< Eligibility Details





SERHII KOVAL, 1937-727A-2ACD-9AAA Effective from : 01-Jan-2024to 31-Dec-2024 at Qatar Insurance Company Required Treatment is Dental Reference No: R-000000275519677 Request Date: 23-Dec-2024 12:06:17

General Network [Applicable Tariff: General Network]

Copayment : 20%

- Referral required No referral required for specialist
 consultation
- Gulfcare Nil deductible applicable to follow up visits within 10 days, full consultation amount to be billed under insurance
- For all Oncology related services, please contact the provider line for the patient share information.
- Copay 50% applicable for :Prosthodontics Treatment





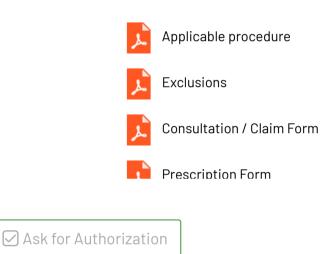


Approval Requirements

Approval required for all treatment related to:

Acute Drugs, Chronic Drugs, Dental Implants, Periodontics Treatment, Preventive Treatment, Prosthodontics Treatment, Routine Dental, Vitamins

Attachments



ሰ Referral Document

📀 The latest version of Google Chrome is recommended for the best experience on our Application

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