

Filter	Home	
Claims		
Member Eligibility Che		Patient Inforn
	Insurance Company	AL SAGR NATIONAL INSURA
Claim Form	Member ID-CardNo	I011-010-118620467-02
	Member Name	AHMAD JAMAL QAISAR KH/
Referral	DOB/Gender	06 Jun 1993 / Male
	Nationality	PAKISTAN
Encounter (Clinic)	Valid Till	08 Jun 2023 to 07 Jun 2024
	Status	MEMBER IS ELIGIBLE IN YOU
Remittance Advice	Emirates ID	784-1993-2656768-4
Download CPT's	Claim Type New V	⁄isit ⊙ Follow Up ○
	Emirates ID *	
Formulary	Patient Contact No *	
1 Officially	Duration of illness *	Day(s)
Add Doctor	Pulse *	
	r uise	/min
Provider Details	Sl# Encounter Type	
	No Bed + No emergency room	
Change Password	Sl# Type Code	Diagnosis Description
	1 Principal ✓	
RenewEmpanelment	Sl# Type Code Name	
	1 CPT →	
	Do you want Referal/Updation CPT(Yes/No)?	
	Upload Reports Choose File No file chosen U	
4	1	