

TAKAFUL COVERGE FOR SRI LANKAN DOMESTIC WORKERS EMPLOYED IN MIDDLE EAST REGION

CONTACT DETAILS FOR QUERIES OTHER THAN CLAIMS

Country	Email	WhatsApp	Hotline
UAE	Uae.slbfe@salama.ae	+971551517323	800-725262
Kuwait	kut.slbfe@salama.ae	+971551517323	800-725262
Saudi Arabia (KSA)	ksa.slbfe@salama.ae	+971551517323	800-725262
Oman	omn.slbfe@salama.ae	+971551517323	800-725262
Bahrain	bhr.slbfe@salama.ae	+971551517323	800-725262
Jordan	jrd.slbfe@salama.ae	+971551517323	800-725262
Lebanon	lbn.slbfe@salama.ae	+971551517323	800-725262
Qatar	qtr.slbfe@salama.ae	+971551517323	800-725262

POLICY PURCHASE PROCEDURE

The employer will login to the portal available on SALAMA 's website at below link.

<https://srilankan-workers.salama.ae/healthSL>

Policy can be obtained by completing a simple application from and making the payment online, according to the contact period of the employee. Policy documents will be provided to the Client at the same time.

BENEFITS DETAILS (ALL BENEFITS ARE PAYABLE ON REIMBURSEMENT BASIS)

S.No	Coverage	Benefit (USD)
1	Death (due to any cause)	15 000 per person
2	Permanent total disability due to (Accident)	15 000 per person
3	Permanent Partial disability due to (Accident)	10 000 percentage of the sum insured as per the continental scale of benefits
4	Temporarily disabilities	1% of the sum insured not exceeding 100% of weekly salary (up to a maximum of USD 5,000 per annum) subject to 7 days deferred
5	Medical Expenses due to Accidents (In-patient including emergency and out – patient treatment administrated within the Hospital) per person per Annum	Actual costs up to USD 3,000 per person
6	Serious illness (pre-detected)	3,000
7	Residential – ICU treatment due to COVID or any other pandemic situation	5,000 per person
8	Repatriation due to harassments (Physical, sexual, mental)	Actual costs up to USD 1,000 per person. For a claim to be valid for sexual and physical harassment a police report must be filed and charges brought against the alleged perpetrator. Repatriation Cost will be limited to actual cost of a one-way economy ticket up to a maximum of USD1,000 annually.
9 (i)	Repatriation due to terminal illness	Actual costs up to USD 1,000 per person
9 (ii)	Repatriation due to any pandemic situation	Actual costs up to USD 1,000 per person. Pandemic should be declared by WHO.
10	Repatriation due to pregnancy	Actual costs up to USD 1,000 per person. within 60days upon arrival in country of residence.
11 (i)	Repatriation due to Premature termination of contract by Employer in case of Bankruptcy, closure of Company	Repatriation due to premature termination of the Insured contract by Employer in case of the Employers Bankruptcy. For a claim to valid to company must be registered for VAT & have a DMCC certificate of registration ,or local equivalent. A claim can only be made by the officially appointed liquidator / administrator on behalf of the insured. Cost will be limited to the actual cost of w one –way economy ticket up to a maximum of USD 1,000
11 (ii)	Repatriation through the respective Sri Lanka mission due to any reason	Actual cost of repatriation to Sri Lanka
12	Legal expenses towards non – insurance related cases like non-payment of Salary, Physical harassment or abuse, sexual harassment or abuse, breach of employment contract by the employer etc. of an insured member	Actual cost per case (Not more than the monthly salary of employee in case of successful award)
13	Repatriation of Human Remains	Actual cost up to USD 2,000 per person
14	If the worker (Sri Lankan) sheltered in a safe house due to any reason	10 USD per person per day for basic needs subject to max of USD 300 per person per annum

★ Amendment 1

“Serious illness” is a health condition or quality of life that carries a high risk of mortality and either negatively impacts a person’s daily function. Such as:

i Cardiac surgical expenses related to

1. Heart Attack – (Myocardial Refraction)
2. Coronary artery disease
3. Stroke (Cerebra Vascular Accident)

ii Surgical operations including,

- i. Cancer
- i. Renal Failure,
- ii. Major Organ Transplant, such as lung or bone marrow;
- iii. Paralysis,
- iv. Multiple Sclerosis
- v. Primary Pulmonary Arterial Hypertension
- vi. Fulminate Hepatitis

OR any other illness, excluding those mentioned above, which is certified by a specialist Doctor on the particular area who is registered under the Medical Authority of particular country to be a serious illness.

