			Cancel	Print	Out Patient 🗸	1005-010-116125805	-01 Search	
				Benefit	Coverage		Condition	
			Formulary Applicable	Applicable				
				Dha Enhanced				
			Plan Name	DIC TM				
				Specialist Access	Direct Access			
Insurance Company	ent Informati DUBAI INSUF COMPANY (P. Name: Dha E I005-010-11 01 AASHIS	RANCE S.C) (I Inhanc	Plan ed)	OP Network	ASTER DM HI QUSAIS+ASTI OF ASTER DM FZC DUBAI (MANKHOOL	Network R HOSPITAL BR OF EALTHCARE_ AL ER HOSPITAL BR I HEALTHCARE )+INTERNATIONAL SPITAL - DUBAI		
	02 Jul 1995 /	' Male			1	rd Network Hospitals		
	NEPAL			Dental	No			
Valid Till	01 Oct 2024 2025	to 30 :	Sep	Maternity	No		0 Days Waiting Period	
	MEMBER IS EL	IGIBLE	E IN	Optical	No			
Status	YOUR FACILIT	Y FOR		Work Related	No			
Emirates ID				Rooms & Boards for hospitalisation	Ward		Applicable For IP Only	
				Chronic	Yes		0 Days Waiting Period	
			GDF/MAF	Yes				
			Chronic Medication	30 Days				
Deductible		Amount	(%)					
Diagnostic & Treatment Services For Dental & Gum		0.00	20.00	Patient Mobile	No:	*		
		25.00	10.00	Purpose of pat	ient visit *			
Gp Maternity		0.00	10.00	Doctor consultation				
Hearing & Vision Aids		0.00	20.00	□Physiotherapy session				
Lab 0.00		0.00	0.00	Other multi- session treatment like injections, nebulization				
Medicine 0.00		0.00	0.00					
Medicine-Maternity 0.0		0.00	10.00	□ Lab or radiology investigations				
Op Ante-Natal Services		0.00	10.00	Others  I G O O O THER O O O O THE O				
Outpatient Maternity		0.00	_	In Case Of OTHERS, Please specify the reason/s in Remark Remarks				
Physiotherapy		0.00	0.00					
		25.00	10.00					
		0.00	20.00					
27		0.00	0.00					
		25.00	10.00					
Spl Maternity 0		0.00	10.00					