Sphera

Table of Benefits
Plans for Dubai and Northern Emirates

International healthcare for you and your family
Valid from 1st January 2026

orient
orient insurance pjsc
Powered by Allianz



Policy terms and conditions

This Table of Benefits was designed for promotional purpose and offers an overview of the cover we provide under each plan. All limits are per member, per Insurance Year, unless otherwise stated. Cover is subject to product availability and to our policy terms and conditions, as detailed in our Benefit Guide, which is available on our website **www.allianzcare.com/en/dubai-indi**.

Request a callback

Key to Table of Benefits

- ✔ Covered in full, up to the maximum plan limit.
- ✕ Not available.
- Waiting period applies.
- ● Treatments/costs require pre- authorisation through submission of a Pre-authorisation Form. Details of our Pre-authorisation process can also be found in the Individual Benefit Guide.

Sphera plans

Our Sphera plans cover you for in-patient, out-patient and standard maternity benefits. Our mandatory Dental Plans are displayed further in this document. You can also purchase our optional Enhanced Maternity Plan (appearing further in this document) to extend your cover.

	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature
Overall maximum plan limit	US$ 250,000	US$ 1,000,000	US$ 2,000,000	US$ 5,000,000
Out-of-network co-payment in the UAE	20%	20%	20%	✕
Core Plan benefits				
● Hospital accommodation	Private room	Private room	Private room	Private room
● Intensive care	✔	✔	✔	✔
● Prescribed drugs and dressings In-patient and day-care treatment only	✔	✔	✔	✔
● Surgical fees, including anaesthesia and theatre charges	✔	✔	✔	✔
● Physician and therapist fees In-patient and day-care treatment only	✔	✔	✔	✔
● Surgical appliances and materials	✔	✔	✔	✔
● Diagnostic tests In-patient and day-care treatment only	✔	✔	✔	✔
● Organ transplant In-patient treatment only	US$ 35,000	✔	✔	✔
● Psychiatry and psychotherapy In-patient and day-care treatment only	✔	✔	✔	✔

	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature
Accommodation costs for one parent staying in hospital with an insured child under 18 per night	US$ 28	US$ 135	✔	✔
Accommodation costs for one person accompanying an insured person in cases of medical necessity per night	US$ 28	US$ 28	US$ 56	US$ 56
Emergency in-patient dental treatment	✔	✔	✔	✔
Reconstructive surgery To restore natural function or appearance after a disfiguring accident or surgery for cancer Where treatment for the accident or initial surgery is covered by this policy	US$ 43,000	✔	✔	✔
Emergency in-patient treatment	✔	✔	✔	✔
Other benefits				
Day-care treatment	✔	✔	✔	✔
Kidney dialysis In-patient, day-care and out-patient treatment	US$ 18,000	✔	✔	✔
Out-patient surgery	✔	✔	✔	✔
Nursing at home or in a convalescent home Immediately after or instead of hospitalisation	US$ 1,500	US$ 2,500	US$ 5,000	✔
Rehabilitation treatment In-patient, day-care and out-patient treatment; must commence within 14 days of discharge after the acute medical and/or surgical treatment ceases	US$ 1,500	US$ 2,500	US$ 5,000	✔
Local ambulance	✔	✔	✔	✔
Congenital conditions In the event of non-emergency treatment In-patient and day-care treatment only	✘	US$ 10,000 12 months	US$ 20,000	US$ 40,000
Congenital conditions In the event of emergency treatment In-patient, day-care and out-patient treatment	US$ 43,000	US$ 43,000	US$ 43,000	US$ 43,000
Post-hospitalisation treatment Covered when it is needed in the 90 days following discharge from in-patient or day-care treatment for the same acute medical condition	✔	✔	✔	✔
Emergency treatment outside area of cover For trips of a maximum period of six weeks	US$ 15,000	US$ 75,000	US$ 75,000	US$ 135,000

