ID Details

Request Type

(•) Out Patient ( ) In patient

Patient ID Type

( ) UB No (•) Emirates ID ( ) Application ID ( ) RA No

784-1980-3153574-7

Search Clear

Member Details

Name

HENRY HADDAD

Group Name

KOSMONTE FOODS L.L.C

UB No

I022-029-115842325-01

DOB

13-Sep-1980

EID

784-1980-3153574-7

Gender

MALE

Appln No

784-1980-3153574-7

Category

Normal

Policy Jurisdiction

DHA

Benefit type

Non EBP

Join Date

15-Aug-2024

Leave Date

14-Aug-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

15-Aug-2024 to 14-Aug-2025

Network

Ecare Classic

Policy no

01-111-01-24-046748

Direct SP Access

Yes

Co-Ins

CONSULTATION	OUTPATIENT	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
20% max 25	NIL	NIL	NIL	NIL LIMIT 5000	NIL	NA	NA

Remarks

20% Copay on all OP Services @ECare Classic Network Hospitals -Aster Hospitals &Cedars|Belhoul SPH |AL Saha Wa Al Shifaa Hsp |Central Pvt Hsp |Sharjah Corniche |Amina Hsp | AL Oraibi Hsp |Al Zharawi Hsp |Al Sharq Hsp |Armada One Day Surgical Centre |Aster Day Surgery Centre | Iranian Hospital |Aster Hospital Sonapur |IMH |Hatta hospital
Area of cover: UAE (Including the Emirate of Abu Dhabi & Al Ain Region).

Active PA Details

Active Referral Details

Claim details

Benifit Group

Select Doctor

Phone No

971-50-3967687

Specialization

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

Add Service

Add

Service	Quantity	Rate	Co-Ins	Net Req Amount	Action

Total

Add Medicine

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)

Sl	File caption

Provider remarks

Generate Claim Form