

Family Care Plan - DXB

Benefits	Limits in AED	Limits in AED
Annual Aggregate Limit	Option to chose from - 150,000, 250,000, 500,000, 750000, 1,000,000	Option to chose from - 150,000, 250,000, 500,000, 750000, 1,000,000
Overarching total limit for all benefits and sub-limits.		
Geographical Scope of Coverage for Elective & Emergency Treatment	Worldwide	Worldwide
Coverage Criteria for Treatment outside UAE	Coverage outside UAE is limited to 90 days per treatment	Coverage outside UAE is limited to 90 days per treatment
	A single holiday or business trip may not exceed 90 days	A single holiday or business trip may not exceed 90 days
Applicable Network	Gold	Silk Road - Out Patient treatment restricted to Clinics Only
		From 10 PM to 8AM Out Patient treatments access is available at Network
MAF Required	Yes	Hospitals Yes
Underwriting terms and coverage criteria for Pre-existing, Chronic	All pre-existing medical conditions should be declared in the Medical	All pre-existing medical conditions should be declared in the Medical
conditions:	Application Form and is subject to medical underwriting.	Application Form and is subject to medical underwriting.
	 All declared Pre-existing and Chronic conditions are covered with a sub limit of AED 150,000/- 	 All declared Pre-existing and Chronic conditions are covered with a sub limit of AED 150,000/-
	Undeclared pre-existing conditions will not be covered during the policy	Undeclared pre-existing conditions will not be covered during the policy
	period and will be underwritten at renewal.	period and will be underwritten at renewal
		period and will be direct written as remember.
A (OD	Charles & Household	
Access for OP Referral procedure	Clinics & Hospital Direct SP access	Out Patient treatment restricted to Clinics Only Direct SP access
IP Co-insurance	Nil	Nil
OP Co-insurance - Consultation	Option to chose from - 20% max 50 per consultation or 20% max 75 per	Option to chose from - 20% max 50 per consultation or 20% max 75 per
	consultation	consultation
Diagnostics Co-insurance (Lab / Rad/ Physio) Pharmacy Limit	Option to chose from - 0%, 10% and 20% Covered	Option to chose from - 0%, 10% and 20% Covered
Pharmacy Co-insurance	Option to chose from - 0%, 10%, 20% and 30%	Option to chose from - 0%, 10%, 20% and 30%
Maternity (for married Females)	Covered with 10% copay	Covered with 10% copay
	10,000 for normal and C-Section	10,000 for normal and C-Section
Pre Existing and Chronic Conditions Dental	Covered upto 150,000/- Covered subject to the following:	Covered upto 150,000/- Covered subject to the following:
Dental	Sub-limit: AED 3,500	• Sub-limit: AED 3,500
	• Coinsurance: 20%	• Coinsurance: 20%
	In-Patient Benefit	
Coverage is up to t	he relevant Annual Benefit Limit per person/per policy	year with pre-approval
Hospitalization - Room type	Private Room	Private Room
Hospital Accommodation and related Services	Covered	Covered
Intensive care unit and coronary artery disease treatment	Covered	Covered
Consultant's, Surgeon's and Anaesthetist's Fees Various therapies including physiotherapy, chemotherapy, radiation therapy	Covered Covered	Covered Covered
etc	covered	covered
Recipient Organ transplantation service, excluding any charges related to	Covered	Covered
Donor		
Use of hospital medical equipments (e.g. heart and lung support systems etc.)	Covered	Covered
Ambulance Services (in Medical Emergency only and if followed by	Covered	Covered
admission)	conce	Corcica
Companion Room & Board expenses for Beneficiary below 16 years of age	Covered	CoveredCovered maximum up to 100 AED per night
L		
The cost of accommodation of a person accompanying a beneficiary below 16 years of age in the same room in cases of medical necessity at the	Covered maximum up to 100 AED per night	
recommendation of the treating doctor and with prior approval		
Repatriation costs for the transport of mortal remains to the country of origin	Covered up to AED 7,500/-	Covered up to AED 7,500/-
origin		
	Out-Patient Benefit	
Physician Consultation	Covered with Co-pay of 20% max 50 per consultation	Covered with Co-pay of 20% max 50 per consultation
Diagnostics and Laboratory Tests	Covered with 0% co-pay per invoice	Covered with 0% co-pay per invoice
Pharmaceuticals Physiotherapy (Require pre-authorization)	Covered with 0% co-pay per invoice Covered with 0% co-pay per invoice	Covered with 0% co-pay per invoice Covered with 0% co-pay per invoice
Physiotherapy (Require pre-authorization)	Covered up to 15 sessions/ Per member Per year	Covered up to 15 sessions/ Per member Per year
*Approval protocol for Free access at network providers will follow DHA guid		,
	Other Salient Benefits	
Day care Treatment	Covered	Covered
Out Patient Surgery	Covered	Covered
Emergency Mental health Treatments	Covered	Covered
Work Related Injuries	Covered	Covered
Emergency Dental treatment for accidental damage to natural teeth	Under this benefit the treatment required within three months following accidental damage to sound natural teeth caused by a violent external means when the	Under this benefit the treatment required within three months following accidental damage to sound natural teeth caused by a violent external means
	treatment is given by a Physician, dentist or dental surgeon is covered.	when the treatment is given by a Physician, dentist or dental surgeon is covered.
