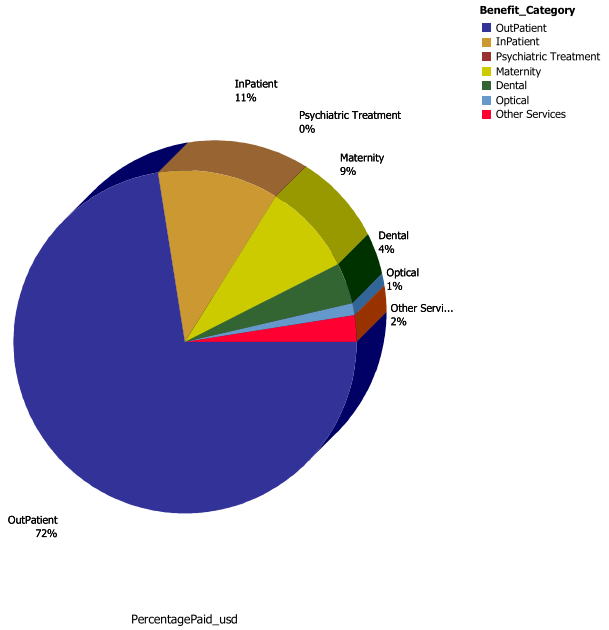
MetLife

CS Claims Analysis

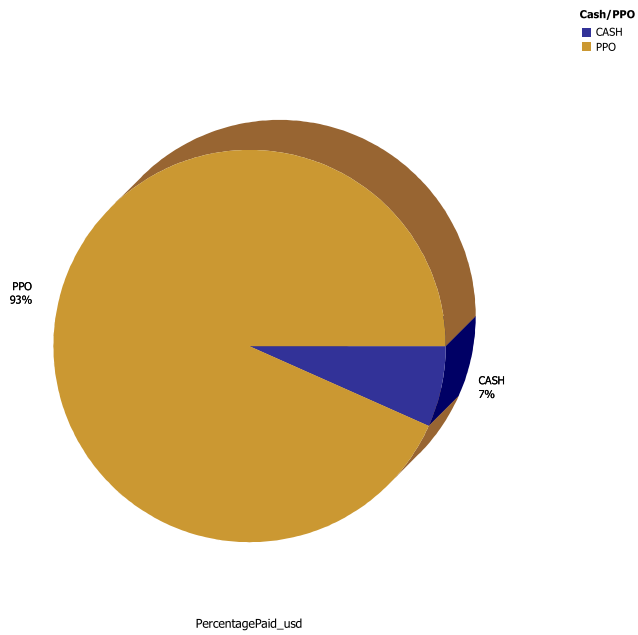
Policy number: 60304-

Incurred date from : 2020-04-01 to : 2021-08-31

Type of claims	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	Total	% of Total
6030400000	404,251	63,861	702	48,315	21,843	6,297	13,674	**558,943**	99%
6030420000	6,333	361			1,163			**7,856**	1%
6030430000	253						5	**257**	0%
Total	**410,836**	**64,222**	**702**	**48,315**	**23,006**	**6,297**	**13,679**	**567,057**	**100%**



Type of claims	CASH		PPO		Total
	Paid Amount	% of total	Paid Amount	% of total	
6030400000	38,189	7%	520,753	92%	**558,943**
6030420000			7,856	1%	**7,856**
6030430000			257	0%	**257**
Total	**38,189**	**7%**	**528,867**	**93%**	**567,057**



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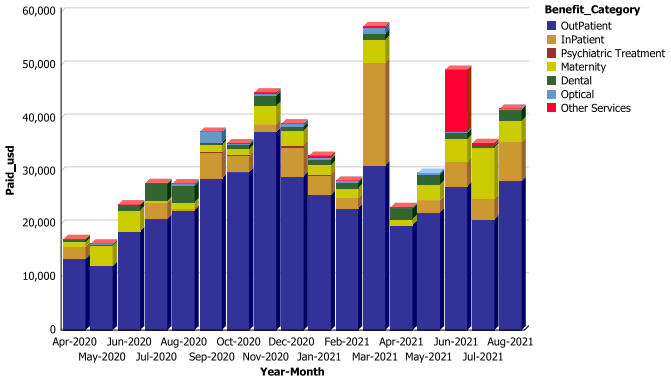
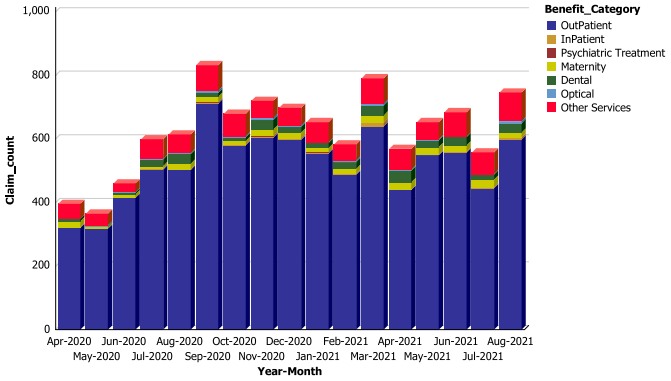
Policy number: 60304-

