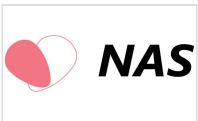




ANJUM THASNEEM,784-2006-4042408-9 ⓘ  
Effective from : 19-Jan-2025to 18-Jan-2026  
at Qatar Insurance Company  
Required Treatment is Dental  
Reference No: R-000000317760388  
Request Date: 07-Aug-2025 15:28:40



Eligible



Restricted Network [Applicable Tariff: Restricted Network]

Copayment : 30%

> 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