

Patient Details

Card Number	097112440256284501
DHA Member ID	-
Mobile Number	505548520
Email	
Identification	Emirates ID :
First Name	MOHAMMED
Last Name	SHARIQ
Date of Birth	23 Oct 1988
Gender	Male
Start Date	01 Jul 2024
Expiry Date	30 Jun 2025
Member Network	N3
Policy Holder	DANUBE PROPERTIES DEVELOPMENT L.L.C
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	Dubai Insurance_XOL_Dubaicare_244
Assist America Coverage	YES
Package Default Network	N3
Approvals Classification	Standard
HAAD/DHA Approval Number	DIN-2024-DANUBE-CAT B

Territory of Coverage	Worldwide
Pre-Existing Conditions Waiting Period (Months)	0 Month(s)
Chronic Condition Waiting Period (Months)	0 Month(s)
Outpatient Plan	Covered
Physical Consultation Deductible	0 AED
Physical Consultation Copayment	Copay 20% Max 0 AED applicable
Laboratory Services Copayment	20%
Laboratory Services Deductible	0 AED
Radiology Services Copayment	20%
Radiology Services Deductible	0 AED
Outpatient Procedure Copayment	0%
Outpatient Procedure Deductible	0 AED
Pharmaceutical Copayment	20%
Pharmaceutical Deductible	0 AED
Dental Coverage	Not Covered
Dental Copayment	0%
Dental Access	Not Covered
Alternative Medicine	Covered
Alternative Medicine Access	Free Access
Alternative Medicine Copayment	0%
Optical Plan	Not Covered
Optical Copayment	0%
Optical Access	Not Covered
Wellness Access	Not Covered0
Vaccination Plan	Not Covered

Vaccination Access	Covered on direct billing
Vaccination Copayment	0%
Out Mat Physician Consultation Copayment	Copay 0% Max 0 AED applicable
Out Mat Laboratory Copayment	0%
Out Mat Radiology Copayment	0%
Out Mat Pharmaceuticals Copayment	0%
Maternity IP Plan	Not Covered
Physiotherapy Services Copayment	20%
Physiotherapy Deductible	0 AED
Inpatient Copay	20%
Inpatient Copay Maximum Amount per Claim	250 AED
DHA Member Registration ID	-

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DISCLAIMER:

ALL SERVICES OUTSIDE PRE-APPROVAL PROTOCOL ARE SUBJECT TO RESTROSPECTIVE MEDICAL EVALUATION UPON CLAIM SUBMISSION.
CLAIMS PROCESSING IS SUBJECT TO CONTRACTUAL TARIFF.