	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature
Medical evacuation and repatriation				
Where necessary treatment is not available locally, we will evacuate the insured person to the nearest appropriate medical centre (or if the insured person's home country is within their area of cover, they can choose to be medically repatriated to their home country).	✔	✔	✔	✔
Where ongoing treatment is required, we will cover hotel accommodation costs.	✔	✔	✔	✔
Evacuation in the event of unavailability of adequately screened blood.	✔	✔	✔	✔
If medical necessity prevents an immediate return trip following discharge from an in-patient episode of care, we will cover hotel accommodation costs.	Max. 7 days	Max. 7 days	Max. 7 days	Max. 7 days
Travel costs for one person accompanying an evacuated/repatriated person	US$ 2,800	US$ 2,800	US$ 4,050	US$ 4,050
Travel costs of insured family members in the event of an evacuation/repatriation	✘	✘	US$ 2,800 per event	US$ 2,800 per event
Repatriation of mortal remains or burial expenses	US$1,500	✔	✔	✔
Travel costs of insured family members in the event of the repatriation of mortal remains	✘	US$ 2,800	✔	✔
Travel costs of insured members to be with a close relative who is at peril of death or who has died One round trip per insured member per Insurance Year	✘	US$ 2,125	US$ 2,125	US$ 2,125
CT and MRI scans In-patient and day-care treatment only Pre-authorisation is required for MRI scans	✔	✔	✔	✔
PET and CT-PET scans In-patient and day-care treatment only	✔	✔	✔	✔
Oncology In-patient, day-care and out-patient treatment	✔	✔	✔	✔
Purchase of a wig, prosthetic bra or other external prosthetic device for cosmetic purposes	US$ 270	US$ 270	US$ 270	US$ 675
Preventive surgery In-patient, day-care and out-patient treatment	✘	US$ 10,000	US$ 20,000	US$ 40,000
In-patient cash benefit (per night) Where treatment has been received free of charge	US$ 100, max. 25 nights	US$ 100, max. 25 nights	US$ 150, max. 25 nights	US$ 250, max. 25 nights
Newborn care In-patient and out-patient treatment	Max. 30 days	Max. 30 days	Max. 30 days	Max. 30 days

	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature
Palliative care In-patient, day-care and out-patient treatment	US$ 50,000	✔	✔	✔
Long term care In-patient, day-care and out-patient treatment	US$ 100,000	Max. 90 days per lifetime	Max. 90 days per lifetime	Max. 90 days per lifetime
Home delivery (12 months)	✕	US$ 270	US$ 500	US$ 1,000
Pre-existing conditions Including pre-existing chronic conditions In-patient, day-care and out-patient treatment Pre-authorisation is required only for in-patient and day-care treatments	US$ 43,000	US$ 43,000	US$ 43,000	US$ 43,000
Standard Maternity				
Antenatal care Within the limits outlined by the Dubai Health Authority protocols	90% refund	90% refund	90% refund	90% refund
Routine maternity Includes medically necessary caesarean section	90% refund, up to US$ 2,750 per pregnancy	90% refund, up to US$ 2,750 per pregnancy	90% refund, up to US$ 2,750 per pregnancy	90% refund, up to US$ 2,750 per pregnancy
Complications of pregnancy and childbirth In the event of non-emergency treatment	90% refund, up to US$ 2,750 per pregnancy	90% refund, up to US$ 2,750 per pregnancy	90% refund, up to US$ 2,750 per pregnancy	90% refund, up to US$ 2,750 per pregnancy
Complications of pregnancy and childbirth In the event of emergency treatment	US$ 43,000	US$ 43,000	✔	✔

	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature
Additional Core Plan services				
Expat Assistance Programme** Offers access to a range of 24/7 multilingual support services as follows: • Confidential and professional counselling up to five sessions per issue, per calendar year (in-person, phone and video) • Legal and financial referral services • Wellness website access	✔	✔	✔	✔
Travel Security Services** Offers 24/7 access to personal security information and advice for all your travel safety queries. This includes: • Emergency Security Assistance Hotline (not a free phone number) • Country intelligence and security advice • Daily security news and travel safety alerts	✔	✔	✔	✔
Olive** Our Health & Wellness support program includes, for example: • Fitness app • Access to wellness resources	✔	✔	✔	✔
MyHealth Digital Services • Manage your cover online with our app or portal anytime, anywhere • Submit and track progress of claims • Access your policy documents, health services, payment details and more	✔	✔	✔	✔
Second Medical Opinion Service** Offers access to expert help on the best treatment options available, if you have been diagnosed with a serious illness or had surgery recommended	✔	✔	✔	✔

