



# **QLM Medical Member Portal**

# **User's Manual**

Document Number: IT\DOC\01\17\01

- Training Document –

**Jan 2017** 

# Contents

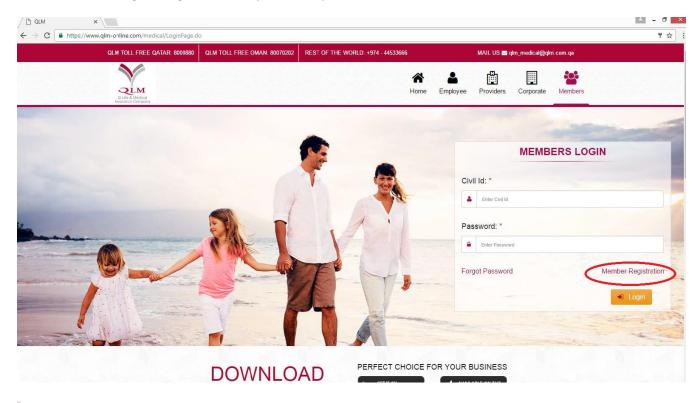
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#### 1. Employee Login

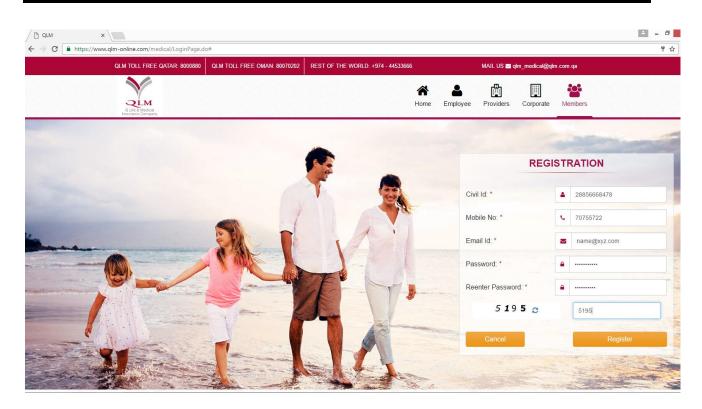
1.1. The Employee can access the QLM website using link <a href="https://www.qlm-online.com/">https://www.qlm-online.com/</a>



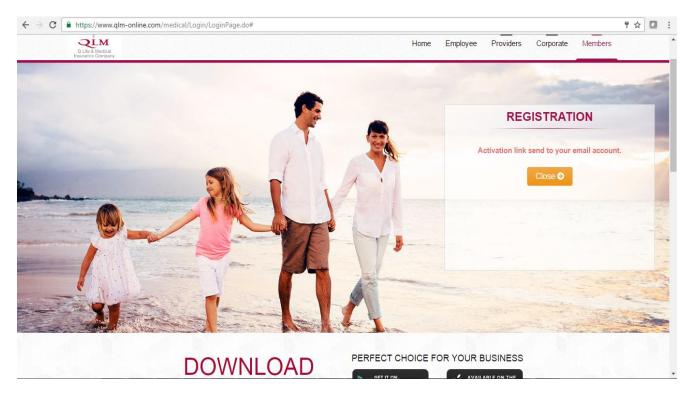
- 1.2. Make sure you select the MEMBERS
- 1.3. You can login using credentials provided by QLM.



1.4 If you have not registered, then you can register and fill in all the details by clicking on **Member Registeration**.



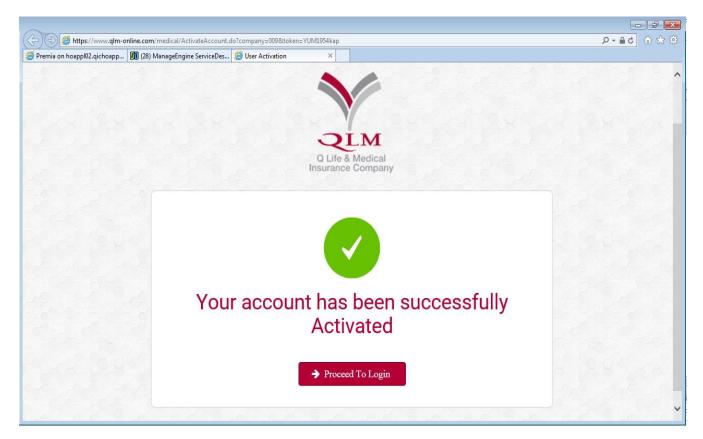
#### 1.5 Below screen will appear on successful Registration.



