

Mercy Hands for Humanitarian Aid Medical Insurance Program (Dhamani) Policy and Procedures

1. Introduction

Mercy Hands is a humanitarian civil society organization that depends on its staff to deliver all kinds of services to people in need. To achieve its mission, Mercy Hands strives to attract the most energetic, brightest, and most experienced people to join the organization, and to keep them healthy and working. Therefore, and as part of its employee benefits package, in 2016, Mercy Hands launched its pilot self-administered and funded medical insurance program, called Dhamani (English translation= my insurance).

2. Purpose

The purpose of Dhamani is to ensure that Mercy Hands' staff and their dependents have access to emergency and outpatient preventive and diagnostic medical care in Iraq.

3. Guidelines

3.1 Eligibility

3.1.1 Dhamani is offered only to Mercy Hands' staff and their dependents living in Iraq.

3.1.2 Ex-employees or their dependents can enroll in Dhamani program.

3.2 Scope of Insured Medical Services

- 3.2.1 Dhamani covers the following medical services: 1) outpatient preventive and diagnostic care, including doctor visits, nursing, diagnostics (e.g. X-ray, Ultrasound, CT scan, MRI, Echocardiogram, etc.), laboratory tests, medications, surgical procedures; 2) emergency room visits; and 3) inpatient services.
- 3.2.2 Dhamani does not cover vision and dental care.
- 3.2.3 Dhamani does not cover medical evacuation or medical services provided outside Iraq.
- 3.2.4 Dhamani does not cover cosmetic procedures. The determination of what is done to improve appearance alone versus correct a functional concern requires a medical determination, and therefore requires prior authorization.

3.3 Enrollment

- 3.3.1 Enrolling in Dhamani's individual plan is mandatory on all full time national employees and optional on Expats living in Iraq. Dhamani will be optional to full time national employees who are paid less than \$500 per month
- 3.3.2 Any new full time national employee paid \$500 per month or more and stationed in Iraq is automatically enrolled in the individual plan.
- 3.3.3 Eligible staff can elect to enroll in the family plan if they want medical coverage for their dependents.

3.4 Administration and Finance

- 3.4.1 Dr. Khaldoon Al-Moosawi is the Medical Director of the insurance program. The program is administered by an Administration and Finance Manager. The Administration and Finance Manager will work under the direct supervision of the Director of Finance Department.
- 3.4.2 Mercy Hands will assign a bank account to the program. All collected insurance money will be deposited in that account and all reimbursements will be debited from it.
- 3.4.3 The collected insurance funds will be used solely for reimbursements and to maintain and grow Dhamani

3.5 Coverage Plans and Cost

3.5.1 The program offers three basic insurance plans: Individual, Family-1 (employee + 3 or less family members), and Family-2 (employee + more than 3 family members). The premium (amount of money paid by the insured staff every month) is summarized in the following table:

Plan	Premium
Individual	\$15
Family-1	\$35
Family-2	\$60

3.5.2 The premium may increase if the insured staff or one or more of their insured dependents have pre-existing medical condition.

3.5.3 All Dhamani insurance plans are zero deductible plans.

3.5.4 All Dhamani insurance plans have 50% copay, which starts after Dhamani spends \$1000 per year to cover the medical expenses.

3.5.5 The annual maximum coverage of individual Dhamani plan is \$25,000; Family-1 plan \$50,000; and \$100,000 for Family-2 plan.

4. Procedure

4.1 Dhamani's Administration and Finance Manager will inform all new employees about Dhamani and explain it to them, in the first week of their job.

4.2 The monthly premium will be deducted from the employee's salary. For the new employee, the premium deduction will start from the first month but insurance will start as of the second month.

4.3 All premiums will be deposited in Dhamani's bank account.

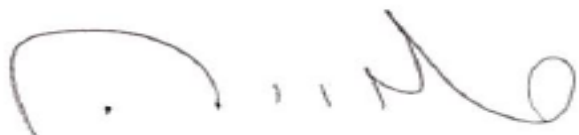
4.4 Reimbursement: The way to obtain insurance benefits or payment is by submitting a medical insurance claim via a request form. After obtaining the medical services, the primary insured (employee) will fill out a medical insurance claim form stating in it: 1) Name of the primary insured; 2) who received the services (for example if it was the primary insured or a dependent like a child, spouse, or a parent); and 3) What was the visit for. The medical insurance claim form shall be submitted to the Administration and Finance Manager. A copy of the receipts of the medical expenses must be attached to the medical insurance claim form. At minimum, the receipt must hold the contact information of the provider of the medical services and a proper signature or stamp.

4.5 The Administration and Finance Manager will review and complete the forms then forward them to the Medical Director for review and approval.

4.6 Once the approval of the Medical Director is obtained, the Administration and Finance Manager will arrange to reimburse the primary insured for the expenses.

4.7 The Administration and Finance Manager and the Medical Director have the right to decline reimbursement if the claim application is incomplete or false. The Medical Director may decline the reimbursement if the service is deemed unjustified, suspicious, or illegal.

Updated: July 31, 2019

A handwritten signature in black ink, appearing to be a stylized name or set of initials, possibly "M. J. No".