

Patient Details

Card Number	097112840266559402
DHA Member ID	1013-036-116670405-01
Mobile Number	563426910
Email	
Identification	Emirates ID :
First Name	JADE
Last Name	ASHCROFT
Date of Birth	03 Nov 1996
Gender	Female
Start Date	31 Oct 2024
Expiry Date	30 Oct 2025
Member Network	Silver Classic
Policy Holder	THE ENGLISH COLLEGE DUBAI - CAT A
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	AMERICAN LIFE INSURANCE CO_Mid-Market_284
Assist America Coverage	NO
Package Default Network	Silver Classic
Approvals Classification	Standard
HAAD/DHA Approval Number	DHA- 6505700000
Territory of Coverage	Worldwide
Pre-Existing Conditions Waiting Period	0 Month(s)
(Months)	
Chronic Condition Waiting Period (Months)	0 Month(s)
Outpatient Plan	Covered
Physicial Consultation Copayment	Copay 20% Max 50 AED applicable
Laboratory Services Copayment	20%
Radiology Services Copayment	20%
Outpatient Procedure Copayment	20%
Pharmaceutical Copayment	30%
Dental Coverage	Covered
Dental Access	Covered on direct billing
Dental Copayment	20%
Alternative Medicine	Not Covered
Alternative Medicine Access	Not Covered

100%
Covered
20%
Reimbursemebent Only
Reimbursemebent Only
Covered
Reimbursemebent Only
0%
Copay 10% Max 500000 AED applicable
10%
10%
10%
Covered
0%
0%
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ALL SERVICES OUTSIDE PRE-APPROVAL PROTOCOL ARE SUBJECT TO RESTROSPECTIVE MEDICAL EVALUATION UPON CLAIM SUBMISSION.

27/Dec/2024 18:01 PM
CLAIMS PROCESSING IS SUBJECT TO CONTRACTUAL TARIFF.