# Eligibility Details













at Qatar Insurance Company
Required Treatment is OutPatient
Reference No: R-000000279957475
Request Date: 19-Jan-2025 10:58:40







### Value Network [Applicable Tariff: Value Network]

# > Referral required No referral required for specialist : consultation

Selected health plan pharmacy coverage is limited to DHA/Shifa Formulary medications, please make sure to select from the enlisted drug products to avoid further rejections

Copay 10% Max 25.00 Consultation / Evaluation and AED applicable for : Management, Teleconsultations

> Copay 20% applicable for : Dental Emergency

# Approval Requirements

#### Approval required for all treatment related to:

Acute Drugs, C.T Scan, Chronic Drugs, Diagnostics NEC, Endoscopy, Immunomodulators, M.R.I, PET Scan, Physiotherapy, Vitamins

Encounter has aggregate net amount AED 100.00 or above for all other services excluding consultation requires approval.

Adult Vaccinations - Mandatory, Breast Cancer Screening, Child Vaccinations - Mandatory, Diabetic Consumables, Hearing Test,

# Attachments

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Applicable procedure

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Exclusions



Consultation / Claim Form



Prescription Form

Ask for Authorization

1 Referral Document

