

Category VIP-END

Policy Period: 1 January 2019 to 31 December 2019

-STANDARD POLICY EXCLUSIONS

	Description	ENAYA Network (Private Hospitals/Clinics)	DHA Facilities
1.	Allergy Testing	Not covered	Not covered
2.	Artificial Insemination, Treatment for Infertility, Impotency	Not covered	Not covered
3.	Auto-therapy (or self prescription)	Not covered	Not covered
4.	Cosmetic Treatment and Surgery, unless medically indicated or resulting from an accident which has occurred after the first enrolment date under the policy	Not covered	Not covered
5.	Hair and Scalp Treatment	Not covered	Not covered
6.	Immunizations	Not covered	Covered
7.	Organ Transplants or Related Services (except Skin grafts, bone grafts, tendon grafts, corneal transplants and bone marrow transplant)	Not covered	Not covered, however pre and post transplantation management are covered at DHA facilities only
8.	Radioactive Contamination	Not covered	Not covered
9.	Rehabilitation Devices	Not covered	Not covered
10.	Self Inflicted Injuries	Not covered	Not covered
11.	Sterilisation or Reversal, Contraception Devices (eg Condom, Spermicidal Cream)	Not covered	Not covered

12.	Treatment for Substance Abuse or Drug Addiction including but not limited to anabolic steroids, non-medical use of water pills, diuretics etc	Not covered	Not covered
13.	Treatment not related to disease	Not covered	Not covered
14.	AIDS and related illness	Not covered	Not covered
15.	Hepatitis B and C	Not covered	Covered
16.	Baby Supplies	Not covered	Not covered
17.	Abortions except when the life of the mother would be medically endangered	Not covered	Not covered
18.	All ground ambulance services other than for cases that are deemed legitimate emergencies by Government of Dubai	Not covered	Not covered
19.	In-patient companion room charges for children over the age of 18	Not covered	Not covered
20.	Any drug, device, medical treatment or procedure that, in the sole discretion of Government of Dubai, is deemed to be experimental, unproven and has not been established as being effective	Not covered	Not covered
21.	Genetic engineering and cloning	Not covered	Not covered
22.	Sex-change procedures or operations and related services	Not covered	Not covered
23.	Smoking Cessation and its treatment	Not covered	covered
24.	Any claim in its entirety where the member acts against medical advice	Not covered	Not covered
25.	Any treatment/tests conducted by a family, or relative member, or a physician not licensed to operate in the country where medical treatment is being delivered	Not covered	Not covered

26.	Any treatment/test not required or prescribed by a licensed doctor	Not covered	Not covered
27.	Any treatment/test not required that, in the sole discretion of Government of Dubai, is not medically necessary	Not covered	Not covered
28.	Any treatment/test that requires pre-authorization but has not been approved	Not covered	Not applicable
29.	Corns, bunions, pigmentation problems	Not covered	Not covered
30.	Fertility-related treatment for ovarian cysts, endometriosis, menstrual cycle problems or irregularities, fibroids, and varicocele	Not covered	Not covered
31.	Services or treatment in any long term care facility, rehabilitation centre, spa, hydro clinic, nature cure clinics, rest cures, sanatorium, home care, nursing home or home for the aged	Not covered	Not covered except for periods of quarantine and/or isolation which are covered at DHA facilities only
32.	Amounts which exceed Usual, Customary and Reasonable (UCR) charges which are defined as a charge or expense for medical care which according to the payers' sole experience does not exceed the general level of charges being made by other Providers of similar standing in the locality where the charge was incurred, when furnishing like or comparable medical treatment, services or supplies.	Not covered	Not applicable
33.	Routine Examinations	Not Covered	Not Covered
34.	Well-Baby clinic	Not Covered	Not Covered

STANDARD PHARMACY EXCLUSIONS

	Description	ENAYA Network	DHA Facilities
		(Private Pharmacies)	
1.	Antiseptic Solutions (Douche / Savlon)	Not covered	Not covered
2.	Baby Formula	Not covered	Not covered
3.	Braces	Not covered	Not covered
4.	Breast Pump	Not covered	Not covered
5.	Contraceptive Medicines	Not covered	Not covered
6.	Cosmetic Preparation (Creams/Lotions)	Not covered	Not covered
7.	Contact Lens Preparations	Not covered	Not covered
8.	Dietary Supplements, unless medically indicated	Not covered	Not covered
9.	Slimming products	Not covered	Not covered
10.	Exercise Machines	Not covered	Not covered
11.	Glucose Strips	Not covered	Covered
12.	Infertility Medications	Not covered	Not covered
13.	Impotence Medicines	Not covered	Not covered
14.	Lozenges	Not covered	Not covered
15.	Lumbar Supports and Corsets	Not covered	Not covered
16.	Mood Altering Medications	Not covered	Not covered
17.	Mouth Gargles and Mouthwashes	Not covered	Not covered
18.	Massage Machines	Not covered	Not covered
19.	Mouth Guards	Not covered	Not covered
20.	Needles	Not covered	Not covered
21.	Nebulizer Machine	Not covered	Not covered
22.	Slings	Not covered	Not covered
23.	Soaps and Shampoos	Not covered	Not covered
24.	Support Stockings and Pantyhose	Not covered	Not covered
25.	Syringes	Not covered	Not covered
26.	Toothbrushes/Floss/Pastes	Not covered	Not covered
27.	Vitamins, unless medically necessary and for the following conditions - pregnancy, anemia and vitamin deficiencies	Not covered	Not covered
28.	Vaccinations	Not covered	Covered

29.	Any other non-prescription drug or otherwise known as 'over the counter' (OTC) medications including but not limited to herbal medications etc	Not covered	Not covered
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