Member Guide

Enhanced Sahtak Plan
Dear Member,

Thank you for choosing the National Health Insurance Company – Daman.

Daman is the UAE’s first specialised health insurance company and today we proudly serve over 2.4 million members.

Our members enjoy high-quality health insurance plans and customer services with access to the largest healthcare network in the UAE and a growing international network of across the Middle East, Africa, Asia, Europe and the Americas.

In addition to our insurance services, we have disease management programmes that are unique to us. These programmes are managed by a qualified team from Daman in liaison with the treating physician to form a special three-way relationship that centres on the members’ health.

In line with our vision to become the most trusted partner in health for the community, we have created our Activelife initiative, which aims to mobilise the entire UAE community to lead a healthy, active lifestyle.

Finally, I would like to wish you and your family, the very best of health.

Dr. Michael Bitzer
Chief Executive Officer
We are pleased to inform you that Daman is supporting the ‘Nadafa’ green initiative led by the Emirate of Abu Dhabi and supervised by the Center of Waste Management.

The Centre of Waste Management supervises the campaign of implementing the Waste Management Strategy to ensure better health, environment and economy for the Emirate of Abu Dhabi. The ‘Nadafa’ initiative is also in line with the Abu Dhabi 2030 strategy.

As the leading specialised health insurer in the United Arab Emirates, Daman is fully committed to the Nadafa initiative, and will be extending its full support to the program by taking steps internally such as paper waste control, use of eco-friendly materials, and recycling system. As one of the steps, all our customer documents are being converted into an electronic format to control paper wastage.

We truly believe that “going green looks good, feels good, and most importantly, does a world of good”.

We look forward to your understanding and support on this initiative to have a greener and healthier environment for our society.
Welcome to Daman

As your health insurance specialists, we are here to make sure that you have access to the best of medical services, whenever you need it.

Within this guide, you will find valuable information on the benefits and services available to you as a Daman member. Please go through this document to help you understand and use your benefits better.

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About Us
The National Health Insurance Company – Daman is the region’s leading specialised health insurer, providing comprehensive health insurance solutions to more than 2.4 million members in the UAE.

Over the years, the company has been the partner of choice for a number of the country’s most prominent organisations and multinational companies in various industries including oil and gas, aerospace, energy, construction, investments and media.

Daman is a public joint-stock company that is 80% owned by the Abu Dhabi Government with the remaining 20% owned by Munich Re. The company is backed by the reliable support of the Abu Dhabi Government and its strategic partner, Munich Re, one of the world’s leading reinsurers, plays an important role as both reinsurer and a valuable source for knowledge transfer.

Headquartered in Abu Dhabi and established in 2006, Daman offers a range of health insurance plans for both individuals and organisations and exclusively manages the Government’s health programme – Thiqa – for UAE Nationals and Abu Dhabi Basic Plan – for low income expatriates. Members enjoy access to the largest healthcare providers’ network in the UAE and an extensive international network of over 45 countries.

Daman, a pioneer in health care insurance, drives innovation through a combination of state-of-the-art technology and healthcare-related expertise offered by a highly skilled and knowledgeable workforce. Members benefit from added value through unique offerings such as the disease and case management programmes as part of the acclaimed Health Support services. Daman also operates a 24/7 customer call centre and has a medical services authorisation team in direct contact with Daman’s network of healthcare providers. It also provides a diverse range of online services that are unmatched in the UAE.

Daman has set high standards in the health insurance industry and has been awarded a number of internationally recognised awards and quality-focused certifications in a relatively short span of time. The company is ISO 9001 certified for Quality Management Systems.
Our Values

Excellence - We set the standard with our exceptional service through the creation and use of internationally recognised best-practices.

Pioneering – We are pioneers in health insurance and continue to introduce innovative solutions as part of our vision to become the most trusted partner in health for the UAE community.

Team-spirit – We communicate openly and transparently and our departments and joint ventures collaborate seamlessly to unite as one organisation.

Responsibility – We support our people in enabling them to exceed the expectations of our members and stakeholders.

Achievement – We are motivated by an aspiration to achieve, which we channel both individually and collectively, into providing an unparalleled level of service to make our members happy.
Key Benefits Summary

Our Core Services

**Toll Free Number 800 4 DAMAN:** Answers members’ queries and concerns through a 24 hour call centre staffed by bi-lingual representatives.

**24-Hour Medical Authorization:** Approves requests for medical treatments that require pre-authorization.

**In-house Claims Processing:** Processes reimbursement of claims within 15 working days.

**Direct Billing:**
Offering direct billing facility at over 10,100 healthcare providers in the UAE and abroad.

**Unmatched Online Services:** Access to www.damanhealth.ae for members to submit and track endorsements and claims, search for healthcare providers and many more

Our Value Added Benefits

**International Non-Emergency Assistance:** Offering medical, security and travel assistance services abroad.

**Expert Medical Opinion Program:** Gives you access to the world’s most recognised medical experts when determining the best course of treatment for your medical situation.

