ID Details

Patient ID Type

O UB No

Emirates ID

O GDRFA ID

784-1979-3175751-8

Search

Clear

A Member Information

Name

Mrityunjoy Biswas Nishan Biswas

Group Name

Ginco Cont. Co. LLC

UB No

LL425418

DOB

24-Nov-1979

EID

784-1979-3175751-8

Gender

MALE

DHA Member ID

1011-037-116050314-01

Category

Normal

Policy Information

Payer

Al Sagr National Insurance Co. (PSC)

TPA

KHAT AL HAYA Management of Health Insurance Claims LLC

Period

01-Aug-2023 to 31-Jul-2024

Network

Lifeline Pearl - EBP

Policy no

DB593023002934

Direct SP Access

GP Referral Mandatory

IP/OP Status

IP not Covered

Co-Ins

| CONSULTATION | LAB/RADIOLOGY | PHYSIO | PHARMACY | IP | MATERNITY | DENTAL |
|--------------------|----------------|--------------------|--------------------|--|--------------------|---|
| 20% Co- payment | 20% Co-Payment | 20% Co- Payment | 30% Co- Payment | 20% Co-payment with a cap of 500 AED per encounter | 10% Co- payment | Excluded, except in case of medical emergencies subject to 20% Co-insurance |

Remarks

Benifit Group

| | | | | | | | Q |
|---|-----------------|-----------------|------------|----------------|------------------|---------|--------|
| Handling Type | | | | | | | |
| Out patient | | | | | | | |
| Specialization | | | | | | | |
| | | | | | | | |
| Phone No | | | | | | | |
| 971-52-9049830 | | | | | | | |
| Please Enter Phone Number in Format | 971-5X-XXXXXXX | | | | | | , |
| Add Diagnosis | | | | | | | |
| | | | | | | | Q |
| Туре | | | | | | | |
| select | | | | | | | |
| | | | | | | | |
| Add | | | | | | | |
| Diagnosis | Co | de | Туре | | Action | | |
| Add Service | | | | | | | |
| | | | | | | | Q |
| Add | | | | | | | |
| | | _ | | | | | |
| Service | Quantity | Rate | Co-Ins | | Net Req Amount | Action | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | Total |
| Add Medicine | | | | | | | Total |
| Add Medicine | | | | | | | |
| | | | | | | | Total |
| Add Medicine Add | | | | | | | |
| | Quantity Bill A | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | |
| Add | Quantity Bill A | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | Q |
| Add | Quantity Bill A | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | Action |
| Add | Quantity Bill A | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | |
| Add | Quantity Bill A | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | Action |
| sl Medicine Billed Rate | Quantity Bill A | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | Action |
| sl Medicine Billed Rate Add Documents | Quantity Bill A | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | Action |
| Add sl Medicine Billed Rate Add Documents Attach document(s) | | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | Action |
| sl Medicine Billed Rate Add Documents Attach document(s) | | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | Action |
| sl Medicine Billed Rate Add Documents Attach document(s) | | Amount Co Ins % | Co Ins Amt | Net Req Amount | Medicine Details | Remarks | Action |