1.6 Click on the below link to activate your account

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ignore X ignore X ig	Image: A constraint of the second	Move Rules ▼ Move Actions ▼ Move Tags	w Granslate Editing Com Editing Com Editing Com	
From: Do Not Reply - QLM Online To: Sarvanan Vajravelu Cc: Subject: QLM Member Registration Activation Link				Sent: Tue 03-Jan-2017 10:07 AM
Dear QLM Member, Thanks for registring with QLM Online. Click below link to activate your account. <u>https://www.qlm-online.com/medical/ActivateAv</u> Regards, QLM <b>Note : This is a system generated mail. Pleas</b>		Kap		1291
Do Not Reply - QLM Online Q Life & Medical Insu	rance Company LLC			<u>.</u>
All Items		Loading		

1.7 Below Screen appears on successful activation.



#### 2. Employee Login

2.1 After logging in, below screen appears, where the benefit limits and sub-benefit limits can be viewed

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	ANOUD MEDICAL		ē									VELU SARAVAN	IAN ¥
				Member Information         Active         Valid: 24/01/2016 to 23/01/2017           Pellow No         Penlow No         Optic Journany Company									
630	Member Details		Policy No Member Nam		)-16-106406 RAVELU SARAVANAN			Employee Name	Qatar Ir	isurance Company			
-	Claims Submission		Plan DOB	Pren				Gender Member ID	Male MEM96	66791			
-	Claims Tracking		Nationality	India	an			Civil ID	277356	06943			
-	Provider Search					Health Certifi	cate Temporary Ca	rd View Dependents TOE					
-	Enquiry Submission												
-	Enquiry Tracking				may not include the clain	ns incurred in	the last three m	onths					
-	BMI Calculator		Benefit Limits										
	Manage Profile		E	Benefit Desc *	Benefit Limit	500.000	Ben	efit Utilized		Benefit Balance	407.674	Action	-
	Managerrome										487,671	۲	
			Dental			5,000		0			5,000	۲	
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			Showing 1 to 3 of 3	3 entries							Previou	us 1 Ne	ext
			Sub Benefit De	etails									
				Benefit Desc	: *	Ben	efit Limit 🔶	Benefit Utilized	÷	Benefit Balance	:e <sup>\$</sup>	Action	÷
							10,000		0		10,000	۲	
			Annual medica	al check up			500,000		0		500,000	۲	
			Basic				500.000		376		499.624		

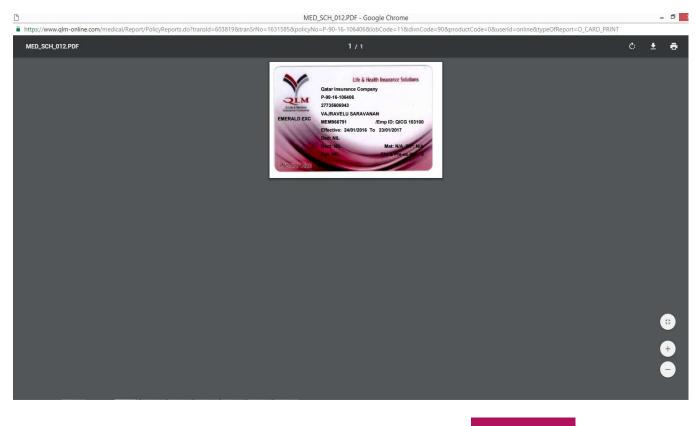
2.2 Health certificate can be viewed by clicking on Heath Certificate Button Health Certificate

