



Filter..

Claims

Member Eligibility Che

Claim Form

Referral

Encounter (Clinic)

Remittance Advice

Old Encounter

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Add Doctor

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Home

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Out Patient ▼

1020-010-119679166-01

Search

Patient Information

Insurance Company	AL BUHAIRA NATIONAL INSURANCE COMPANY FMC TM (Plan Name: Dha Enhanced)		
Member ID-CardNo	1020-010-119679166-01		
Member Name	MUHAMMAD NOUMAN		
DOB/Gender	22 Feb 2002 / Male		
Nationality	PAKISTAN		
Valid Till	31 Jul 2023 to 27 Apr 2024		
Status	MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES		
Emirates ID	784-2002-9225270-5		

Policy Deductibles Benefit & Coverage

Deductible	Amount	(%)
Diagnostic & Treatment Services For Dental & Gum	0.00	20.00
Gp	25.00	20.00
Gp Maternity	0.00	10.00
Hearing & Vision Aids	0.00	20.00
Lab	0.00	0.00
Medicine	0.00	10.00
Medicine-Maternity	0.00	10.00
On Auto Retal Services	0.00	10.00

Claim Type

New Visit ☒ Follow Up ☐

Select Claim Catagory

Complaints *

Emirates ID *

Emirates ID, Not available? select re: ▼

Symptoms *

Patient Contact No *

Temp *

Allergies (If Any)

Duration of illness *

Day(s) ▼

BPS/BPD *

mmHg

Pulse *

/min

Claim/Inv.No

Sign

Sl#	Encounter Type	Encounter Start	Encounter End	Start Date	Start Time	End Date	End Time
1	No Bed + No emergency room	▼ Elective	▼ Discharged with appr	21/08/2023	16:20	21/08/2023	16:20

Sl#	Type	Code	Diagnosis Description
1	Principal	▼	

Sl#	Type	Code	Name	Qty	Gross.Amt	Pt.Share	Start	Clinician
1	CPT	▼		1			21/08/2023	Select
					0.00	0.00		

☐ Do you want Referral/Updation CPT(Yes/No)?

Remarks

Upload Reports

Choose File

No file chosen

Upload File