#### Ջ= **ID** Details

Patient ID Type

O UB No

Emirates ID

O GDRFA ID

784-1999-8326827-9

QSearch

Clear

### Member Information

Name

### **Zainab Hassan Fathy Ahmed Saad**

**Group Name** 

Mercure Hotel Suites & Apartments FZ-LLC

UB No

LW531626

DOB

16-Aug-1999

**EID** 

784-1999-8326827-9

Gender

**FEMALE** 

**DHA Member ID** 

1007-037-120493449-01

Category

W Period

## **Policy Information**

Payer

Dubai National Insurance & Reinsurance P.S.C

**TPA** 

KHAT AL HAYA Management of Health Insurance Claims LLC

13-Jan-2024 to 12-Jan-2025

Network

**Lifeline Pearl Network** 

Policy no

09/954/2024/14/LLT

**Direct SP Access** 

**SP Direct Access** 

**Policy Jurisdiction** 

DHA

IP/OP Status

IP not Covered

Co-Ins

CONSULTATION	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
20% (Max AED: 25/-) Copayment	Nil	Nil	Nil	Nil	10% Co- payment	Excluded, except in case of medical emergencies subject to 20% Co-insurance



# **Activity Information**

Select Doctor							
							Q
Handling Type							
Out patient							
Specialization							
Phone No							
971-50-5030168							
Please Enter Phone Number in Forma	at 971-5X-XXXXXXX						
Add Diagnosis							
							Q
Туре							
select							
Add							
			_				
Diagnosis	Cod	e	Туре		Action		
Add Service							
							Q
Add							
Service	Quantity	Rate	Co-Ins		Net Req Amount	Action	
Service	Quantity	Rate	Co-Ins		Net Req Amount	Action	
Service	Quantity	Rate	Co-Ins		Net Req Amount	Action	Total
	Quantity	Rate	Co-Ins		Net Req Amount	Action	Total
	Quantity	Rate	Co-Ins		Net Req Amount	Action	
Add Medicine	Quantity	Rate	Co-Ins		Net Req Amount	Action	Total
Add Medicine				Net Reg Amount			Q
Add Medicine		mount Co Ins %	Co Ins Amt	Net Req Amount	Net Req Amount  Medicine Details	Action	
Add Medicine				Net Req Amount			Q
Add Medicine				Net Req Amount			Action
Add Medicine  Add  sl Medicine Billed Rate				Net Req Amount			Action
Add Medicine  Add  sl Medicine Billed Rate				Net Req Amount			Action
Add Medicine  Add  sl Medicine Billed Rate  Add Documents				Net Req Amount			Action
Add Medicine  Add  sl Medicine Billed Rate  Add Documents  Attach document(s)	e Quantity Bill Ar			Net Req Amount			Action
Add Medicine  Add  sl Medicine Billed Rate  Add Documents  Attach document(s)	e Quantity Bill Ar			Net Req Amount			Action
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