

ID Details

Request Type

☒ Out Patient ☐ In patient

Patient ID Type

☒ UB No ☐ Emirates ID ☐ Application ID ☐ RA No

I017-029-117280950-01

Search

Clear

Member Details

Name	RIHANNA SARANYA MANIKANADAN	Group Name	M A K POOLS AND GARDENS L.L.C
UB No	I017-029-117280950-01	DOB	03-Feb-2019
EID	784-2019-1630572-1	Gender	FEMALE
AppIn No	I017-029-117280950-01	Category	Normal
Policy Jurisdiction	DHA	Benefit type	Non EBP
Join Date	16-Oct-2022	Leave Date	15-Oct-2023
PEC Status	NIL WAITING PERIOD		

Policy Details

Payer	ABU DHABI NATIONAL INSURANCE COMPANY	TPA	E CARE INTERNATIONAL MEDICAL BILLING SERVICES CO. LLC
Period	16-Oct-2022 to 15-Oct-2023	Network	Blue
Policy no	200086	Direct SP Access	GP Referral Mandatory

Co-Ins	CONSULTATION	OUTPATIENT	LAB/RADIOLOGY	PHYSIO	PHARMACY	IP	MATERNITY	DENTAL
	20% upto AED 25	NIL	NIL	NIL	NIL LIMIT 7500	NIL	NA	NA
Remarks	Area of coverage: UAE (Excluding the Emirate of Abu Dhabi & Al Ain Region). PEC: NIL WAITING PERIOD							

Active PA Details

Active Referral Details

Claim details

Benifit Group

Select Doctor

Phone No

971-55-7555679

Specialization

Please Enter Phone Number in Format 971-5X-XXXXXXX

Add Service

Q

Add

Service	Quantity	Rate	Co-Ins	Net Req Amount	Action
					Total

Add Diagnosis

Q

Type

select

Add

Diagnosis	Code	Type	Action
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Add Documents

📎 Attach document(s)

SI	File caption
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Provider remarks

Generate Claim Form