Law No. (23) of 2005
and the Executive Regulations
Regarding the Health Insurance Scheme
for the Emirate of Abu Dhabi

This English version of Law No. (23) of 2005, and its Executive Regulations, regarding health insurance scheme for the Emirates of Abu Dhabi is translated from Arabic. Any instances where the meaning of words or sentences may be interpreted in different contexts, the intended meaning in the Arabic version shall prevail.
Law No. (23) of 2005 Regarding the Health Insurance Scheme for the Emirate of Abu Dhabi

We, Khalifa Bin Zayed Al Nahyan the Ruler of Abu Dhabi,

having perused;

− Law No. 1 of 1974 reorganizing the government body in Abu Dhabi and the amendments thereof;
− Law No. 2 of 1971 regarding the National Consultative Council and the amendments thereof;
− Law No. 8 of 2001 establishing the General Authority for Health Services for the Emirate of Abu Dhabi;
− Law No. 1 of 2004 issuing the Civil Service Law;
− Federal Law No. 5 of 1985 issuing the Civil Transactions Law and the amendments thereof;
− Federal Law No. 8 of 1980 regarding labor relations the amendments thereof;
− Federal Law No. 9 of 1984 regarding insurance companies and brokers and the amendments thereof;
− Federal Law No. 21 of 2001 regarding the issuance of the Civil Service Law in the Federal Government;
− based on the proposal presented to the Executive Council and its sanction;

Issued the following Law:

Chapter I

Definitions

Article 1

The following words and terms shall have the corresponding meanings unless the context indicates otherwise:

The State The United Arab Emirates
The Emirate The Emirate of Abu Dhabi
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Executive Council</td>
<td>The Executive Council of Abu Dhabi</td>
</tr>
<tr>
<td>The Authority</td>
<td>The General Authority for Health Services for the Emirate of Abu Dhabi</td>
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<tr>
<td>The National</td>
<td>A person having the UAE citizenship</td>
</tr>
<tr>
<td>The Residing Expatriate</td>
<td>Any non national working in Abu Dhabi for reward whatsoever under the sponsorship of a natural or corporate person in the Emirate</td>
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<tr>
<td>The Employer</td>
<td>A natural or corporate person employs workers in consideration of a reward whatsoever.</td>
</tr>
<tr>
<td>The Sponsor</td>
<td>A person sponsoring a non national.</td>
</tr>
<tr>
<td>The Insurer</td>
<td>The insurance company operating in the State and licensed by the Authority to provide health insurance services</td>
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<tr>
<td>The Insurance relationship</td>
<td>The contractual relationship between the insurers licensed to operate in the health insurance and the employer or sponsor for providing medical treatment services to the insured.</td>
</tr>
<tr>
<td>The Insured</td>
<td>The person having been insured through the health insurance scheme</td>
</tr>
<tr>
<td>The Health Insurance:</td>
<td>The healthcare service given by Healthcare Providers through health centers to the Insured under a health insurance policy.</td>
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<tr>
<td>Healthcare Provider</td>
<td>Government or private health centers licensed by the Authority to provide healthcare services.</td>
</tr>
<tr>
<td>Health Insurance Policy</td>
<td>A contract entered into between the employer or sponsor with the Insurer for providing health insurance service to the Insured.</td>
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Chapter II

Applicability

Article 2

The health insurance scheme shall be applicable in accordance with the provisions herein to the expatriates and their families residing in the Emirate of Abu Dhabi. The Law may be applied to the nationals of the Emirate by a decision from the Executive Council. The Executive Regulations of the Law shall specify the provisions applicable to the visitors on their relatives’ sponsorship.

Article 3

The following categories are exempted from the health insurance scheme:

1. employees of establishments and corporations operating in the Emirates and having medical centers licensed by the Authority to render medical treatment services provided that such exemption is made upon a decision from the Authority;
2. a non-national wife married to a UAE national;
3. children of a UAE wife married to a non-national;
4. persons entering on tourist visas;
5. other categories exempted by a decision issued by the Authority and approved by the Executive Council.

Article 4

Subject to the provisions of Articles 2 and 3 hereof, subscription to the health insurance scheme is obligatory for non nationals and their families residing in the Emirate. However, the scheme is optional for UAE nationals.

Article 5

Every employer shall provide health insurance coverage for all his employees/workers and their family members covering the employee’s/worker’s wife and three children under 18 years of age. Every sponsor shall subscribe to the scheme for any person under his sponsorship from the date of his arrival to the State unless such person is entitled for health insurance coverage by an employer.
Expatriates may not be employed, issued residence permits nor have their existing permits renewed unless they are subscribed to the health insurance scheme.

Chapter III

Health Insurance Companies

Article 6

Health insurance companies licensed by the Authority to carry out health insurance activities shall render its services to the residing non nationals and their families and whoever wishes to benefit from such services. The Executive Regulations of the Law shall specify the terms and conditions of licensing.

Article 7

The health insurance companies shall pay the Healthcare Providers the costs of the medical services rendered to their Insured.

Article 8

Health insurance companies may not own, manage or participate in the management of healthcare centers nor may they render any healthcare services. The Healthcare Providers may not own, manage or participate in the management the health insurance companies.

Chapter IV

Provider of medical treatment service

Article 9

Government or private healthcare facilities shall provide medical treatment to the Insured under the health insurance scheme. However, private healthcare facilities may not render such service unless they are licensed by the Authority who shall monitor the services provided by such healthcare facilities under the Health Insurance scheme. The Executive Regulation shall specify the medical center in which each Insured should be treated.
Article 10

Healthcare Providers shall render such services in accordance with the professional and ethical accepted standards and the recognized medical methods taking into consideration scientific progress achieved in this field.