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QLM	Membe	Health Certifical	×							
A Lato & Marking Insurance Generative	Policy No	Health Certificate	For Member and Deper	ndent	e Company					
Claims Submission	Member	VAJRAVELU SARAVA	NAN 🗹							
Claims Tracking	DOB Nationalit		Name		Civil Id	Select				
	Tutionan	JAYANTHAN KALAIVAI	NI SARAVANAN		31135602129					
Provider Search		KALAIVANI BABU			28135616536					
Enquiry Submission		VISHWA KALIVANI SAF	RAVANAN		30935602953					
🚳 Enquiry Tracking	* Note: The					Previous 1 Next				
BMI Calculator	Benefit Lin			Print Certificate Cancel						
🚳 Manage Profile	Basic						it Balance 487,671	Action		
	Dental	_		5,000	_	0	5,000	•		
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	Showing 1 to 3 o	of 3 entries					Pro	evious 1 Next		
	Sub Benefit I	Details								
		Benefit Des	: ^	Benefit Limit	¢ Benefi	t Utilized 🔶	Benefit Balance	Action <sup>‡</sup>		
				10	000	0	10,000			
	Annual medie	cal check up		500	000	0	500,000			
	Basic			500	000	376	499.622			

2.3 Further certificate is generated on clicking Print certificate. Similarly this can be done for all the members

Ľ		MED_SCH_013.PDF - Google Chrome	_ 0
https://www.qlm-online.com/medical/Report/PolicyReports.do?tran	sld=603819&tranSrNo	o=1631585&depSrNo=&policyNo=P-90-16-106406&lo <mark>bC</mark> ode=11&divnCode=90&productCod	de=0&userId=online&typeOfReport=MEM_CERT
		<b>O Life &amp; Medical Insurance Company LLC</b> orporated at Qatar Finance Centre - License No. 141, Authorized by QFC Regulatory Athourity (A Member of Qatar Insurance Group)	
	Date : January	03.2017	
	Ref. : QLM/MED		
	Subject	: Medical Insurance Certificate	
	Policy Name	: QATAR INSURANCE COMPANY	
	Policy Period	: January 24, 2016 To January 23, 2017	
	Medical Insurance January 23, 201 106406) having a COUNTRIES, ISC PHILIPPINES & SINGAPORE ANI CANADA, EUROF for emergency or cover and requires	at the member(s) mentioned below is(are) insured under Q Life & Medical Insurance Company's Programme for QATAR INSURANCE COMPANY for the period from January 24, 2016 To 17 as per the terms and conditions of our Group Health Insurance Policy (Policy No. P-90-16- in annual policy limit of QAR 0 /- with a scope of cover: STATE OF QATAR, GCC, ARAB C (INDIA, PAKISTAN, SRI LANKA, BANGLADESH, NEPAL & BHUTAN), SEA (KOREA, INDONESIA), ME & HOME COUNTRY EXCLUDING USA, CANADA, EUROPE, CHINA, D JAPAN. However, the cover shall extend EXTENDED WORLDWIDE EXCLUDING USA, "Critical medical condition or a medical condition which arises after travelling outside the area of simmediate health care intervention only whilst on holiday or business trip up to 90 days. U SARAVANAN S6606943	
		p Id No: MEM966791/ QICG 103100	
	This certificate of in evidence that insura conditions of covera the event of any inc	nsurance is issued upon the request of the insured (OATAR INSURANCE COMPANY) as an ance has been arranged as detailed in the policy and does not purport to show full terms and age nor vary them in any way. The terms and conditions of the insurance policy shall prevail in consistency between this certificate of insurance and the policy. Insurance Company will not be liable to any legal matters beyond the coverage of the	

## 2.4 Temporary Card can be viewed by clicking on **Temporary Card** button Temporary Card



2.5 Dependent details can be viewed by clicking on **View Dependents** button

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ANOUD MEDICAL	⊡												VELU SARAVAN	an ~
QLM	Member	Dependents Details ×								×				
Calific & Modesel Insurance Company	Policy No Member Na										e Company			
Claims Submission	Plan	Name	▲ Plan <sup>⊕</sup>	From Date	To Date <sup>‡</sup>	D.O.B	Gender	Civil Id 🗘	Member Id	Relation				
Claims Tracking	DOB Nationality	JAYANTHAN KALAIVANI SARAVANAN	Premier	24/01/2016	23/01/2017	22/05/2011	Male	31135602129	MEM966930	SON				
Provider Search		KALAIVANI BABU	Premier	24/01/2016	23/01/2017	10/04/1981	Female	28135616536	MEM966928	WIFE				
Enquiry Submission		VISHWA KALIVANI SARAVANAN	Premier	24/01/2016	23/01/2017	25/05/2009	Male	30935602953	MEM966929	SON				
B Enquiry Tracking	* Note: The								Previous 1	Next				
BMI Calculator	Benefit Limi		I	ि Health Certific	ate 🛢 Temp	oorary Card	Cancel				fit Balance	÷	Action	÷
🍘 Manage Profile														
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	Sub Benefit D	etails												
		Benefit Desc	Ben	efit Limit		l	Benefit U	tilized		E	Benefit Balance		Action	

