Offer for Insurance

CHAPMAN FREEBORN AVIATION SERVICES DMCC 2025 - 2026

Privileged and Confidential

Date: 29/01/2025

Reference No.: SME-29012025-34-3875-12316-1-1



Proposal Details

Company Name: CHAPMAN FREEBORN AVIATION SERVICES DMCC

Quotation Summary

This quotation is valid for 30 days from the date of issuance, i.e. until 27/02/2025.

Category	Plan	Network	No. of Members	Total Premium (AED)
CAT A	Uselect Gold DNE	Royal	4	92,360.91
CAT B	Uselect Gold DNE	Supreme	73	1,144,684.32
Total Number of Members : 7				

Total Premium (excluding VAT) VAT Charges (5% of premium) : AED 1,237,045.23 61,852.26 Upload Fees (AED 25.2 per member)** 2,991.45 + HCV + Basmah Fees (Incl. VAT) in AED (38.85 per : AED member)* Total Premium (inclusive of VAT & Basmah)
* Applicable to Dubai members only
** Applicable to Abu Dhabi and Northen Emirates members only 1,301,888.94 : AED

Terms and Conditions:

- 1. This quotation is issued based on the information and documents provided by the Policyholder to Daman. In the event of any misrepresentation or change in the information or documents provided by the Policyholder, Daman shall have the right to invalidate or revise this quotation.
- 2. The Premiums quoted above are: (i) valid for 30 days from the Quotation Date appearing above; (ii) payable in advance unless otherwise agreed in writing; (iii) only applicable to the specific Plan named above and for groups comprising at least 11 principles; and (iv) indicative and subject to individual underwriting for members of 65 years old and above (only applicable to groups of 150 members or less).
- 3. The Premiums above are exclusive of VAT. The VAT shall be charged as per the applicable UAE laws and regulations and shall be reflected in the final invoice.
- 4. The above Premiums and benefits are subject to a maximum 10% deviation in the quoted population . If the population at confirmation is deviated by 10% then Daman reserve the rights to review the quoted benefits ,terms , and premiums.
- 5. The above premium is for the PURPOSES OF ILLUSTRATION ONLY and is SUBJECT TO CHANGE if the information (Population census and member age band) provided to us at the time of enrolment changes.
- 6. The rates & benefits in this quotation for the group are according to the membership information provided in line with Daman's SME Definition. Daman reserves the right to underwrite and/or re-price the plan(s) & benefits if the deviations in group size, upon inception, falls below 11 Principals or above 150 members.
- 7. Manpower and Recruitment companies are not eligible for U-Select Plans , all such entities and companies must be handled as Large group New business under Daman .



Premium Rates - CAT A

Reference Number: SME-29012025-34-3875-12316-1-1/CAT A

Plan Name
Annual Limit
Benefit
Annual Limit

Annual Premium per Member

Age	Male	Female (without Maternity)	Female (with Maternity)
[0-15]	11,030	10,167	13,454
[16-20]	8,285	9,217	17,731
[21-25]	8,550	11,686	21,450
[26-30]	9,263	14,582	22,822
[31-35]	10,549	17,705	23,652
[36-40]	12,575	21,166	24,099
[41-45]	15,670	25,311	25,928
[46-50]	20,207	30,585	30,745
[51-55]	26,533	37,598	37,598
[56-59]	35,291	47,175	47,175
[60-65]	55,913	71,222	71,222
[66-99]	121,633	146,566	146,566

Membership

Age	Male	Female (without Maternity)	Female (with Maternity)
[0-15]	-	-	-
[16-20]	-	-	-
[21-25]	1	-	-
[26-30]	-	-	-
[31-35]	-	-	-
[36-40]	-	-	-
[41-45]	-	-	-
[46-50]	-	-	1
[51-55]	2	-	-
[56-59]	-	-	-
[60-65]	-	-	-
[66-99]	-	-	-