**Case Management:** Guides members through the medical system and ensure that they are receiving the best care and service.

**Disease Management Program:** Aids members in managing chronic conditions by a well-trained coach who will educate and motivate participants leading to a healthier lifestyle and improved quality of life.

**ActiveLife Program:** Community engagement platform designed to give our members and the community at large a platform to support them in leading a healthier, more active life.
Your plan
Understand your Schedule of Benefits (SOB)

As a member, you are enrolled in one of our health insurance plans, covering you for a range of medical services and benefits. Your policy clearly states the medical services or treatments that are covered for you. These covered services or treatments are listed in your Schedule of Benefits. You can read your specific Schedule of Benefit on our website or contact our Customer Service center through the toll-free number mentioned on Daman website, digital app or Daman card.

Steps to access your Schedule of Benefits

1. Visit http://www.damanhealth.ae
2. Click ‘Login to My Daman’
3. Fill in your Username and Password
4. Click the ‘Login’ button to open your Policy Information page
5. On the Policy Information page, click the tab on ‘Benefits’
6. Read through the ‘Schedule of Benefits (SOB)’ document to know more about the covered services under your policy
Your Benefits.

Schedule of Benefits (SOB)

<table>
<thead>
<tr>
<th>Plan Name</th>
<th>Enhanced Sahtak Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Benefit Limit</td>
<td>AED 500,000 Per Person Per Policy Year</td>
</tr>
<tr>
<td>Territorial Limit</td>
<td>UAE plus Home Country</td>
</tr>
<tr>
<td><strong>Network Within UAE:</strong> (as mentioned on your card)**</td>
<td>In &amp; Out-patient on direct billing in UAE</td>
</tr>
<tr>
<td></td>
<td>Vaccination covered at SEHA facilities only</td>
</tr>
<tr>
<td><strong>Network Outside UAE: Home Country</strong></td>
<td>Network in respective Home Country</td>
</tr>
<tr>
<td></td>
<td>(Home Country is defined as the country that has issued member’s passport on which UAE Residence Visa is stamped)</td>
</tr>
<tr>
<td>Pre-existing conditions</td>
<td>Fully Covered</td>
</tr>
</tbody>
</table>

**Inpatient Treatment**

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Network in Abu Dhabi</th>
<th>Network in Dubai and Northern Emirates (DNE)</th>
<th>Network in Home Country</th>
<th>Non-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient &amp; Day Treatment (including Pre &amp; Post In Hospital Treatment Covered)</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Accommodation Type – Single Private Room</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Hospital Accommodation &amp; Services</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Consultant’s, Surgeon’s &amp; Anesthetist’s Fees and other fees</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Ambulance Services (in Medical emergency cases, subject to General exclusions)</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
</tr>
<tr>
<td>Parent Accommodation for accompanying an Insured Child under 10 years of age</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>(Maximum limit of AED 300 per day)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Companion Accommodation for Critical Illness (Maximum limit of AED 300 per day)</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

**Out-patient Treatment**

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Network in Abu Dhabi</th>
<th>Network in DNE</th>
<th>Network in Home Country</th>
<th>Non-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician Consultation</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>(Within Abu Dhabi: Deductible AED 80 when any Diagnostics or Laboratory is prescribed; and AED 50 in all other cases)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Deductible not applicable for follow up within 7 days)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diagnostics (X-Ray, MRI, CT-Scan, Ultra Sound, etc.), Laboratory (Specialized investigation and scan including but not limited to MRI, Scan, Endoscopies with Pre-authorization only)</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Pharmaceuticals (Long term medications to be dispensed up to 90 days without pre-authorization)</td>
<td>70% covered</td>
<td>70% covered</td>
<td>70% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Physiotherapy</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
</tbody>
</table>

**Other Benefits**

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Network in Abu Dhabi</th>
<th>Network in DNE</th>
<th>Network in Home Country</th>
<th>Non-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>Repatriation of Mortal Remains to country of origin (AED 10,000)</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
</tr>
<tr>
<td>Emergency Treatment</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
</tr>
<tr>
<td>Diagnostic and treatment services for dental and gum treatment (Medical emergency cases)</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
</tr>
<tr>
<td>Hearing and vision aids, and vision correction by surgeries and laser (Medical emergency cases)</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
</tr>
</tbody>
</table>
Schedule of Benefits (SOB)