# 2.6 Table of Benefits can be viewed by clicking on **TOB** button .

<u>C</u>	Medical	Policy Agreement - Go	ogle Chrome					- 0
https://www.qlm-online.com/medical/ShowDmsImageServlet?app	pImageType=PDF&isThumbNail=N&docCod	e=11&docName=603819	_P_P.pdf&module=009&	para1=TOB&para2=60381	98tpara3=P			
Medical Policy Agreement		1 / 10				¢	Ŧ	ē
	This Policy covers all expenses reaso period of insurance for the safe purpor Policy and Schedule, the Company A extent of your cover Insurance Company: Insurance Period of Insurance: Premium							
	BENEFITS DETAILS		BENEFITS LIMTS					
	PLAN	CLASSIC - PLAN	ADVANTAGE -PLAN	PREMIER - PLAN				
	CATEGORY	G, H & I	E & F	A, B, C & D				
	ELIGIBLITY	STAFF ONLY	STAFF ONLY	STAFF & SPOUSES				
	SCOPE OF COVER	STATE OF QATAR & HOME COUNTRY EXCLUDING USA, CANADA, EUROPE, CHINA, SINGAPORE AND JAPAN,	STATE OF QATAR, GCC, ARAB COUNTRIES, ISC (INDIA, PANISTAN, SRILANKA, BANGALADISH, NEPAL& BHUTAN) SEA (INDENESIA), ME & HOME COUNTRY EXCLUDING USA, CANADA, EUROPE, CHINA, SINGAPORE AND JAPAN,	WORLDWIDE EXCLUDING USA & CANADA				#
	EMERGENCY COVER OUTSIDE AREA OF COVER:	CANADA, EUROPE, CHINA, emergency of critical med condition which arises after the area of cover and requ	worldwide exclude USA, SINGAPORE AND JAPAN, for Ical condition or a medical you have travelled outside irizes immediate health care soliday or business trip up to	The cover shall extend worldwide include USA, CANADA, for emergency of critical medical condition or a medical condition which arises after you have travelled outside the area of cover and requires immediate health care intervention only whilst on				+ -

#### 3. Claims Submission

3.1. For Submitting Claims, Select the member first. Click on GO.

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ANOUD MEDICAL	I			🔘 VAJRAVELU SARAVANAN 🗸
- Line a Musiku	Claim Submission			
Member Details	Employee Name *	Select *	⇒Go	
Claims Submission				
Claims Tracking		Select VAJRAVELU SARAVANAN		
Provider Search		KALAIVANI BABU		
		VISHWA KALIVANI SARAVANAN		
Enquiry Submission		JAYANTHAN KALAIVANI SARAVANAN		
Enquiry Tracking				
BMI Calculator				
🚳 Manage Profile				

#### 3.2 On click of GO, below screen appears. Enter all the information required.

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ANOUD MEDICAL	<b>I</b>				(	VAJRAVELU SARAVANAN 🗸
	Member Information Activ	3				Valid till: 23/01/2017
Member Details	Policy No	P-90-16-106406		Employee	Qatar Insurance Company	
Claims Submission	Member Name Gender	VAJRAVELU SARAVANAN Male		Civil ID DOB	27735606943 13/05/1977	
B Claims Tracking	Member ID Plan	MEM966791 Premier		Mobile No Sub Plan	55267075 Premier	
Provider Search	Reimbursement Form					
Enquiry Submission     Enquiry Tracking	Service Type *	OP	Y	Treatment Type *	General	Y
🚯 BMI Calculator	Claim Currency*	Qatari Riyal	Y	Amount*		500
🔹 Manage Profile	Mobile No* Treatment Country*	State Of Qatar	55267075	Email ID* Hospital	sarvanan.vajravelu@qicgroup.com.qa	v
	Hospital Tel No	State Of Qatai	· · ·		Select	·
	Doctor Name			Doctor Tel No		
	Payment To *	Member	v	Pay Method *	Bank Transfer	v
	Bank Name *	Commercial Bank		Bank Location *	Qatar	
	Account No *	254633358888		IBAN *	23453454	
	Remarks					
	Norman Na					

3.3 \* Marked fields are mandatory.