Total Annual Premium : AED 92,360.91

Number of Members : 04



Plan Name	Uselect Gold DNE with Dental and Optical		
Annual Benefit Limit	AED 1,000,000 Per Person Per Policy Year		
Territorial Limit ¹	Worldwide		
Network	Network Within UAE: Royal Network Outside UAE: Worldwide		
(Allowing direct billing a	at designated provider. Please refer to www.damanhealth.ae	for Network Provide	r details.)
Pre-existing conditions	Fully Covered. For members without continuity of coverage (COC) in UAE	, covered up to AED	250,000
In-patient Treatment		Naturali	Non-network
Inpatient & Day Treatm		Network	
(including Pre & Post In	Hospital Treatment Covered)	100% Covered	50% Covered
Accommodation Type -		100% Covered	50% Covered
Hospital Accommodatio	n & Services : & Anesthetist's Fees and other fee	100% Covered 100% Covered	50% Covered 50% Covered
Ambulance Services	& Allesthetist's rees and other ree		
	ses, subject to General exclusion)	100% Covered	100% Covered
	spilitization)-Medically Necessary cases		
	r day with maximum of 90 days Per Person per Policy Year)	100% Covered	50% Covered
Air fare for outside UAE	treatment ³		
(If cost of treatment or	itside UAE is 60% of UAE R&C rates and treatment cost in		
UAE is more than AED	10,000.)	100% Covered	100% Covered
(Covered only for Inpat	ient treatment on reimbursement for Insured member for		
Economy class return ti	cket up to maximum of AED 2,000.)		
	for accompanying an Insured Child under 16 years of age	100% Covered	50% Covered
(Maximum limit of AED Companion Accommoda	ation in cases of medical necessity at the recommendation	1000/ 0	500/ 6
of the treating doctor (I	Maximum limit of AED 300 per day)	100% Covered	50% Covered
Psychiatric Treatment ² (Covered upto 30 days)		100% Covered	50% Covered
(Covered upto 30 days)			
Out-patient Treatmer	nt	Network	Non-network
Physician Consultation			
Physician Consultation (Within Abu Dhabi Emir	rate – A deductible of AED 50 applicable; Outside Abu	Network 100% Covered	Non-network 50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED		
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c	rate – A deductible of AED 50 applicable; Outside Abu		
Physician Consultation (Within Abu Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigation	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan,		
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% cc 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigati Endoscopies with Pre-a	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan,	100% Covered	50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigati Endoscopies with Pre-a Pharmaceuticals	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only)	100% Covered	50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigati Endoscopies with Pre-a Pharmaceuticals (Long term medications	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan,	100% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu- Diagnostics (X-Ray, MR (Specialized investigati- Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ²	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only)	100% Covered	50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigative Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , ⁴	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) s to be dispensed up to 90 days without pre-authorization)	100% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu- Diagnostics (X-Ray, MR (Specialized investigati- Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization)	100% Covered 100% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigative Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment (rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Is up to AED 3,000 Per Person Per Policy Year) including Mental Health counselling) ³	100% Covered 100% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigative Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment (rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization)	100% Covered 100% Covered 100% Covered 100% Covered 80% Covered	50% Covered 50% Covered 50% Covered 50% Covered 80% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigative Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment (rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Is up to AED 3,000 Per Person Per Policy Year) including Mental Health counselling) ³ AED 1,000 Per Person per Policy Year)	100% Covered 100% Covered 100% Covered 100% Covered 80% Covered 100% Covered	50% Covered 50% Covered 50% Covered 50% Covered 80% Covered 100% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigative Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment (Maximum Annual limit Medical appliances and	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Is up to AED 3,000 Per Person Per Policy Year) including Mental Health counselling) ³ AED 1,000 Per Person per Policy Year)	100% Covered 100% Covered 100% Covered 100% Covered 80% Covered	50% Covered 50% Covered 50% Covered 50% Covered 80% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigati Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment (Maximum Annual limit Medical appliances and (Maximum Annual limit	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Is up to AED 3,000 Per Person Per Policy Year) Including Mental Health counselling) ³ AED 1,000 Per Person per Policy Year) Medical equipment ²	100% Covered 100% Covered 100% Covered 80% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered 80% Covered 100% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu- Diagnostics (X-Ray, MR (Specialized investigatic Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , ⁴ (including consultations Psychiatric Treatment ((Maximum Annual limit Medical appliances and (Maximum Annual limit Other Benefits	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Is up to AED 3,000 Per Person Per Policy Year) Including Mental Health counselling) ³ AED 1,000 Per Person per Policy Year) Medical equipment ²	100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered 80% Covered 100% Covered 50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu- Diagnostics (X-Ray, MR (Specialized investigati- Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment ((Maximum Annual limit Medical appliances and (Maximum Annual limit Other Benefits Repatriation of Mortal R (up to AED 20,000 Per	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Is up to AED 3,000 Per Person Per Policy Year) Including Mental Health counselling) ³ AED 1,000 Per Person per Policy Year) Medical equipment ² AED 1,000 Per Person per Policy Year)	100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered Network 100% Covered	50% Covered 50% Covered 50% Covered 80% Covered 100% Covered 50% Covered Non-network 100% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu- Diagnostics (X-Ray, MR (Specialized investigati- Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment ((Maximum Annual limit Medical appliances and (Maximum Annual limit Other Benefits Repatriation of Mortal R (up to AED 20,000 Per Emergency Treatment ⁹	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Is up to AED 3,000 Per Person Per Policy Year) Including Mental Health counselling) ³ AED 1,000 Per Person per Policy Year) Medical equipment ² AED 1,000 Per Person per Policy Year) Idemains to country of origin ³ Person)	100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered 80% Covered 100% Covered 50% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu Diagnostics (X-Ray, MR (Specialized investigati Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , ⁴ (including consultations Psychiatric Treatment (Maximum Annual limit Medical appliances and (Maximum Annual limit Other Benefits Repatriation of Mortal R (up to AED 20,000 Per Emergency Treatment ⁹ Diagnostic and treatment	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) 1, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) 15 to be dispensed up to 90 days without pre-authorization) 16 up to AED 3,000 Per Person Per Policy Year) 17 including Mental Health counselling) 18 AED 1,000 Per Person per Policy Year) Medical equipment 2 AED 1,000 Per Person per Policy Year) 18 demains to country of origin 2 Person) 10 nt services for dental and gum treatment	100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered Network 100% Covered	50% Covered 50% Covered 50% Covered 80% Covered 100% Covered 50% Covered Non-network 100% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu- Diagnostics (X-Ray, MR (Specialized investigati- Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment ((Maximum Annual limit Medical appliances and (Maximum Annual limit Other Benefits Repatriation of Mortal R (up to AED 20,000 Per Emergency Treatment*) Diagnostic and treatmet (Medical Emergency ca:	tate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) 1, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) 15 to be dispensed up to 90 days without pre-authorization) 16 up to AED 3,000 Per Person Per Policy Year) 17 including Mental Health counselling) 18 AED 1,000 Per Person per Policy Year) Medical equipment 2 AED 1,000 Per Person per Policy Year) Medical equipment AED 1,000 Per Person per Policy Year) Medical equipment AED 1,000 Per Person per Policy Year)	100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered Network 100% Covered 100% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered 80% Covered 100% Covered 50% Covered 100% Covered 100% Covered 100% Covered 100% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu- Diagnostics (X-Ray, MR (Specialized investigati- Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment ((Maximum Annual limit Medical appliances and (Maximum Annual limit Other Benefits Repatriation of Mortal R (up to AED 20,000 Per Emergency Treatment*) Diagnostic and treatmet (Medical Emergency ca:	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Is up to AED 3,000 Per Person Per Policy Year) Including Mental Health counselling) ³ AED 1,000 Per Person per Policy Year) Medical equipment ² AED 1,000 Per Person per Policy Year) Itemains to country of origin ³ Person) Itemains to country of origin ³ Person) Itemains to revices for dental and gum treatment ses) I, and vision correction by surgeries and laser	100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered Network 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered 80% Covered 100% Covered Non-network 100% Covered 100% Covered
Physician Consultation (Within Abu Dhabi Emir Dhabi Emirate – 20% c 50; Co-insurance/dedu- Diagnostics (X-Ray, MR (Specialized investigatic Endoscopies with Pre-a Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment ((Maximum Annual limit Medical appliances and (Maximum Annual limit Other Benefits Repatriation of Mortal R (up to AED 20,000 Per Emergency Treatment 9 Diagnostic and treatmet (Medical Emergency ca: Hearing and vision aids (Medical Emergency ca: Treatment for Road Tra	rate – A deductible of AED 50 applicable; Outside Abu oinsurance applicable with an Out of pocket limit of AED ctible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) Is to be dispensed up to 90 days without pre-authorization) Including Mental Health counselling) ³ AED 1,000 Per Person per Policy Year) Medical equipment ² AED 1,000 Per Person per Policy Year) Idemains to country of origin ³ Person) Int services for dental and gum treatment ses) In and vision correction by surgeries and laser ses)	100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered Network 100% Covered 100% Covered 100% Covered 100% Covered	50% Covered 50% Covered 50% Covered 80% Covered 100% Covered 50% Covered 100% Covered 100% Covered 100% Covered 100% Covered



