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Patient Details

Card Number	097110150178153901
DHA Member ID	I084-036-114736970-03
Mobile Number	561749959
Email	
Identification	Emirates ID :
First Name	IBRAHIM
Last Name	KAAKANI
Date of Birth	18 Oct 1991
Gender	Male
Start Date	01 Apr 2024
Expiry Date	31 Mar 2025
Member Network	Silver Premium
Policy Holder	ITOCHU MIDDLE EAST L.L.C
Policy Issued From	Dubai-DHA

Member Benefits

Payer's Name	TOKIO MARINE & NICHIDO FIRE INSURANCE CO., LTD_15
Assist America Coverage	YES
Package Default Network	Silver Premium
Approvals Classification	Standard
HAAD/DHA Approval Number	DHA-TOKIO2-SILVER PREMIUM_SME002

Territory of Coverage	Worldwide
Pre-Existing Conditions Waiting Period (Months)	0 Month(s)
Chronic Condition Waiting Period (Months)	0 Month(s)
Outpatient Plan	Covered
Physicial Consultation Copayment	Copay 20% Max 50 AED applicable
Laboratory Services Copayment	0%
Radiology Services Copayment	0%
Outpatient Services Copayment	0%
Pharmaceutical Copayment	0%
Dental Coverage	Covered
Dental Access	02 Reimbursement & Free Access
Dental Copayment	20%
Alternative Medicine	Covered
Alternative Medicine Access	01 Reimbursement
Alternative Medicine Copayment	0%
Optical Plan	Not Covered
Optical Copayment	100%
Optical Access	03 Not Covered
Wellness Access	01 Reimbursement
Vaccination Plan	Not Covered
Vaccination Access	03 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%
Maternity IP Plan	Not Covered
Physiotherapy Services Copayment	0%
Inpatient Copay	0%
DHA Member Registration ID	I084-036-114736970-03

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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.