











JEHOSHABETH BATASINN LORENZANA,784-1987-6873547-8 ①

Effective from : 26-Feb-2023to 25-Feb-2024at Noor Takaful

Required Treatment is OutPatient
Reference No: R-000000214095619
Request Date: 18-Nov-2023 18:38:32







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Exceptional Case Selected: Yes

♦ Value Network [Applicable Tariff: Value Network]

## > Referral required : Specialist Visit Subject to GP Referral Only

Copay Consultation / Evaluation and Management,
 20% Laboratory, Dental Emergency, Ultrasound, X-Ray,
 applicable C.T Scan, M.R.I, Radiology NEC, Physiotherapy, PET
 for: Scan, Endoscopy

Copay 30% applicable Acute Drugs, Chronic Drugs, for:
Immunomodulators

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## Approval required for all treatment related to:

Acute Drugs, C.T Scan, Chronic Drugs, Endoscopy, Immunomodulators, M.R.I, PET Scan, Physiotherapy

Encounter has aggregate net amount AED 100.00 or above for all other services excluding consultation requires approval.

Breast Cancer Screening, Child Vaccinations - Mandatory,
Diagnostics NEC, Hearing Test, Laboratory, Non-surgical minor

## Attachments

Applicable procedure

Exclusions

Consultation / Claim Form

Prescription Form

✓ Ask for Authorization

① Referral Document

