



KHERIWIN CORCUERA ALMARIO,784-1990-5821830-8

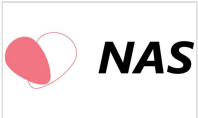
Effective from : 10-Mar-2025to 09-Mar-2026

at National Life & General Insurance Company

Required Treatment is OutPatient

Reference No: R-000000311121457

Request Date: 03-Jul-2025 11:57:19





Eligible

 Restricted Network [Applicable Tariff: Restricted Network]

- > Referral required **No referral required for specialist consultation**
- > Copay 20% Max 50.00 AED applicable for : Consultation / Evaluation and Management, Teleconsultations
- > Copay 20% applicable for :Dialysis
- > Copay 10% applicable for : Acute Drugs, Chronic Drugs, Immunomodulators, Vitamins

 Approval Requirements

Approval required for all treatment related to:
Breast Cancer Screening, C.T Scan, Circumcision, Diabetic Consumables, Dialysis, Endoscopy, Hormone Replacement Therapy (HRT), 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 -

 Attachments

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

☒ Ask for Authorization

 Referral Document