



## Who we are

Dubai Insurance Co (DIN) was incorporated by His Highness Late Sheikh Rashid Al Maktoum as the first local company in the UAE.

Since then, DIN has always provided excellent service to its clientele. The major transformation took place when the newly, agile and proactive Board of Directors were elected in early 2006. Dubai Insurance's new Board of Directors together with the new management team tripled and doubled its revenue, profitability and client offering while maintaining the same unique values the founders were keen to establish.

Revenue multiplied from AED 24M in 2006 to AED 1.5B in 2022 without compromise on profitability. Under its composite P&C and Life License, Dubai Insurance offers a varied portfolio of products including Property, Liability, Marine, Group Life and Medical and many other specialty lines including Credit and Surety.

In acknowledgement of its performance and outlook, AM Best has assigned Financial Strength Rating of "A (Excellent)" and Fitch Ratings has assigned an "A" Financial Rating.

Dubai Insurance prides itself in partnering with leading international reinsurers to offer our clients the solutions necessary for all their traditional and non-traditional risk management needs.

In the past 15 years Dubai insurance has seen a steady growth, in profits as well as premiums. What we are most proud of, is our contributions to our community and working closely with government entities to ensure that the community living here or visiting have the necessary insurance protecting them and making society work at peace. Over the course of 15 years, we, at Dubai Insurance have worked hard to consistently maintain or increase our rating score and these steady increases in growth can be witnessed throughout the years.

**GROUP MEDICAL INSURANCE QUOTATION FOR  
M/s. Test Company II**

Reference is made to your query in respect of the above. We are pleased to offer you the following plan in line to meet your client's requirement.

Non -DOH Product: Category CAT A

Category	CAT A (Employee plus dependent plan)
Family of benefits	In & Out Patient
Annual Maximum Limit (OP+IP)	Covered up to AED 150,000
Scope of Cover	To cover the reasonable and customary medical expenses and costs arising due to accidental injuries and / or illness occurring during the policy period as per Dubai Insurance's group policy wording, provisions, terms, conditions and exclusions
Members covered	Eligible Employees and their eligible dependents
TPA	Dubai Care
Area of coverage (AOC) (Elective & Emergency)	Worldwide
Extension of Area of Cover (Only emergency IP)	Worldwide
Network	N1
Deductible	20% up to AED 25
Hospital Class	Private Room
Pre-existing & chronic conditions & consequences	<p>Covered up to Annual Aggregate Limit for all members being renewed, however major medical conditions to be declared. New joiners to running policy to provide health declaration form (please refer to the policy terms &amp; conditions).</p> <p>New joiners (with existing cover): Covered up to annual aggregate limit per person per year with no waiting period. New joiners (without existing cover): Six (6) months waiting period applicable for Treatment of chronic and pre-existing conditions.</p> <p>If a pre-existing or chronic condition develops into an emergency within the 6 month exclusion period, it will be covered up to the annual aggregate limit.</p>

#### Emergency Treatment:

Within Network: 100% on direct billing

Outside Network, within UAE: 100% of actual costs subject to a maximum of 100% of applicable UAE Network tariff on reimbursement basis.

Outside UAE, within AOC: 100% of actual costs subject to a maximum of 100% of applicable UAE Network tariff on reimbursement basis.

Outside AOC: 100% of actual costs subject to a maximum of 100% of applicable UAE Network tariff on reimbursement basis.

All Inpatient treatment in case of medical emergency requires prior approval from the insurance company within 24 hours from the date of admission.

#### \*Elective Treatment:

Within Network: 100% on direct billing

Outside Network, within UAE: With prior approval: 80% of actual costs subject to a maximum of 80% of applicable UAE Network tariff on reimbursement basis.

Outside UAE, within AOC: With prior approval: 100% of actual costs subject to a maximum of 100% of applicable UAE Network tariff on reimbursement basis.

All costs of services not incurred on direct billing shall be considered on reimbursement basis as above

#### Out Patient Benefits


Out-Patient Sublimit	Equal to AML
General Out-Patient Services	Covered* (0% coinsurance for Outpatient treatments)
Consultations, Specialist Fees and Second Opinion Consultation ( <i>Follow up consultation on the same medical condition and at the same provider is free within 7 days from the first consultation</i> ).	Covered*
<i>Outpatient (X-ray and Pathology and Diagnostic tests) and MRI &amp; CT Scans received as an outpatient and pre-authorized.</i>	Covered*
Out-Patient Prescribed Drugs (Branded)	Covered up to AED 1500 with 0% Coinsurance
Outpatient Physiotherapy (which is medically necessary and prescribed by a specialist)	Covered up to 6 Session pppa with 0% coinsurance. Full refund at Network Hospital, if necessary and prescribed by the treating physician.
Routine maintenance of chronic illness	Covered*

Materials, Injections and dressing	Covered*
Accidental Damage to Natural Teeth following an accident (Only initial treatment is covered. Follow up not covered. No cover for treatment resulting from consumption of food or drink or any foreign bodies contained in such food/drink)	Covered for treatment required immediately (within 7 days of accident) following accidental damage to natural teeth by external trauma and when treatment is given by medical practitioner
Outpatient Oncology tests and drugs.	Covered*
Outpatient surgical operations	Covered*
<b>In Patient Benefits</b> (Required Prior Approval)	
Coinsurance	Nil
Hospital accommodation (Room and Board) including ICU	Covered*
Inpatient Physiotherapy (which is medically necessary and prescribed by a specialist)	Covered*
MRI, PET, CT Scans, X-Rays, Pathology, Diagnostic Tests and Procedures, Oncology tests, Drugs and consultants fees (including cover for chemotherapy and radiotherapy)	Covered*
Physician, surgeon, & anesthetist fees and Surgical fees, including anesthesia & theatre charges	Covered*
Prescribed Medicines and Drugs.	Covered*
Emergency road ambulance services to and from hospital by registered ambulance services provider	Covered*
Organ Transplant cost (cost of surgical procedures in performing an organ transplant of either: Kidney, Heart & Liver in respect of the insured person as recipient and not the organ donor)	Covered*
Accidental Dental (only to natural teeth due to sudden and unintentional accident, covered in a hospital or clinic- within 24 hrs of accident. No follow-up treatment covered)	Covered*
Surgical appliances and prostheses`	Covered*
Parent accommodation (Hospital accommodation cost in respect of a parent or legal guardian staying with an insured person who is under 18 years of age and is admitted to a hospital).	Covered up to AED 200/- per night
The cost of accommodation of a person accompanying an in-patient in the same room in cases of medical necessity at the recommendation of the treating doctor and after the prior approval of the insurance company providing coverage	Covered up to AED 200/- per night