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Network in Abu Dhabi</th>
<th>Network in DNE</th>
<th>Network in Home Country</th>
<th>Non-network</th>
</tr>
</thead>
<tbody>
<tr>
<td>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</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Annual Breast Cancer Screening (applicable for females &gt; 35 years)</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Annual Prostate Cancer Screening (applicable for males &gt; 45 years)</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Colorectal Cancer Screening (applicable for males and females &gt; 40 years)</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Vaccinations as per HAAD list (Benefit only at SEHA providers)</td>
<td>100% covered</td>
<td>Not covered</td>
<td>Not covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Maternity</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inpatient Maternity (Deductible AED 500 Per delivery applicable within UAE + Home Country)</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Outpatient Maternity (Within Abu Dhabi: Deductible for Physician Consultation AED 80 when any Diagnostics or Laboratory is prescribed; and AED 50 in all other cases) (Deductible not applicable for follow up within 7 days)</td>
<td>100% covered</td>
<td>80% covered</td>
<td>100% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Dental Module 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dental (Maximum Annual limit of AED 2,000 Per Person)</td>
<td>80% covered</td>
<td>80% covered</td>
<td>80% covered</td>
<td>Not covered</td>
</tr>
<tr>
<td>Accidental dental treatment</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
<td>100% covered</td>
</tr>
<tr>
<td>Other Services covered (Through Service Providers Only)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tele-consultation healthcare services (Nil Deductible)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>International non-emergency assistance services</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Second Medical Opinion

1. Please note: (1) A single holiday or business trip may not exceed 90 days. (2) Coverage outside UAE is limited to 90 days per treatment. Exception: For Maternity benefit, coverage is extended up to 180 days.
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. Covered In-patient treatment not available in Network will be covered 100% on reimbursement only covered when approved in advance.
4. Covered Out-patient treatment not available in Network will be covered 100% on reimbursement only. Covered Pharmaceuticals not available in Network will be covered 70% on reimbursement only.
5. Benefit available on reimbursement only.
6. Includes: a) Clinical Examination b) Mammogram c) Pelvic Sonogram (if medically indicated) d) CA 15.3 (if medically indicated)
7. Includes: a) Clinical Examination b) PSA c) Rectal sonogram
8. Includes: a) FIT (Fecal Immunochemical Test) every 2 years; b) Colonoscopy every 10 years
9. Following services are covered: a) X-Rays; b) Extractions; c) Amalgam / Composite Fillings; d) Root Canal Treatments; e) Consultations; f) Prescribed Drugs for the above mentioned services (covered as part of Outpatient Pharmaceuticals).
10. Covered Dental services not available in Network will be 80% on reimbursement only.
Finding a healthcare provider
Need medical help, find in our network

Damans Medical Service Providers Network

You are important to us and so is the quality and delivery of medical care that you receive. That is why we established and continuously work towards establishing relationships with reputable medical facilities to provide you with the best medical treatment available. We have a comprehensive list of network providers around the globe to help you whenever you need medical attention.

Within UAE
We have carefully selected the network providers to offer comprehensive geographic access to you in relation to your place of work or residence. Our network, comprises of different medical facilities such as hospitals, pharmacies, specialty centers, polyclinics and more. Specific health services may be covered in specific network providers as per your policy terms and conditions.

You can visit any of our network providers to enjoy a cashless treatment via direct billing where your bills will be settled directly by Daman. You may, however, have to share a small portion of the bill according to deductibles or co-insurance charges for certain services offered under your health plan (such as consultations, medicines, etc.). Such charges will be clearly mentioned on your Schedule of Benefits and will be due and payable to the provider on the date that the service is provided.

Outside UAE
You have access to medical facilities as part of our international network. Please refer to your home country network published on Daman website for more details. Any service in the provider network will be covered as per the terms and conditions of your policy.

In case you would like to receive inpatient services at a non-network provider, you can call our International number (+97124184888) or send an email to intl_assistance@damanhealth.ae and request for a pre-authorization.

Want to find a network provider?

Our provider directories are continuously updated as we establish new agreements with healthcare facilities. Please check on the participation status of any provider with Daman before you visit the facility.

To find out more about our network providers or to locate any provider nearest to you, please use the Provider Search on our website or contact us.

Phone
Toll free number: 800 4 DAMAN (32626)

Email
customerinfo@damanhealth.ae

Website
www.damanhealth.ae
Availing health benefits
Cashless treatment

Direct Billing at Network Providers

As a Daman member you are entitled to be treated without the need to pay at your plan’s network of medical service providers (Network Providers). Some treatments and services are excluded, please check your plan’s Schedule of Benefits (SOB).

Direct billing adds extra convenience where you do not have to worry about paying your eligible medical expenses up front. Deductible and co-insurance fees are the only amounts you would have to pay.

To benefit from direct billing services, you just have to follow the below mentioned steps:

- Present your health insurance card (Emirates ID, digital insurance card or Daman card) at the Network Provider’s reception
- Comply with the Network Provider’s administrative procedures for availing direct billing. Network providers will explain and help you in completing the necessary administrative procedures.

Some health services may have deductibles or co-insurance charges applicable that you have to pay directly to the Network Providers for availing health services. (“Deductible” is a fixed fee that is required to be paid by you to the Network Provider. “Co-insurance” is the percentage of eligible expenses that is required to be paid by you to the Network Provider). Such charges will be clearly mentioned on your Schedule of Benefits and will be due and payable to the provider on the date that the service is provided.

