

Patient Details

Card Number 097110780193597701

DHA Member ID 1035-036-116346238-03

Mobile Number 0554754345

Email

Identification Emirates ID:

First Name PRATIK

Last Name RAMESHCHANDRA TRIVEDI

Date of Birth 23 Feb 1981

Gender Male

Start Date 01 Jan 2022

Expiry Date 31 Dec 2022

Member Network Silver Premium

Policy Holder SALAMA FT

Member Benefits

Payer's Name Islamic Arab Insurance Co. (P.S.C.)_TPA_78

Package Default Network Silver Premium

Approvals Classification Standard

HAAD/DHA Approval Number DHA-SIAC-MNG-315

Territory of Coverage UAE, Arab Countries, South East Asia, Iran & Afghanistan

OP @ Hospital: Cons. 20% Max AED 50, 10% Lab, Rad, PH

& Physio ,10% ALT || @ Clinics : Cons. 20% Max AED 50 , 0%

Lab, Rad, PH & Physio: 10% ALT

Pre-Existing Conditions Waiting Period 0 Month(s)

Special Remark for Provider

Chronic Condition Waiting Period 0 Month(s)

Outpatient Plan Covered

Physicial Consultation Copayment 20%

Physician Consultation Copay Maximum Amount 50 AED

Laboratory Services Copayment 0%

Radiology Services Copayment 0%

Outpatient Services Copayment 0%

Pharmaceutical Copayment 0%

Dental Coverage Covered

Dental Access 04 Free Access

Dental Copayment 20%

Alternative Medicine Covered

Alternative Medicine Access 02 Reimbursement & Free Access

Alternative Medicine Copayment 10%

Optical Plan Covered

Optical Copayment 10%

Optical Access 04 Free Access

Wellness Access 01 Reimbursement

Vaccination Plan Not Covered

Vaccination Access 02 Reimbursement & Free Access

Vaccination Copayment 0%

Out Mat Physician Consultation Copayment	0%
Out Mat Physician Consultation Copayment Maximum Amount	0 AED
Out Mat Laboratory Copayment	0%
Out Mat Radiology Copayment	0%
Out Mat Pharmaceuticals Copayment	0%
Maternity IP Plan	Not Covered
Physiotherapy Services Copayment	0%
Inpatient Copay	0%
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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.