Rehabilitation after Hospitalisation, Physiotherapy, Congenital Illnesses and Birth Defects (Life threatening only)	Covered*
Cash Indemnity for Inpatient Treatment	AED 200/- up to 180 days for all inpatient hospitalization that are not submitted to the insurance
<b>Additional Benefits</b>	
<p>Out-patient pre-natal services</p> <p>Pre-approval is required for this benefit</p> <p>Note: Where any condition develops which becomes life threatening to either the mother or the new born, the medically necessary expenses will be covered up to the annual aggregate limit.</p>	<p><u>10% co-insurance applied at the time of payment</u></p> <p>8 visits to PHC; All care provided by PHC obstetrician for low risk or specialist obstetrician for high risk referrals</p> <p>All care provided by PHC obstetrician for low risk or specialist obstetrician for high risk referrals. Services include:</p> <ul style="list-style-type: none"> <li>* FBC and Platelets</li> <li>* Blood group, Rhesus status and antibodies</li> <li>* VDRL</li> <li>* MSU &amp; urinalysis</li> <li>* Rubella serology</li> <li>* HIV</li> <li>* Hep C offered to high risk patients</li> <li>* GTT if high risk</li> <li>* FBS , random s or A1c for all due to high prevalence of diabetes in UAE</li> <li>* 3 ante-natal ultrasound scans Visits to include reviews, checks and tests in accordance with DHA pre-natal care protocols</li> </ul>
<p>In-patient maternity services</p> <p>(Requires prior approval from the insurance company or within 24 hours of emergency treatment)</p>	<p><u>10% co-insurance applied at the time of payment</u></p> <ul style="list-style-type: none"> <li>* Maximum AED 10,000 for normal delivery.</li> <li>* Maximum AED 10,000 for medically necessary C-section, complications and medically necessary termination.</li> </ul> <p>(All limits include coinsurance)</p>
New Born cover	Cover for 30 Days from birth BCG , Hepatitis B and Neo-Natal Screening test (Phenylketonuria ,Congenital Hypothyroidism ,sickle cell screening, Congenital adrenal hyperplasia)
<p><b>Alternative Medicine Covered:</b></p> <ul style="list-style-type: none"> <li>➤ Herbal Medicine</li> <li>➤ Homeopathy</li> <li>➤ Ayurveda</li> <li>➤ Osteopathy</li> <li>➤ Chiropractic</li> <li>➤ Acupuncture</li> </ul>	Not Covered
<p><b>Chronic And Pre-Existing</b></p> <p>(Waiting Period Of 6 Months For NEW JOINERS) - Sublimit</p>	Equal to AML

<p><b>Dental:</b></p> <p>Only the following medically necessary treatment is covered:</p> <p>1. Dental consultation, 2. Teeth extraction, 3. Amalgam/temporary/permanent/composite filling, 4. Root canal treatment, 5. X-rays, 6. Antibiotics, 7. scaling &amp; polishing for dental carious (once a year up to AED 250 pppa)</p> <p><b>Exclusions:</b> Fixed Bridgework, braces, dentures (crowns, cap, facings, etc.), Orthodontics, Cosmetic Services. Appliances, Restorations or procedure to alter vertical dimension or restore occlusion, any Prosthetic or Precious metal covers Cosmetic filling (i.e. Porcelain, etc.), Gum treatment, general check - up, any treatment which is not medically necessary.</p> <p>Covered on Direct Billing under the selected network only Dental claims incurred outside the network on reimbursement will be subject additional 20% copay over &amp; above the dental copay.</p>	<p>Not Covered</p>
<p><b>Optical:</b></p> <p>(this benefit will cover Optical examination conducted for the purpose of obtaining eye glasses or upgrading existing lenses including the cost of the glasses/lens)</p> <p>Frames and contact lenses are however not covered Claim will be on reimbursement basis.</p>	<p>Covered up to AED 1500 per person per year (20% co-insurance).</p>
<p>Global Emergency Assistance Services by Assist America</p> <p>1) Medical Emergency Assistance 2) Travel Emergency Assistance 3) Second Medical Opinion</p>	<p>Not Covered</p>
<p>Repatriation of Mortal Remains from UAE to Home Country</p>	<p>Covered up to Limit AED 10,000 per person</p>
<p>Life Cover Death due to any cause</p>	<p>Not Covered</p>
<p>Telehealth, Second Medical Opinion (SMO) and Chronic Disease Management (CDM)</p>	<p>Covered through ISON health</p>
<p><b>Wellness benefit:</b></p> <p>Wellness Benefit: Annual Health Check Up Available Exclusively at Prime Medical Centers Deductible - <b>AED 200/-</b></p>	<p>Not Covered</p>

