

Welcome

We are delighted to be looking after you. To start, we want to ensure that your transition to your new Orient policy is as smooth as possible. That's why we're offering you an Orient plan that is the closest match to the Al Ain Ahlia plan you are on, so your cover remains as consistent as possible. Depending on your plan, you may also find new benefits, so we encourage you to review your Table of Benefits in detail.

In this document, we help you compare your current Al Ain Ahlia plan to your new Orient plan. The complete overview of your new cover is in your Table of Benefits. All the applicable terms and conditions are detailed in the Individual Benefit Guide.

If you have any questions about the information in this document, please do not hesitate to contact us. We're here to help.

Please note that in the tables below, the ✓ symbol means 'Covered in full up to the maximum plan limit'.

Your new Orient plan

If you're currently on an Al Ain Ahlia Pioneer Dubai 1750 plan...

...you will be moving to our **Dubai Select** Core Plan and **Dubai Pearl** Out-patient Plan.

How your current and new plan compare:

	Your current Al Ain Ahlia plan	Your new Orient plan
Maximum Plan Limit	\$1,750,000	\$1,750,000
In-patient room type	Private room	Private room
In-patient and day-care treatment	✓	✓
In-patient psychiatry and psychotherapy	Max. 30 days up to \$5,000 for non-emergency, and shared \$41,000 limit for emergencies	✓
Cancer treatment	✓	✓
Congenital conditions	Not covered	Treatment and procedures for these are covered under several plan benefits*
Pre-existing conditions (including pre-existing chronic conditions) (in-patient, day-care and out-patient treatment)	Treatment and procedures for these are covered under several plan benefits	\$43,000
Out-patient day-to-day costs	\$41,000 (limit shared with other benefits)	\$51,000 (limit shared with other benefits, of which \$1,400 for 'Prescription drugs')
Out-patient scans	\$41,000 (limit shared with other benefits)	✓
Routine health checks	DHA-mandated 'Preventive services'	DHA-mandated 'Preventive services'
Vaccinations	\$41,000 (limit shared with other benefits)	✓**

<i>Out-patient psychiatry and psychotherapy</i>	\$2,750 for non-emergency and shared \$41,000 limit for emergencies	\$2,725, max. 15 visits
<i>Medical evacuation</i>	Covered in full for emergencies only (unless you tailored your plan by selecting a non-emergency medical evacuation benefit covered up to \$2,000)	Covered in full for emergency and non-emergency
<i>Optional dental cover</i>	Not included	Not included

*See your Table of Benefits for details of all benefits included.

**Out-patient maximum plan limit applies.

And if you currently have an out-patient co-insurance, note that Orient calls it a 'co-payment':

If you are on this AI Ain Ahlia out-patient co-insurance...	...then you are moving to this Orient out-patient co-payment
20% up to max. \$28 for each out-patient consultation	20% up to max. \$28 per consultation

If you're currently on an AI Ain Ahlia Pioneer Dubai 4000 plan...

...you will be moving to our **Dubai Prime** Core Plan and **Dubai Silver** Out-patient Plan.

How your current and new plan compare:

	Your current AI Ain Ahlia plan	Your new Orient plan
<i>Maximum Plan Limit</i>	\$4,000,000	\$4,000,000
<i>In-patient room type</i>	Private room	Private room
<i>In-patient and day-care treatment</i>	✓	✓
<i>In-patient psychiatry and psychotherapy</i>	Max. 30 days up to \$10,000 for non-emergency, and shared \$41,000 limit for emergencies	✓
<i>Cancer treatment</i>	✓	✓
<i>Congenital conditions</i>	\$50,000 per lifetime	Treatment and procedures for these are covered under several plan benefits*
<i>Pre-existing conditions (including pre-existing chronic conditions) (in-patient, day-care and out-patient treatment)</i>	Treatment and procedures for these are covered under several plan benefits	\$43,000
<i>Out-patient day-to-day costs</i>	\$41,000 (limit shared with other benefits)	✓**
<i>Out-patient scans</i>	\$41,000 (limit shared with other benefits)	✓
<i>Routine health checks</i>	\$500, in addition to DHA-mandated 'Preventive services'	\$850, with 'Cancer screening' covered in full**, in addition to DHA-mandated 'Preventive services'
<i>Vaccinations</i>	\$250, in addition to DHA-mandated 'Essential vaccinations'	✓**
<i>Out-patient psychiatry and psychotherapy</i>	\$2,750 for non-emergency and shared \$41,000 limit for emergencies	20 visits
<i>Medical evacuation</i>	Covered in full for emergencies only (unless you tailored your plan by selecting a non-emergency medical evacuation benefit covered up to \$2,000)	Covered in full for emergency and non-emergency