Incurred date from : 2020-04-01 to : 2021-08-31

Monthly claims (Paid Amount)	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	Total
Apr-2020	13,446	2,357		782	494		110	**17,189**
May-2020	12,112			3,867	207	58	90	**16,334**
Jun-2020	18,730			3,913	1,004	35	26	**23,708**
Jul-2020	20,980	3,042		348	3,267	39	89	**27,764**
Aug-2020	22,636	361		1,115	3,127	421	33	**27,692**
Sep-2020	28,624	4,957	47	1,297	509	1,971	50	**37,454**
Oct-2020	29,806	3,147	94	1,160	782	207	77	**35,273**
Nov-2020	37,431	1,432	94	3,369	1,883	487	181	**44,876**
Dec-2020	29,103	5,406	281	2,891	773	556	1	**39,011**
Jan-2021	25,514	3,724	187	1,720	1,054	265	465	**32,928**
Feb-2021	23,021	1,977		1,808	1,079	302	35	**28,223**
Mar-2021	31,117	19,427	1	4,262	1,224	1,069	277	**57,378**
Apr-2021	19,864			1,103	2,061	145	49	**23,221**
May-2021	22,240	2,316		2,921	1,866	337	1	**29,681**
Jun-2021	27,143	4,726		4,208	1,146	268	11,689	**49,179**
Jul-2021	20,938	3,944		9,586	381	29	453	**35,330**
Aug-2021	28,131	7,407		3,966	2,149	107	54	**41,815**
Total	**410,836**	**64,222**	**702**	**48,315**	**23,006**	**6,297**	**13,679**	**567,057**



Monthly claims (Claim count)	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services
Apr-2020	320	2		19	8		47
May-2020	318			5	2	3	37
Jun-2020	415			11	6	1	27
Jul-2020	504	2		9	21	1	62
Aug-2020	503	1		18	31	3	58
Sep-2020	712	3	1	17	12	7	80
Oct-2020	580	3	1	10	11	3	71
Nov-2020	604	5	1	20	30	6	54
Dec-2020	597	4	1	18	17	5	56
Jan-2021	555	3	1	13	16	2	63
Feb-2021	487	3		16	21	5	51
Mar-2021	639	12	1	22	31	6	80
Apr-2021	440	1		23	36	4	65
May-2021	549	2		24	21	3	54
Jun-2021	557	3		20	26	1	77
Jul-2021	445	2		25	16	1	69
Aug-2021	598	7		15	30	6	90
Total	**8,823**	**53**	**6**	**285**	**335**	**57**	**1,041**



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CS Claims Analysis

Policy number: 60304-

Incurred date from : 2020-04-01 to : 2021-08-31

Claims Range/USD	No.of claims	Count %	Paid Amount	% of Total
<= 100	9,011	90%	233,715	41%
101-250	741	7%	113,273	20%
251-500	187	2%	62,495	11%
501-1000	66	1%	43,900	8%
1001-2500	26	0%	44,339	8%
2501-5000	13	0%	38,214	7%
5001-10000	3	0%	19,434	3%
10001-50000	1	0%	11,688	2%
Total	**10,048**	**100%**	**567,057**	**100%**

Top 10 Diagnosis	No.of Claimant	Paid Amount	% of Total
HYPERTENSION	73	32,721	5.8%
DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED	49	30,726	5.4%
C/S DELIVERY ADMISSION (MEDICALLY NECESSARY) (MATERNITY)	8	23,658	4.2%
ABDOMINAL PAIN UNSPECIFIED SITE	101	15,543	2.7%
CHEST PAIN (UNSPECIFIC REASON)	47	15,305	2.7%
ABDOMINAL PAIN	6	14,543	2.6%
HYPERLIPIDEMIA/DISPLIPIDEMIA	46	12,127	2.1%
SUPERVISION OF OTHER NORMAL PREGNANCY	26	11,799	2.1%
UPPER RESPIRATORY INFECTION (URTI / URI)	141	11,714	2.1%
CONDUCTIVE HEARING LOSS BILATERAL	1	11,688	2.1%
Top 10		**179,823**	**31.7%**
Others		**387,233**	**68.3%**
Total		**567,057**	**100.0%**

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CS Claims Analysis

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
1	21,521	3.8%	ABDOMINAL PAIN
			ABDOMINAL PAIN OTHER SPECIFIED SITE
			ABDOMINAL PAIN RIGHT UPPER QUADRANT
			ABDOMINAL PAIN UNSPECIFIED SITE
			ATROPHIC GASTRITIS WITHOUT MENTION OF HEMORRHAGE
			CHEST PAIN (UNSPECIFIC REASON)
			COUGH
			DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED
			HELICOBACTER PYLORI INFECTION
			HYDRONEPHROSIS
			HYPERTENSION
			LOWER ABDOMINAL PAIN, UNSPECIFIED
			LUMBAGO / LOW BACK PAIN
			MALAISE / FATIGUE
			OTHER KYPHOSCOLIOSIS AND SCOLIOSIS
			OTHER POSTPROCEDURAL STATUS
			OTHER SPECIFIED AFTERCARE FOLLOWING SURGERY
			OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER
			RENAL COLIC
			RENAL UNSPECIFIC DISORDER
			URETER CALCULUS
			URINARY OBSTRUCTION NOT ELSEWHERE CLASSIFIED
2	13,739	2.4%	ABSCESS OF TENDON SHEATH, UNSPECIFIED LOWER LEG
			ACUTE GINGIVITIS NON-PLAQUE INDUCED
			ACUTE GINGIVITIS PLAQUE INDUCED
			BENIGN PAROXYSMAL POSITIONAL VERTIGO
			CELLULITIS AND ABSCESS OF OTHER SPECIFIED SITES
			CONDUCTIVE HEARING LOSS BILATERAL
			DENTAL CARIES UNSPECIFIED
			IMPACTED CERUMEN /EAR WAX
			LUMBAGO / LOW BACK PAIN
			MASTOIDITIS CHRONIC
			OTHER CHRONIC SEROUS OTITIS MEDIA
			OTHER SPECIFIED SITES OF SPRAINS AND STRAINS
			OTITIS MEDIA
			PAIN IN LIMBS / HAND PAIN / LEG PAIN
			UNSPECIFIED CHRONIC SUPPURATIVE OTITIS MEDIA
			UPPER RESPIRATORY INFECTION (URTI / URI)