Article 11

In emergency cases, Healthcare Providers shall first provide medical treatment to the Insured and then recourse to his Insurer for the costs reimbursement.

Chapter V

Medical Treatment Services

Article 12

Compulsory Health Insurance scheme provided for herein shall include the provision of the following medical treatment services:

1. Medical examination, treatment and primary healthcare provided in clinics and medical centers by general practitioners and specialist doctors;
2. laboratory tests and x-rays;
3. in-patient stay and hospital treatment;
4. dental and gum treatment excluding orthodontics and dentures;
5. medications required to treat a case
6. Accommodation charges of one escort in critical cases.

The Authority may, subject to the Executive Council approval, delete or add other services whenever need arises. The Executive Regulations shall specify for the Authority the type of medical treatment services to be provided to the Insured.

Article 13

The health insurance scheme shall not cover the following cases:

1. self-inflicted injuries;
2. diseases caused by the use of performance-enhancement drugs or tranquilizers without medical prescription as well as alcohol and any other prohibited drugs;
3. plastic surgery, unless result of post-traumatic cases
4. check-ups, vaccines, drugs and preventive means not necessitated by medical treatment covered by the insurance policy;
5. pregnancy and delivery treatment for women covered as single;
6. recreational and physical fitness treatment;
7. occupational diseases and injuries covered by workman compensation treatment;
8. treatment of sexual transmitted diseases as medically recognized;
9. medical expenses following the diagnosis of HIV;
10. expenses of transplantation of teeth, dentures, bridges and orthodontic surgery except those resulting from post-traumatic cases;
11. eyesight and hearing correction tests and the visual and audio aids unless they are prescribed by the treating physician;
12. expenses of transporting the insured by transport means other than local licensed ambulances;
13. treatment of hair loss or alopecia or the cost of perukes;
14. psychiatric, mental disorder treatment other than acute cases;
15. allergy tests whatsoever other than those relating to medication, diagnosis or treatment;
16. equipments, means, drugs, procedures and hormone treatment used for birth control, and contraception or treatment of infertility, sexual impotency or fertility reduction or fertilization by the use of fertilization tubes or any other means of artificial fertilization;
17. birth deformities that exist prior to the inception of the insurance policy except those with life threatening
18. organ transplants;
19. cases that need to be treated abroad.

Without prejudice to the provisions of Article 12 herein, the Authority may, subject to the Executive Council approval, add or delete other services whenever need arises.

Chapter VI

Health Insurance policy

Article 14

The Executive Regulations shall specify the fundamentals of contracting between the Insurers and Healthcare Providers, provided that such contract should particularly contain the following elements:

1. Scope, price ceilings and cost of services;
2. Deductible paid by the insured upon each visit;
3. methods of disputes resolution and indemnities arising from breach of contracts or policies; in all events. The contracts shall be subject to the Authority’s control;

Article 15

Government healthcare facilities affiliated with the Authority may contract directly with the Insurers for providing covered or non-covered medical treatment services to their Insured.

Article 16

The Authority shall approve the value of the compulsory Health Insurance Policy. The Insurers shall provide their Insured with health insurance cards with explanatory instructions as to the coverage, limits and types of covered or non-covered medical services under the policy.

Article 17

Additional medical treatment services other than those set out in the compulsory health insurance policy may be incorporated into another optional health insurance policy of which type and conditions shall be agreed upon between the Insurers and Healthcare Providers.

Article 18

The Authority shall approve the prices of the medical treatment services offered by Healthcare Providers, whether governmental or private, and such prices are considered final and may not be changed during the validity of the policy.

Article 19

Medical services shall be provided upon the inception of the insurance policy and shall cease upon the death of the Insured or the expiration of the Health Insurance Policy.

Article 20

If the Insurer or Insured is in breach of the provisions of the Health Insurance Policy or if false declaration is made by any of them, the breaching party shall pay the costs of the medical services rendered to the Insured in accordance with the prices prescribed for non-holders of the Health Insurance Policy.
Chapter VII

General provisions

Article 21

Files and all records pertaining to the medical services rendered to the Insured are confidential and may not be disclosed to any third party and shall be kept by the Healthcare Provider for two years from the date of the last treatment. The Insurers, the Insured or any other party may not obtain such files and records. Judicial and other authorities stipulated by the Law shall be exempted from the above provision.

Article 22

The General Authority for Health Services for the Emirate of Abu Dhabi shall be in charge of enforcing this Law and shall issue decisions to this effect after obtaining approval thereto from the Executive Council.

Article 23

The Minister of Justice shall, in coordination with the chairman of the Authority, issue a decision appointing the officers having judicial capacity for inspecting the entities licensed to operate under the Health Insurance scheme in order to ensure that they comply with the laws.

Article 24

1. A monthly fine of AED 300, for each case, shall be levied on Employers/Sponsors who refrain from subscribing to the Health Insurance scheme or from renewing the Health Insurance Policy.

2. Subject to the provisions of the former subsection and without prejudice to any severer penalty provided for in any other law, anyone who violates the provisions of this Law shall pay a fine of no less than AED 5,000 (AED five thousand) and no more than AED 20,000 (AED twenty thousand).
Article 25

The Executive Council shall issue the Executive Regulations of this Law based on a proposal to be presented by the General Authority for Health Services for the Emirate of Abu Dhabi.

Article 26

Any provision in contradiction with the provisions of this Law or the Executive Regulations thereof shall be void

Article 27

This Law shall be published in the Official Gazette of the Emirate and come into force after four months following the publication thereof.

Khalifa Bin Zayed Al Nahyan

Ruler of Abu Dhabi

Date: 10th September 2005