< Eligibility Details



TINA KISHOR MANSUKHANI,4CE2-DC2F-EF93-DFAD Effective from : 01-Jan-2024to 31-Dec-2024 at Abu Dhabi National Insurance Company Required Treatment is Dental Reference No: R-000000274065883 Request Date: 14-Dec-2024 12:19:39





General Network [Applicable Tariff: General Network]

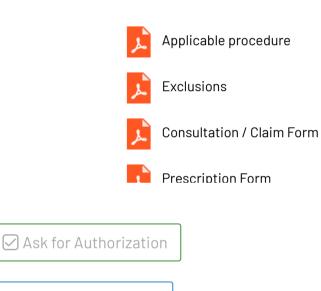
Copayment : 20%

Referral required No referral required for specialist
consultation

Approval Requirements

Approval required for all treatment related to: Acute Drugs, Chronic Drugs, Orthodontics Treatment, Periodontics Treatment, Preventive Treatment, Prosthodontics Treatment, Routine Dental

Attachments



🛈 Referral Document

📀 The latest version of Google Chrome is recommended for the best experience on our Application

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