## < Eligibility Details



MANU SINGH,784-1980-3546976-0 Effective from : 01-Aug-2024to 31-Jul-2025at Cigna Required Treatment is Dental Reference No: R-000000278027509 Request Date: 08-Jan-2025 12:45:03





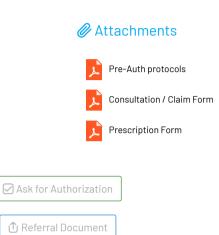
Comprehensive [Applicable Tariff: Comprehensive Network]

> Referral required : No referral required for specialist consultation > Copay 20% applicable for :Class II

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

## Approval Requirements

Approval required for all treatment related to: Acute Drugs, Class I, Class II, Class III, Orthodontics Treatment



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