

iter	Home Member Eligibilit							
Claims								
Member Eligibility Chec	k				Cancel Print Out Patient ▼		1019-010-1196	
,					Benefit	Coverage		
Prior Request					Formulary Applicable	Applicable		
					Product Name	Dha Enhanced		
Referral	Patient Information				Specialist Access Direct Access Fmc Standard Network Clinics+ASTER HOSPITAL BR C			onemia po on i
	Insurance Company Qatar Insurance Company (Plan Name: Dha Enhanced)				OP Network	Fmc Standard Network Clii DUBAI (MANKHOOL)	nics+ASTER HC	SPITAL BR OF A
Encounters					IP Network			
Downloads	Member ID-CardNo I019-010-119614751-01				GDF/MAF	NA		
	Member Name				Dental	No		
	DOB/Gender	05 Jun 1997 / Male	05 Jun 1997 / Male			Maternity No		
	Nationality	SIERRA LEONE			•			
	Valid Till	08 Jun 2024 to 07 Jun 2025			Optical	No		
	Status	MEMBER IS ELIGIBLE IN YOUR FACILI	TV EOD MEDICAL SERVICES		Work Related	No		
Add Doctor	Emirates ID	784-1997-8982880-5	TOR PIEDICAL SERVICES		Plan Name Rooms & Boards for	QIC TM DXB		
	Emirates 1D	784-1997-8982880-5			hospitalisation	Ward		
Bank Information					_	**		
					Chronic	Yes		
Change Password					Chronic Medication	60 Days		
	Deductible		Amount	(%)				
Update Profile	Diagnostic & Treatment Services F	or Dental & Gum	0.00	0.00	Patient Mobile No :		*	
	Gp		50.00	20.00	Purpose of patient visit * Doctor consultation			
	Gp Maternity	0.00	10.00	Physiotherapy session				
	Hearing & Vision Aids			0.00		ment like injections, nebulization	an .	
	Inpatient Maternity Lab	0.00	10.00	Lab or radiology investigations				
	Medicine	0.00	10.00	Others				
	Op Ante-Natal Services	0.00	10.00		e specify the reason/s in Remar	k		
	Outpatient Maternity	0.00	10.00	Remarks				
	Physiotherapy	0.00	0.00					
	Procedure			20.00				
	Procedure							
	Radiology		0.00	0.00				
			0.00 50.00 0.00	0.00 20.00 10.00				