		Cancel Prin		<u>t</u>	Out Pa	itient 🗸	1019-010-1202853	45-01 Se	Search
				Benefit	С	overage		Conditi	on
				Formulary	Λ.	Applicable			
				Applicable	A	ррпсавіс			
				Product Name	e D	ha Enhan	ced		
				Specialist Acc					
	Patient Information						ard Network		
Insurance	Qatar Insurance Company (Plan Name: Dha Enhanced)			OP Network		Clinics+ASTER HOSPITAL BR OF ASTER DM			
Company							TER DM CARE FZC DUBA	т	
Member ID- CardNo	I019-010-120285345	-01		IP Network	Ip		andard Network	1	
Member Rahul				GDF/MAF	N.				
Name	ranai			Dental	N				
DOB/Gender	30 Nov 1996 / Male							0 Days	
Nationality	INDIA			Maternity	N	No		Waiting	,
Valid Till	08 Jun 2024 to 07 Jur	2025						Period	
vana iiii	MEMBER IS ELIGIBLE I			Optical	N	0			
Status	FACILITY FOR MEDICAL			Work Related					
Emirates ID		SERVI	CES	Plan Name		IC TM D	XB		
Emirates ID	784-1996-4101620-1			Rooms & Boa					
				for		ard		IP Only	
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				Chronic	Ye	2.0		0 Days Waiting	
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Deductible		Amoun	+(0/)	<u> </u> 				r criou	
	entmant Sarvigas For Dantal		14(70)	Patient Mobile	le No :				
Diagnostic & Treatment Services For Dental & Gum		0.00	0.00	0547823567					
Gp		50.00	20.00	Purpose of patient visit *					
Gp Maternity		0.00	10.00	☑ Doctor consultation					
Hearing & Vision Aids		0.00	0.00	□Physiotherapy session					
Inpatient Maternity		0.00	10.00	Other multi- session treatment like injections, nebulization					
Lab		0.00	0.00						
Medicine		0.00	10.00	✓Lab or radiology investigations					
Op Ante-Natal Services		0.00	10.00	✓ Others					
Outpatient Maternity		0.00	10.00	In Case Of OTHERS, Please specify the reason/s in Remark					
Physiotherapy		0.00	0.00	Remarks					_
Procedure		50.00	20.00	CONSULTATIO	UN				
Radiology		0.00	0.00						
C1		50.00	20.00	1					

50.00

0.00

20.00

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Spl Spl Maternity