Eligibility Details

DEYAA ELSAYED ABDELHAFIZ ELSAYED SHALABY,
784-1995-3410533-5
Effective from : **16-May-2024** to **15-May-2025**
at Qatar Insurance Company
Required Treatment is OutPatient
Reference No: R-000000301774144
Request Date: 14-May-2025 19:44:17

NAS

NAS

Eligible

Workers Network [Applicable Tariff: Workers Network]

Referral required :	**No referral required for specialist consultation**
Copay 20% Max 50.00 AED applicable for :	Consultation / Evaluation and Management
Copay 20% applicable for :	Acute Drugs, Chronic Drugs, Immunomodulators, Vitamins

Approval Requirements

Approval required for all treatment related to:
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, Vision Test, Vitamins

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

The latest version of Google Chrome is recommended for the best experience on our Application

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