	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature
Out-patient Plan benefits				
Maximum plan limit Subject to the overall maximum plan limit	US$ 43,000	US$ 63,000	No limit	No limit
Pre-hospitalisation tests Covered when they are needed in the 72 hours before in-patient or day-care treatment	✔	✔	✔	✔
Video consultation services**	✔	✔	✔	✔
Medical practitioner fees	✔	✔	✔	✔
Specialist fees	✔	✔	✔	✔
Prescribed drugs and dressings	70% refund, up to US$ 1,000	70% refund, up to US$ 1,400	US$ 10,000	✔
Diagnostic tests	✔	✔	✔	✔
MRI scans ●	✔	✔	✔	✔
CT scans	✔	✔	✔	✔
PET scans and CT-PET scans ●	✔	✔	✔	✔
Emergency out-patient treatment	✔	✔	✔	✔
Emergency out-patient dental treatment Can also be reimbursed within the terms of any separate Dental Plan	✔	✔	✔	✔
Chiropractic treatment, osteopathy, and podiatry After every 4 sessions, your therapist needs to provide a progress report and a treatment plan for your condition	✘	10 visits	15 visits	✔
Homeopathy, Chinese herbal medicine, acupuncture and ayurvedic treatment After every 4 sessions, your therapist needs to provide a progress report and a treatment plan for your condition	✘	US$ 500	US$ 2,000	US$ 5,000
Prescribed physiotherapy Referral from doctor required Initially limited to 8 sessions ; limit also applies to prescribed and non-prescribed physiotherapy sessions, where combined	8 sessions	12 sessions	20 sessions	30 sessions
- Non-prescribed physiotherapy	✘	✘	5 sessions	5 sessions

	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature
Prescribed speech therapy and occupational therapy Pre-authorisation is required for occupational therapy only	US$ 1,000	US$ 1,400	US$ 5,000	✔
Vaccinations Up to and including 17 years of age	✔	✔	✔	✔
Vaccinations From 18 years of age and older	US$ 300	US$ 500	US$ 2,000	✔
Health and wellbeing checks including screening for the early detection of illness or disease Checks are limited to: • Physical examination • Chest X-ray • Blood tests (full blood count, biochemistry, lipid profile, thyroid function test, liver function test, kidney function test) • Cardiovascular examination (physical examination, electrocardiogram, blood pressure) • Neurological examination (physical examination) • Bone densitometry (every five years for women aged 50+)	US$ 150	US$ 250	US$ 750	US$ 1,000
Well child test	8 visits Up to and including 6 years of age	15 visits Up to and including 6 years of age	15 visits Up to and including 15 years of age	✔ Up to and including 15 years of age
Cancer screening Checks are limited to: • Annual gynaecological exam • Mammogram (every two years for women aged 40+, or younger where a family history exists) • Annual prostate screening (yearly for men aged 50+, or younger where a family history exists) • Colonoscopy (every five years for members aged 50+, or 40+ where a family history exists) • Annual faecal occult blood test • BRCA1 and BRCA2 genetic test (where a direct family history exists)	✔ with exclusion of BRCA1 and BRCA2 that are not covered	✔ with exclusion of BRCA1 and BRCA2 that are not covered	✔ with exclusion of BRCA1 and BRCA2 that are not covered	✔
Preventive services Checks are limited to: • Diabetes tests (every three years for members aged 30+, or yearly for members aged 18+ if there is a high risk of diabetes developing) • Annual pap smear • Hepatitis B & C Virus screening	✔	✔	✔	✔
Psychiatry and psychotherapy Referral from doctor required for psychotherapy, and initially limited to 10 sessions	US$ 1,000	US$ 1,500	20 visits	30 visits
Prescribed medical aids	US$ 500	US$ 1,000	US$ 5,000	✔

	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature
Dietician fees	✗	✗	1 visit	4 visits
Hormone Replacement Therapy	✗	US$ 500	✔	✔
Sleep apnoea	✗	✗	US$ 2,500	✔
Prescribed glasses and contact lenses	✗	US$ 280	US$ 280	US$ 500
Annual eye examination			✔	✔

To reduce your Out-patient Plan premium, please select a co-payment from the options below, based on your selected plan. Two co-payment options are available with the Essence and Base Plans and five co-payment options are available with the Enhanced and Signature Plans. Once you've selected a co-payment option, please read across to find the relevant premium discount. The co-payment selected is payable per insured person, per visit on Out-patient services and applies to all benefits with the exception of 'Video consultation services', 'Cancer screening', 'Preventive services' and 'Vaccinations.

Also, our premiums are expressed in whole numbers (i.e. without any cents), therefore, percentages may be slightly higher or lower than those stated below.

Out-patient Plan co-payments	Sphera Essence	Sphera Base	Sphera Enhanced	Sphera Signature	Premium discount
NIL	✗	✗	✔	✔	0%
10%, up to max. US$ 14 per visit on out-patient services	✗	✗	✔	✔	15%
20%, up to max. US$ 28 per visit on out-patient services	✗	✗	✔	✔	25%
10% per visit on out-patient services	✔	✔	✔	✔	20%
20% per visit on out-patient services	✔	✔	✔	✔	30%

Dental Plans

Please note that it is mandatory to select one of the following Dental Plans. They can't be bought separately. The Sphera Dental 1 Plan can be selected with any of the four Sphera Plans. The Sphera Dental 2 and Sphera Dental 3 Plans can only be selected with either the Sphera Enhanced or Sphera Signature Plans. You can't buy them in conjunction with the Sphera Essence or Sphera Base Plans.

