

Patient Details

Card Number	097110040382711202
DHA Member ID	I008-036-117356560-01
Mobile Number	505027125
Email	
Identification	Emirates ID :
First Name	RUCHIKA
Last Name	ASWANI
Date of Birth	11 Mar 1993
Gender	Female
Start Date	01 Mar 2025
Expiry Date	31 Oct 2025
Member Network	Gold
Policy Holder	MUNICH RE UNDERWRITING AGENTS (DIFC) LIMITED
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	Orient Insurance PJSC_Enhanced_4
Assist America Coverage	YES
Package Default Network	Gold
Approvals Classification	Standard
HAAD/DHA Approval Number	DHA-MN5284A

Territory of Coverage	Worldwide Excluding USA & Canada
Special Remark for Provider	Member have special access at Mediclinic City Hospital and Emirates Hosp - Jumeirah for Dental. Please send request through email and special GOP will be issued.
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	Covered on direct billing
Alternative Medicine Copayment	10%
Optical Plan	Covered
Optical Copayment	10%
Optical Access	Covered on direct billing
Wellness Access	Reimbursable Only
Vaccination Plan	Covered
Vaccination Access	Covered on direct billing
Vaccination Copayment	0%

Out Mat Physician Consultation Copayment	Copay 10% Max 50 AED applicable
Out Mat Laboratory Copayment	0%
Out Mat Radiology Copayment	0%
Out Mat Pharmaceuticals Copayment	0%
Maternity IP Plan	Covered
Physiotherapy Services Copayment	0%
Inpatient Copay	0%
DHA Member Registration ID	I008-036-117356560-01

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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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