

MEHDI HABBOUB, KGGA-AKE2-C2C1-JCDE [\(i\)](#)

Effective from : 16-Oct-2024 to 09-Oct-2025

at Qatar Insurance Company

Required Treatment is Dental

Reference No: R-000000305393578

Request Date: 02-Jun-2025 11:29:43



Eligible

Restricted Network [Applicable Tariff: Restricted Network]

Copayment : 20%

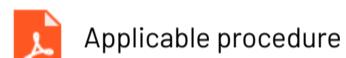
- > Referral required **No referral required for specialist consultation**
- > Work Injury : Covered

Approval Requirements

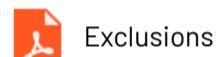
Approval required for all treatment related to:

Acute Drugs, Chronic Drugs, Endodontics Treatment, Routine Dental

Attachments



Applicable procedure



Exclusions



Consultation / Claim Form



Prescription Form

 Ask for Authorization Referral Document