

Filter	Hom	me Member Eligi	bilit	
Claims				
Member Eligibility	Check			
Prior Request				
			Patient Information	
Referral	Insura	ance Company	Qatar Insurance Company (Plan Nam	
Encounters		per ID-CardNo	I019-010-120074161-01	
		per Name	Roshan	
Downloads	DOB/	Gender	12 Nov 1997 / Male	
	Natio		NEPAL	
Formulary	Valid		08 Jun 2024 to 07 Jun 2025	
	Statu	S	MEMBER IS ELIGIBLE IN YOUR FACILITY	
Add Doctor	Emira	tes ID	784-1997-7810136-2	
Bank Information				
Changa Dagawar	Deduct	Deductible		
Change Password	u	Diagnostic & Treatment Services For Dental & Gum		
Update Profile	Gp	*		
2 F 2332 7 7 2 332		Gp Maternity Hearing & Vision Aids		
		nt Maternity		
	Lab			
		Medicine		
		Op Ante-Natal Services		
		Outpatient Maternity		
		therapy		
	Proced			
	Radiolo Spl	ogy		
	Spl Ma	nternity		
	Spi wie	itermity		
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