Optional dental cover (if currently selected)	\$1,000 25% co-insurance	\$700 20% co-payment 50% co-payment for 'Dental prosthesis' and 'Orthodontic treatment'
---	-----------------------------	---

*See your Table of Benefits for details of all benefits included.

**Out-patient maximum plan limit applies.

And if you currently have an out-patient co-insurance, note that Orient calls it a 'co-payment':

If you are on this AI Ain Ahlia out-patient co-insurance...	...then you are moving to this Orient out-patient co-payment
10% up to max. \$14 for each out-patient consultation	10% up to max. \$14 per consultation
20% up to max. \$28 for each out-patient consultation	20% up to max. \$28 per consultation

If you're currently on an AI Ain Ahlia Pioneer Dubai 5000 plan...

...you will be moving to our **Dubai Elite** Core Plan and **Dubai Silver** Out-patient Plan.



How your current and new plan compare:

	Your current AI Ain Ahlia plan	Your new Orient plan
Maximum Plan Limit	\$5,000,000	\$10,500,000
In-patient room type	Private room	Private room
In-patient and day-care treatment	✓	✓
In-patient psychiatry and psychotherapy	Max. 30 days covered in full for non-emergency, and shared \$41,000 limit for emergencies	✓
Cancer treatment	✓	✓
Congenital conditions	\$100,000 per lifetime	Treatment and procedures for these are covered under several plan benefits*
Pre-existing conditions (including pre-existing chronic conditions) (in-patient, day-care and out-patient treatment)	Treatment and procedures for these are covered under several plan benefits	\$43,000
Out-patient scans	✓	✓
Routine health checks	\$1,000, in addition to DHA-mandated 'Preventive services'	\$850, with 'Cancer screening' covered in full**, in addition to DHA-mandated 'Preventive services'
Vaccinations	\$250, in addition to DHA-mandated 'Essential vaccinations'	✓**
Out-patient psychiatry and psychotherapy	\$10,000 for non-emergency, and shared \$41,000 limit for emergencies	20 visits
Medical evacuation	Covered in full for emergencies only (unless you tailored your plan by selecting a non-emergency medical evacuation benefit covered up to \$2,000)	Covered in full for emergency and non-emergency

*See your Table of Benefits for details of all benefits included.

**Out-patient maximum plan limit applies.

And if you currently have an out-patient co-insurance, note that Orient calls it a 'co-payment':

If you are on this Al Ain Ahlia out-patient co-insurance...	...then you are moving to this Orient out-patient co-payment
10% up to max. \$14 for each out-patient consultation 	10% up to max. \$14 per consultation
20% up to max. \$28 for each out-patient consultation 	20% up to max. \$28 per consultation

If you're currently on an Al Ain Ahlia Pioneer Dubai 5000+ plan...



...you will be moving to our **Dubai Elite** Core Plan, and **Dubai Gold** Out-patient Plan.

