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Patient Details

Card Number	097112950227872602
DHA Member ID	I035-036-118605451-03
Mobile Number	555527062
Email	
Identification	Emirates ID :
First Name	FE
Last Name	ARCEGA
Date of Birth	23 Jan 1964
Gender	Female
Start Date	01 Nov 2024
Expiry Date	31 Oct 2025
Member Network	EBP Network (Please follow EBP network protocols.)
Policy Holder	FE RAZON ARCEGA
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	Islamic Arab Insurance Co. (P.S.C.)_Peak Re_EBP_TPA_295
Assist America Coverage	NO
Package Default Network	EBP
Approvals Classification	Standard
HAAD/DHA Approval Number	DHA-SIAIC-MNG-395
Territory of Coverage	Dubai & Northern Emirates
Special Remark for Provider	Outpatient treatment restricted to clinics only
Pre-Existing Conditions Waiting Period (Months)	6 Month(s)
Chronic Condition Waiting Period (Months)	6 Month(s)
Physician Consultation Copayment	20%
Laboratory Services Copayment	20%
Radiology Services Copayment	20%
Outpatient Services Copayment	20%
Pharmaceutical Copayment	30%
Dental Access	Not Covered
Dental Copayment	100%
Alternative Medicine Access	Not Covered
Optical Copayment	100%
Wellness Access	Not Covered0
Vaccination Access	Reimbursemebent Only
Out Mat Physician Consultation Copayment	10%
Out Mat Laboratory Copayment	10%
Out Mat Radiology Copayment	10%
Out Mat Pharmaceuticals Copayment	10%

Maternity IP Plan	Not Covered
Physiotherapy Services Copayment	20%
Inpatient Copay	20%
DHA Member Registration ID	I035-036-118605451-03

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

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