

## Patient Details

Card Number	097115010349252201
DHA Member ID	I013-036-113002410-01
Mobile Number	543555058
Email	
Identification	Emirates ID :
First Name	FLORIAN
Last Name	REDL
Date of Birth	02 Jun 1995
Gender	Male
Start Date	23 Jul 2024
Expiry Date	30 Sep 2024
Member Network	ML - Gold
Policy Holder	6070 BAKER HUGHES - EHO LTD - DUBAI BR
Policy Issued From	Dubai-DHA

## Member Benefits

Payer's Name	AMERICAN LIFE INSURANCE CO_TPA_501
Assist America Coverage	NO
Package Default Network	ML - Gold
DHA Member Registration ID	I013-036-113002410-01
HAAD/DHA Approval Number	DHA-6106600045
Approvals Classification	Standard
Territory of Coverage	Worldwide
Special Remark for Provider	NIL Copay at Health Hub Facilities on OP services
Pre-Existing Conditions Waiting Period (Months)	0 Month(s)
Chronic Condition Waiting Period (Months)	0 Month(s)
Outpatient Plan	Covered
Physical Consultation Deductible	0 AED

Physical Consultation Copayment	Copay 20% Max 75 AED applicable
Laboratory Services Copayment	0%
Radiology Services Copayment	0%
Outpatient Procedure Copayment	0%
Pharmaceutical Copayment	0%
Dental Coverage	Covered
Dental Access	02 Reimbursement & Free Access
Dental Copayment	20%
Alternative Medicine	Covered
Alternative Medicine Access	02 Reimbursement & Free Access
Alternative Medicine Copayment	0%
Optical Plan	Covered
Optical Copayment	20%
Optical Access	02 Reimbursement & Free Access
Vaccination Plan	Covered
Vaccination Access	02 Reimbursement & Free Access
Vaccination Copayment	0%
Out Mat Physician Consultation Copayment	Copay 100% Max 2500000 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	0%
Inpatient Copay	0%
Inpatient Copay Maximum Amount per Claim	2500000 AED
Psychiatric Access	02 Reimbursement & Free Access
Inpatient Psychiatric Copayment	10%
Outpatient Psychiatric Copayment	10%

**Teleconsultation covered with nil ded/Co-pay**

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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.

01/Aug/2024 11:50 AM