



ARJUN TK,784-1989-3745602-2 ⓘ
Effective from : 08-Apr-2024 to 07-Apr-2025 at Union Insurance
Required Treatment is OutPatient
Reference No: R-000000283326043
Request Date: 05-Feb-2025 17:25:40



Eligible



Workers Network [Applicable Tariff: Workers Network]

- > Referral required **No referral required for specialist consultation**
- > For jet - Maternity: No Waiting Period applies
- > Copay 20% Max 50.00 AED Consultation / Evaluation and applicable for : Management
- > Copay 20% applicable for : Dental Emergency

Approval Requirements

Approval required for all treatment related to:
Accidental Death, Acute Drugs, Breast Cancer Screening, C.T Scan, Chronic Drugs, Diabetic Consumables, Endoscopy, Hearing Test , Immunomodulators, M.R.I, PET Scan, Physiotherapy, Pre-Op Tests, Rehabil ... [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