



NASEEBULLAH SAID ZAMAN SAID ZAMAN,784-1990-5304939-3 ⓘ

Effective from : 07-Aug-2024to 06-Aug-2025at Watania Takaful Family

Required Treatment is OutPatient

Reference No: R-000000284001622

Request Date: 09-Feb-2025

10:41:19



Eligible

 Exceptional Case Selected : **Yes**

 Value Network [Applicable Tariff: Value Network]

- > Referral required :**Specialist Visit Subject to GP Referral Only**
- > Road and Traffic Accident: Covered
- > Copay 10% applicable for :Physiotherapy
- > Copay 20% Max 25.00 AED Consultation / Evaluation and applicable for : Management, Teleconsultations
- > Copay 10% applicableAcute Drugs, Chronic Drugs, for : Immunomodulators, Vitamins

 Approval Requirements

Approval required for all treatment related to:
Acute Drugs, C.T Scan, Chronic Drugs, 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, Diagnostics NEC, Hearing

 Attachments

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

☒ Ask for Authorization

 Referral Document