Annual Breast Cancer Screening ² , ⁵		
(applicable for females >35 years)	100% Covered	50% Covered
Annual Prostate Cancer Screening ² , ⁶	100% Covered	50% Covered
(applicable for males >45 years) Colorectal Cancer Screening ² , ⁷		
(applicable for males and females >40 years)	100% Covered	50% Covered
Cervical Cancer Screening ² , ⁸		
(applicable for females aged 25-65 years. Every 3 years for women aged 25-49	100% Covered	50% Covered
years, every 5 years for women aged 50-65 years.)		
Healthcare services for work illnesses and injuries as per Federal Law No. 8 of 1980 concerning the Regulation of Work Relations, as amended, and applicable	100% Covered	50% Covered
laws in this respect	100 % Covered	30 % Covered
Circumcision Healthcare services	100% Covered	50% Covered
Preventive services ³ , ¹¹	100% Covered	100% Covered
Organ Transplant ²	100% Covered	50% Covered
Essential vaccinations and immunizations ³		
(Maximum Limit AED 100 Per Person Per Policy YearAED 100 per vaccine)	100% Covered	100% Covered
(For newborns, children and Adults as stipulated by DHA)		
Adult Pneumococcal Conjugate Vaccine ³	100% Covered	100% Covered
(Covered as per DHA Adult Pneumococcal Vaccination guidelines)		
Influenza Vaccine once per year ²	100% Covered	50% Covered
Hepatitis B and C Virus Screening ²	100% Covered	50% Covered
Patient Support Program ² , ¹²	100% Covered	Not Covered
Dialysis ³ , ¹⁰	80% Covered	80% Covered
(Maximum Annual limit AED 60,000 Per Person per Policy Year)100% Covered		
Shingles (herpes zoster) Vaccine ³ , ¹⁵	100% Covered	100% Covered
(2 doses, once per lifetime)		
Maternity ¹⁰ (Covered for Married Female only)	Network	Non-network
Maximum Annual limit Per Person per Policy Year:		
Within & Outside UAE : AED 25,000		
Within & Outside UAE : AED 25,000 Inpatient Maternity	100% Covered	50% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³		
Within & Outside UAE : AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis	100% Covered	50% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² ,13 Outpatient Maternity Outpatient Maternity - Physician Consultation		
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate – A deductible of AED 25 applicable; Outside Abu		
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate – A deductible of AED 25 applicable; Outside Abu Dhabi Emirate – 10% coinsurance applicable with an Out of pocket limit of AED	100% Covered	50% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate – A deductible of AED 25 applicable; Outside Abu	100% Covered	50% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate – A deductible of AED 25 applicable; Outside Abu Dhabi Emirate – 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days)	100% Covered	50% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate – A deductible of AED 25 applicable; Outside Abu Dhabi Emirate – 10% coinsurance applicable with an Out of pocket limit of AED	100% Covered	50% Covered 50% Covered Non-network
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup ³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy	100% Covered	50% Covered 50% Covered Non-network
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup	100% Covered	50% Covered 50% Covered Non-network
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate – A deductible of AED 25 applicable; Outside Abu Dhabi Emirate – 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy	100% Covered	50% Covered 50% Covered Non-network 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year)	100% Covered 100% Covered Network 100% Covered	50% Covered 50% Covered Non-network 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental²,¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year	100% Covered 100% Covered Network 100% Covered Network 80% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate – A deductible of AED 25 applicable; Outside Abu Dhabi Emirate – 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental ² , ¹⁴	100% Covered 100% Covered Network 100% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental²,¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year Accidental dental treatment	100% Covered Network 100% Covered Network 80% Covered 100% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup3 (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental ² , ¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year	100% Covered 100% Covered Network 100% Covered Network 80% Covered 100% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental²,¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year Accidental dental treatment Optical Optical³ (Limited to 2 vision tests per year and Maximum Annual Limit AED 1,500 Per	100% Covered Network 100% Covered Network 80% Covered 100% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental²,¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year Accidental dental treatment Optical Optical³	100% Covered 100% Covered Network 100% Covered Network 80% Covered 100% Covered	50% Covered 50% Covered Non-network 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³ Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup3 (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental ² , ¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year Accidental dental treatment Optical Optical Optical3 (Limited to 2 vision tests per year and Maximum Annual Limit AED 1,500 Per Person including Prescribed Eve glasses. Frames and/or contact lenses)	100% Covered 100% Covered Network 100% Covered Network 80% Covered 100% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental²,¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year Accidental dental treatment Optical Optical³ (Limited to 2 vision tests per year and Maximum Annual Limit AED 1,500 Per	100% Covered 100% Covered Network 100% Covered Network 80% Covered 100% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental²,¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year Accidental dental treatment Optical Optical Optical Optical Optical Optical Optical Optical Prescribed Eve glasses. Frames and/or contact lenses) Other Services covered (Through designated Service Providers Or Teleconsultation healthcare services (Deductible Nii)	100% Covered 100% Covered Network 100% Covered Network 80% Covered 100% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered 100% Covered
Within & Outside UAE: AED 25,000 Inpatient Maternity Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests²,¹³ Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days) Medical Checkup Medical Checkup³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy Year) Dental Module 1 Dental²,¹⁴ (Maximum Annual limit AED 5,000 Per Person per Policy Year Accidental dental treatment Optical³ (Limited to 2 vision tests per year and Maximum Annual Limit AED 1,500 Per Person including Prescribed Eve glasses. Frames and/or contact lenses) Other Services covered (Through designated Service Providers Or	100% Covered 100% Covered Network 100% Covered Network 80% Covered 100% Covered	50% Covered 50% Covered Non-network 100% Covered Non-network 80% Covered 100% Covered