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
2	13,739	2.4%	VERTIGO / DIZZINESS / GIDDINESS
3	11,342	2.0%	ACCIDENT BROKEN TEETH
			ANTENATAL CARE / PREGNANCY (MATERNITY)
			C/S DELIVERY ADMISSION (MEDICALLY NECESSARY) (MATERNITY)
			CARDIOMYOPATHY
			CHECKUPS - ADULT
			CHEST PAIN (UNSPECIFIC REASON)
			DENTAL
			DENTAL CARIES UNSPECIFIED
			ENCOUNTER FOR SCREENING FOR OTHER VIRAL DISEASES
			FEVER UNSPECIFIED
			HERNIA UMBILICAL
			INFECTION BY HISTOPLASMA CAPSULATUM PERICARDITIS
			MYOCARDITIS ACUTE
			MYOCARDITIS CHRONIC
			MYOPIA
			OTHER ABNORMAL GLUCOSE
			OTHER SPECIFIED DISORDERS OF THE TEETH AND SUPPORTING STRUCTURES
			PAIN IN JOINT MULTIPLE SITES
			PULPITIS
			ROUTINE GENERAL MEDICAL EXAMINATION AT A HEALTH CARE FACILITY
			SEBACEOUS CYST
			SHORTNESS OF BREATH (SOB) / DYSPNEA
			SUPERVISION OF OTHER NORMAL PREGNANCY
			URINARY TRACT INFECTION (UTI)
4	10,747	1.9%	ABDOMINAL PAIN OTHER SPECIFIED SITE
			ABDOMINAL PAIN UNSPECIFIED SITE
			ALLERGIC RHINITIS / RHINORRHEA / HAY FEVER
			ANEMIA UNSPECIFIED
			ANTENATAL CARE / PREGNANCY (MATERNITY)
			APHTHOUS ULCER
			ARTHROPATHY UNSPECIFIED SITE UNSPECIFIED
			CANDIDIASIS / YEAST INFECTION UNSPECIFIC SITE
			CATARRH / COLD / CORYZA / NASOPHARYNTIGIS /RHINOPHARINGITIS
			CHRONIC KIDNEY DISEASE UNSPECIFIED
			CONSTIPATION UNSPECIFIED
			COUGH
			DEAFNESS / HEARING LOSS
			DEEP NECROSIS OF UNDERLYING TISSUES [DEEP THIRD DEGREE] WITH LOSS OF A BODY PART UNSPECIFIED

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
4	10,747	1.9%	DENTAL CARIES UNSPECIFIED
			DERMATITIS (& CONTACT) / ECZEMA
			DISTURBANCES IN TOOTH ERUPTION
			FEVER UNSPECIFIED
			HEADACHE / HEAD PAIN
			HORDEOLUM INTERNUM
			KNEE LEG ANKLE AND FOOT INJURY
			LUMBAGO / LOW BACK PAIN
			MYOFASCITIS / MYALGIA
			OTHER HEMORRHAGIC DISORDER DUE TO INTRINSIC CIRCULATING ANTICOAGULANTS ANTIBODIES OR INHIBITORS
			OTHER SPECIFIED DISORDERS OF THE TEETH AND SUPPORTING STRUCTURES
			OVARIAN CYST
			PAIN IN JOINT MULTIPLE SITES
			POLYCYSTIC OVARIES (PCO)
			PRIMARY HYPERCOAGULABLE STATE
			RECURRENT PREGNANCY LOSS
			SEBACEOUS CYST
			SORE THROAT / PHARYNGITIS ACUTE
			SPASM OF MUSCLE
			SYSTEMATIC LUPUS ERYTHEMATOSUS (SLE)
			THROAT PAIN
			TONSILLITIS ACUTE
			UNSPECIFIED DISORDER OF JOINT SITE UNSPECIFIED
			UNSPECIFIED DISORDER OF MENSTRUATION/ OTHER ABNORMAL VAGINAL BLEEDING FROM FEMALE GENITAL TRACT
			UNSPECIFIED POLYARTHROPATHY OR POLYARTHRITIS SITE UNSPECIFIED
			UPPER RESPIRATORY INFECTION (URTI / URI)
			VARICOSE VEINS LEG
5	9,330	1.6%	ABDOMINAL PAIN
			ABDOMINAL PAIN GENERALIZED
			ABDOMINAL PAIN UNSPECIFIED SITE
			COUGH
			DERMATITIS (& CONTACT) / ECZEMA
			EPISTAXIS
			FEVER UNSPECIFIED
			GASTRITIS
			GENERALIZED ABDOMINAL PAIN
			MALAISE / FATIGUE
			NONSPECIFIC MESENTERIC LYMPHADENITIS