	-online.com/medical/AnoudClaims/Re	aimburramantClaimSaarchPacult.do?				
ANOUD MEDICAL		imbulsement claimbear cintesurcusi				
ANUOD MEDICAL	Doctor Name			Doctor tenno		
QLM	Payment To *	Member	×	Pay Method *	Bank Transfer	
A Life & Mendeal     Member Details	Bank Name *	Commercial Bank		Bank Location *	Qatar	
Claims Submission	Account No *	254633358888		IBAN *	23453454	
Claims Tracking	Illness Details					
Provider Search	Remarks					
Enquiry Submission						
	Invoice Details					+ Ac
Enquiry Tracking	Invoice No*	1212		Service Date *	03/01/17	A
BMI Calculator	Amount *		500	Invoice Type *	Consultation	
Manage Profile	Details		500		Consultation	
						Previous Nex
	File Upload					
	ore invoices by	clicking on Save&	Bs		ve & Add More	
	ore invoices by	clicking on Save& on save and close	Bs	button	ve & Add More	
After adding al	ore invoices by l invoices, click	on save and close	button	button Save & Close	<mark>ve &amp; Add More</mark> ; ; on file upload sect	ion
After adding al	ore invoices by I invoices, click I Invoice copies	on save and close	button	button Save & Close		ion
After adding al You can upload by clicking on E	ore invoices by I invoices, click I Invoice copies Browse button	on save and close	button Bs	button Save & Close		ion

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A Company	Payment To * Bank Name *	Claims Pay c	Qatari Riyal		¥		Bank Transfer Qatar		*
	Account No*	Currency • Remarks					23453454		
	Illness Details	Remarks					20130131		
	Remarks				X Close Submit				
	Invoice Details								+ Add
	Invoice No 1212	<ul> <li>Invoi</li> <li>03/01/2017</li> </ul>	ice Date 🗧	Details 🔍	Service type Consultation	ľ	Amount	Action	_
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	File Upload								
	Upload Documents								
	Remarks: Enter Re			🗁 Browse file	1				
				_					
				Add More	Submit Claim				
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3.11 On submission below screen appears with Reference number generated. Note down the reference number for further tracking.

/ D	: ANOUD - QIC :: ×		■ - 0
←	→ C 🔒 https://www.	Im-online.com/medical/AnoudClaims/InsertReimbursementClaims.do	*
	ANOUD MEDICAL		
<b>a</b>	Aerober Details	Your request Successfully Reference ID :	
	Claims Submission	Close	
<b>6</b> 20 (	Claims Tracking		
<b>6</b> 2	Provider Search		
<b>6</b> 2	Enquiry Submission		
<b>6</b> 20	Enquiry Tracking		
<b>6</b> 2	3MI Calculator		
<b>6</b> 20	Manage Profile		

## **5** Provider Search

5.1 Below screen will appear, after you click on Provider Search Menu.

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	ANOUD MEDICAL	3	E							U SARAVANAN
			Provider Search							
-	Member Details		Country	State Of Qatar	Y	Speciality	Cardiology			٣
<b>B</b>	Claims Submission		City	Doha	Y	Provider Type	All			٣
	Claims Tracking		Area	Select	٣					
					4	Q Search				
	Provider Search							Search_		
æ	Enquiry Submission							¢		<b>.</b>
<b>6</b> 20	Enquiry Tracking		AL ESRAA MEDICAL CEN	Name	Al Gharafa, Near Land M	Address			Phone •	Action 👻
æ	BMI Calculator		AL ESRAA MEDICAL CEN			tation, Al Markhiya Street, Garaffa			377991	@ Y
		_	AL HAYAT MEDICAL CEN		Al Waab Street	aaton, / a markinya oa eeg oarana			297200	@ Vj
<b>B</b>	Manage Profile		AL HAYAT MEDICAL CEN		Al Soudan Area off Al Wa	aab Street			297297	ۍ کړ. ۱۹
			ATLAS MEDICAL CENTER	- PHARMACY	Barwa Village, Wakra			445	513222	وي چ ا
									Previous	1 Next

