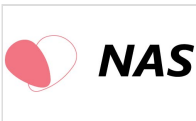




HAKIM FAIZAN,784-2024-5784813-7 ⓘ
Effective from : 02-Aug-2025to 01-Aug-2026
at Qatar Insurance Company
Required Treatment is OutPatient
Reference No: R-000000317826388
Request Date: 07-Aug-2025 20:49:42



Eligible



Super-Restricted Network [Applicable Tariff:
Super-Restricted Network]

- > Referral required **No referral required for specialist consultation**
- > Copay 20% Max 25.00 : Consultation / Evaluation and Management, Teleconsultations
- > Copay 20% applicable for :Vitamins, Dialysis

Approval Requirements

Approval required for all treatment related to:
Breast Cancer Screening, C.T Scan, Circumcision, 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 -

Attachments

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

☒ Ask for Authorization