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
5	9,330	1.6%	OTHER ACUTE SINUSITIS
			OTHER SPECIFIED DISORDERS OF RECTUM AND ANUS
			SIALOADENITIS
			SPRAINS AND STRAINS ANKLE / ANKLE & FOOT SPRAIN OR INJURY
			UPPER RESPIRATORY INFECTION (URTI / URI)
			VERTIGO / DIZZINESS / GIDDINESS
			VERTIGO OF CENTRAL ORIGIN
6	8,863	1.6%	ABDOMINAL PAIN UNSPECIFIED SITE
			ANAL / RECTAL FISSURE
			ANAL ABSCESS
			ANEMIA UNSPECIFIED
			ANTENATAL CARE / PREGNANCY (MATERNITY)
			C/S DELIVERY ADMISSION (MEDICALLY NECESSARY) (MATERNITY)
			FEVER UNSPECIFIED
			HAEMORRHOIDS THROMBOSES - EXTERNAL (PILES)
			LUMBAGO / LOW BACK PAIN
			MALAISE / FATIGUE
			MYOFASCITIS / MYALGIA
			OTHER SPECIFIED DISORDERS OF RECTUM AND ANUS
			ROUTINE POSTPARTUM FOLLOW-UP
			SUPERVISION OF OTHER NORMAL PREGNANCY
			THIRD DEGREE HEMORRHOIDS
			TWIN PREGNANCY ANTEPARTUM CONDITION OR COMPLICATION
			TWIN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
			UNSPECIFIED HEMORRHOIDS WITH OTHER COMPLICATION
			UNSPECIFIED THROMBOSED HEMORRHOIDS
			UPPER RESPIRATORY INFECTION (URTI / URI)
7	8,327	1.5%	ABDOMINAL PAIN OTHER SPECIFIED SITE
			ABDOMINAL PAIN UNSPECIFIED SITE
			ADENOPATHY / ENLARGEMENT LYMPH NODES - GLANDS
			BENIGN NEOPLASM OF LEFT KIDNEY
			CATARRH / COLD / CORYZA / NASOPHARYNTIGIS /RHINOPHARINGITIS
			CYSTIC KIDNEY
			DISPLACEMENT OF LUMBAR INTERVERTEBRAL DISC WITHOUT MYELOPATHY/LUMBAR DISC PROLAPSE.
			ENTHESOPATHY OF WRIST AND CARPUS
			EXCESSIVE MENSTRUATION / MENORRHAGIA
			FEVER UNSPECIFIED
			GASTRITIS
			JOINT PAIN

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
7	8,327	1.5%	NECK MASS / CERVICAL LUMP / PALATE MASS / NOSE MASS
			NECK PAIN / CERVICALGIA
			OTHER POSTPROCEDURAL STATUS
			OTHER SPECIFIED AFTERCARE FOLLOWING SURGERY
			OVARIAN CYST
			PAIN IN JOINT ANKLE AND FOOT
			PAIN IN JOINT MULTIPLE SITES
			PAIN IN LIMBS / HAND PAIN / LEG PAIN
			PALPITATIONS
			PELVIC PAIN / LOWER ABDOMINAL PAIN
			PLANTAR FASCIA FIBROMATOSIS / PLANTAR FACITIS
			SCIATICA / SCIATIC PAIN
			SPONDYLOSIS LUMBOSACRAL
			SPRAINS AND STRAINS ANKLE / ANKLE & FOOT SPRAIN OR INJURY
			TIBIALIS TENDINITIS
			TINEA
			UNSPECIFIED AFTERCARE
			UNSPECIFIED INFLAMMATORY DISEASE OF CERVIX
8	8,146	1.4%	ABDOMINAL PAIN OTHER SPECIFIED SITE
			ABDOMINAL PAIN UNSPECIFIED SITE
			ACUTE GASTRIC ULCER WITHOUT HEMORRHAGE OR PERFORATION
			ACUTE GINGIVITIS PLAQUE INDUCED
			ALLERGIC GASTROENTERITIS AND COLITIS
			ANEMIA UNSPECIFIC
			ANEMIA UNSPECIFIED
			C/S DELIVERY ADMISSION (MEDICALLY NECESSARY) (MATERNITY)
			COUGH
			DUODENAL ULCER
			FEVER UNSPECIFIED
			GASTRITIS
			GASTROENTERITIS / ENTERITIS OR COLITIS
			HEADACHE / HEAD PAIN
			HEARTBURN
			HYPERTENSION
			INFECTIOUS COLITIS ENTERITIS AND GASTROENTERITIS
			LUMBAGO / LOW BACK PAIN
			OLIGOHYDRAMNIOS UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
			OTHER AND UNSPECIFIED DISC DISORDER CERVICAL REGION
			OVARIAN CYST

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
8	8,146	1.4%	PAIN IN JOINT MULTIPLE SITES
			SUPERVISION OF OTHER NORMAL PREGNANCY
			THORACIC OR LUMBOSACRAL NEURITIS OR RADICULITIS
			UNSPECIFIED DISORDER OF MENSTRUATION/ OTHER ABNORMAL VAGINAL BLEEDING FROM FEMALE GENITAL TRACT
			URIC ACID NEPHROLITHIASIS
			VAGINITIS / VULVO-VAGINITIS / VULVITIS
			VERTIGO / DIZZINESS / GIDDINESS
			VITAMIN D DEFICIENCY UNSPECIFIED / (RICKETS)
9	7,887	1.4%	BACK PAIN
			BRONCHITIS NOT SPECIFIED AS ACUTE OR CHRONIC
			CATARRH / COLD / CORYZA / NASOPHARYNTIGIS /RHINOPHARINGITIS
			CHEST PAIN (UNSPECIFIC REASON)
			COUGH
			COVID-19
			DISTURBANCE OF SKIN SENSATION
			FEVER UNSPECIFIED
			LUMBAGO / LOW BACK PAIN
			MALAISE / FATIGUE
			OTHER ACUTE PAIN
			OTHER ACUTE SINUSITIS
			OTHER INFLAMMATORY AND TOXIC NEUROPATHY
			PNEUMONIA / PNEUMONITIS
			SCIATICA / SCIATIC PAIN
			SHOULDER PAIN
			SORE THROAT / PHARYNGITIS ACUTE
			UNSPECIFIED INFLAMMATORY AND TOXIC NEUROPATHY
			UPPER RESPIRATORY INFECTION (URTI / URI)
10	7,855	1.4%	BREAST TUMOR - MALIGNANT -FEMALE
			ILLNESS OF UNKNOWN REASON / UNSPECIFIED CONDITIONS
			MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST
			TUMOR - MALIGNANT (UNSPECIFIED)
Top 10	**107,756**	**19.0%**	
Others	**459,300**	**81.0%**	
Total	**567,057**	**100.0%**	