- ¹ Please note: (1) A single holiday or business trip may not exceed 180 days. (2) Coverage outside UAE is limited to 180 days per treatment.
- 2 Pre-authorization required to avail this benefit. All Emergency cases do not require pre-authorization but should be notified to Daman within 24 hours.
- ³ Available on reimbursement only. Non-network Providers covered on re-imbursement only.
- 4 Alternative Medicine is limited to Herbal Medicine, Homeopathy medicine, Acupuncture, Osteopathy, Chinese Medicine and Ayurvedic treatment only.
- 5 a) Clinical Exam b) Mammogram c) Pelvic Sonogram (if medically indicated) d) CA 15.3 (if medically indicated)
- ⁶ a) Clinical exam b) PSA c) Rectal sonogram
- ⁷ a) FIT (Fecal Immunochemical Test) every 2 years; b) Colonoscopy every 10 years
- 8 Papanicolaou test (Pap test)
- ⁹ Exception: For in and outpatient maternity treatment at Non Network Provider, 50% covered outside UAE.
- Maternity: Where any condition develops into a life-threatening condition, the medically necessary expenses will be covered up to the annual aggregate limit.
- 11 Preventive services for diabetes, every 3 years from age 30 and for High risk individuals annually from age 18.
- 12 Mandated patient support program offering coverage for treatment of Cancer, Hepatitis B and Hepatitis C as per applicable DHA support program
- 13 Neo-natal screening tests includes: Phenylketonuria (PKU), Congenital Hypothyroidism, Sickle cell screening, congenital adrenal hyperplasia.
- 14 Following services are covered a) X-Rays; b) Extractions; c) Amalgam / Composite Fillings; d) Root Canal Treatments; e) Consultations; f) Scaling, g)Prophylaxis; h) Antibiotics and Other Prescribed Drugs for the above mentioned services.
- 15 Vaccine for members above the age of 50 years and immunocompromised patients above the age of 18 years as mandated by DHA. Effective from 1 July 2024 for new and renewal policies.



