

MOHAMMEDSHABEER KOLATHAZHATH,784-1988-1054210-4 ⓘ

Effective from : 18-Jan-2025to 17-Jan-2026at Dubai Insurance

Required Treatment is OutPatient

Reference No: R-000000302396218

Request Date: 18-May-2025 09:23:54

Eligible

Restricted Network [Applicable Tariff: Restricted Network]

- > Medical Condition Coverage Criteria: ⓘ Click Here
- > Referral required : No referral required for specialist consultation
- > Work Injury : Covered
- > Copay 20% Max 50.00 AED applicable for : Consultation / Evaluation and Management, Teleconsultations
- > Copay 20% applicable for :Physiotherapy, Dialysis

Approval Requirements

Approval required for all treatment related to:
Breast Cancer Screening, C.T Scan, Diabetic Consumables, Dialysis, Endoscopy, M.R.I, PET Scan, Physiotherapy, Vision Test

Encounter has aggregate net amount AED 700.00 or above for all other services excluding consultation requires approval.

Acute Drugs, Adult Vaccinations - Mandatory, Child Vaccinations - Mandatory, Chronic Drugs, Diagnostics NEC, Hearing Test ,

Attachments

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

☒ Ask for Authorization

Referral Document