

Policy Directive pursuant to the Health Insurance Law (No 11 of 2013) of the Emirate of Dubai
Policy Directive Number 03 of 2019 (PD 03/2019)

Subject of this Policy Directive	Settlement of Payment for Emergency Services
Applicability of this Policy Directive	This Standard is applicable to all Healthcare Payers (Payers), Third Party Administrators (TPAs), Healthcare Providers (Providers) and Health Insurance Stakeholders in the Emirate of Dubai. This Policy Directive is integrated with other regulations, standards and circulars in Emirate of Dubai relevant to the Health Insurance Law (No 11 of 2013) of the Emirate of Dubai.
Purpose of this Policy Directive	The Policy Directive serves to reiterate the time line for settlement of payment for Emergency Services and minimum benefits requirements for all primary health insurance policies issued in the Emirate of Dubai
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This document replaces	Policy Directive Number 1 of 2016 (PD 01/2016)
This document has been replaced by	Not Applicable
Publication date	April 23 rd 2019
Effective date of this Policy Directive	April 23 rd 2019
Grace period for compliance	Not Applicable

1 Preamble

The Policy Directive serves to:

- 1.1 Reiterate to all Insurance companies and Third Party Administrators operating in Dubai under a DHA permit, the time line for settlement of payment for Emergency Healthcare Services as per Health Insurance Law No11 of 2013 and subject to the relevant offences and penalties listed in [Executive Council Resolution No. 7 of 2016](#).
- 1.2 Confirm the responsibilities of insurance companies specifically in respect of emergency treatment provided to its policyholders.

2 Minimum benefit requirements

- 2.1 The minimum benefit requirements for all primary health insurance policies issued in the Emirate of Dubai require that cover be provided for emergency medical treatment in all Emirates of the UAE.
- 2.2 The treating facility is not specified and it should therefore be understood that chargeable treatment costs must be covered under the policy in whatever facility the treatment is provided (whether inside or outside a particular network).

3 Penalties for not covering emergency treatment costs

3.1

Executive Council Resolution No. (7) of 2016 states at Table No.2, item 19:	
عدم قيام شركة التأمين بسداد الخدمات الصحية المقدمة في الحالات الطارئة من منسأة صحية غير مدرجة لديها ضمن شبكة مقدمي الخدمات الصحية خلال (7) أيام عمل من تاريخ تقديمها.	(5000) درهم إضافة الى سداد تكلفة العلاج