



IVAN NIKOLAI ALINAS ESTIMADA,52GE4888544095704 ⓘ

Effective from : 01-Mar-2024to 28-Feb-2025at Cigna

Required Treatment is Dental

Reference No: R-000000265968151

Request Date: 26-Oct-2024 10:40:38



Eligible

Comprehensive [Applicable Tariff: Comprehensive Network]

> Referral required **No referral required for specialist consultation**

> Copay 20% applicable for :Class II

> Copay 50% applicable Orthodontics Treatment, Class III, Dental for : Implants

Approval Requirements

Approval required for all treatment related to:

Acute Drugs, Class I, Class II, Class III, Dental Implants, Orthodontics Treatment

Attachments



Pre-Auth protocols



Consultation / Claim Form



Prescription Form

Ask for Authorization

Referral Document