Premium Rates - CAT B

Reference Number: SME-29012025-34-3875-12316-1-1/CAT B

Plan Name Annual Limit Territory Network Non Network : Uselect Gold DNE : AED 1,000,000 : Worldwide

Territory : Worldwide
Network : Supreme
Non Network : 50% Covered of Actuals
OP Consultation Deductible/Copay : 20% Copay with Out of Pocket Limit of AED 50
Pharmaceutical Benefit : 100% Covered Upto Annual Limit
Dental Benefit : 80% Covered upto AED 5,000
Optical Benefit : 100% Covered upto AED 1,500
Maternity : 100% Covered upto AED 1,500
Maternity : 100% Covered Upto AED 1,500
Maternity : 100% Covered Upto AED 25,000)
Maternity OP Deductible/Copay : 10% Copay with Out of Pocket Limit of AED 25

Annual Premium per Member

Age	Male	Female (without Maternity)	Female (with Maternity)
[0-15]	10,355	9,555	12,599
[16-20]	7,813	8,676	16,559
[21-25]	8,058	10,962	20,003
[26-30]	8,719	13,644	21,274
[31-35]	9,910	16,536	22,042
[36-40]	11,785	19,740	22,456
[41-45]	14,651	23,578	24,149
[46-50]	18,852	28,462	28,609
[51-55]	24,710	34,955	34,955
[56-59]	32,819	43,822	43,822
[60-65]	51,913	66,088	66,088
[66-99]	112,765	135,851	135,851

Membership

Age	Male	Female (without Maternity)	Female (with Maternity)
[0-15]	2	1	-
[16-20]	1	-	-
[21-25]	2	-	1
[26-30]	7	2	3
[31-35]	13	3	4
[36-40]	10	3	3
[41-45]	5	2	1
[46-50]	4	1	-
[51-55]	2	-	-
[56-59]	2	-	1
[60-65]	-	-	-
[66-99]	-	-	-

