Eligibility Details

Appointments (0)

HAYA ABDALLA ABDELWANIS ABDELWAHED ZAHRA,
784-2013-5928248-6
Effective from : **15-Jan-2025** to **14-Jan-2026**
at Qatar Insurance Company
Required Treatment is Dental
Reference No: R-000000312851731
Request Date: 12-Jul-2025 12:33:30

NAS

NAS

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, Preventive Treatment, Routine Dental

Attachments

- Applicable procedure
- Exclusions
- Consultation / Claim Form
- Prescription Form

Ask for Authorization

Referral Document