

## Patient Details

Card Number	097112730327990501
DHA Member ID	I022-036-120372731-01
Mobile Number	555381866
Email	
Identification	Emirates ID :
First Name	SAMIR
Last Name	KHECHINE
Date of Birth	22 Oct 1982
Gender	Male
Start Date	30 Jan 2025
Expiry Date	29 Jan 2026
Member Network	PEARL
Policy Holder	FLEXVISION SERVICES - FZCO
Policy Issued From	Dubai-DHA

## Member Benefits

Payer's Name	Takaful Emarat PSC_ICICI Lombard_TPA_273
Assist America Coverage	YES
Package Default Network	PEARL
Approvals Classification	Standard
HAAD/DHA Approval Number	DHA-23399

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
Physician 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	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	0%
Optical Access	Not Covered
Wellness Access	Not Covered
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	Not Covered
Physiotherapy Services Copayment	0%
Inpatient Copay	0%
DHA Member Registration ID	I022-036-120372731-01

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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.**