

## **Patient Details**

Card Number	097112950390750702
DHA Member ID	1035-036-120001184-01
Mobile Number	504510238
Email	
Identification	Emirates ID :
First Name	Virginia
Last Name	Van Der Westhuizen
Date of Birth	15 Mar 1954
Gender	Female
Start Date	01 Apr 2025
Expiry Date	31 Mar 2026
Member Network	EBP Network
	(Please follow EBP network protocols.)
Policy Holder	Virginia Van Der Westhuizen
Policy Issued From	Dubai-DHA

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	DAH-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%
Physician Consultation Copay Maximum Amount	150000 AED
Laboratory Services Copayment	20%
Radiology Services Copayment	20%
Outpatient Services Copayment	20%
Pharmaceutical Copayment	30%
Dental Access	Not Covered
Dental Copayment	30%

Alternative Medicine Access	Not Covered	
Optical Copayment	100%	
Wellness Access	Not Covered0	
Vaccination Access	Reimbursemebent Only	
Out Mat Physician Consultation	10%	
Copayment	1076	
Out Mat Laboratory Copayment	10%	
Out Mat Radiology Copayment	10%	
Out Mat Pharmaceuticals Copayment	10%	
Maternity IP Plan	Covered	
Physiotherapy Services Copayment	20%	
Inpatient Copay	20%	
DHA Member Registration ID	1035-036-120001184-01	



## DISCLAIMER:

ALL SERVICES OUTSIDE PRE-APPROVAL PROTOCOL ARE SUBJECT TO RESTROSPECTIVE MEDICAL EVALUATION UPON CLAIM SUBMISSION.

19/May/2025 11:34 AM

CLAIMS PROCESSING IS SUBJECT TO CONTRACTUAL TARIFF.