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Top 10 Providers	Paid Amount	% of Total
Muscat Private Hospital	84,783	16.0%
Burjeel Hospital(Lifeline Hospital LLC)-oman	72,092	13.6%
STARCARE Hospital	53,407	10.1%
Al Raffah Hospital	52,226	9.9%
KIMS Oman Hospital	49,210	9.3%
Badr Al Samaa Polyclinic	29,455	5.6%
Starcare Medical CentreAl Mabela	21,271	4.0%
Badr Al Sama- Al KhouldBranch	17,758	3.4%
NMC Specialty Hospital - Al Ghoubra	14,744	2.8%
Al Raffah Polyclinic Ma'abela	10,599	2.0%
Top 10	**405,545**	**76.7%**

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6030400000

Top 10 Providers	Paid Amount	% of Total
Muscat Private Hospital	84,705	16.3%
Burjeel Hospital(Lifeline Hospital LLC)-oman	71,579	13.7%
STARCARE Hospital	53,407	10.3%
Al Raffah Hospital	51,074	9.8%
KIMS Oman Hospital	48,939	9.4%
Badr Al Samaa Polyclinic	29,455	5.7%
Starcare Medical CentreAl Mabela	21,271	4.1%
Badr Al Sama- Al KhouldBranch	17,501	3.4%
NMC Specialty Hospital - Al Ghoubra	14,744	2.8%
Al Raffah Polyclinic Ma'abela	10,599	2.0%
Top 10	**403,273**	**77.4%**
Others	**117,480**	**22.6%**
6030400000's Total	**520,753**	**100.0%**

6030420000

Top 10 Providers	Paid Amount	% of Total
Sagar Polyclinic	1,927	24.5%
Hatat House Pharmacy	1,170	14.9%
Al Raffah Hospital	1,151	14.7%
Starcare First Medical Centre	902	11.5%
Badr Al Samaa- Al Khuwair Branch	884	11.2%
Hatat Polyclinic	822	10.5%
Burjeel Hospital(Lifeline Hospital LLC)-oman	514	6.5%
KIMS Oman Hospital	271	3.5%
Scientific Pharmacy	137	1.7%
Muscat Private Hospital	78	1.0%
Top 10	**7,856**	**100.0%**
6030420000's Total	**7,856**	**100.0%**

6030430000

Top 10 Providers	Paid Amount	% of Total
Badr Al Sama- Al KhouldBranch	257	100.0%
Top 10	**257**	**100.0%**
6030430000's Total	**257**	**100.0%**

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Policy number: 60304-

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CASH Claims	Paid_usd	
	6030400000	**Total**
	OMAN	
ASIA	8,864	**8,864**
COUNTRY	29,180	**29,180**
GULF	145	**145**

CASH Claims	Claim Count	
	6030400000	**Total**
	OMAN	
ASIA	29	**29**
COUNTRY	153	**153**
GULF	1	**1**

PPO Claims	Paid_usd			
	6030400000	6030420000	6030430000	**Total**
	OMAN	OMAN	OMAN	
BLUE	25,842			**25,842**
GOLD	71,751	514		**72,264**
GREEN	236,843	5,541	257	**242,640**
SILVER	186,318	1,802		**188,120**

PPO Claims	Claim Count			
	6030400000	6030420000	6030430000	**Total**
	OMAN	OMAN	OMAN	
BLUE	720			**720**
GOLD	637	9		**646**
GREEN	5621	129	10	**5760**
SILVER	2700	39		**2739**

Note: This report does not include the outstanding claims amount (USD 2,955).
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**All Figures mentioned herein are in USD.

MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2020-04-01 to : 2021-08-31

	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	**TOTAL**	% of Total
Employees	196,971	22,002	701	8,204	12,241	3,220	13,029	**256,368**	45.2%
Spouse	144,401	36,878	1	40,111	5,389	2,335	638	**229,753**	40.5%
Child	69,464	5,342			5,375	742	12	**80,936**	14.3%
Total claims	**410,836**	**64,222**	**702**	**48,315**	**23,006**	**6,297**	**13,679**	**567,057**	**100.0%**

Age	Paid Amount			Claim count		
	Male	Female	**Total**	Female	Male	**Total**
Under 21	19,509	26,966	**46,475**	847	758	**1,605**
21-25	7,950	12,682	**20,631**	256	265	**521**
26-30	10,510	6,833	**17,343**	125	88	**213**
31-35	2,794	11,064	**13,858**	291	117	**408**
36-40	10,105	60,327	**70,432**	931	295	**1,226**
41-45	33,063	41,824	**74,887**	737	700	**1,437**
46-50	52,494	75,190	**127,684**	967	806	**1,773**
51-55	65,391	20,359	**85,751**	292	882	**1,174**
56-60	30,253	19,213	**49,466**	340	449	**789**
61-65	23,557	6,984	**30,541**	165	381	**546**
66-69	24,530	2,010	**26,540**	29	246	**275**
70 and above	490	2,960	**3,450**	70	11	**81**
Total	**280,646**	**286,410**	**567,057**	**5,050**	**4,998**	**10,048**

