

Patient Details

Card Number	097112730347381302
DHA Member ID	I022-036-116517658-01
Mobile Number	502706240
Email	
Identification	Emirates ID :
First Name	KIRAN
Last Name	QAISER
Date of Birth	30 Aug 1978
Gender	Female
Start Date	09 Jul 2024
Expiry Date	08 Jul 2025
Member Network	Silver Premium
Policy Holder	HASEEB UR RAHMAN KHAN ROHILLA
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	Takaful Emarat PSC_ICICI Lombard_TPA_273
Assist America Coverage	YES
Package Default Network	Silver Premium
Approvals Classification	Standard
HAAD/DHA Approval Number	DHA-20150
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	20%

Radiology Services Copayment	20%
Outpatient Services Copayment	20%
Pharmaceutical Copayment	20%
Dental Coverage	Covered
Dental Access	Covered on direct billing
Dental Copayment	20%
Alternative Medicine	Covered
Alternative Medicine Access	Reimburse ment Only
Alternative Medicine Copayment	20%
Optical Plan	Not Covered
Optical Copayment	100%
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	Covered
Physiotherapy Services Copayment	20%
Inpatient Copay	0%
DHA Member Registration ID	I022-036-116517658-01

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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.

24/Oct/2024 10:10 AM