Eligibility Details

Appointments (0)

AMIN KHAMIM,52GM2034371761101

Effective from : **01-Oct-2024** to **30-Sep-2025** at Cigna

Required Treatment is Dental

Reference No: R-000000307492897

Request Date: 14-Jun-2025 16:36:43

neuron

Eligible

Comprehensive Network [Applicable Tariff: Comprehensive Network]

Copayment : 20%

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

Approval Requirements

Approval required for all treatment related to:

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

Attachments

- Pre-Auth protocols
- Consultation / Claim Form
- Prescription Form

Ask for Authorization

Referral Document