How your current and new plan compares:

	Your current Al Ain Ahlia plan	Your new Orient plan
<i>Maximum Plan Limit</i>	\$5,000,000	\$10,500,000
<i>In-patient room type</i>	Private room	Private room
<i>In-patient and day-care treatment</i>	✓	✓
<i>In-patient psychiatry and psychotherapy</i>	Max. 30 days covered in full for non-emergency, and shared \$41,000 limit for emergencies	✓
<i>Cancer treatment</i>	✓	✓
<i>Congenital conditions</i>	\$100,000 per lifetime	Treatment and procedures for these are covered under several plan benefits*
<i>Pre-existing conditions (including pre-existing chronic conditions) (in-patient, day-care and out-patient treatment)</i>	Treatment and procedures for these are covered under several plan benefits	\$43,000
<i>Out-patient day-to-day costs</i>	✓	✓
<i>Out-patient scans</i>	✓	✓
<i>Routine health checks</i>	\$1,000, in addition to DHA-mandated 'Preventive services'	\$1,700, with 'Cancer screening' covered in full, in addition to DHA-mandated 'Preventive services'
<i>Vaccinations</i>	\$250, in addition to DHA mandated essential vaccinations	✓
<i>Out-patient psychiatry and psychotherapy</i>	\$10,000 for non-emergency, and shared \$41,000 limit for emergencies	30 visits
<i>Medical evacuation</i>	Covered in full for emergencies only (unless you tailored your plan by selecting a non-emergency medical evacuation benefit covered up to \$2,000)	Covered in full for emergency and non-emergency
<i>Optional dental cover (if currently selected)</i>	\$1,500 25% co-insurance	\$2,875 20% co-payment 50% co-payment for 'Dental prosthesis' and 'Orthodontic treatment'

*See your Table of Benefits for details of all benefits included.

And if you currently have an out-patient co-insurance, note that Orient calls it a 'co-payment':

If you are on this Al Ain Ahlia out-patient co-insurance...	...then you are moving to this Orient out-patient co-payment
10% up to max. \$14 for each out-patient consultation 	10% up to max. \$14 per consultation
20% up to max. \$28 for each out-patient consultation 	20% up to max. \$28 per consultation

If you have currently selected the Enhanced Maternity option on the AI Ain Ahlia Pioneer Dubai 4000 or 5000 plan....

...you will be moving to our **Elite Enhanced Maternity Plan**:

	Your current AI Ain Ahlia plan	Your new Orient plan
<i>Routine maternity</i>	90% refund, up to \$10,000	90% refund, up to \$7,250
<i>Complications of pregnancy and childbirth</i>	90% refund, up to \$10,000 (from assisted conception) \$50,000 (from natural conception)	90% refund, up to \$50,000

If you have currently selected the Enhanced Maternity option on the AI Ain Ahlia Pioneer Dubai 5000+ plan....

...you will be moving to our **Elite Enhanced Maternity Plan**:

	Your current AI Ain Ahlia plan	Your new Orient plan
<i>Routine maternity</i>	90% refund, up to \$20,000	90% refund, up to \$7,250
<i>Complications of pregnancy and childbirth</i>	90% refund, up to \$40,000 (from assisted conception) Covered in full from natural conception	90% refund, up to \$50,000

Medical provider network

If you are on this AI Ain Ahlia network tier...	...then you are moving to this Orient medical network
Comprehensive <i>(with additional network restrictions on specific medical benefits)</i>	Comprehensive (no additional network restrictions apply to specific medical benefits)
General Plus with Mediclinic <i>(with additional network restrictions on specific medical benefits)</i>	Comprehensive excluding CCAD (no additional network restrictions apply to specific medical benefits)
General Plus <i>(with additional network restrictions on specific medical benefits)</i>	Standard (no additional network restrictions apply to specific medical benefits)

The list of medical providers that facilitate direct settlement with us may differ from your experience with AI Ain Ahlia. We are expanding our provider network as we endeavour to make sure that access to key medical providers is available.