Pre-authorization:

A pre-authorization is a prior approval given by Daman to the Network Providers, before certain health services are provided. Daman requests this approval for certain health services to support your Network Provider’s choice and to ensure that the Network Provider has appropriate information on services covered under your health plan.

The Network Provider will inform you if the requested or prescribed procedure requires pre-authorization and if required, the Network Provider will then carry out the necessary procedures to obtain the pre-authorization for the health service that will be offered.

As a standard requirement, unless otherwise specified in the SOB applicable to your health plan, the below services require pre-approval from Daman:

- All inpatient hospitalisation and day treatment services
- Outpatient specialised investigations and scans including but not limited to MRI, CAT scan and Endoscopies
- Physiotherapy
- Long term medication for more than 30, 60 or 90 days (as mentioned in your SOB)
- Dental treatments (if the services are included in the SOB)
- Medical Appliances, Equipment and Supplies (if the services are included in your SOB)
- Annual screening
- Other benefits specified in your SOB

Emergency cases that are followed by a hospital admission do not require pre-authorization from Daman but has to be notified by the Network Provider within 24 hours for Enhanced plan members from admission. Covered treatments not available in Network will be covered 100% when approved in advance or in Emergency.

Daman’s Authorization team operates 24 hours, 7 days a week. It includes doctors, paramedics and specialized coordinators, and is fully equipped technologically for Network Providers to get in touch with them through multiple channels.
Visit any provider you want

If you would like to receive medical treatment or service outside of your plan’s network of medical service providers, or if you have forgotten your health insurance card (Emirates ID, digital insurance card or Daman card), you will be able to claim the amount via reimbursement.

In such cases, as a Daman insured member you have the option to apply for a reimbursement of your treatment’s cost, if the availed services are covered under your health plan and reimbursement is available in your policy. You can apply for reimbursement of a claim through the following methods:

• On-line submission through our website www.damanhealth.ae for claimed amount up to AED 10,000. In certain cases of on-line submissions we may ask you to submit the original documents to process the reimbursement.
• By visiting any of our branches and service points.
• Through Sales Administration staff, Sales Representatives, Health Insurance Specialists or Customer Support Agents (CSA).

Required Documents:
The following documents are required to be submitted with the Reimbursement Claim Form:
- Copy of your health insurance card (Emirates ID, digital insurance card or Daman card).
- Original itemized bill/invoices with service date
- Original prescription for medication prescribed by your doctor
- Investigation results and/or reports (e.g. - laboratory test results, x-ray report etc.) should be attached for procedures above AED 1,000
- In case of inpatient (hospitalization) claims you are required to submit a medical report/discharge summary stamped and signed by your doctor.
- In case of treatment availed outside the UAE you are also required to submit a copy of the passport page with the entry and exit stamps or any other document proving your stay outside the UAE when the treatment was received

Important to Note:
Validity of reimbursement requests:
- You must submit your reimbursement form to Daman within 180 days from the last treatment date for services availed within and outside UAE.
- Resubmission/Appeal of Reimbursement Claims - in case you disagree with a partially paid or rejected reimbursement claim, you have the right to appeal the decision. You can resubmit your claim with the supporting document(s)/justification(s) within 180 calendar days from the date of notification of partial payment or rejection.

Coverage Outside UAE (as specified in Schedule of Benefits)
- Coverage outside UAE is limited to 90 days per treatment. A single holiday or business trip may not exceed 90 days. Any treatment after 90 days from leaving the UAE is not covered under your policy. Exception: For Maternity benefit, coverage is extended up to 180 days.
- Reimbursement is not applicable for particular plans except for medical emergencies.
Pharmacy Benefit Management

Pharmacy Benefit Management (PBM) is a comprehensive drug utilisation program. Daman manages its PBM program via an internet-based interface between Daman and the pharmacies within Daman’s network in UAE. PBM is designed to manage your health insurance pharmaceuticals benefit in line with the best medical practices.

PBM involves a wide range of real time controls such as:

- Quality checks on prescribed drugs for consistency with your diagnosis, age, gender as well as other parameters such as dosage, refill frequency etc.
- Checks for possible negative drug-to-drug interactions and drug-to-diagnosis contraindications to avoid possible health hazards. The checks are performed on your prescription history with us.
- Performs insurance checks such as drug coverage, benefits and plan limits and any other factors relevant to your plan.
- Actively monitoring prescription claims for fraud and abuse.

PBM has an appeal process to address your feedback, a contingency plan to ensure continuity of service in case of technical issues, promotes quality, includes a scientific panel in the decision-making process of your pharmaceuticals benefit, and reduces overall claim costs by promoting rational use of pharmaceuticals.

