

	Home Member Eligi	bilit		
Claims				
Member Eligibility Ch	neck			
Claim Form				
Referal				
Encounter (Clinic)		Patient Information		
		ABU DHABI NATIONAL INSURANCE COMP.	ANV (Dlan Name: I	Dha
Remitance Advice	Insurance Company	Enhanced)	ANT (Flatt Nathe. I	Jila
	Member ID-CardNo	I017-010-115525792-01		
Old Encounter	Member Name	NICE TUAZON TAN		
	DOB/Gender	03 Jun 1995 / Female		
Download CPT's	Nationality	PHILIPPINES		
	Valid Till	26 Oct 2022 to 25 Oct 2023		
Formulary	Status	MEMBER IS ELIGIBLE IN YOUR FACILITY FOR MEDICAL SERVICES		
			CHEDICAL SERVICE	
Add Doctor	Emirates ID	784-1995-0022968-9	C MEDICAL SERVICE	
Add Doctor			N PILDICAL SERVICE	
Add Doctor Provider Details			CMEDICAL SERVICE	<u> </u>
Provider Details			MEDICAL SERVICE	<u> </u>
			MEDICAL SERVICE	<u> </u>
Provider Details  Change Password	Emirates ID		Amount	(%)
Provider Details	Emirates ID  Deductible Diagnostic & Treatment Service	784-1995-0022968-9	Amount 0.00	
Provider Details  Change Password	Emirates ID  Deductible Diagnostic & Treatment Service Gp	784-1995-0022968-9	Amount 0.00 20.00	(%) 20.00 20.00
Provider Details  Change Password	Deductible Diagnostic & Treatment Service Gp Gp Maternity	784-1995-0022968-9	Amount 0.00 20.00 0.00	(%) 20.00 20.00 10.00
Provider Details  Change Password	Deductible Diagnostic & Treatment Service Gp Gp Maternity Hearing & Vision Aids	784-1995-0022968-9	Amount 0.00 20.00 0.00 0.00	(%) 20.00 20.00 10.00 20.00
Provider Details  Change Password	Deductible Diagnostic & Treatment Service Gp Gp Maternity Hearing & Vision Aids Lab	784-1995-0022968-9	Amount 0.00 20.00 0.00 0.00 0.00	20.00 20.00 10.00 20.00 0.00
Provider Details  Change Password	Deductible Diagnostic & Treatment Service Gp Gp Maternity Hearing & Vision Aids Lab Medicine	784-1995-0022968-9	Amount 0.00 20.00 0.00 0.00 0.00 0.00	(%) 20.00 20.00 10.00 20.00 0.00 0.00
Provider Details  Change Password	Deductible Diagnostic & Treatment Service Gp Gp Maternity Hearing & Vision Aids Lab Medicine Medicine-Maternity	784-1995-0022968-9	Amount 0.00 20.00 0.00 0.00 0.00 0.00 0.00	20.00 20.00 10.00 20.00 0.00 0.00
Provider Details  Change Password	Deductible Diagnostic & Treatment Service Gp Gp Maternity Hearing & Vision Aids Lab Medicine Medicine-Maternity Op Ante-Natal Services	784-1995-0022968-9	Amount 0.00 20.00 0.00 0.00 0.00 0.00 0.00 0.	(%) 20.00 20.00 10.00 20.00 0.00 0.00 10.00
Provider Details  Change Password	Deductible Diagnostic & Treatment Service Gp Gp Maternity Hearing & Vision Aids Lab Medicine Medicine-Maternity Op Ante-Natal Services Outpatient Maternity	784-1995-0022968-9	Amount 0.00 20.00 0.00 0.00 0.00 0.00 0.00 0.	(%) 20.00 20.00 10.00 20.00 0.00 10.00 10.00
Provider Details  Change Password	Deductible Diagnostic & Treatment Service Gp Gp Maternity Hearing & Vision Aids Lab Medicine Medicine-Maternity Op Ante-Natal Services	784-1995-0022968-9	Amount 0.00 20.00 0.00 0.00 0.00 0.00 0.00 0.	(%) 20.00 20.00 10.00 20.00 0.00 0.00 10.00