Once per annum and includes the following:  a) Physical Examination by General Physician b) Complete blood count c) Kidney Function Test d) Fasting Blood Sugar e) Total Cholesterol f) HDL Cholesterol g) LDL Cholesterol h) Triglycerides i) Resting ECG	Not Covered
Work Related Injuries / illnesses - For Employees Only	Covered over and above workmen's compensation*
Home nursing	Covered up to AED 10,000 and maximum of up to 8 weeks following discharge from hospital, if medically necessary and if recommended by treating medical practitioner as mandatory*
Hepatitis C Virus Screening and treatment	To be followed as per the guidelines laid out in the Hepatitis C support program
Hepatitis B Virus Screening and treatment	To be followed as per the guidelines laid out
Cancer Screening and treatment	To be followed as per the guidelines laid out in Cancer support program
Vaccinations (Covered on reimbursement basis)	Essential vaccinations and inoculations for newborns and children as stipulated in the DHA's policies and its updates in the assigned facilities (currently the same as Federal MOH)
Preventive Services	Covered Initial Diabetic Screening. Frequency Restricted to : <b>Every 3 yrs from age 30</b> . High risk individual annually from age 18
Adult Pneumococcal Conjugate Vaccine	As per DHA Adult Pneumococcal Vaccination guidelines
Psychiatry & Mental Health Inpatient, Outpatient & Emergency Coverage Claim will be on reimbursement basis and is subject to 10% coinsurance per claim	Not Covered
Diagnostic and treatment services for dental and gum treatments (Emergency cases)	Covered - Medical Emergency Cases Only
Hearing & Vision Aids, and vision correction by surgeries, and laser (Emergency Cases)	Covered - Medical Emergency Cases Only

<p>Home Country Treatment / Air ticket</p>	<p>Covered for the insured members in respect of elective treatment subject to the following:</p> <ul style="list-style-type: none"> <li>• Cost of treatment outside UAE (within Geographical area) for the required medical procedures is less than 70% of customary rates with a minimum difference of AED 10,000/-</li> <li>• Only for inpatient treatments.</li> <li>• Economy class round trip ticket</li> <li>• Only for patient i.e. accompany person not covered</li> <li>• Up to a maximum of AED 5,000/- per year Reimbursement basis.</li> </ul>
<p>Influenza Vaccine (For Dubai members)</p>	<p>Covered up to max AED 50 once per annum at designated clinics via direct billing as per DHA guidelines</p>
<p><b>Preventive Vaccinations</b></p> <p>Herpes zoster (shingles)- Shingrix Vaccine(GSK) is a recombinant subunit vaccine which is to be offered to people above the age of 50 and immunocompromised patients above the age of 18. Dose: 2 doses, 2 to 6 months apart once per lifetime (As per DHA/DHIC guidelines).</p>	<p>Covered (under reimbursement basis)</p>
<p>Travel Insurance Rider through ISA Assist</p>	<p>Please scan QR Code for the benefit details</p>  <p>NOTES:</p> <ul style="list-style-type: none"> <li>• Policy does not cover any expenses incurred as a result of a Pre-Existing Condition, congenital and/or Chronic medical condition.</li> <li>• The Insured shall be eligible for Services when he/she travels outside the Usual Country of Residence.</li> <li>• Policies, once issued, cannot be amended or cancelled unless the insured terminates their medical insurance, and the policy has not been used.</li> <li>• This certificate/coverage does not entitle the holder to seek medical treatment abroad, if travel is primarily for treatment purposes.</li> </ul>



\* Subject to any applicable deductible amount and coinsurance amount.

**GROUP MEDICAL INSURANCE QUOTATION FOR  
M/s. Test Company II**

Reference is made to your query in respect of the above. We are pleased to offer you the following plan in line to meet your client's requirement.

Non -DOH Product: Category CAT B

Category	CAT B (Employee plus dependent plan)
Family of benefits	In & Out Patient
Annual Maximum Limit (OP+IP)	Covered up to AED 250,000
Scope of Cover	To cover the reasonable and customary medical expenses and costs arising due to accidental injuries and / or illness occurring during the policy period as per Dubai Insurance's group policy wording, provisions, terms, conditions and exclusions
Members covered	Eligible Employees and their eligible dependents
TPA	Dubai Care
Area of coverage (AOC) (Elective & Emergency)	GCC + ME + SEA + ISC
Extension of Area of Cover (Only emergency IP)	Worldwide
Network	N2
Deductible	20% up to AED 25
Hospital Class	Private Room
Pre-existing & chronic conditions & consequences	<p>Covered up to Annual Aggregate Limit for all members being renewed, however major medical conditions to be declared. New joiners to running policy to provide health declaration form (please refer to the policy terms &amp; conditions).</p> <p>New joiners (with existing cover): Covered up to annual aggregate limit per person per year with no waiting period. New joiners (without existing cover): Six (6) months waiting period applicable for Treatment of chronic and pre-existing conditions.</p> <p>If a pre-existing or chronic condition develops into an emergency within the 6 month exclusion period, it will be covered up to the annual aggregate limit.</p>

#### Emergency Treatment:

Within Network: 100% on direct billing

Outside Network, within UAE: 100% of actual costs subject to a maximum of 100% of applicable UAE Network tariff on reimbursement basis.

Outside UAE, within AOC: 100% of actual costs subject to a maximum of 100% of applicable UAE Network tariff on reimbursement basis.

Outside AOC: 100% of actual costs subject to a maximum of 100% of applicable UAE Network tariff on reimbursement basis.

All Inpatient treatment in case of medical emergency requires prior approval from the insurance company within 24 hours from the date of admission.

#### \*Elective Treatment:

Within Network: 100% on direct billing

Outside Network, within UAE: With prior approval: 80% of actual costs subject to a maximum of 80% of applicable UAE Network tariff on reimbursement basis.

Outside UAE, within AOC: With prior approval: 100% of actual costs subject to a maximum of 100% of applicable UAE Network tariff on reimbursement basis.