★★ If a women is detected positive for pregnancy test after the departure form Sri Lanka and if there is a need for repatriation

CONTRIBUTION PAYABLE

COUNTRY	PLAN	BASIC CONTRIBUTOIN	VAT	GROSS CONTRIBUTOIN
BAHRAIN	For 2 Years plan	140	7	147
	For 3 Years plan	210	11	221
	For 4 Years plan	280	14	294

COUNTRY	PLAN	BASIC CONTRIBUTOIN	VAT	GROSS CONTRIBUTOIN
JORDAN	For 2 Years plan	140	7	147
	For 3 Years plan	210	11	221
	For 4 Years plan	280	14	294

COUNTRY	PLAN	BASIC CONTRIBUTOIN	VAT	GROSS CONTRIBUTOIN
KUWAIT	For 2 Years plan	140	7	147
	For 3 Years plan	210	11	221
	For 4 Years plan	280	14	294

COUNTRY	PLAN	BASIC CONTRIBUTOIN	VAT	GROSS CONTRIBUTOIN
LEBANON	For 2 Years plan	140	7	147
	For 3 Years plan	210	11	221
	For 4 Years plan	280	14	294

COUNTRY	PLAN	BASIC CONTRIBUTOIN	VAT	GROSS CONTRIBUTOIN
OMAN	For 2 Years plan	140	7	147
	For 3 Years plan	210	11	221
	For 4 Years plan	280	14	294

COUNTRY	PLAN	BASIC CONTRIBUTOIN	VAT	GROSS CONTRIBUTOIN
QATAR	For 2 Years plan	140	7	147
	For 3 Years plan	210	11	221
	For 4 Years plan	280	14	294

COUNTRY	PLAN	BASIC CONTRIBUTION	VAT	GROSS CONTRIBUTION
SAUDI ARABIA	For 2 Years plan	140	7	147
	For 3 Years plan	210	11	221
	For 4 Years plan	280	14	294

COUNTRY	PLAN	BASIC CONTRIBUTION	VAT	GROSS CONTRIBUTION
UNITED ARAB EMIRATES	For 2 Years plan	140	7	147
	For 3 Years plan	210	11	221
	For 4 Years plan	280	14	294

CONTACT DETAILS FOR CLAIM PERPES ONLY

Country	Office Address	Contact No.	Insurance Coordinator
UAE	EIFFEL 2 Building,1 st floor Umm AL Sheif, Sheikh Zayed Road, PO Box 80864 Dubai,UAE (Land mark :Near to the Equiti Metro station, Next to Habib Bank)	Hotline + 97142708781	Life@nextcarehelth.com
Kuwait	Kuwait chamber of Commerce and Industry Bldg, 1 st floor Block 9, Abdul Aziz Hamad Al-Sagher St, Qibla, Kuwait City	Hotline + 97142708781 Alternative : +96522413385	Life@nextcarehelth.com
Saudi Arabia (K.S.A.)	Al Rabia & Nassar Bldg. M102, King Abdallah Road, P.O.Box 30455,Al Khobar 31952,K.S.A.	Hotline + 97142708781 Alternative : 966138988910	Life@nextcarehelth.com
Oman	Bldg # 1022,Way # 1013,Block #210,1 st floor ,#17, Edara Building, Qurum, P.O.Box 548, PC 115, Muscat, Oman	Hotline + 97142708781 Alternative : +96824655801	Life@nextcarehelth.com
Bahrain	Exhibition Tower, 12th Floor, Office No.1501, 1502,1503&1504 Building 614 Road 1011 Block 410, Senabis, P.O.Box 18442 Manama, Kingdom of Bahrain	Hotline + 97142708781 Alternative : +97317382564	Life@nextcarehelth.com
Jordan	Nat Health, Al Madinah Al Monawarah Street, Bldg, No.194, Amman 19153, P.O.Box 750, Jordan	+962(6)55110 10	Jrd.slbfe@salama.ae
Lebanon	Nextcare Building Father Naamtallah Kahale Street, Saloumi Sin EL Fill Beirut – Lebanon P.O.Box 55-630 Sin El Fil	Hotline + 97142708781 Alternative : +9611504000	Life@nextcarehelth.com
Qatar	6 th Floor – Office 604D, Al Jaidah Square Business Center 63, Airport Road, Umm Ghuwailina – Zone 27 Doha, Qatar	Hotline + 97142708781 Alternative : +97444341057	Life@nextcarehelth.com

CLAIM PROCEDURE

Notice of Claim

Written notice of occurrence upon which a claim under this Takaful plan may be based must be given to the Third Party Administrator (TPA) within sixty (60) days such occurrence with a total period of another 360 days to complete the claim documents.

Proof of Loss

The following information is needed.

- Name of insured accompanied by a letter from the employer.
- Sum Insured from pay roll (Applicable if the some insured is based on basic salary)
- Cause of death (Hospital report)
- Copy of death certificate (In case of accident, also police report)
- Copy of Passport or Identity card apart from basic information out lined above the following further information is requested.

1. Information from the claimant.

- a. Name and address of medical attendance
- b. Detail of other disability benefits being received (eg. State, individual cover)
- c. Details about occupation/job description

2. Information from the employer

- a. Details of the employee's occupation/job.
- b. Date first absent from work.
- c. Details from employee's salary.

3. Information from medical attendance

- a. Details of nature of disability.
- b. Details and dates of consultations.
- c. Details of previous disabilities.
- d. Details of treatments.
- e. Estimation of when employee will be able to return to work.

Only comprehensive information on the exact duties involved in the claimant's occupation can enable a discussion on the claim to be made. Such information should also be made available to the relevant medical attendant so he can make a fair assessment of the case. Often the above information will not be sufficient and further medical examinations by specialists will be needed.

Examinations

The TPA shall have the right and opportunity through its medical representative to examine covered member when and so often as it may reasonably require during the pendency of a claim here under , in case of death, to investigate the circumstances of death, to examine the body and unless prohibited by law, to request or order an autopsy either before or after burial.

Payment of Claim

Any payment of claim under this Takaful Plan shall be paid to the Plan holder or nominated beneficiary.