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	*No treatment will be covered after 3 months of the accident.	*No treatment will be covered after 3 months of the accident.
	XXT	**T
	**Treatment required as the result of the consumption of food or drink or any foreign bodies contained in such food or drink is not covered.	**Treatment required as the result of the consumption of food or drink or any foreign bodies contained in such food or drink is not covered.
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New Born baby coverage	Babies born inside and out-side UAE - New born expenses are covered from Date of Birth under the mother's card for the first 30days from date of birth upto Annual	Babies born inside and out-side UAE - New born expenses are covered from Date of Birth under the mother's card for the first 30days from date of birth upto
	Benefit Limit of mother.	Annual Benefit Limit of mother.
	New born babies will be added to the principle policy only upon requested by the	New born babies will be added to the principle policy only upon requested by
	policy holder and is subject to Medical underwriting.	the policy holder and is subject to Medical underwriting.
	Coverage for new born are in line with DHA benefit guidelines.	Coverage for new born are in line with DHA benefit guidelines.
	coverage to thew both are in line with DriA beliefit guidelines.	coverage for new born are in line with DRA benefit guidelines.
Preventive services covered for members over 18 years of age	Diabetic Screening:	Diabetic Screening:
*Prior Approval is required for Free Access facility(Non AUH)	Fasting Blood Sugar and HBA1C tests are covered once a policy year for eligible	Fasting Blood Sugar and HBA1C tests are covered once a policy year for eligible
	members	members

Cancer Screening, healthcare services, investigations and treatments only for members who are enrolled under "Patient Support Program" only	Covered as per terms, conditions and exclusions of the program defined by DHA	Covered as per terms, conditions and exclusions of the program defined by DHA
HCV Hepatitis C Virus Infection: Screening, healthcare services, investigations and treatments related to vira Hepatitis and associated complications related to Hepatitis C shall only be for members enrolled under Patient Support Program.		