All costs of services not incurred on direct billing shall be considered on reimbursement basis as above

#### Out Patient Benefits


Out-Patient Sublimit	Equal to AML
General Out-Patient Services	Covered* (0% coinsurance for Outpatient treatments)
Consultations, Specialist Fees and Second Opinion Consultation ( <i>Follow up consultation on the same medical condition and at the same provider is free within 7 days from the first consultation</i> ).	Covered*
<i>Outpatient (X-ray and Pathology and Diagnostic tests) and MRI &amp; CT Scans received as an outpatient and pre-authorized.</i>	Covered*
Out-Patient Prescribed Drugs (Branded)	Covered up to AED 2500 with 5% Coinsurance
Outpatient Physiotherapy (which is medically necessary and prescribed by a specialist)	Covered up to 10 Session pppa with 0% coinsurance. Full refund at Network Hospital, if necessary and prescribed by the treating physician.
Routine maintenance of chronic illness	Covered*

Materials, Injections and dressing	Covered*
Accidental Damage to Natural Teeth following an accident (Only initial treatment is covered. Follow up not covered. No cover for treatment resulting from consumption of food or drink or any foreign bodies contained in such food/drink)	Covered for treatment required immediately (within 7 days of accident) following accidental damage to natural teeth by external trauma and when treatment is given by medical practitioner
Outpatient Oncology tests and drugs.	Covered*
Outpatient surgical operations	Covered*
<b>In Patient Benefits</b> (Required Prior Approval)	
Coinsurance	Nil
Hospital accommodation (Room and Board) including ICU	Covered*
Inpatient Physiotherapy (which is medically necessary and prescribed by a specialist)	Covered*
MRI, PET, CT Scans, X-Rays, Pathology, Diagnostic Tests and Procedures, Oncology tests, Drugs and consultants fees (including cover for chemotherapy and radiotherapy)	Covered*
Physician, surgeon, & anesthetist fees and Surgical fees, including anesthesia & theatre charges	Covered*
Prescribed Medicines and Drugs.	Covered*
Emergency road ambulance services to and from hospital by registered ambulance services provider	Covered*
Organ Transplant cost (cost of surgical procedures in performing an organ transplant of either: Kidney, Heart & Liver in respect of the insured person as recipient and not the organ donor)	Covered*
Accidental Dental (only to natural teeth due to sudden and unintentional accident, covered in a hospital or clinic- within 24 hrs of accident. No follow-up treatment covered)	Covered*
Surgical appliances and prostheses`	Covered*
Parent accommodation (Hospital accommodation cost in respect of a parent or legal guardian staying with an insured person who is under 18 years of age and is admitted to a hospital).	Covered up to AED 200/- per night
The cost of accommodation of a person accompanying an in-patient in the same room in cases of medical necessity at the recommendation of the treating doctor and after the prior approval of the insurance company providing coverage	Covered up to AED 200/- per night

Rehabilitation after Hospitalisation, Physiotherapy, Congenital Illnesses and Birth Defects (Life threatening only)	Covered*
Cash Indemnity for Inpatient Treatment	AED 200/- up to 180 days for all inpatient hospitalization that are not submitted to the insurance
<b>Additional Benefits</b>	
<p>Out-patient pre-natal services</p> <p>Pre-approval is required for this benefit</p> <p>Note: Where any condition develops which becomes life threatening to either the mother or the new born, the medically necessary expenses will be covered up to the annual aggregate limit.</p>	<p><u>10% co-insurance applied at the time of payment</u></p> <p>8 visits to PHC; All care provided by PHC obstetrician for low risk or specialist obstetrician for high risk referrals</p> <p>All care provided by PHC obstetrician for low risk or specialist obstetrician for high risk referrals. Services include:</p> <ul style="list-style-type: none"> <li>* FBC and Platelets</li> <li>* Blood group, Rhesus status and antibodies</li> <li>* VDRL</li> <li>* MSU &amp; urinalysis</li> <li>* Rubella serology</li> <li>* HIV</li> <li>* Hep C offered to high risk patients</li> <li>* GTT if high risk</li> <li>* FBS , random s or A1c for all due to high prevalence of diabetes in UAE</li> <li>* 3 ante-natal ultrasound scans Visits to include reviews, checks and tests in accordance with DHA pre-natal care protocols</li> </ul>
<p>In-patient maternity services</p> <p>(Requires prior approval from the insurance company or within 24 hours of emergency treatment)</p>	<p><u>10% co-insurance applied at the time of payment</u></p> <ul style="list-style-type: none"> <li>* Maximum AED 10,000 for normal delivery.</li> <li>* Maximum AED 10,000 for medically necessary C-section, complications and medically necessary termination.</li> </ul> <p>(All limits include coinsurance)</p>
New Born cover	Cover for 30 Days from birth BCG , Hepatitis B and Neo-Natal Screening test (Phenylketonuria ,Congenital Hypothyroidism ,sickle cell screening, Congenital adrenal hyperplasia)
<p><b>Alternative Medicine Covered:</b></p> <ul style="list-style-type: none"> <li>➤ Herbal Medicine</li> <li>➤ Homeopathy</li> <li>➤ Ayurveda</li> <li>➤ Osteopathy</li> <li>➤ Chiropractic</li> <li>➤ Acupuncture</li> </ul>	Not Covered
<p><b>Chronic And Pre-Existing</b></p> <p>(Waiting Period Of 6 Months For NEW JOINERS) - Sublimit</p>	Equal to AML

<p><b>Dental:</b></p> <p>Only the following medically necessary treatment is covered:</p> <p>1. Dental consultation, 2. Teeth extraction, 3. Amalgam/temporary/permanent/composite filling, 4. Root canal treatment, 5. X-rays, 6. Antibiotics, 7. scaling &amp; polishing for dental carious (once a year up to AED 250 pppa)</p> <p><b>Exclusions:</b> Fixed Bridgework, braces, dentures (crowns, cap, facings, etc.), Orthodontics, Cosmetic Services. Appliances, Restorations or procedure to alter vertical dimension or restore occlusion, any Prosthetic or Precious metal covers Cosmetic filling (i.e. Porcelain, etc.), Gum treatment, general check - up, any treatment which is not medically necessary.</p> <p>Covered on Direct Billing under the selected network only</p> <p>Dental claims incurred outside the network on reimbursement will be subject additional 20% copay over &amp; above the dental copay.</p>	<p>Not Covered</p>
<p><b>Optical:</b></p> <p>(this benefit will cover Optical examination conducted for the purpose of obtaining eye glasses or upgrading existing lenses including the cost of the glasses/lens)</p> <p>Frames and contact lenses are however not covered</p> <p>Claim will be on reimbursement basis.</p>	<p>Covered up to AED 1500 per person per year (20% co-insurance).</p>
<p>Global Emergency Assistance Services by Assist America</p> <p>1) Medical Emergency Assistance</p> <p>2) Travel Emergency Assistance</p> <p>3) Second Medical Opinion</p>	<p>Not Covered</p>
<p>Repatriation of Mortal Remains from UAE to Home Country</p>	<p>Covered up to Limit AED 10,000 per person</p>
<p>Life Cover Death due to any cause</p>	<p>Not Covered</p>
<p>Telehealth, Second Medical Opinion (SMO) and Chronic Disease Management (CDM)</p>	<p>Covered through ISON health</p>
<p><b>Wellness benefit:</b></p> <p>Wellness Benefit: Annual Health Check Up Available Exclusively at Prime Medical Centers Deductible - <b>AED 200/-</b></p>	<p>Covered</p>

