RAK LIFE INSURANCE
A division of Ras Al Khaimah National Insurance Company P.S.C.

RAK Essential Medical Policy - Frequently Asked Questions

1. **What is the RAK Essential Medical Policy?**
   The RAK Essential Medical Plan will provide the residents holding RAK Visa with access to good healthcare to pay for any emergency or curative health care needs.

2. **What is the applicable territorial scope of coverage?**
   Within the Emirate of Ras Al Khaimah and emergency is covered within all Emirates across the UAE.

3. **Who is eligible to buy?**
   - RAK visa holders earning salary less than AED 20,000 per month can buy this product for themselves and/or their Spouse and Children.
   - RAK Essential Benefits can be bought for Domestic servants as well. The Policy can be bought either by the sponsor of the domestic servant or the domestic servant himself.
   - Dependent Parents and Business Partner/Investor visa holders are not eligible to buy the Policy.

4. **What is the annual aggregate limit?**
   There is limit of AED 50,000 per insured member per annum including any co-insurance and/or deductibles.

5. **Which is the Third Party Administrator (TPA) / Provider and the network that is offered?**
   IRIS Healthcare is the Third Party Administrator and IRIS Ezyclaim Network is the network name.

6. **Are Pre-existing and Chronic conditions covered?**
   Pre-existing and chronic conditions are not covered in the first 12 months of the Policy. However, these conditions will be covered when the Policy is renewed (after the first 12 months). Further, when a pre-existing condition becomes an emergency within the first 12 months, it will be covered up to the annual aggregate limit.

7. **Is Maternity covered under RAK Essential Medical Plan? If yes, is there a waiting period?**
   Maternity is not covered for the first 12 months of the Policy. When the Policy is renewed, females between 18 to 45 years old who are married are covered for the specified out-patient and in-patient services related to maternity or pregnancy.

8. **Why should any existing medical conditions be declared when you apply for the Policy?**
   Non-disclosure of medical condition will result in your claims not honored and the Policy will become void.

9. **What is "co-insurance"?**
   Co-insurance is a percentage of the costs of consultations, treatments, tests, drugs and medicines that you have to pay. The details of the co-insurance applicable to different services / treatments can be referred to in the Product Snapshot.

RAK Life Insurance
A division of Ras Al Khaimah National Insurance Company P.S.C.

RAK Essential Medical Policy - Frequently Asked Questions

10. If an individual is unemployed and is on the spouse's visa, how is the coverage offered?
The sponsor of the individual can apply for the medical insurance for the dependent.

11. How can a domestic servant take this insurance?
If the person is working as a domestic servant for example as a maid, a nanny, a gardener or a driver, either the sponsor can apply for the medical insurance or the domestic servant can buy it themselves.

12. What is meant by referral procedure for in-patient and out-patient treatment?
Referral procedure means that you need to first consult a General Practitioner (GP) licensed by the Ministry of Health to cover the consultation of any specialist / consultant doctor in the Policy. The General Practitioner will evaluate if your medical condition needs a specialist's opinion and accordingly refer you to the specialist or consultant.

13. Will every Policyholder receive a health insurance card in his/her name?
There will be virtual health cards (soft copy) generated for each member in this Policy which can be presented along with the Emirates ID in the medical facilities to identify yourself and use the benefits under the Policy.

14. Is there any pre-approval / authorisation process applicable for this Policy?
Pre- authorisation / approval is not needed in emergency situations like accidents or sudden illness where immediate medical attention is warranted. Pre-authorisation has to be obtained from IRIS Healthcare to avail certain services, which you can refer to the Table of Benefits for more details. If any approval is required, contact IRIS Healthcare on 800 4747 or email at approvals@iris.healthcare and for other general queries please email at enquiries@iris.healthcare.

15. What is the claim process?
The member can present their virtual health insurance card along with the Emirates ID at the provider and avail of the benefits offered in the plan.

For further queries, you may contact RAK Insurance on 800 RAKI (7254) or email us at callcentre@rakinsurance.com and you must quote your policy number in all cases.