



ATHENA HAMID RAHMATIE,784-1993-6769697-0 ⓘ

Effective from : 19-Oct-2023to 18-Oct-2024

at Qatar Insurance Company

Required Treatment is Dental

Reference No: R-000000238797511

Request Date: 03-May-2024 11:08:02



Eligible

+ 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, Endodontics Treatment, Routine Dental

📎 Attachments



Applicable procedure



Exclusions



Consultation / Claim Form



Prescription Form

☑ Ask for Authorization

📄 Referral Document