	Sphera Dental 1	Sphera Dental 2	Sphera Dental 3
Maximum plan limit Subject to the overall maximum plan limit	US$ 150	US$ 1,500	US$ 3,000
Dental Plan benefits			
Dental treatment	70% refund	80% refund	80% refund
Dental surgery	70% refund	80% refund	80% refund
Periodontics	70% refund	80% refund	80% refund
Orthodontic treatment Please contact us and submit the details we will require before starting treatment, so we can verify if you are covered Cover starts 12 months after the benefit was first introduced to your plan	✕	50% refund	50% refund
Dental prostheses Cover starts 12 months after the benefit was first introduced to your plan	✕	50% refund	50% refund

Our optional plan

Sphera Enhanced Maternity Plan

The Sphera Enhanced Maternity Plan extends the maternity cover already offered within the Core Plan. You can only purchase the Sphera Enhanced Maternity Plan with either the Sphera Enhanced or Sphera Signature Plans. You can't buy them separately or in conjunction with the Sphera Essence or Sphera Base Plans. This optional plan is subject to the overall maximum plan limit.

		Sphera Enhanced Maternity
Maternity Plan benefits		
Enhanced routine maternity In-patient and out-patient treatment Includes medically necessary caesarean section Cover starts 12 months after the benefit was first introduced to your plan	●	90% refund, up to US$ 7,250
Enhanced complications of pregnancy and childbirth In the event of non- emergency treatment Cover starts 12 months after the benefit was first introduced to your plan	●	90% refund, up to US$ 50,000
Elective circumcision for newborn males Cover starts 12 months after the benefit was first introduced to your plan	●	90% refund, up to US$ 500

Area of cover

We offer a choice of two different geographical areas of cover:



Worldwide, which provides cover anywhere in the world
(this area of cover can only be selected with the Sphera Signature Plan)



Worldwide excluding USA

The area of cover is subject to full terms and conditions as stated in the Benefit Guide.

Choice of medical provider networks inside the UAE

We offer a choice of medical provider networks you can select depending on your requirements:

Comprehensive Network: includes all medical facilities within our UAE provider network (only available with the Sphera Enhanced and Sphera Signature plans).
General Plus Network: excludes premium healthcare providers (American Hospital Group, Mediclinic Group, Cleveland Clinic Abu Dhabi, and Dr. Sulaiman Al Habib) (available with all plans).
General Network: features additional exclusions of high-cost providers beyond those excluded from Comprehensive and General Plus networks (only available with the Sphera Base and Sphera Essence plans).
Restricted Enhanced Network: includes selected cost-effective providers delivering a complete range of medical services throughout the UAE (only available with the Sphera Essence plan).

Please contact us for the list of providers available under each of the above network.

We have contractual arrangements in place with the UAE clinics/hospitals and pharmacies included in our networks. Upon presentation of the Access Card, each of these clinics/hospitals and pharmacies will provide their services and products without seeking immediate payment from members (unless the prescribed treatment is specifically excluded under your policy). Please note that where provided under the following benefits, cover is available on a reimbursement basis only, i.e. the member will have to pay for eligible treatment and then complete and submit a claim for:

- Health and wellbeing checks including screening for the early detection of illness or disease
- Preventive services
- Prescribed medical aids
- Complementary treatment
- Well child test

** Certain services that may be included in your plan are provided by third party providers. If included in your plan, these services will show in your Table of Benefits. These services are made available to you subject to your acceptance of your policy's terms and conditions, as well as the service's terms and conditions as set out by the relevant third party service provider. By accepting the third party service providers' terms and conditions, you enter a separate contractual relationship directly with them. Their services may be subject to geographical restrictions. Full details of the third party service providers' terms and conditions are available in their websites and in the relevant application and/or platform where services may be hosted. The third party service providers are independent data controllers, and we recommend that you review their privacy notices to understand how they process your personal data. The third party service providers offer non-insurance services that are not intended to be a substitute for in-person medical consultations, diagnosis, treatment, assessment or care. You understand and agree that the insurer, its reinsurer and their administrators are not responsible or liable for any claim, loss or damage, directly or indirectly resulting from your use of any of these third party services.

Talk to us, we love to help!

If you have any queries, please do not hesitate to contact us:

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