

Patient Details

Card Number	097112730346816802
DHA Member ID	-
Mobile Number	547867945
Email	
Identification	Emirates ID :
First Name	LAYLA
Last Name	MOHAMED
Date of Birth	14 Jul 2020
Gender	Female
Start Date	04 Jul 2024
Expiry Date	03 Jul 2025
Member Network	Silver Classic
Policy Holder	KATARZYNA PAULINA LARYS
Policy Issued From	Others / NE

Member Benefits

Payer's Name	Takaful Emarat PSC_ICICI Lombard_TPA_273
Assist America Coverage	YES
Package Default Network	Silver Classic
Approvals Classification	Standard
HAAD/DHA Approval Number	20151
Territory of Coverage	Worldwide
Special Remark for Provider	Influenza Vaccine is not covered on direct billing
Pre-Existing Conditions Waiting Period (Months)	0 Month(s)
Chronic Condition Waiting Period (Months)	0 Month(s)
Outpatient Plan	Covered
Physical Consultation Copayment	Copay 20% Max 50 AED applicable
Laboratory Services Copayment	10%
Radiology Services Copayment	10%
Outpatient Services Copayment	10%
Pharmaceutical Copayment	10%
Dental Coverage	Covered
Dental Access	Covered on direct billing
Dental Copayment	20%
Alternative Medicine	Covered
Alternative Medicine Access	Reimbursement Only
Alternative Medicine Copayment	20%
Optical Plan	Not Covered
Optical Copayment	100%
Optical Access	Not Covered
Wellness Access	Not Covered
Vaccination Plan	Covered
Vaccination Access	Covered on direct billing
Vaccination Copayment	0%
Out Mat Physician Consultation Copayment	Copay 100% Max 0 AED applicable
Out Mat Laboratory Copayment	100%
Out Mat Radiology Copayment	100%
Out Mat Pharmaceuticals Copayment	100%
Maternity IP Plan	Not Covered
Physiotherapy Services Copayment	10%
Inpatient Copay	0%
DHA Member Registration ID	-

PRINT

DISCLAIMER:
ALL SERVICES OUTSIDE PRE-APPROVAL PROTOCOL ARE SUBJECT TO RESTROSPECTIVE MEDICAL EVALUATION UPON CLAIM SUBMISSION.
CLAIMS PROCESSING IS SUBJECT TO CONTRACTUAL TARIFF.

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