5.2 You can search for any Provider by Specialty, city, type, Area and click on search Button.

#### 6 Enquiry submission

6.1 On click of search Enquiry submission below screen will appear.

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<	> C 🔒 https://www.qlm-onlin	ne.com/medical/Pages/Menu.do					\$
	ANOUD MEDICAL	Ē					VAJRAVELU SARAVANAN
		Enquiry Details					
đ	Member Details	Name	VAJRAVELU SARAVANAN		Type *	Select	×
6	Claims Submission	Mobile No *		55267075	Email *	I	
đ	Claims Tracking	Details *	Amount wrongly approved			Select	
						Claims General	
- 23	Provider Search					Preapproval	
đ	Enquiry Submission	File Upload				Accounts	
đ	Enquiry Tracking	ine oproud				Providers	
đ	BMI Calculator					Underwriting	
		Upload Documents					
63	Manage Profile	Remarks: Enter Remark	3	🗁 Browse file			
				_			
				Subm	it Enquiry		

- 6.2 Enter the type of information required.
- 6.3 Fill in the detail enquiry required.
- 6.4 If you have any supporting documents, upload the same in file Upload section.
- 6.5 \* Marked fields are mandatory.
- 6.6 Click on **Submit Enquiry** Button.
- 6.7 Below section will appear on submission. Note down the Reference number for further tracking.

Your Request has been sent successfully. Kindly note the Ref No:7120 for future reference.
Close

## 7 Enquiry Tracking

- 7.1 Below screen will appear, after you click on Enquiry Tracking.
- 7.2 You can enter the reference number and track the status for the same.

• > C https://www.ql	m-online.com/medical/Pag	jes/Menu.do							4	
ANOUD MEDICAL	æ	<b>a</b>								
A Line & Montreal	Tracking						Search.		<b>≜</b> Exc	
Member Details	Ref. Id 🕈	Type 🗘	Name	🗘 Mobile No		\$	Req. Date		Action	
Claims Submission	7120 Ge	eneral VAJRA	VELU SARAVANAN	55267075	sarvanan.vajravelu@qicgroup.com.qa		03/01/2017	New	۲	
Claims Tracking	Showing 1 to 1 of 1	l entries						Previous	1 Nex	
Provider Search										
Enquiry Submission										
Enquiry Tracking										
Enquiry Tracking BMI Calculator Manage Profile										
BMI Calculator										
BMI Calculator										
BMI Calculator										
BMI Calculator										
BMI Calculator										
BMI Calculator										

7.3 This section enables user to View and Track the Enquiry status. Click on enables user to view the details

#### 8 BMI Calculator

- 8.1 The BMI Calculator allows you to add your height and weight by adjusting the green button as shown below.
- 8.2 Based on your BMI index, the meaning can be viewed from the reverence table.

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ANOUD MEDICAL	Œ		🚺 VAJRAVELU SARAVANAN					
	BMI Calculator							
Member Details	Weight 63 kgs.		BMI Value					
Claims Submission	Height 173 cm		21.0					
Claims Tracking		•	Normal					
Provider Search								
Enquiry Submission	BMI Index		Meaning					
B Enquiry Tracking	Less Than 15	Very severely underweight						
	15.0 - 16.0	Severely underweight						
BMI Calculator	16.0 - 18.4	Underweight						
Manage Profile	18.5 - 24.9							
	25 - 29.9	Overweight						
	30 - 34.9	Obese Class I (Moderately obese)						
	35 - 39.9	Obese Class II (Severely obese)						
	Above 40	Obese Class III (Very severely obese)						

# 9 Manage Profile

9.1 On clicking on Manage Profile, below screen appears.

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ANOUD MEDICAL	⊡					VAJRAVELU SARAVAN	IAN 🗸
ALSA & Belleway	Profile						
Member Details	Personal Details						
Claims Submission	Name	VAJRAVELU SARAVANAN					
Claims Tracking	Member Id	MEM966791					
Provider Search	Civil Id	27735606943					
Enquiry Submission	Policy No	P-90-16-106406					
Enquiry Tracking							
BMI Calculator	P.O. Box			Address	1		
Manage Profile	Country	select	Ŧ	City	select		Y
	Mobile No *		55267075	Email Id *	sarvanan.vajravelu@qicgroup.com.qa		
	Bank Details						
	Bank Name *			Account No *			
	Bank Location *			IBAN *			
			Bu	pdate			
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9.2 You can add update your personal details and also Bank details and click on update button

🖹 Update