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Patient Details

Card Number	097110040339635302
DHA Member ID	I008-036-117378260-01
Mobile Number	562793617
Email	
Identification	Emirates ID :
First Name	PAULA
Last Name	KIMBERLY ANN EUGENIO SALCEDO
Date of Birth	17 Aug 1991
Gender	Female
Start Date	30 Apr 2024
Expiry Date	29 Apr 2025
Member Network	Green
Policy Holder	RMA AUTOMOTIVE MIDDLE EAST AND AFRICA FZE
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	Orient Insurance PJSC_Enhanced_4
Assist America Coverage	YES
Package Default Network	Green
Approvals Classification	Standard
HAAD/DHA Approval Number	DHA-MN540761B

Territory of Coverage	Worldwide
Outpatient Plan	Covered
Physicial Consultation Copayment	Copay 20% Max 50 AED applicable
Laboratory Services Copayment	0%
Radiology Services Copayment	0%
Outpatient Procedure Copayment	0%
Pharmaceutical Copayment	0%
Dental Coverage	Covered
Dental Access	Covered on direct billing
Dental Copayment	20%
Alternative Medicine	Covered
Alternative Medicine Access	Covered on direct billing
Alternative Medicine Copayment	20%
Optical Plan	Not Covered
Optical Copayment	100%
Optical Access	Not Covered
Wellness Access	Reimbursemebent Only
Vaccination Plan	Covered
Vaccination Access	Reimbursemebent Only
Vaccination Copayment	0%
Out Mat Physician Consultation Copayment	Copay 100% Max 0 AED applicable
Out Mat Laboratory Copayment	100%
Out Mat Radiology Copayment	100%
Out Mat Pharmaceuticals Copayment	100%
Maternity IP Plan	Not Covered

Physiotherapy Services Copayment	0%
Inpatient Copay	0%
DHA Member Registration ID	I008-036-117378260-01

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