

 ID Details

Request Type

☒ Out Patient ☐ In patient

Patient ID Type

☐ UB No ☒ Emirates ID ☐ Application ID ☐ RA No

784-2015-8743090-7

 Search

Clear

 Member Details

Name

YASMINE OMER AKEEL ABDUL WAHAB

Group Name

OMER AKEEL ABDULLA ABDUL WAHAB

UB No

I022-029-116140261-01

DOB

15-Sep-2015

EID

784-2015-8743090-7

Gender

FEMALE

Appln No

784-2015-8743090-7

Category

Normal

Policy Jurisdiction

DHA

Benefit type

Non EBP

Join Date

31-Oct-2024

Leave Date

30-Oct-2025

PEC Status

NIL WAITING PERIOD

Member Flag

NONE

Maternity Status

NIL WAITING PERIOD

Flag Remarks

Visa Authority

Dubai

 Policy Details

Payer

TAKAFUL EMARAT - INSURANCE

TPA

E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC

Period

31-Oct-2024 to 30-Oct-2025

Network

Blue

Policy no

01-115-11-24-5545217354

Direct SP Access

No

Co-Ins

CONSULTATION	OUTPATIENT	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
20% max 25	20%	20%	20%	20% LIMIT 3500	NIL	NA	NA

Remarks

Area of cover: UAE.
Only declared pre existing condition will be covered.

 Active PA Details

 Active Referral Details

 Claim details

Benifit Group

Select Doctor

Q

Phone No

971-55-1234567

Specialization

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

Add Service

Q

Add

Service	Quantity	Rate	Co-Ins	Net Req Amount	Action
---------	----------	------	--------	----------------	--------

Total

Add Medicine

Q

Add

sl	Medicine	Billed Rate	Quantity	Bill Amount	Co Ins %	Co Ins Amt	Net Req Amount	Medicine Details	Action
----	----------	-------------	----------	-------------	----------	------------	----------------	------------------	--------

Total

Add Diagnosis



Type

select

Add

Diagnosis	Code	Type	Action
-----------	------	------	--------

Add Documents

Attach document(s)

SI	File caption
----	--------------

Provider remarks

Generate Claim Form