NAOUFAL AMEZIANE AMEZIANE,784-1991-3870639-7
Effective from : **20-Nov-2023** to **19-Nov-2024**
at Qatar Insurance Company
Required Treatment is OutPatient
Reference No: R-000000269924632
Request Date: 18-Nov-2024 18:12:36

Eligible

Restricted Network [Applicable Tariff: Restricted Network]

- Referral required : **No referral required for specialist consultation**
- Copay 20% Max 25.00 AED applicable for : Consultation / Evaluation and Management

Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Adult Wellness, Breast Cancer Screening, C.T Scan, Chronic Drugs, Diabetic Consumables, Dialysis, Endoscopy, Hearing Test , Hormone Replacement Therapy (HRT), Immunomodulators, M.R.I, PET ... See More

Encounter has aggregate net amount AED 700.00 or above for all other services excluding consultation requires approval.

Attachments

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

Ask for Authorization

Referral Document