Main differences in policy terms and conditions

- **Prescription drugs:** Currently on your Al Ain Ahlia policy, it is possible to claim for drugs that are available both over-the-counter and on prescription, as long as your doctor prescribed the drug. On your new Orient policy we will only cover those drugs that need a prescription by a doctor in order to be dispensed by the pharmacy (unless you are moving to the Gold Out-patient plan, which provides additional cover for these costs, up to \$70).
- **New-born care for babies born from assisted conception:** Your current Al Ain Ahlia policy restricts in-patient treatment for acute medical conditions that begin before the baby is eight days old, if the pregnancy was achieved by assisted conception. The limit applicable to Pioneer 1750, 4000 & 5000 plans is \$41,000 and the limit applicable to Pioneer 5000+ plans is \$150,000. In your new Orient policy, you will not find this restriction, however there will be a limit for in-patient treatment if the baby is born by surrogacy or is a multiple birth baby born as a result of medically assisted reproduction. The limit that applies to babies born in Dubai is \$28,150 per child* for the second and third months following birth and the limit that applies to babies born outside Dubai is \$40,500 per child* for the first three months following birth. These limits apply before any other benefit in your plan and out-patient treatment is paid under the terms of the out-patient plan.

**Please note that this limit also applies to babies that are adopted or fostered.*

- The benefit '**Out-patient tests and diagnostic procedures for communicable diseases**' on Al Ain Ahlia's 4000, 5000 and 5000+ Pioneer Dubai plans provides cover for diagnostic tests when you did not have signs or symptoms. This cover does not exist as a standalone benefit in your new Orient plan but cover for asymptomatic diagnostic tests is available under the 'Diagnostic tests' benefit, provided there is medical necessity, or where needed following country-specific health guidance. Diagnostic testing required for travel or recreational purposes is not covered.

Add-on plans

Personal Accident and Travel: If your policy includes a Personal Accident and/or Travel add-on plan, we will no longer be able to offer you this cover therefore we will reflect this in your quoted premium.

Accessing treatment

The process regarding accessing treatment will be slightly different under your new Orient policy. You will find a complete description in the Benefit Guide – please find below a short summary for your convenience:

1. Your cover includes access to a UAE medical network of healthcare providers. The name of the network linked to your policy is indicated on your access card and a list of all providers included in the network is available as part of your membership pack. When accessing treatment within the UAE medical network, the provider will simply need to see your access card – then they will contact us directly for the necessary pre-approval and for the direct payment of eligible medical costs. The above applies to all benefits included in your new Plan with us. If there are any exceptions, these will be indicated on your Table of Benefits.
2. When needing treatment outside of the UAE medical network or outside of the UAE, you need to check the Table of Benefits first. Some benefits included in your new Orient policy will be indicated in the Table of Benefits as subject to **pre-approval**. These benefits are usually in-patient treatments or high cost treatments. For these benefits, you will need to send us a Treatment Guarantee Form in advance: this will help us assess each case, organise everything with the hospital before your arrival and make direct payment of the hospital bill easier, where possible.

If pre-approval via Pre-authorisation Form is not obtained, the following will apply:

- If the treatment received is subsequently proven to be medically unnecessary, we reserve the right to decline the claim.
- If the treatment is subsequently proven to be medically necessary, we will pay 80% of in-patient benefits and 50% of other benefits.

In case of **emergency treatments**, you can simply access the treatment you require and inform us within 48 hours of any hospital admission. We can take Pre-authorisation Form details over the phone at that point.

For any other treatment outside of the UAE or outside of the UAE medical network that is not indicated in the Table of Benefits as subject to pre-approval, you can simply pay the medical provider upfront and then claim the eligible costs

via our MyHealth digital services (available as portal and mobile app).

- **Claiming deadline:** Your cover under Orient offers an extended claims submission timeline whereby we will accept claims for processing up to six months after the end of the Insurance Year they refer to, as opposed to six months after the treatment date as applicable under your Al Ain Ahlia policy.

Contact us, we love to help!

If you need any assistance in understanding our cover with us, you'll find the contact details on your policy documents. Call us anytime, we will be happy to help.