









NAJIYA SHAIKH,4129-CG4C-DCDC-9DEA ① Effective from: 25-Sep-2023to 24-Sep-2024at National Life & General Insurance Company

Required Treatment is Dental Reference No: R-000000254867971 Request Date: 18-Aug-2024 16:59:42







Restricted Network [Applicable Tariff: Restricted Network]

Copayment : 20%

- ${}^{\flat}\operatorname{Referral\ required:} \textbf{No\ referral\ required\ for\ specialist\ consultation}$
- $^{\flat}$ Copay 20% Max 50.00 AED applicable for :Consultation / Evaluation and Management

✓ Approval Requirements

Approval required for all treatment related to:

 $Acute\ Drugs,\ Chronic\ Drugs,\ Endodontics\ Treatment,\ Orthodontics\ Treatment,\ Periodontics\ Treatment,$ Preventive Treatment, Prosthodontics Treatment, Routine Dental

Attachments

Applicable procedure

Exclusions

Consultation / Claim Form

Prescription Form

Ask for Authorization

⚠ Referral Document