

Patient Details

Card Number	097110330201174601
DHA Member ID	I035-036-119927912-03
Mobile Number	568008991
Email	
Identification	Emirates ID :
First Name	GUSTAVO
Last Name	DE FREITAZ BRAZ
Date of Birth	22 Mar 1981
Gender	Male
Start Date	20 Sep 2024
Expiry Date	19 Sep 2025
Member Network	Green
Policy Holder	GUSTAVO DE FREITAZ BRAZ
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	Islamic Arab Insurance Co. (P.S.C.)_33
Assist America Coverage	NO
Package Default Network	Green
Approvals Classification	Standard
HAAD/DHA Approval Number	DHA-SIAIC-MNI-100

Territory of Coverage	Worldwide
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	0%
Radiology Services Copayment	0%
Outpatient Services Copayment	0%
Pharmaceutical Copayment	0%
Dental Coverage	Covered
Dental Access	Covered on direct billing
Dental Copayment	20%
Alternative Medicine	Covered
Alternative Medicine Access	Reimburse ment Only
Alternative Medicine Copayment	0%
Optical Plan	Not Covered
Optical Copayment	0%
Optical Access	Not Covered
Wellness Access	Not Covered0
Vaccination Plan	Covered
Vaccination Access	Reimburse ment Only
Vaccination Copayment	0%
Out Mat Physician Consultation Copayment	10%
Out Mat Laboratory Copayment	10%
Out Mat Radiology Copayment	10%

Out Mat Pharmaceuticals Copayment	10%
Maternity IP Plan	Not Covered
Physiotherapy Services Copayment	0%
Inpatient Copay	0%
DHA Member Registration ID	I035-036-119927912-03

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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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