

 ID Details

Request Type

☒ Out Patient

☐ In patient

 Member Details

Name

AGUS DWIYANTO

Group Name

TH8 A HOUSE OF ORIGINALS HOTEL - FZE--

UB No

I017-029-118176513-02

DOB

19-Aug-1999

EID

784-1999-2092513-0

Gender

MALE

Appln No

I017-029-118176513-02

Category

Normal

Policy Jurisdiction

DHA

Benefit type

Non EBP

Join Date

01-Oct-2023

Leave Date

30-Sep-2024

PEC Status

NIL WAITING PERIOD

 Policy Details

Payer

ABU DHABI NATIONAL INSURANCE COMPANY

TPA

E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC

Period

01-Oct-2023 to 30-Sep-2024

Network

Green

Policy no

200020-1

Direct SP Access

SP Direct Access

Co-Ins

CONSULTATION

OUTPATIENT

LAB/RADIOLOGY

PHYSIO

PHARMACY

IP

MATERNITY

DENTAL

10% upto AED 25

NIL

NIL

NIL

NIL LIMIT 150000

NIL

NA

NA

Remarks

Active PA Details

Active Referral Details

Claim details

Benifit Group

Select Doctor

Phone No

971-12-3456789

Specialization

Please Enter Phone Number in Format 971-5X-XXXXXXX

Add Service

Add

Service	Quantity	Rate	Co-Ins	Net Req Amount	Action
					Total

Add Diagnosis

Type

select

Add

Diagnosis	Code	Type	Action
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Add Documents

Attach document(s)

Sl	File caption
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Provider remarks

Generate Claim Form

