

Patient Details

Card Number	097112440399263401
DHA Member ID	I005-000-116218099-01
Mobile Number	552737276
Email	
Identification	Emirates ID :
First Name	Ganga Kumar
Last Name	Pradhan
Date of Birth	13 Dec 1980
Gender	Male
Start Date	07 Jun 2025
Expiry Date	06 Jun 2026
Member Network	Exclusive N2
Policy Holder	C CENTRAL RESORT
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	Dubai Insurance_XOL_Dubaicare_244
Assist America Coverage	YES
Package Default Network	Exclusive N2
Approvals Classification	Standard
HAAD/DHA Approval Number	DIN-2025-CANAL CENTRAL-CATA

Territory of Coverage	Worldwide
Pre-Existing Conditions Waiting Period (Months)	0 Month(s)
Chronic Condition Waiting Period (Months)	0 Month(s)
Physician Consultation Deductible	0 AED
Physician Consultation Copayment	Copay 20% Max 50 AED applicable
Laboratory Services Copayment	0%
Laboratory Services Deductible	0 AED
Radiology Services Copayment	0%
Radiology Services Deductible	0 AED
Outpatient Procedure Copayment	0%
Outpatient Procedure Deductible	0 AED
Pharmaceutical Copayment	0%
Pharmaceutical Deductible	0 AED
Dental Access	Covered on direct billing
Dental Copayment	20%
Alternative Medicine Access	Reimbursement Only
Alternative Medicine Copayment	20%
Optical Copayment	20%
Optical Access	Covered on direct billing
Wellness Access	Covered on direct billing
Vaccination Access	Not Covered
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%
Physiotherapy Services Copayment	0%
Physiotherapy Deductible	0 AED
Inpatient Copay	0%
Inpatient Copay Maximum Amount per Claim	0 AED
DHA Member Registration ID	I005-000-116218099-01

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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.

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