



MARYAM MOHAMAMD ALI Y ZAHDI, 784-2010-4691725-4 ⓘ

Effective from : 01-Mar-2025 to 28-Feb-2026

at Qatar Insurance Company

Required Treatment is Dental

Reference No: R-000000308611885

Request Date: 20-Jun-2025 10:53:35



Eligible

**⊕ Premium Network [Applicable Tariff:
Comprehensive Network]**

Copayment : 10%

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

> Work Injury : Covered > Road and Traffic Accident: Covered

☑ Approval Requirements

Approval required for all treatment related to:

Acute Drugs, Chronic Drugs, Endodontics Treatment, Periodontics
Treatment, Preventive Treatment, Routine Dental**📎 Attachments**

Pre-Auth protocols



Overseas Pre-Auth protocols



Consultation / Claim Form



Prescription Form

 Ask for Authorization Referral Document