Note: PPO - Preferred Provider Organization, IP - In Patient, OP - Out Patient

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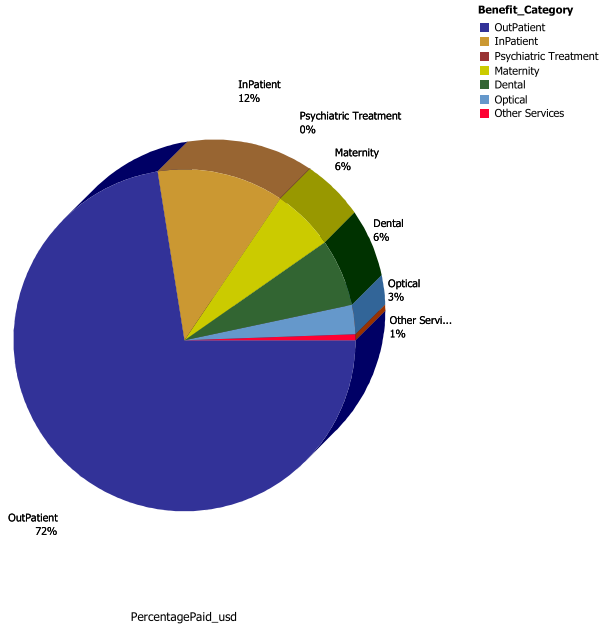
CS Claims Analysis

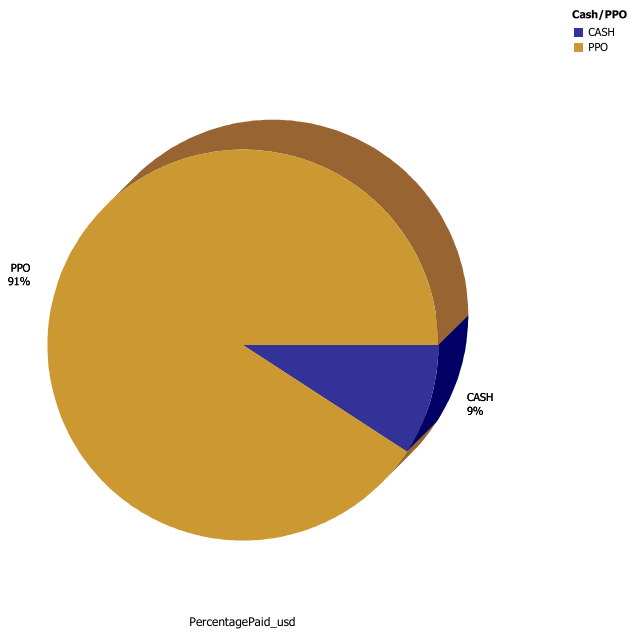
Policy number: 60304-

Incurred date from : 2021-09-01 to : 2022-08-31

Type of claims	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	Total	% of Total
6030400000	11,090	375			185		1	**11,651**	2%
6030420000	19							**19**	0%
6030440000	356,636	60,764	410	29,543	30,349	13,790	3,492	**494,984**	96%
6030450000	5,563	557			2,148	109	82	**8,458**	2%
Total	**373,308**	**61,696**	**410**	**29,543**	**32,682**	**13,899**	**3,575**	**515,113**	**100%**



Type of claims	CASH		PPO		Total
	Paid Amount	% of total	Paid Amount	% of total	
6030400000	1,004	0%	10,647	2%	**11,651**
6030420000			19	0%	**19**
6030440000	45,347	9%	449,637	87%	**494,984**
6030450000	240	0%	8,218	2%	**8,458**
Total	**46,591**	**9%**	**468,522**	**91%**	**515,113**



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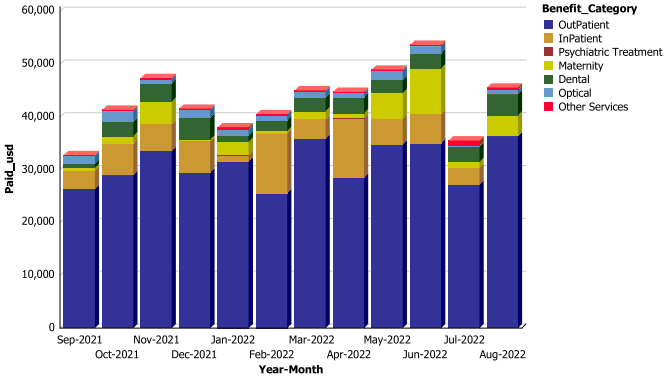
MetLife

CS Claims Analysis

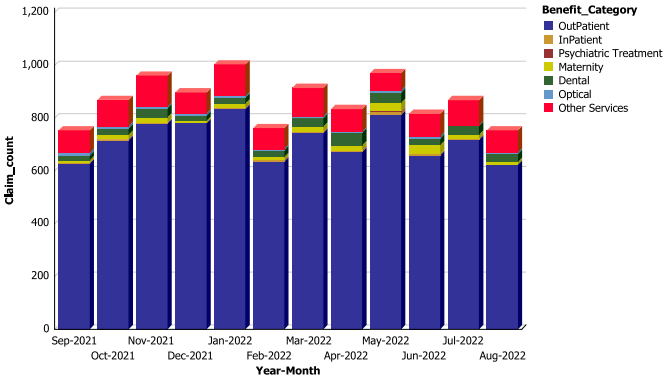
Policy number: 60304-

Incurred date from : 2021-09-01 to : 2022-08-31

Monthly claims (Paid Amount)	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	Total
Sep-2021	26,367	3,478		457	850	1,494	105	**32,751**
Oct-2021	28,972	6,011	94	1,273	2,746	1,994	253	**41,341**
Nov-2021	33,557	5,111		4,201	3,528	800	178	**47,374**
Dec-2021	29,486	5,933		245	4,196	1,551	158	**41,569**
Jan-2022	31,593	1,116	140	2,436	1,206	1,102	467	**38,061**
Feb-2022	25,547	11,380		404	2,064	942	196	**40,534**
Mar-2022	35,853	3,714	2	1,487	2,652	1,168	170	**45,045**
Apr-2022	28,491	11,175	164	845	3,056	792	216	**44,738**
May-2022	34,810	4,955	11	4,711	2,545	1,777	161	**48,970**
Jun-2022	35,059	5,611		8,524	2,872	1,319	270	**53,655**
Jul-2022	27,206	3,212		1,050	2,926	139	1,002	**35,535**
Aug-2022	36,367			3,909	4,041	821	400	**45,538**
Total	**373,308**	**61,696**	**410**	**29,543**	**32,682**	**13,899**	**3,575**	**515,113**