Total Annual Premium : AED 1,144,684.32

Number of Members : 73



Plan Name	Uselect Gold DNE with Dental and Optical		
Annual Benefit Limit	AED 1,000,000 Per Person Per Policy Year		
Territorial Limit ¹	Worldwide		
Network	Network Within UAE: Supreme		
INCLWOIK	Network Outside UAE: Worldwide		
(Allowing direct billing a	t designated provider. Please refer to www.damanhealth.ae	for Network Provide	r details.)
Pre-existing conditions	Fully Covered.		250.000
	For members without continuity of coverage (COC) in UAE	, covered up to AED	250,000
In-patient Treatment		Network	Non-network
Inpatient & Day Treatme		100% Covered	
	Hospital Treatment Covered)		50% Covered
Accommodation Type - I		100% Covered	50% Covered
Hospital Accommodation		100% Covered	50% Covered
Ambulance Services	& Anesthetist's Fees and other fee	100% Covered	50% Covered
	es, subject to General exclusion)	100% Covered	100% Covered
	spilitization)-Medically Necessary cases		
	day with maximum of 90 days Per Person per Policy Year)	100% Covered	50% Covered
Air fare for outside UAE	treatment ³		
(If cost of treatment out	tside UAE is 60% of UAE R&C rates and treatment cost in		
UAE is more than AED 1		100% Covered	100% Covered
	ent treatment on reimbursement for Insured member for		
Economy class return tic	cket up to maximum of AED 2,000.)		
	for accompanying an Insured Child under 16 years of age	100% Covered	50% Covered
	200 per day)		
(Maximum limit of AED 3			
(Maximum limit of AED 3 Companion Accommoda	tion in cases of medical necessity at the recommendation	100% Covered	50% Covered
(Maximum limit of AED 3 Companion Accommoda			
(Maximum limit of AED 3 Companion Accommoda of the treating doctor (M	tion in cases of medical necessity at the recommendation	100% Covered 100% Covered	50% Covered
(Maximum limit of AED 3 Companion Accommoda of the treating doctor (N Psychiatric Treatment ² (Covered upto 30 days)	tion in cases of medical necessity at the recommendation laximum limit of AED 300 per day)	100% Covered	50% Covered
(Maximum limit of AED 3 Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen	tion in cases of medical necessity at the recommendation laximum limit of AED 300 per day)		
(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation	tion in cases of medical necessity at the recommendation faximum limit of AED 300 per day)	100% Covered Network	50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira	ution in cases of medical necessity at the recommendation flaximum limit of AED 300 per day) ut ate – A deductible of AED 50 applicable; Outside Abu	100% Covered	50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Dhabi Emirate – 20% cc	ition in cases of medical necessity at the recommendation laximum limit of AED 300 per day) at ate – A deductible of AED 50 applicable; Outside Abu binsurance applicable with an Out of pocket limit of AED	100% Covered Network	50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Dhabi Emirate - 20% co 50: Co-insurance/deduc Diagnostics (X-Ray, MRI	ition in cases of medical necessity at the recommendation flaximum limit of AED 300 per day) at ate – A deductible of AED 50 applicable; Outside Abu pinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) t, CT-Scan, Ultra Sound, etc.), Laboratory	100% Covered Network 100% Covered	50% Covered Non-network 50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (MPsychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Dhabi Emirate - 20% co 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio	nt cases of medical necessity at the recommendation flaximum limit of AED 300 per day) nt ate – A deductible of AED 50 applicable; Outside Abu pinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) (, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan,	100% Covered Network	50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Dhabi Emirate - 20% co 50: Co-insurance/deduc Diagnostics (X-Ray, MRI	nt cases of medical necessity at the recommendation flaximum limit of AED 300 per day) nt ate – A deductible of AED 50 applicable; Outside Abu pinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) (, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan,	100% Covered Network 100% Covered	50% Covered Non-network 50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (MPsychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Dhabi Emirate - 20% co 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio	nt cases of medical necessity at the recommendation flaximum limit of AED 300 per day) nt ate – A deductible of AED 50 applicable; Outside Abu pinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) (, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan,	100% Covered Network 100% Covered 100% Covered	50% Covered Non-network 50% Covered 50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (MPsychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Uhabi Emirate - 20% cc 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals	nt cases of medical necessity at the recommendation flaximum limit of AED 300 per day) nt ate – A deductible of AED 50 applicable; Outside Abu pinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) (, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan,	100% Covered Network 100% Covered	50% Covered Non-network 50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (MPsychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Uhabi Emirate - 20% cc 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals (Long term medications	ate — A deductible of AED 50 applicable; Outside Abu pinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) (T.CT-Scan, Ultra Sound, etc.), Laboratory and ascan including but not limited to MRI, Scan, uthorization only)	100% Covered Network 100% Covered 100% Covered 100% Covered	50% Covered Non-network 50% Covered 50% Covered 50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (MPsychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Uhabi Emirate - 20% cc 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals	ate — A deductible of AED 50 applicable; Outside Abu pinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) (T.CT-Scan, Ultra Sound, etc.), Laboratory and ascan including but not limited to MRI, Scan, uthorization only)	100% Covered Network 100% Covered 100% Covered 100% Covered 100% Covered	50% Covered Non-network 50% Covered 50% Covered 50% Covered 50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Dhabi Emirate – 20% co 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , ⁴	ate — A deductible of AED 50 applicable; Outside Abu pinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) (T.CT-Scan, Ultra Sound, etc.), Laboratory and ascan including but not limited to MRI, Scan, uthorization only)	100% Covered Network 100% Covered 100% Covered 100% Covered	50% Covered Non-network 50% Covered 50% Covered 50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (MPsychiatric Treatment ² (Covered upto 30 days) Out-patient Treatment Physician Consultation (Within Abu Dhabi Emirat Dhabi Emirate – 20% cc 50: Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations	ition in cases of medical necessity at the recommendation daximum limit of AED 300 per day) ate - A deductible of AED 50 applicable; Outside Abubinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days). G.CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, athorization only) to be dispensed up to 90 days without pre-authorization)	Network 100% Covered 100% Covered 100% Covered 100% Covered 80% Covered	50% Covered Non-network 50% Covered 50% Covered 50% Covered 50% Covered 80% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (MPsychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emirate – 20% cc 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , 4 (including consultations Psychiatric Treatment (il (Maximum Annual limit & Maximum Annual limit & Meximum	ition in cases of medical necessity at the recommendation daximum limit of AED 300 per day) int ate – A deductible of AED 50 applicable; Outside Abusinsurance applicable with an Out of pocket limit of AED stible not applicable for follow up within 7 days) (CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) to be dispensed up to 90 days without pre-authorization) up to AED 3,000 Per Person Per Policy Year) ncluding Mental Health counselling) ³ AED 1,000 Per Person per Policy Year)	100% Covered Network 100% Covered 100% Covered 100% Covered 100% Covered	50% Covered Non-network 50% Covered 50% Covered 50% Covered 50% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emire Dhabi Emirate – 20% co 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , ⁴ (including consultations Psychiatric Treatment (ii (Maximum Annual limit , Medical appliances and I	ition in cases of medical necessity at the recommendation daximum limit of AED 300 per day) ate - A deductible of AED 50 applicable; Outside Abubinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) G.CT-Scan, Ultra Sound, etc.), Laboratory of an and scan including but not limited to MRI, Scan, authorization only) to be dispensed up to 90 days without pre-authorization) up to AED 3,000 Per Person Per Policy Year) ncluding Mental Health counselling) ³ AED 1,000 Per Person per Policy Year) Medical equipment ²	Network 100% Covered 100% Covered 100% Covered 100% Covered 80% Covered 100% Covered	50% Covered Non-network 50% Covered 50% Covered 50% Covered 50% Covered 100% Covered
(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment ² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emire Dhabi Emirate – 20% co 50; Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals (Long term medications Physiotherapy ² Alternative Medicine ³ , ⁴ (including consultations Psychiatric Treatment (ii (Maximum Annual limit , Medical appliances and I	ition in cases of medical necessity at the recommendation daximum limit of AED 300 per day) int ate – A deductible of AED 50 applicable; Outside Abusinsurance applicable with an Out of pocket limit of AED stible not applicable for follow up within 7 days) (CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, uthorization only) to be dispensed up to 90 days without pre-authorization) up to AED 3,000 Per Person Per Policy Year) ncluding Mental Health counselling) ³ AED 1,000 Per Person per Policy Year)	Network 100% Covered 100% Covered 100% Covered 100% Covered 80% Covered	50% Covered Non-network 50% Covered 50% Covered 50% Covered 50% Covered 80% Covered
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(Maximum limit of AED : Companion Accommoda of the treating doctor (M Psychiatric Treatment² (Covered upto 30 days) Out-patient Treatmen Physician Consultation (Within Abu Dhabi Emira Dhabi Emirate - 20% co 50: Co-insurance/deduc Diagnostics (X-Ray, MRI (Specialized investigatio Endoscopies with Pre-au Pharmaceuticals (Long term medications Physiotherapy² Alternative Medicine³,4 (including consultations Psychiatric Treatment (in (Maximum Annual limit in Medical appliances and in (Maximum Annual limit in Other Benefits Repatriation of Mortal Re (up to AED 20,000 Per F Emergency Treatment³ Diagnostic and treatmer (Medical Emergency cas	ition in cases of medical necessity at the recommendation daximum limit of AED 300 per day) Int ate – A deductible of AED 50 applicable; Outside Abubinsurance applicable with an Out of pocket limit of AED tible not applicable for follow up within 7 days) I, CT-Scan, Ultra Sound, etc.), Laboratory on and scan including but not limited to MRI, Scan, athorization only) to be dispensed up to 90 days without pre-authorization) up to AED 3,000 Per Person Per Policy Year) ncluding Mental Health counselling) ³ AED 1,000 Per Person per Policy Year) Medical equipment ² AED 1,000 Per Person per Policy Year) memains to country of origin ³ Person) Int services for dental and gum treatment less)	100% Covered Network 100% Covered 100% Covered	50% Covered Non-network 50% Covered 50% Covered 50% Covered 80% Covered 100% Covered Non-network 100% Covered 100% Covered 100% Covered 100% Covered
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Annual Breast Cancer Screening ² , ⁵ (applicable for females >35 years)	100% Covered	50% Covered
Annual Prostate Cancer Screening ² , ⁶	100% Covered	50% Covered
(applicable for males >45 years) Colorectal Cancer Screening ² , ⁷	100% Covered	50% Covered
(applicable for males and females >40 years) Cervical Cancer Screening ² , ⁸		
(applicable for females aged 25-65 years. Every 3 years for women aged 25-49 years, every 5 years for women aged 50-65 years.)	100% Covered	50% Covered
Healthcare services for work illnesses and injuries as per Federal Law No. 8 of 1980 concerning the Regulation of Work Relations, as amended, and applicable laws in this respect	100% Covered	50% Covered
Circumcision Healthcare services	100% Covered	50% Covered
Preventive services ³ , ¹¹	100% Covered	100% Covered
Organ Transplant ²	100% Covered	50% Covered
Essential vaccinations and immunizations ³ (Maximum Limit AED 100 Per Person Per Policy YearAED 100 per vaccine) (For newborns, children and Adults as stipulated by DHA)	100% Covered	100% Covered
Adult Pneumococcal Conjugate Vaccine ³ (Covered as per DHA Adult Pneumococcal Vaccination guidelines)	100% Covered	100% Covered
Influenza Vaccine once per year ²	100% Covered	50% Covered
Hepatitis B and C Virus Screening ²	100% Covered	50% Covered
Patient Support Program ² , ¹²	100% Covered	Not Covered
Dialysis³,¹0 (Maximum Annual limit AED 60,000 Per Person per Policy Year)	100% Covered	100% Covered
Shingles (herpes zoster) Vaccine ³ , ¹⁵ (2 doses, once per lifetime)	100% Covered	100% Covered
Maternity¹º (Covered for Married Female only)	Maharada	Non-network
Maximum Annual limit Per Person per Policy Year:	Network	NOII-IIEEWOIK
Within & Outside UAE : AED 25,000		
Inpatient Maternity ² , ¹³		
Newborn Care: Upto 30 days from birth (New Born care to include BCG, Hepatitis B and neo-natal screening tests ² , ¹³	100% Covered	50% Covered
Outpatient Maternity	100% Covered	50% Covered
Outpatient Maternity - Physician Consultation (Within Abu Dhabi Emirate - A deductible of AED 25 applicable; Outside Abu Dhabi Emirate - 10% coinsurance applicable with an Out of pocket limit of AED 25; Co-insurance/deductible not applicable for follow up within 7 days)	100% Covered	50% Covered
Medical Checkup	Network	Non-network
Medical Checkup ³ (One Annual Checkup limited to a maximum AED 1,000 Per Person per Policy	100% Covered	100% Covered
Year)		
Dental Module 1	Network	Non-network
Dental ² , ¹⁴	80% Covered	80% Covered
(Maximum Annual limit AED 5.000 Per Person per Policy Year Accidental dental treatment	100% Covered	100% Covered
Optical Optical	Network	Non-network
Optical ³ (Limited to 2 vision tests per year and Maximum Annual Limit AED 1,500 Per Person including Prescribed Eve glasses. Frames and/or contact lenses)	100% Covered	100% Covered
Other Services covered (Through Service Providers Only)		
Teleconsultation healthcare services		
(Deductible Nil) International Assistance Service through service provider only		
Second Medical Opinion through service provider only		
Second medical Opinion unrough service provider only		