Once per annum and includes the following:  a) Physical Examination by General Physician b) Complete blood count c) Kidney Function Test d) Fasting Blood Sugar e) Total Cholesterol f) HDL Cholesterol g) LDL Cholesterol h) Triglycerides i) Resting ECG	Covered
Work Related Injuries / illnesses - For Employees Only	Covered over and above workmen's compensation*
Home nursing	Covered up to AED 10,000 and maximum of up to 8 weeks following discharge from hospital, if medically necessary and if recommended by treating medical practitioner as mandatory*
Hepatitis C Virus Screening and treatment	To be followed as per the guidelines laid out in the Hepatitis C support program
Hepatitis B Virus Screening and treatment	To be followed as per the guidelines laid out
Cancer Screening and treatment	To be followed as per the guidelines laid out in Cancer support program
Vaccinations (Covered on reimbursement basis)	Essential vaccinations and inoculations for newborns and children as stipulated in the DHA's policies and its updates in the assigned facilities (currently the same as Federal MOH)
Preventive Services	Covered Initial Diabetic Screening. Frequency Restricted to : <b>Every 3 yrs from age 30</b> . High risk individual annually from age 18
Adult Pneumococcal Conjugate Vaccine	As per DHA Adult Pneumococcal Vaccination guidelines
Psychiatry & Mental Health Inpatient, Outpatient & Emergency Coverage Claim will be on reimbursement basis and is subject to 10% coinsurance per claim	Not Covered
Diagnostic and treatment services for dental and gum treatments (Emergency cases)	Covered - Medical Emergency Cases Only
Hearing & Vision Aids, and vision correction by surgeries, and laser (Emergency Cases)	Covered - Medical Emergency Cases Only

Home Country Treatment / Air ticket	<p>Covered for the insured members in respect of elective treatment subject to the following:</p> <ul style="list-style-type: none"> <li>• Cost of treatment outside UAE (within Geographical area) for the required medical procedures is less than 70% of customary rates with a minimum difference of AED 10,000/-</li> <li>• Only for inpatient treatments.</li> <li>• Economy class round trip ticket</li> <li>• Only for patient i.e. accompany person not covered</li> <li>• Up to a maximum of AED 5,000/- per year Reimbursement basis.</li> </ul>
Influenza Vaccine (For Dubai members)	Covered up to max AED 50 once per annum at designated clinics via direct billing as per DHA guidelines
<p><b>Preventive Vaccinations</b></p> <p>Herpes zoster (shingles)- Shingrix Vaccine(GSK) is a recombinant subunit vaccine which is to be offered to people above the age of 50 and immunocompromised patients above the age of 18. Dose: 2 doses, 2 to 6 months apart once per lifetime (As per DHA/DHIC guidelines).</p>	Covered (under reimbursement basis)
Travel Insurance Rider through ISA Assist	<p>Please scan QR Code for the benefit details</p>  <p>NOTES:</p> <ul style="list-style-type: none"> <li>• Policy does not cover any expenses incurred as a result of a Pre-Existing Condition, congenital and/or Chronic medical condition.</li> <li>• The Insured shall be eligible for Services when he/she travels outside the Usual Country of Residence.</li> <li>• Policies, once issued, cannot be amended or cancelled unless the insured terminates their medical insurance, and the policy has not been used.</li> <li>• This certificate/coverage does not entitle the holder to seek medical treatment abroad, if travel is primarily for treatment purposes.</li> </ul>



\* Subject to any applicable deductible amount and coinsurance amount.

### Countries Includes in Different Territories

#### Arab Countries:

Kingdom of Saudi Arabia, Oman, Yemen, Iraq, Syria, Jordan, Lebanon, Qatar, Bahrain, Kuwait, Egypt, Libya, Algeria, Morocco, Sudan, Somalia, Tunisia

#### Sub - Asia:

India, Pakistan, Burma, Thailand, Vietnam, Philippines, Malaysia, Sri Lanka, Indonesia, Bangladesh, Nepal, Bhutan, Iran, Afghanistan

### NON-HAAD EXCLUSIONS

This Insurance Policy is intended to provide cover for expenses incurred for Medical Treatment of Medical Conditions or Bodily injuries which, in the opinion of both the treating physician are Medically Necessary and which are covered under the Terms and Conditions of the Insurance Policy.

This Insurance Policy does not cover, amongst other things, expenses arising directly or indirectly from the following:

#### Excluded healthcare services except in cases of medical emergencies

1. Diagnostic and treatment services for dental and gum treatments
2. Hearing and vision aids, and vision correction by surgeries and laser

#### Excluded (non-basic) healthcare services

1. Healthcare Services which are not medically necessary
2. All expenses relating to dental treatment, dental prostheses, and orthodontic treatments.
3. Care for the sake of travelling.
4. Custodial care including
  - (1) Non-medical treatment services;
  - (2) Health-related services which do not seek to improve or which do not result in a change in the medical condition of the patient.
5. Services that do not require continuous administration by specialized medical personnel.
6. Personal comfort and convenience items (television, barber or beauty service, guest service and similar incidental services and supplies).

