				Benefit	Coverage	Condition
				Formulary Applicable	Applicable	
Patient Information				Plan Name	ASNIC FMC DXB	
	AL SAGR NATIONAL				PLAN 4 - V1	
Insurance	INSURANCE CO. (PSC) (Plan Name: Dha Enhanced)			Product Name	Dha Enhanced	
Company				Specialist Access	Direct Access	
				OP Network	Fmc Standard	
Member ID-	ordNo 1011-010-116030849-01				Network Clinics	
CardNo				IP Network	Ip : Fmc Standard	
Member MOHSEN					Network Hospitals	
Name	IOIIOLIA			GDF/MAF	NA	
DOB/Gender19 Aug 1985 / Male				Dental	No	
Nationality	IRAN 20 Sep 2024 to 19 Sep 2025		Maternity	No	0 Days	
Valid Till					Waiting	
					Period	
	MEMBER IS ELIGIBLE IN			Optical	No	
Status	YOUR FACILITY FOR		Work Related	No		
	MEDICAL SERVICES			Rooms & Boards for	Ward	IP Only
 			hospitalisation		0 Davis	
Emirates ID 784-1985-8106968-3				Chronic	Yes	0 Days Waiting
				Cinome	i CS	Period
Deductible A			t(%)]		
Diagnostic & Treatment Services		1				
For Dental & Gum		0.00	20.00			*
Gp		25.00	20.00	Purpose of patient visit *		
Gp Maternity		0.00	10.00	□Doctor consultation		
Hearing & Vision Aids		0.00	20.00	☐Physiotherapy session		
Lab		0.00	0.00	Other multi- session treatment like injections,		
Medicine		0.00	0.00	nebulization		
Medicine-Maternity		0.00	10.00	Remark		
Op Ante-Natal Services		0.00	10.00			
Outpatient Maternity		0.00	10.00			
Physiotherapy		0.00	0.00			
Procedure		25.00	20.00	Remarks		
Radiology	0.00	0.00				
C 1	25.00	20.00	1			

20.00

10.00

25.00 0.00

Spl

Spl Maternity

Cancel Print

Out Patient 🗸

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