Monthly claims (Claim count)	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services
Sep-2021	628	3		9	18	10	85
Oct-2021	717	3	1	16	24	8	100
Nov-2021	780	4		19	35	4	119
Dec-2021	781	1		8	19	8	80
Jan-2022	835	3	1	16	23	5	120
Feb-2022	636	7		10	26	4	79
Mar-2022	744	4	1	19	32	5	109
Apr-2022	672	5	2	18	49	3	85
May-2022	812	14	1	31	39	8	65
Jun-2022	659	5		34	25	7	86
Jul-2022	718	5		14	35	1	95
Aug-2022	624			10	31	5	83
Total	**8,606**	**54**	**6**	**204**	**356**	**68**	**1,106**



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CS Claims Analysis

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Claims Range/USD	No.of claims	Count %	Paid Amount	% of Total
<= 100	8,891	91%	225,856	44%
101-250	632	6%	96,720	19%
251-500	171	2%	56,335	11%
501-1000	51	1%	36,205	7%
1001-2500	26	0%	38,422	7%
2501-5000	15	0%	48,931	9%
5001-10000	2	0%	12,644	2%
Total	**9,788**	**100%**	**515,113**	**100%**

Top 10 Diagnosis	No.of Claimant	Paid Amount	% of Total
HYPERTENSION	76	25,450	4.9%
DENTAL	75	20,447	4.0%
UPPER RESPIRATORY INFECTION (URTI / URI)	248	20,163	3.9%
DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED	48	18,885	3.7%
ABDOMINAL PAIN UNSPECIFIED SITE	103	18,216	3.5%
BREAST TUMOR - MALIGNANT -FEMALE	1	14,165	2.7%
ENCOUNTER FOR CESAREAN DELIVERY WITHOUT INDICATION (INSURED'S REQUEST) (MATERNITY)	5	13,474	2.6%
FEVER UNSPECIFIED	180	12,533	2.4%
OPTICAL	52	11,760	2.3%
HYPERLIPIDEMIA/DISPLIPIDEMIA	48	10,974	2.1%
Top 10		**166,066**	**32.2%**
Others		**349,047**	**67.8%**
Total		**515,113**	**100.0%**

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CS Claims Analysis

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
1	14,165	2.7%	BREAST TUMOR - MALIGNANT -FEMALE
2	9,831	1.9%	ABSCESS / CELLULITIS
			ANEMIA UNSPECIFIED
			ASTHMA UNSPECIFIED TYPE WITH (ACUTE) EXACERBATION
			ENCOUNTER FOR CHANGE OR REMOVAL OF NONSURGICAL WOUND DRESSING
			FEVER UNSPECIFIED
			HEADACHE / HEAD PAIN
			HYPERTENSION
			KNEE PAIN
			LUMBAGO / LOW BACK PAIN
			MASTITIS / BREAST ABSCESS-CELLULITIS
			OTHER DISEASE OF NASAL CAVITY AND SINUSES
			OTHER DISORDERS OF LACRIMAL SYSTEM
			OTHER SPECIFIED AFTERCARE
			OTHER SPECIFIED AFTERCARE FOLLOWING SURGERY
			SORE THROAT / PHARYNGITIS ACUTE
			SPONDYLOSIS LUMBOSACRAL
			UNSPECIFIED FOLLOW-UP EXAMINATION
			VARICES OF OTHER SITES
			VARICOSE VEINS LEG
			VARICOSE VEINS OF LOWER EXTREMITIES WITH OTHER COMPLICATIONS
3	9,387	1.8%	ABDOMINAL PAIN
			ABDOMINAL PAIN GENERALIZED
			ABDOMINAL PAIN OTHER SPECIFIED SITE
			ABDOMINAL PAIN RIGHT LOWER QUADRANT
			ABDOMINAL PAIN UNSPECIFIED SITE
			ACUTE APPENDICITIS WITHOUT MENTION OF PERITONITIS
			ACUTE GASTRITIS WITHOUT MENTION OF HEMORRHAGE
			ANEMIA UNSPECIFIED
			APPENDICITIS
			CHECKUPS - ADULT
			COUGH
			DIARRHAEA
			DYSFUNCTIONAL UTERINE BLEEDING (DUB)
			DYSURIA
			ENCOUNTER FOR CHANGE OR REMOVAL OF NONSURGICAL WOUND DRESSING
			ENCOUNTER FOR CHANGE OR REMOVAL OF SURGICAL WOUND DRESSING
			FEVER UNSPECIFIED
			GASTRITIS

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CS Claims Analysis

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Incurred date from : 2021-09-01 to : 2022-08-31