Hearing and vision aids, and vision correction by surgeries and laser	Covered only in cases of medical emergencies	Covered only in cases of medical emergencies
MedNet's Global Emergency Assistance services coverage through Assist America	No Financial limitations applicable under this benefit Worldwide Emergency Medical Evacuation Worldwide Hospital Admission Assistance Repatriation of mortal remains to home country from anywhere in the world, including country of residence. Medical Consultation, Evaluation, Referral & Monitoring Care of minor children & Compassionate visit For detailed information please refer Assist America Table of Benefit	No Financial limitations applicable under this benefit Worldwide Emergency Medical Evacuation Worldwide Hospital Admission Assistance Repatriation of mortal remains to home country from anywhere in the world, including country of residence. Medical Consultation, Evaluation, Referral & Monitoring Care of minor children & Compassionate visit For detailed information please refer Assist America Table of Benefit
	Additional Benefits	
Matawaiter Danafit		
Maternity Benefit Inpatient & Outpatient coverage includes:	- Normal Delivery expenses are covered up to a sub limit of AED	- Normal Delivery expenses are covered up to a sub limit of AED
1. Pre & Post natal treatments	10,000/-	10,000/-
Normal delivery Medically necessary Caesarean Section	 Medically necessary Caesarean Section and complication expenses are covered up to a sub limit of AED 10,000/- 	 Medically necessary Caesarean Section and complication expenses are covered up to a sub limit of AED 10,000/-
4. Maternity related Complications	- Any Medical Emergency expenses related to Maternity will be	- Any Medical Emergency expenses related to Maternity will be
5. Medically necessary legal terminations	covered up to a sublimit of AED 150,000/-	covered up to a sublimit of AED 150,000/-
* In-patient maternity treatment are subject to prior	Out Patient eligible Maternity expenses are covered up to Annual limit	Out Patient eligible Maternity expenses are covered up to Annual limit
approval	- 10% co-payment applicable on all Maternity treatments, including out-	- 10% co-payment applicable on all Maternity treatments, including out-
	patient Maternity consultation (no Deductible applies) - The following screening tests are covered as per DHA Antenatal care	patient Maternity consultation (no Deductible applies) - The following screening tests are covered as per DHA Antenatal care
	protocol:	protocol:
	o FBC and Platelets	o FBC and Platelets
	o Blood group, Rhesus status and antibodies o VDRL	o Blood group, Rhesus status and antibodies o VDRL
	o MSU & urinalysis	o MSU & urinalysis
	o Rubella serology o HIV	o Rubella serology
	o Hepatitis C offered to high risk patients	o Hepatitis C offered to high risk patients
	o GTT, if high risk	o GTT, if high risk
	o FBS, Random blood sugar OR HbA1C o Ultrasonography: 3 scans	o FBS, Random blood sugar OR HbA1C o Ultrasonography: 3 scans
Alternative Medication Benefit		
Alternative Medicine Benefit covers: Osteopathy, Chiropractic, Homeopathy, Acupuncture, Ayurveda and Herbal Treatments	Covered up to AED 1,600/- PMPY	Covered up to AED 1,600/- PMPY
	**Only on reimbursement basis	**Only on reimbursement basis
Vaccination Benefit Vaccination Covered as per MOH schedule	Covered both on *Free Access & reimbursement basis	Covered both on *Free Access & reimbursement basis
(Require pre-authorization)	STATE STATE OF THE PROCESS OF CHINDAL SCHICLE DOSIS	22.3. 2.3. Or Tree recess & remodiscincte posts
	Reimbursements claims are settled at 100% of actual covered cost subject to maximum of 100% of Applicable Network rates	Reimbursements claims are settled at 100% of actual covered cost subject to maximum of 100% of Applicable Network rates
	maximum of 100% of Applicable Network rates	maximum of 100% of Applicable Network rates
	*Free Access facility is available only within specific MedNet Vaccination Network	*Free Access facility is available only within specific MedNet Vaccination Network
Dental Benefit		
Free Access - Covered with pre-authorization only	Covered with Annual sub-limit of AED 3,500	Covered with Annual sub-limit of AED 3,500
- Co-payment 20% applicable		
'Reimbursement* - Additional 20% co-payment applicable over free access		
*No reimbursement for Silk Road NW inside UAE.		

CLAIMS SETTLEMENT TERMS (what is Paid by the Insurer)			
Elective Treatment	· · · · · · · · · · · · · · · · · · ·	Covered (Out-side UAE: covered maximum up to 100% of UAE applicable network rates)	
	Reimbursement in SEA: - 100% of actual covered cost subject to maximum of 100% of UAE applicable network rates	Reimbursement in SEA: - 100% of actual covered cost subject to maximum of 100% of UAE applicable network rates	
	- 80% of Actual Covered Cost subject to maximum of 80% of UAE Applicable	Reimbursement elsewhere within territorial scope of cover*: - 80% of Actual Covered Cost subject to maximum of 80% of UAE Applicable Network rates	
	*No Elective treatment reimbursement for Silk Road Network inside UAE.	*No Elective treatment reimbursement for Silk Road Network inside UAE.	
Emergency Treatment	100% of Actual Covered Cost	100% of Actual Covered Cost	