7. All cosmetic healthcare services and services associated with replacement of an existing breast implant. Cosmetic operations which are related to an Injury, sickness or congenital anomaly when the primary purpose is to improve physiological functioning of the involved part of the body and breast reconstruction following a mastectomy for cancer are covered.
8. Surgical and non-surgical treatment for obesity (including morbid obesity), and any other weight control programs, services, or supplies.
9. Medical services utilized for the sake of research, medically non-approved experiments, investigations, and pharmacological weight reduction regimens.
10. Healthcare Services that are not performed by Authorized Healthcare Service Providers.
11. Healthcare services and associated expenses for the treatment of alopecia, baldness, hair falling, dandruff or wigs.
12. Health services and supplies for smoking cessation programs and the treatment of nicotine addiction.
13. Treatment and services for contraception
14. Treatment and services for sex transformation, sterilization or intended to correct a state of sterility or infertility or sexual dysfunction. Sterilization is allowed only if medically indicated and if allowed under the Law.
15. External prosthetic devices and medical equipment.
16. Treatments and services arising as a result of professional sports activities, including but not limited to, any form of aerial flight, any kind of power-vehicle race, water sports, horse riding activities, mountaineering activities, violent sports such as judo, boxing, and wrestling, bungee jumping and any other professional sports activities.
17. Growth hormone therapy unless medically necessary.
18. Costs associated with hearing tests, prosthetic devices or hearing and vision aids.
19. Mental Health diseases, both outpatient and in-patient treatments, unless it is an emergency condition.
20. Patient treatment supplies (including for example: elastic stockings, ace bandages, gauze, syringes, diabetic test strips, and like products; non-prescription drugs and treatments,) excluding supplies required as a result of Healthcare Services rendered during a Medical Emergency.
21. Allergy testing and desensitization (except testing for allergy towards medications and supplies used in treatment); any physical, psychiatric or psychological examinations or investigations during these examinations.
22. Services rendered by any medical provider who is a relative of the patient for example the Insured person himself or first-degree relatives.
23. Enteral feedings (via a tube) and other nutritional and electrolyte supplements, unless medically necessary during in-patient treatment.
24. Healthcare services for adjustment of spinal subluxation.
25. Healthcare services and treatments by acupuncture; acupressure, hypnotism, massage therapy, aromatherapy, ozone therapy, homeopathic treatments, and all forms of treatment by alternative medicine.
26. All healthcare services & treatments for in-vitro fertilization (IVF), embryo transfer; ovum and sperms transfer.
27. Elective diagnostic services and medical treatment for correction of vision
28. Nasal septum deviation and nasal concha resection.
29. All chronic conditions requiring haemodialysis or peritoneal dialysis, and related investigations, treatments or

procedures.

30. Healthcare services, investigations and treatments related to viral hepatitis and associated complications, except for the treatment and services related to Hepatitis B and C.

31. Any services related to birth defects, congenital diseases and deformities unless if left untreated will develop into an emergency.

32. Healthcare services for senile dementia and Alzheimer's disease.

33. Air or terrestrial medical evacuation and unauthorized transportation services.

34. Inpatient treatment received without prior approval from the insurance company including cases of medical emergency that were not notified within 24 hours from the date of admission where possible.

35. Any inpatient treatment, investigations or other procedures, which can be carried out on outpatient basis without jeopardizing the Insured Person's health.

36. Any investigations or health services conducted for non-medical purposes such as investigations related to employment, travel, licensing or insurance purposes.

37. All supplies which are not considered as medical treatments including but not limited to: mouthwash, toothpaste, lozenges, antiseptics, , food supplements, skin care products, shampoos and multivitamins (unless prescribed as replacement therapy for known vitamin deficiency conditions); and all equipment not primarily intended to improve a medical condition or injury, including but not limited to: air conditioners or air purifying systems, arch supports, exercise equipment and sanitary supplies.

38. More than one consultation or follow up with a medical specialist in a single day unless referred by the treating physician.

39. Health services and associated expenses for organ and tissue transplants, irrespective of whether the Insured Person is a donor or a recipient. This exclusion also applies to follow-up treatments and complications unless if left untreated will develop into an emergency.

40. Any expenses related to immunomodulators and immunotherapy unless medically necessary.

41. Any expenses related to the treatment of sleep related disorders.

42. Services and educational programs for people of determination, this also includes disability types such as but not limited to mental, intellectual, developmental, physical and/or psychological disabilities.

**Healthcare services outside scope of insurance - (In emergency cases as defined by PD 02-2017, the following must be covered until stabilization at minimum)**

1. Injuries or illnesses suffered by the Insured Person as a result of military operations of whatever type.
2. Injuries or illnesses suffered by the Insured Person as a result of wars or acts of terror of whatever type.
3. Healthcare services for injuries and accidents arising from nuclear or chemical contamination.
4. Injuries resulting from natural disasters, including but not limited to: earthquakes, tornados and any other type of natural disaster.
5. Injuries resulting from criminal acts or resisting authority by the Insured Person.

7. Healthcare services for work related illnesses and injuries as per Federal Law No. 8 of 1980 concerning the Regulation of Work Relations, its amendments, and applicable laws in this respect.
8. All cases resulting from the use of alcoholic drinks, controlled substances and drugs and hallucinating substances.
9. Any investigation or treatment not prescribed by a doctor.
10. Injuries resulting from attempted suicide or self-inflicted injuries.
11. Diagnosis and treatment services for complications of exempted illnesses.
12. All healthcare services for internationally and/or locally recognized epidemics.
13. Healthcare services for patients suffering from (and related to the diagnosis and treatment of) HIV - AIDS and its