Complaints and Appeals

Daman is committed to address members' coverage issues, complaints and problems. For any general inquires related to your policy benefits, or specific complaints concerning your pharmacy benefits such as adjudication of your claims (declining the pre-authorization request for a drug), dispensing oversight or provider related issues (access, quality and safety), you can call our Customer Service toll free number mentioned on Daman website, digital app or Daman card.

For cases where a drug cannot be found with your Network Provider, you have the option to request exceptional consideration for coverage. If your request is declined, you may further approach us through our appeal process. Daman will discuss the merits of your case internally and externally and will communicate the decision to you within 30 calendar days from the date of appeal. Details of appeals process and the Appeals/Exception Request Form are available on our website. You can submit your Appeal/Exception request Form along with all supporting documents at any of the Daman Branches or via email to pbm.appealsexceptions@damanhealth.ae.
Other valuable Services
Emergency coverage under our insurance plans

We are committed to ensure that you receive the best health care services, especially in an emergency.

In the event of a medical emergency within the geographical limits of your policy, you can avail health services at the nearest available health service provider. Emergency services are covered in network and non-network health service providers.

**When availing services at Network providers:**
If the nearest available health service provider is within our list of Network providers, then you do not have to pay for the availed health services as benefits offered are on direct billing basis.

For emergency services, we have waived the requirement of pre-authorization. However, the network health service provider must notify Daman within 24 hours for all our health insurance plan (except Premier) members from admission.

**When availing services at non-Network providers:**
If the nearest available health service provider is not within our list of Network providers; then you would need to pay for the service and claim the amount via reimbursement. Simply fill in the claims reimbursement form available at www.damanhealth.ae, attach all necessary documents and send it to us. For any assistance with our reimbursements process, please call the toll free number mentioned on Daman website, digital app or Daman card.

In case you would like to receive inpatient services at a non-network provider, you can call our International number (+97124184888) or send an email to intl_assistance@damanhealth.ae and request for a pre-authorization.
Medical tele-consultation services

The Abu Dhabi Telemedicine Centre is an innovative telemedicine consultation service offered exclusively by Daman to our health insurance plan members where highly qualified physicians provide you world-class healthcare around the clock, without having to visit a clinic or hospital. The centre is staffed by Swiss-trained medical professionals delivering sound medical consultation over the telephone in confidence when you need it, for routine pediatric conditions or simply general medical queries.

The Abu Dhabi Telemedicine Centre is a partnership between Abu Dhabi’s Mubadala Development Company and Switzerland’s leading telemedicine provider, Medgate.

The Abu Dhabi Telemedicine Centre offers medical consultation services in Arabic and English, utilising a staff of qualified physicians and an innovative patient management system, to ensure confidentiality, facilitate referrals to specialised, local physicians and provide personalised care.

Healthcare – wherever, whenever!
Why should you call for medical tele-consultation?
- Peace of mind. Helps you decide when to visit a doctor and saves your time from unnecessary trips to the clinic or hospital.
- Faster identification of any symptoms requiring further medical attention.
- Receive the highest level of medical advice from specialised and Swiss-trained medical staff.
- Medical consultation in full confidence. The telemedicine centre maintains the highest level of data security and confidentiality.

When do you call the telemedicine centre?
- Call anytime 24/7, even in the middle of the night.
- Call from anywhere, to speak with a doctor even from the remotest location.
- Call if you are not sure whether to visit a doctor or not, for any symptoms.
- Call for routine pediatric conditions, general medicine and dermatology.

When do you go to a hospital or clinic?
- Incase of emergencies.
- For specialised medical services.
- For consultation requiring face-to-face interaction with the doctor.

What happens when you call the telemedicine centre?
- When you call, you will speak directly with a nurse for a preliminary assessment who will take note of your symptoms, personal details, and arrange to have a doctor call you back shortly for a full assessment.
- Within 30 minutes, you will be contacted by a doctor who will conduct an assessment of your symptoms. The doctor will then either recommend a personalised treatment programme or refer you to a nearby network provider for further assessment and specialised care.

Important to know:
- If your plan covers medical tele-consultation service, you can avail this service anytime of the day. To know about the coverage under your plan, please refer to your Schedule of Benefits.
- The Abu Dhabi Telemedicine Centre will uphold the confidentiality of the information that you provide to their medical staff, as per the requirements of UAE law. All calls are recorded; they will create electronic medical records and authorise us, Abu Dhabi Telemedicine Centre and/or other healthcare providers to receive or exchange your personal or medical information, as medically necessary.
- As part of the data security check, please keep the following information handy:
  - Your Member Number as mentioned on your digital insurance card or Daman card.
  - Your insurance policy expiry date as mentioned on the digital insurance card or Daman card.
- No Deductible will be charged for availing this service.
International Non-Emergency Assistance

International Non-Emergency Assistance

Whenever you consider travelling abroad for day-care or treatment requiring a hospital stay, our in-house International Assistance Team is ready to support you. The process is easy and simple: let us know at least 5 working days in advance so that we can organize everything required. We will be providing you with the following services:

**Explaining international benefits** as per your policy.

**Facilitating direct billing** at chosen healthcare facilities within the network.

**Comparing the best facilities** and proposing the most suitable ones for your case.

**Pre-trip planning** and appointment scheduling.

**Resolving any issue** related to your medical stay.

**Issuing advance payments** for facilities outside our network (requires pre-approval).

**Following up** with you and the hospital during the stay and actively monitoring the case.

Our current network consists of more than 100,000 different facilities around the globe. Even if your preferred provider is not listed in our directory, we will be able to arrange ad-hoc direct settlement in most of the cases.

