AMUDHA PRABHAKARAN,JAAE-8GE2-C2C8-KCDE
Effective from : **21-Jul-2024**to **20-Jul-2025**
at National Life & General Insurance Company
Required Treatment is Dental
Reference No: R-000000267746059
Request Date: 05-Nov-2024 19:04:35

Eligible

Restricted Network [Applicable Tariff: Restricted Network]

Copayment : 20%

- Referral required : **No referral required for specialist consultation**
- Road and Traffic Accident: Covered

Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Chronic Drugs, Endodontics Treatment, Periodontics Treatment, Preventive Treatment, Routine Dental

Attachments

- Applicable procedure
- Exclusions
- Consultation / Claim Form
- Prescription Form

Ask for Authorization

Referral Document