#### Terms & Conditions:

- Ø The proposal assumes compulsory coverage for all employees residing in UAE on valid residence and there is no voluntary option exercised by any employee.
- Ø This policy assumes that all UAE national members, if any, enrolled under this scheme do not hold Thiqqa medical Cards.
- Ø All employees must be on the payroll of the policy holder.
- Ø The benefits offered in this quotation do not comply with the Health Authority Abu Dhabi regulation for compulsory insurance and hence Abu Dhabi residence visa holders and/or members working/residing in Abu Dhabi/AI Ain and/or any person likely to be working in Abu Dhabi/AI Ain temporarily or permanently are not eligible for this cover.
- Ø The quote is valid for 30 days from the date of issue.
- Ø If dependents are to be covered it has to be on compulsory basis within the group /sub group for all employees with dependents residing in UAE on valid residence. There is no voluntary option exercised by any employee to add his/her dependents
- Ø Quotation is available only to United Arab Emirates Nationals and persons holding a valid residence status visa for the United Arab Emirates and who are
- Ø If maternity cover is included all female employees and spouses must be enrolled.
- Ø If routine dental treatment is covered all persons must be enrolled.
- Ø Where pre-existing conditions are not covered, Medical Health Declaration form needs to be completed by all the applicants. [Dubai Insurance](#) reserves the right to ask for any medical check-up if necessary and the cost of which should be borne by the applicant.
- Ø This proposal is based on the information given. Any change in the number, age or sex of the persons to be insured or the scope of coverage will result in recalculation of the premium rates.
- Ø Additions/Deletions will be on a pro-rata premium basis.
- Ø Treatment within the Network in UAE will be settled on a direct billing basis.
- Ø The company reserves the right to vary the premium rates, if there is a change in the total number of insured members above or below 15% during the policy year.
- Ø No Insurer shall be deemed to provide cover and no insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would be in violation of any

- Ø All known major pre- existing / Chronic cases including but not limited to Chemotherapy, radiotherapy, Heart surgery, any major surgery, renal dialysis & osteoarthritis treatment to be mentioned to Dubai Insurance Company before submitting the final documents to issue the policy if the policy is subject to major medical declaration and Members having any major medical conditions (as detailed above) shall be subject to individual medical evaluation & acceptance shall be at the discretion of the insurer with an additional premium &/or application of sub limits or declined
- Ø This quote is valid only if all categories proposed are selected and with no substantial variation in total member census or distribution of members in each category.
- Ø Maximum age of entry is up to 64 years, members 65 years and above shall be subject to individual medical evaluation & acceptance shall be at the discretion of the insurer with an additional premium &/or application of sub limits or declined
- Ø Children are covered from Date of Birth
- Ø Change of benefits class may only take place at renewal of the Group Scheme or upon satisfactory proof of promotion.
- Ø Deductibles and any co-insurance amounts are to be paid by the insured person. If deductibles and/or co-insurance amounts are paid by the employer the premium quoted will be subject to revision.
- Ø Premiums are per person per annum and are payable annually in advance.
- Ø If maternity cover is included all female employees and spouses must be enrolled.
- Ø If routine dental treatment is covered all persons must be enrolled.
- trade or economic sanctions, laws or regulations applicable in the insurer jurisdiction of domicile, or which the insurer is legally obligated to comply.
- Ø Required minimum number of employees in a category is 03.
- Ø The Insured must inform of new additions or deletions to the company within a reasonable time but not later than 30 days from the date of the joining of the employee (and direct dependents) or separation of an employee (and direct dependents) from the organization.
- Ø For a group size with 50 members and below, any New joiners / New Addition shall be subject to individual underwriting (individual medical application form required).
- Ø For a group size with ABOVE 50 members, any New joiners / New Addition without continuity of cover shall be subject to individual underwriting (individual medical application form required). If the New joiners / New Addition have continuity of cover, only Major Declaration form (with Maternity) will be required.
- Ø ALL NETWORKS: Please note that the network list is subject to change without any prior notice due to various factors.
- Ø In compliance to Identity Citizenship Port Security (ICP) requirement by the authorities an ICP charge is applicable on all AUH & Northern Emirates medical policies effective from 15th May. All new business, renewal and addition is to be processed with an additional ICP charges from 15th May 2023 onwards for Abu Dhabi, Sharjah, Ras Al Khaimah, Ajman, Umm Al Quwain, Fujairah visa holders. The Applicable Charges which will be made mandatory is AED 24 + VAT per Insured Member and not Refundable.

**Cancellation of the policy:**

The Policy can be cancelled by either party giving 30 days notice in writing to Dubai Insurance co. (P.S.C).

In the event of cancellation by the Policyholder, Dubai Insurance co. (P.S.C) will retain premium as per the following short term premium rates.

A. 25% of the annual premium for the first month or part thereof.

B. 12.5% of the annual premium for each subsequent month or part thereof.

The refund will be subject to providing evidence of visa cancellation or obtaining new insurance.

Dubai insurance co. (P.S.C) have the right to cancel the policy with immediate effect if;

- Premium is not paid as per the premium payment agreed terms or issued CDC/PDC Cheques are not honoured.
- Misrepresentation of info
- None disclosure of material facts.

In the event of cancellation by the company, Dubai insurance co. (P.S.C) will refund premium for the remaining policy period on prorated premium basis.

**Errors & Omissions excepted (E & OE):**

- We make every effort to make sure that the information in this document is accurate and up to date, based on the information given to us.
- We will promptly correct any errors brought to our attention. If you find an error please contact us.
- We cannot accept responsibility for the supply of incorrect information, copied within this document.
- We reserve the right to withdraw this quotation and its acceptance at any point and for any reason. You will be

**GROUP MEDICAL INSURANCE**

**Enhanced - Category CAT A (DEPENDANTS - DXB )**

Premium Summary (PMPA in AED)				Census Summary			
Age Band	Males	Females	Married Female	Age Band	Males	Females	Married Female
Age 0-17	4,981.04	3,624.09	0.00	Age 0-17	6	5	0
Age 18-40	10,346.41	12,840.60	15,645.40	Age 18-40	3	0	5
Age 41-45	22,982.04	25,458.53	28,263.33	Age 41-45	0	0	1
Age 46-59	22,982.04	25,458.53	25,458.53	Age 46-59	0	0	4
Age 60-64	55,132.18	55,132.18	55,132.18	Age 60-64	0	0	0