You can avail International Non-Emergency Assistance by emailing: int_assistance@damanhealth.ae

Terms and conditions apply.
Review your case with leading International experts

Expert Medical Opinion

Most of us will likely face difficult medical issues in our lives, whether they are our own or those of a loved one. Emotions and uncertainty can make it hard to think clearly at a time when critical decisions are needed. It’s at times like these when you might need expert advice from an international medical team.

That is why Daman has partnered with Advance Medical, to offer you access to the Expert Medical Opinion Program, providing you with access to the most highly qualified medical experts and the latest advances in healthcare.

The Expert Medical Opinion Program

Find reassurance and clarity whenever you need

When it comes to making sure that the medical treatment you get is the medical treatment you need, The Expert Medical Opinion Program is your best choice. This service will help you to find reassurance and clarity whenever you need to better understand the best options for your care.

Access to the world’s most recognized medical experts

The Expert Medical Opinion Program gives you access to the world’s most recognized medical experts when determining the best course of treatment for your medical situation. Experts come from all over the globe and are selected specifically to address your concerns.

Your Case Manager will guide you through the process

You will be assigned a doctor from Advance Medical team who will serve as your Case Manager and guide you through the process of having your case reviewed by leading international doctors.
Review your case with leading International experts

**On demand access to a team of leading international doctors**

1. Contact us to confirm eligibility for the Service at expert.medical@damanhealth.ae or request online.
2. You will be assigned a doctor, who will be your Case Manager through your case from start to finish.
3. We will help you to collect your medical records and prepare a comprehensive medical summary to be sent to the experts.
4. Our clinical committee will select world class experts who are specialist in your condition to review your case.
5. In matter of days, you will receive a report containing each expert’s written recommendations, information about treatment alternatives and answers to your specific questions.

**What are your health concerns?**

Contact us

**Email us:** expert.medical@damanhealth.ae
A Case Manager will call you back to provide rapid clarity for any medical situation.
Take a step towards a healthier you!

Preventive Health Services

At Daman, we firmly believe in promoting preventive health services for our members to reduce their health risks and contribute to their overall wellness. We have two different programs for our members.

**Annual Screening**
We have designed specific health screenings for women and men above a certain age group.

Under our Annual Screening benefit, female members above the age of 35 years can avail Breast Cancer Screening, male members above the age of 45 years can avail Prostate Cancer Screening and both male and female above the age of 40 years can avail Colorectal Cancer Screening. The screening services are available once a year, with pre-authorization (where the health service provider will ask us for a pre-approval before offering you the service).

Services covered under Breast Cancer Screening are:
- Clinical Exam
- Mammogram
- Pelvic Sonogram (if medically necessary)
- CA 15.3 (CA - Carcinoma Antigen) (if medically necessary)

Services covered under Prostate Cancer Screening are:
- Clinical Exam
- PSA (Prostate Specific Antigen)
- Rectal Sonogram

Services covered under Colorectal Cancer Screening are:
- FIT (Fecal Immunochemical Test) every 2 years
- Colonoscopy every 10 years

**Annual Health Check-up**
We have designed specific annual health check-up module for our plan members. The health check-up service will be available with listed health service providers. The annual health check-up will offer preventive tests that can be availed once in a year and will include: Physical Examination by GP, ECG, CBC, Blood Urea Nitrogen, Total Cholesterol, Fasting Blood Sugar, Creatinine, Urinalysis, Stool Examination, SGOT, SGPT.

Annual Screening and Annual Health Check-up is available with a range of plans.
At your service anytime, anywhere
We are here to help you

Daman Customer Service Centre

Our Customer Service Centre was set up to serve as your first point of contact with Daman. We serve members over the phone and email around the clock, and have put in place a quality assurance team to ensure members receive the best service possible.

Customer Call Support:

Our call support team operates 24 hours a day, 7 days a week and is staffed with bi-lingual representatives. You can call on our toll free numbers for any queries, concerns or complaints that you may have about the benefits and services included in your policy. This team is responsible to handle your requests within Daman and in the process, coordinating with different teams across the company on your behalf. The team from time to time may call you to check your satisfaction with Daman and take any comments you may have.

E-mail Support:

This team will log your email enquiries and answer you within a promised maximum of two working days. They are also responsible to record suggestions and answer enquiries made through our website.

