Eligibility Details

Appointments (1)

LUCA DEL BEL BELLUZ,52GM44131697097
Effective from : **01-Jul-2024** to **30-Jun-2025** at Cigna
Required Treatment is Dental
Reference No: R-000000302849422
Request Date: 20-May-2025 11:03:17

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, Dental Implants, Orthodontics Treatment

Attachments

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

Ask for Authorization

Referral Document