



KHIRABDHI TANAYA, 784-1991-4917435-3 ⓘ
Effective from : 17-Oct-2024 to 16-Oct-2025 at Cigna
Required Treatment is OutPatient
Reference No: R-000000283173880
Request Date: 04-Feb-2025 23:36:45



Eligible



General Network + [Applicable Tariff: General Network +]

Copayment : 10%

- > Referral required **No referral required for specialist consultation**
- > Copay 0% applicable for :Hearing Test , Vision Test
- > Copay 20% applicable for :Dental Emergency
- > Copay 10% Max 50.00 C.T Scan, Laboratory, M.R.I, PET Scan, AED applicable for : Radiology NEC, Ultrasound, X-Ray

Approval Requirements

Approval required for all treatment related to:
Acute Drugs, Breast Cancer Screening, C.T Scan, Child Wellness, Chronic Drugs, Circumcision, Endoscopy, Hearing Test , Hormone Replacement Therapy (HRT), Immunomodulators, M.R.I, PET Scan, Palliative, ... [See More](#)
Encounter has aggregate net amount AED 2,000.00 or above for all other services excluding consultation requires approval.

Attachments



Pre-Auth protocols



Consultation / Claim Form



Prescription Form

☒ Ask for Authorization