Quality Assurance:

This team ensures that everyone in the Customer Service Centre works in accordance with our policies that guarantees you are served as best as possible.

Contact Us:

Phone: Toll Free Number: 800 4 DAMAN (32626)
Email: customerinfo@damanhealth.ae
A more intelligent health insurance experience

Electronic Services

Daman has always been committed to bringing you the best in innovation and digital convenience, which is why, in March of 2009, we began offering online services on our website www.damanhealth.ae. These give members access to an easy-to-use portal with a wide range of services to enhance their health insurance experience.

These electronic services are being added to and developed continuously in our endeavour to remain at the cutting edge of digital customer experience, and we are proud of the awards we have collected at both local and international events.

With a user-friendly interface, it is extremely secure and all medical and personal data is dealt with in utmost confidentiality.

The features you can benefit from include:

- **Know your plan** – a quick way to browse through your plan’s benefits and other details.

- **Search for medical service providers** – use this to search for hospitals, pharmacies and other medical facilities.

- **Submit a reimbursement request** - submit a reimbursement request online. Just fill the online claim form, upload all required documents, input your bank account details and submit the claim online. The claim amount is directly credited to your bank account when approved.
A more intelligent health insurance experience

- **Track your claims** – track the status of your claims conveniently from your My Daman account.

- **Download forms** – download important forms and guidelines from our website.

- **Get new quotes** – use our Premium Calculator on the website to receive indicative rates for health insurance policies. Once you receive a quote, you can even pay for it online using your credit card.

- **Callback and feedback** – should you wish to speak to one of our Customer Service Representatives, you can submit a request and our team will call you at the time and date specified by you. You can also use our feedback form to share suggestions or report fraud.

- **ActiveLife** – ActiveLife is our community engagement platform designed to give our members and the community at large a platform to support them in leading a healthier, more active life. ActiveLife can be accessed online at www.activelife.ae (Winner of Middle East Internet Award 2012) and includes the following sections:

  a) **Get active! – Active Weekends and Active ideas**

  In these sections we break down many fun and active things for you to get involved in around the UAE, allowing you to get out there for yourself and find out what weekends are all about. We have also included general interest articles about nutrition, exercise and well-being.

  b) **Healthy living**

  We have a dedicated healthy living section on the website that includes healthy recipes, fitness tips and real-life transformation stories.

  c) **ActiveLife events**

  In this section we provide details about the many initiatives and events held under the ActiveLife brand, including The Color Run, Electric Run, Yasalam, Get Driver Fit and others.

  d) **Train initiatives by ActiveLife**

  ActiveLife by Daman sponsors several events and initiatives to encourage the community to live healthier, more active lives. Our weekly StartYAS, TrainYAS, GoYAS, TrainDubai and Train Al-Ain ActiveLife events are free to participate in and a great way to join thousands of like-minded individuals who meet every week to get fit in state-of-the-art facilities at Yas Marina Circuit, Dubai Autodrome and Hazza Bin Zayed Stadium.

Visit www.damanhealth.ae for more information
Your concerns are important to us

Resolving Customer Complaints

Do you have a feedback or complaint? We have different channels to hear from you:

Phone: Toll free 800 4 (DAMAN) 32626  
Email: customerinfo@damanhealth.ae  
Website: visit www.damanhealth.ae and go talk to us. We have several ways to hear from you  
Fax number: +971 2 614 9787  
Post: Customer Service Department  
Customer Communication and Complaint Management Unit  
National Health Insurance Company – Daman  
P.O Box 128888, Abu Dhabi, United Arab Emirates

To report Fraud and Abuse, please call Daman at 02-6145544.

If you have raised a complaint, our team will acknowledge it within two working days by sending you an SMS or an email with the complaint number. We will then proceed with a thorough investigation into your issue and get back to you within 15 working days. Please be assured that your complaint will be dealt with seriously, diligently and confidentially.

To investigate your complaint thoroughly, please provide us with any supporting documents and ask us the questions you would like us to answer.
Are you not satisfied with our response?

We aim to meet, and even exceed our members’ expectations and provide them with solutions to their complaints. In case you are not satisfied with our response, you may contact us again via customerinfo@damanhealth.ae and providing us with your original complaint reference number. A Customer Service Supervisor will acknowledge your complaint within two working days, and will proceed to investigate your case further before responding to you within 15 working days.

In the unfortunate event where we are unable to reach a satisfactory agreement with you, you have the right to refer your complaint to the appropriate insurance regulator as indicated below. Kindly quote your Daman complaint reference number to the insurance regulator.

Health Authority – Abu Dhabi (HAAD)

HAAD
Abu Dhabi, Airport Road
Abu Dhabi, United Arab Emirates
**P.O. Box** 5674
**Tel:** +971 2 449 3333
**Fax:** +971 2 444 9822
**Email:** contact@abudhabi.ae

Insurance Authority if you are working or residing in other Emirates.