**TOTAL MEMBERS : 24**

**TOTAL PREMIUM OF CATEGORY CAT A : 287,370.36**

**Enhanced - Category CAT A (EMPLOYEES - DXB )**

Premium Summary (PMPA in AED)				Census Summary			
Age Band	Males	Females	Married Female	Age Band	Males	Females	Married Female
Age 18-40	6,379.68	7,888.10	10,692.90	Age 18-40	11	1	0
Age 41-45	14,021.40	15,519.12	18,323.91	Age 41-45	2	1	0
Age 46-59	14,021.40	15,519.12	15,519.12	Age 46-59	9	0	0
Age 60-64	33,465.00	33,465.00	33,465.00	Age 60-64	3	0	0

**TOTAL MEMBERS : 27**

**TOTAL PREMIUM OF CATEGORY CAT A : 348,214.11**

**Enhanced - Category CAT B (EMPLOYEES - DXB )**

Premium Summary (PMPA in AED)				Census Summary			
Age Band	Males	Females	Married Female	Age Band	Males	Females	Married Female
Age 18-40	3,933.82	4,624.54	7,269.07	Age 18-40	5	3	0
Age 41-45	7,433.04	8,118.86	10,763.38	Age 41-45	1	0	0
Age 46-59	7,433.04	8,118.86	8,118.86	Age 46-59	0	0	0
Age 60-64	16,336.47	16,336.47	16,336.47	Age 60-64	0	0	0

**TOTAL MEMBERS : 9**

**TOTAL PREMIUM OF CATEGORY CAT B : 40,975.79**

**Total number of members : 60**

<b>Premium</b>	<b>676,560.26</b>
<b>Basmah &amp; HCV (DXB Only)</b>	<b>2,220.00</b>
<b>ICP</b>	<b>0.00</b>
<b>VAT (5%)</b>	<b>33,939.01</b>
<b>Grand Total</b>	<b>712,719.27</b>

**Premium calculation**

The company reserves the right to vary the premium rates, if there is a change in the total number of insured members above or below 15% during the policy year.

**VAT Clause**

The quote provided above is inclusive of Value Added Tax ('VAT') which may be applicable on the policy.



### MAJOR MEDICAL DECLARATION FORM

(To be completed by the HR or an authorized person of the company)

Company Name/			
Quotation Ref	QA202412180266	Business Activity	
E-mail ID		Telephone No./Mobile No.	
Previous Insu		Previous Policy Expiry Date	

We hereby confirm to Dubai Insurance Company that the below information is correct and has been provided after verifying the same with all members to be insured with us.

Sl. No	Type of Conditions / Diseases / Ailments	Yes	No
1	Cardiac Illnesses, Ischemic Heart Diseases or Surgeries	<input type="checkbox"/>	<input type="checkbox"/>
2	Cancer / Tumor - (Malignant or Non Malignant)	<input type="checkbox"/>	<input type="checkbox"/>
3	Person in COMA	<input type="checkbox"/>	<input type="checkbox"/>
4	COPD (Chronic Obstructive Pulmonary Disease)	<input type="checkbox"/>	<input type="checkbox"/>
5	Bone Fractures / Bone Diseases / Joint replacement / Disc Prolapse	<input type="checkbox"/>	<input type="checkbox"/>
6	Infertility Treatment	<input type="checkbox"/>	<input type="checkbox"/>
7	Ongoing Pregnancy (Mandatory for groups with 50 lives & below and if mentioned in TOB for endorsements)	<input type="checkbox"/>	<input type="checkbox"/>
8	Gastric problems (including Hiatus Hernia), Liver or Pancreatic Illnesses or Surgeries.	<input type="checkbox"/>	<input type="checkbox"/>
9	Organ Transplants (Done and/or planned)	<input type="checkbox"/>	<input type="checkbox"/>
10	Blood and vascular disorders including Varicose veins.	<input type="checkbox"/>	<input type="checkbox"/>
11	Birth defects/ deformities/congenital illnesses/hereditary or developmental disorders	<input type="checkbox"/>	<input type="checkbox"/>
12	Major Kidney Diseases	<input type="checkbox"/>	<input type="checkbox"/>
13	Autoimmune Disorders such as but not limited to multiple sclerosis, Rheumatoid arthritis, Systemic Lupus erythematosus (Lupus), Inflammatory bowel disease (IBS), Addison disease. Celiac disease, sprue (gluten- sensitive enteropathy) Dermatomyositis, Graves' disease. Hashimoto thyroiditis, Multiple sclerosis. Myasthenia gravis, Pernicious anemia	<input type="checkbox"/>	<input type="checkbox"/>

Note: It is important to disclose any and all pre-existing medical conditions or circumstances that may affect your insurance coverage. Failure to do so may result in Dubai Insurance Co. declining any claims related to these conditions for non-disclosure of material facts. In such cases, policy holder will be responsible for settling and reimbursing any paid amounts back to Dubai Insurance Co. Therefore, we strongly advise you to disclose all relevant information to ensure a smooth and hassle-free insurance experience.

If any of the above are answered "YES", please provide details below

Member Name	Relation	Condition / Diseases / Ailments	MAF ✓		Reports ✓	
			Yes	No	Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Note:** Any declaration made regarding the above-mentioned medical conditions will be subject to individual medical application form evaluation and underwriting. Additional premium charges may apply based on the underwriting assessment.

**Declaration:**

1. Dubai Insurance Co. has the right to re-underwrite and propose new premiums based on above information
2. Members above age 64 or with pre-existing/chronic conditions will have to submit Individual health declaration forms.
3. All additional members to the policy will have to declare all pre-existing conditions in relation to above listed conditions.
4. After inception or the date of period between signed group declaration form and onboarding process of the policy if we become aware of any of the above conditions previously unreported, we undertake to inform Dubai Insurance Co. promptly thereafter for their appropriate action.
5. We understand and acknowledge any pregnancy not declared at the time of this application's coverage will be at the sole discretion of the insurer. The insurer has the right to not cover any maternity claims to any undeclared pregnancy. We also acknowledge and understand any pregnancy, which arises within forty calendar days from the date of this application; coverage will also be at the discretion of the insurer.
6. By signing this form, we hereby confirm that we have notified our Employees and received their confirmation on the same.

-----  
Authorized Signatory & Company Stamp

Date : \_\_\_\_\_