Cancel Print	Out Patient 🗸	183-23-H000104-00	Search

AL BUHAIRA NATIONAL Insurance INSURANCE COMPANY Company FMC TM (Plan Name: NE ENHANCED) Member ID- CardNo Member MUHAMMAD EJAZ AHMAD Name KHUDA BUKHSH DOB/Gender15 Apr 1992 / Male Nationality PAKISTAN Valid Till 28 Apr 2023 to 27 Apr 2024 MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES			D (
Insurance INSURANCE COMPANY Company FMC TM (Plan Name: NE ENHANCED) Member ID- CardNo Member MUHAMMAD EJAZ AHMAD Name KHUDA BUKHSH DOB/Gender 15 Apr 1992 / Male Nationality PAKISTAN Valid Till 28 Apr 2023 to 27 Apr 2024 MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES For. App For. App Prod Der Mai	Pa	tient Information	Benef
CardNo Member MUHAMMAD EJAZ AHMAD Der Name KHUDA BUKHSH DOB/Gender15 Apr 1992 / Male Nationality PAKISTAN Valid Till 28 Apr 2023 to 27 Apr 2024 MEMBER IS ELIGIBLE IN Specific Spe	Insurance Company	INSURANCE COMPANY FMC TM (Plan Name: NE	Formu Applic
Member MUHAMMAD EJAZ AHMAD Der Name KHUDA BUKHSH DOB/Gender15 Apr 1992 / Male Mar Nationality PAKISTAN Valid Till 28 Apr 2023 to 27 Apr 2024 MEMBER IS ELIGIBLE IN Specific Status YOUR FACILITY FOR MEDICAL SERVICES		183-23-H000104-00	GDF/I
Nationality PAKISTAN Valid Till 28 Apr 2023 to 27 Apr 2024 MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES PAKISTAN Opt Work No. 1992 / Male			Denta
Valid Till 28 Apr 2023 to 27 Apr 2024 MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES Woo OP Spe	DOB/Gender	15 Apr 1992 / Male	Mater
Valid Till 2024 MEMBER IS ELIGIBLE IN Status YOUR FACILITY FOR MEDICAL SERVICES Nos	Nationality	PAKISTAN	Optica
Status YOUR FACILITY FOR Rock hos	Valid Till		Work OP Ne
	Status	YOUR FACILITY FOR	Specia Room hospit
			Chron

_		
Benefit	Coverage	Condition
Plan Name	ABNIC TM NE	
Formulary Applicable	Applicable	
IP Network	Ip : Fmc Standard Network Hospitals	
GDF/MAF	NA	
Product Name	NE ENHANCED	
Dental	No	
Maternity	No	0 Days Waiting Period
Optical	No	
Work Related	No	
OP Network	Op - Std + Hospital	
Specialist Access	Through GP Referral	
Rooms & Boards for hospitalisation	Ward	Applicable For IP Only
Chronic	Yes	0 Days Waiting Period
	•	•

Deductible	Amount	(%)
Diagnostic & Treatment Services	0.00	20.00
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
Op Ante-Natal Services	0.00	10.00
Outpatient Maternity	0.00	10.00
Physiotherapy	0.00	0.00
Procedure	25.00	20.00
Radiology	0.00	0.00
Spl	25.00	20.00
Spl Maternity	0.00	10.00

Patient Mobile No:

0566960387

Purpose of patient visit *

✓Doctor consultation

□Physiotherapy session

✓Other multi- session treatment like injections, nebulization ...

✓Lab or radiology investigations

✓Others

In Case Of OTHERS, Please specify the reason/s in Remark

Remarks

CONSULTATION