

Dear Insured Member,

To ensure optimal use of your insurance benefits within the Starkar medical network, please adhere to the following guidelines when accessing healthcare services.

Steps for Using Your Health Insurance

1 Provide Your Official Identification Documents

When visiting any in-network provider (Hospital), you must present the following documents:

Residency Permit (Residency Card) or Passport
Your insurance code number

2 Registration Procedures at the Service Provider (Hospital) Insurance Desk

The service provider will make a copy of your Residency card or Passport and your insurance code number.
You will be provided with the Starkar claim form (S.O.A.P).

3 Visiting and Consulting the Specialist Physician

Visit the appropriate physician based on your medical condition.

The service provider will submit a request to the Starkar medical approvals department for visit to the specialist physician.

You may be required to pay any additional fees to specialist physician visit according to your insurance policy coverage.

The attending physician will complete the Starkar claim form (S.O.A.P) that was provided by Service Provider (Hospital) insurance desk.

The (S.O.A.P) form must include:

Patient History and Examination
Initial or final medical diagnosis
All required medical investigations and procedures (if needed)
Prescribed medications (if needed)

4 Requesting Medical Authorization

The Service Provider (Hospital) insurance desk will submit a request to the Starkar Medical approvals department which includes the requested services by the specialist physician.

Approval decisions are generally provided in a timely manner.

Note: We apologize for any delays caused by unexpected situations.

The service provider will also collect your co-payment share based on:

- The terms and conditions of your insurance policy
- The remaining coverage limit

5 Receiving Approved Medical Services

Approved services will be provided once authorization is granted and confirmed by Starkar.

6 Payment for Services Not Covered and Outside Coverage

If any service is rejected (not approved), you have two options:

- You may proceed with the non-approved service by paying its full cost
- You may choose not to proceed with the non-approved service without incurring any additional costs