- ¹ Please note: (1) A single holiday or business trip may not exceed 180 days. (2) Coverage outside UAE is limited to 180 days per treatment
- ² Pre-authorization required to avail this benefit. All Emergency cases do not require pre-authorization but should be notified to Daman within 24 hours.
- 3 Available on reimbursement only. Non-network Providers covered on re-imbursement only.
- 4 Alternative Medicine is limited to Herbal Medicine, Homeopathy medicine, Acupuncture, Osteopathy, Chinese Medicine and Ayurvedic treatment only.
- ⁵ a) Clinical Exam b) Mammogram c) Pelvic Sonogram (if medically indicated) d) CA 15.3 (if medically indicated)
- ⁶ a) Clinical exam b) PSA c) Rectal sonogram
- 7 a) FIT (Fecal Immunochemical Test) every 2 years; b) Colonoscopy every 10 years
- ⁸ Papanicolaou test (Pap test)
- ⁹ Exception: For in and outpatient maternity treatment at Non Network Provider, 50% covered outside UAE.
- ¹⁰ Maternity: Where any condition develops into a life-threatening condition, the medically necessary expenses will be covered up to the annual aggregate limit.
- 11 Preventive services for diabetes, every 3 years from age 30 and for High risk individuals annually from age 18.
- ¹² Mandated patient support program offering coverage for treatment of Cancer, Hepatitis B and Hepatitis C as per applicable DHA support program
- ¹³ Neo-natal screening tests includes: Phenylketonuria (PKU), Congenital Hypothyroidism, Sickle cell screening, congenital adrenal hyperplasia.
- ¹⁴ Following services are covered a) X-Rays; b) Extractions; c) Amalgam / Composite Fillings; d) Root Canal Treatments; e) Consultations; f) Scaling, g)Prophylaxis; h) Antibiotics and Other Prescribed Drugs for the above mentioned services.
- ¹⁵ Vaccine for members above the age of 50 years and immunocompromised patients above the age of 18 years as mandated by DHA. Effective from 1 July 2024 for new and renewal policies.