

Appendix A: General Instructions

1. **In compliance with the instructions of the Health Authority- Abu Dhabi and UAE law, all information related to the Claim are strictly confidential and shall not be disclosed to any third party.**
2. This form can be used for all types of medical plans and has to be completed by the insured member (Card holder), only if provider is not submitting the claim on his behalf.
3. Use separate form for each Daman member.
4. **Please read the form carefully and make sure to complete all pertinent information.** Daman will not be able to process any incomplete Claim Reimbursement Form without complete documentation as listed below:

Essential Documents:	Original itemized bill / Invoices with date Original prescription for medication given by the treating doctor Investigation results / reports like laboratory tests, x-rays, etc. for procedures above AED 1,000.00
Additional Requirements For Inpatient (Hospitalization Cases):	Medical Report / Discharge Summary stamped & signed by the treating Doctor
Additional Requirements For Treatment availed outside the UAE:	Passport copy with the entry/exit stamp or any other proof must be provided.

Note: Please keep copies of receipts and documents enclosed with your claim as Daman will not return the original documents unless it is a case of total rejection.

5. **Payment Preference:**
 - All fields marked with (*) are mandatory and have to be provided by the member at the time of submission of the claim form. Daman will not be responsible for any incorrect information provided by you, especially in respect of incorrect bank information.
 - Swift code information is only necessary for international transfers
 - The wire transfer payment will be deposited into the principal account number
 - Wire Transfer payment fee is guaranteed paid by Daman; any amount charged as a result of this service need to be discussed by the member with his/her respective bank.
6. All claims subject to reimbursement should be submitted to Daman from the last treatment dates as mentioned below:
 - A. Within **120 Days** in case for services taken inside and outside UAE for all Enhanced Plans
 - B. Within **180 Days** in case for services taken inside and outside the UAE for Premier Plan
 - C. Within **60 Days** in case for services taken inside UAE for Abu Dhabi card holders
 - D. Coverage outside UAE is limited to 90 days per treatment. A single holiday – or Business trip may not exceed 90 days.
7. Please note that the claim might take an additional five working days if submitted in a language other than English and Arabic.
8. To ensure efficient and prompt settlement of your claims, please submit all the above required documents directly to **Customer Support Desk** in any of Daman's Branches for convenience.

If you have any question or need assistance in filling this form,
Please call 800 4 32626 within the UAE or +971 2 6149555 Outside UAE

Physical Cheque Request Form



1. Card Holder's Information	
Card Holder's Name: (Exactly as printed on the card)	Daman Card No.:
Member E-mail Address:	Mobile No.:
Member Address:	
2. Claims Payment Preference	
<input type="checkbox"/> Direct Cheque (Please specify the collection method):	
<input type="checkbox"/> I will personally come to collect the cheque from DAMAN Customer Support Executive.	
<input type="checkbox"/> I hereby authorize my company representative Mr./ MrsTo collect the cheque and all relevant documents on my behalf from National Health Insurance Company – Daman and will not hold Daman liable for releasing the payment/cheque to the authorized person.	
Signature	
Please note that reimbursements by cheque may take 10 to 15 days to process. For a faster and efficient way of receiving your payment(s) and to avoid the inconvenience of having to go to the bank, you may also opt for wire transfer by providing your bank details on section 2 of the reimbursement claim form.	