Insurance Authority
Abu Dhabi, Aldar HQ, Al Raha Beach
**P.O. Box** 113332
**Tel.:** +971 2 499 0111
**Fax:** +971 2 557 2111
**Email:** contactus@ia.go.ae

Or alternatively you may visit the Insurance Authority website to log an anonymous complaint via the below provided link:
<table>
<thead>
<tr>
<th>Branch Locations</th>
<th>Service Points Locations</th>
</tr>
</thead>
</table>
| **Daman Headquarters**  
Next to Centro Rotana Hotel and Aloft Hotel  
ADNEC Area, Abu Dhabi  
Telephone: 02 614 9555 | **Abu Dhabi Service Points**  
Infinity Services – Moroor Street  
Zones Corp. Mussafah  
Abu Dhabi Immigration  
Dept. of Economic Development  
Abu Dhabi Chamber of Commerce  
Marina Mall  
Masdar City  
Al Shahama Municipality |
| **Central Branch**  
Airport Road, Abu Dhabi  
Telephone: 02 417 3609 | **Al Ain Service Points**  
Infinity Services  
Al Wagan Municipality  
Mazyad Municipality  
Al Hayer Municipality  
Sweihan Municipality  
Al Qoaa Municipality  
Al Ain Immigration  
Al Khaznah Municipality  
Al Maqam Municipality |
| **Mussafah Branch**  
Global Ascent Business Center  
Al Mussafah 4, Abu Dhabi  
Plot No. 12 Next to SEHA  
Telephone: 02 815 0209 | **Western Region Service Points**  
Madinat Zayed, Tamm Center  
Ghayathi, Tamm Center  
Silaa, Tamm Center  
Delma, Tamm Center  
Al Marfa’a, Tamm Center  
Liwa, Tamm Center |
| **Al Ain Branch**  
G01-G02, Ground Flr, Al Wadi Trading Centre, Khalifa Bin Zayed Al Awwat St. Al Ain  
Telephone: 03 701 1001 | **Sharjah Service Points**  
Sharjah Immigration |
| **Western Region Branch**  
Saeed Bin Humaid Complex - Block A – 1st Floor  
Western Region, Abu Dhabi  
Telephone: 02 894 4303 | **Ras Al Khaimah Service Points**  
Ras Al Khaimah Immigration |
| **Sharjah Branch**  
Ground Level, Crystal Plaza, Corniche Road Sharjah  
Telephone: 06 517 15 55 | |
| **Dubai Office**  
Al Barsha 1, Next to Sharaf DG Metro Station  
Hassanicor bldg, (Roche Bobois Furniture Shop), 5th Floor Room 501  
Telephone: 04 436 0222 | |
| **Dubai Direct Sales Office**  
Office #601 Capricorn Bldg, Sheikh Zayed Road, Dubai  
Telephone: 04 311 7911 | |
As a Daman member you have the Right to:

- Receive information about Daman’s health insurance plans and services including but not limited to health insurance plan benefits, exclusions, policy terms and conditions, Pharmacy Benefit Management (PBM) services, details of network providers (including hospital, pharmacy, dental clinic etc.), online services, list of medications covered under your health insurance plan (Drug List) and your Rights and Responsibilities.
- Be treated with respect and dignity and have the right to privacy.
- Preserve the confidentiality of your treatment records to the extent protected by Federal and Emirate laws in the UAE. You are also entitled to receive an explanation regarding exceptions to confidentiality.
- Voice complaints or to appeal to Daman on benefits offered, claim settlement, services offered, PBM services or any other grievance.
- Be provided, upon request, with information about your plan’s benefits including limitations and exclusions applicable and details related to your health plan Drug List.
- Receive services in English and Arabic when contacting Daman Customer Service.
- Make suggestions and give comments on ways Daman can improve its services.
- Exercise your rights in accordance with the Health Insurance Law of the Emirate of Abu Dhabi.

As a Daman member your Responsibilities are:

- To read your insurance policies for the details of benefits, exclusions, other terms and conditions applicable under your health insurance plan. If you do not understand the information, you should contact Daman Customer Service for explanations on the covered benefits, limitations and authorization procedures.
- To present your health insurance card (Emirates ID, digital insurance card or Daman card) when accessing covered health services from our Network Providers.
- To know how to access covered health services and pharmacy benefit you are entitled to as part of your health insurance plan benefits.
- To pay applicable co-insurance and deductible, if any, at the time of availing a health service.
- To demonstrate mutual respect and courtesy towards providers (including hospitals, pharmacies, dental clinics etc.) and Daman personnel.
Important Note: This document is for information purposes only and does not form part of the Policy. The complete list of benefits, definitions, exclusions, terms and conditions are set out in the Policy. While every effort is made to ensure the accuracy of the content, Daman cannot be held liable for any typographical errors, errors of fact or any other error or inconsistency found in this document.