Top 10 Claimant	Paid Amount	% of Total	Major Conditions
3	9,387	1.8%	GASTROENTERITIS / ENTERITIS OR COLITIS
			HEADACHE / HEAD PAIN
			INTERVERTEBRAL DISC DISORDER WITH MYELOPATHY LUMBAR REGION
			OTHER AND UNSPECIFIED COMPLICATIONS OF MEDICAL CARE
			OTHER AND UNSPECIFIED DISC DISORDER CERVICAL REGION
			OTHER POSTOPERATIVE INFECTION
			OTHER POSTPROCEDURAL STATUS
			OTHER SPECIFIED AFTERCARE FOLLOWING SURGERY
			OVARIAN CYST
			PAIN IN LIMBS / HAND PAIN / LEG PAIN
			PELVIC INFLAMMATORY DISEASE / PELVIC CONGESTION
			PELVIC PAIN / LOWER ABDOMINAL PAIN
			SHOULDER / ARM SPRAIN
			THORACIC OR LUMBOSACRAL NEURITIS OR RADICULITIS
			UNSPECIFIED INFLAMMATORY DISEASE OF CERVIX
			UPPER RESPIRATORY INFECTION (URTI / URI)
			URTICARIA
4	8,576	1.7%	ABDOMINAL PAIN LEFT LOWER QUADRANT
			ABDOMINAL PAIN OTHER SPECIFIED SITE
			ABDOMINAL PAIN UNSPECIFIED SITE
			CATARRH / COLD / CORYZA / NASOPHARYNTIGIS /RHINOPHARINGITIS
			CHECKUPS - ADULT
			DERMATITIS (& CONTACT) / ECZEMA
			DERMATOPHYTOSIS OF THE BODY
			ENCOUNTER FOR CHANGE OR REMOVAL OF NONSURGICAL WOUND DRESSING
			EYE - FOREIGN BODY
			FEVER UNSPECIFIED
			HYPERPITUITARISM / HYPERPROLACTINEMIA
			HYPOTHYROIDISM - ACQUIRED
			KNEE LEG ANKLE AND FOOT INJURY
			KNEE PAIN
			MYOPIA
			NECK PAIN / CERVICALGIA
			OSTEOARTHROSIS LOCALIZED PRIMARY LOWER LEG
			OTHER SPECIFIED AFTERCARE
			OTHER SPECIFIED DISORDERS OF THE TEETH AND SUPPORTING STRUCTURES
			PAIN IN LIMBS / HAND PAIN / LEG PAIN
			PRESBYOPIA
			PULPITIS

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
4	8,576	1.7%	TEAR OF MEDIAL CARTILAGE OR MENISCUS OF KNEE
			TINEA PEDIS
			TRIGGER FINGER
			UNSPECIFIED DISORDER OF MENSTRUATION/ OTHER ABNORMAL VAGINAL BLEEDING FROM FEMALE GENITAL TRACT
			URETER CALCULUS
5	8,193	1.6%	ABDOMINAL PAIN RIGHT UPPER QUADRANT
			ABDOMINAL PAIN UNSPECIFIED SITE
			ANKLE DISLOCATION / SUBLUXATION - CLOSED
			COUGH
			DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED
			EYE DISORDER - UNSPECIFIC
			HELICOBACTER PYLORI INFECTION
			HYPERLIPIDEMIA/DISPLIPIDEMIA
			HYPERTENSION
			NECK PAIN / CERVICALGIA
			PAIN IN JOINT MULTIPLE SITES
			PALLOR
			POLYNEUROPATHY IN DIABETES
			RHEUMATOID ARTHRITIS
			SORE THROAT / PHARYNGITIS ACUTE
			THROAT PAIN
			UPPER ABDOMINAL PAIN, UNSPECIFIED
			UPPER RESPIRATORY INFECTION (URTI / URI)
			VAGINITIS AND VULVOVAGINITIS IN DISEASES CLASSIFIED ELSEWHERE
			VITAMIN D DEFICIENCY UNSPECIFIED / (RICKETS)
6	7,585	1.5%	ABDOMINAL PAIN UNSPECIFIED SITE
			ACUTE LARYNGITIS WITHOUT MENTION OF OBSTRUCTION
			FATTY LIVER
			GOITER - NON TOXIC
			HYPOTHYROIDISM - ACQUIRED
			MALIGNANT NEOPLASM OF THYROID GLAND
			NECK MASS / CERVICAL LUMP / PALATE MASS / NOSE MASS
			NECK PAIN / CERVICALGIA
			OTHER SPECIFIED PRE-OPERATIVE EXAMINATION
			THYROID - CYST
			THYROID TUMOR - MALIGNANT
			THYROIDITIS
			TONSILLITIS ACUTE

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CS Claims Analysis

Policy number: 60304-

Incurred date from : 2021-09-01 to : 2022-08-31

Top 10 Claimant	Paid Amount	% of Total	Major Conditions
7	7,543	1.5%	ABNORMAL CHEST SOUNDS
			ABSCESS / CELLULITIS
			BRONCHIOLITIS ACUTE
			CELLULITIS AND ABSCESS OF LEG EXCEPT FOOT
			CHECKUPS - ADULT
			CHECKUPS - CHILD / WELL BABY CARE
			COUGH
			DERMATITIS (& CONTACT) / ECZEMA
			DIARRHAEA
			INFECTIOUS COLITIS ENTERITIS AND GASTROENTERITIS
			OTHER DISORDERS OF EAR
			OTHER SPECIFIED AFTERCARE
			OTHER SPECIFIED PRE-OPERATIVE EXAMINATION
			OTHER VOMITING IN NEWBORN
			PAIN IN LIMBS / HAND PAIN / LEG PAIN
			PERSISTENT VOMITING
			PHIMOSIS
			ROUTINE CIRCUMCISION
			SHOULDER PAIN
			SWELLING SKIN
			THROMBOPHLEBITIS
			TRAUMATIC ARTHROPATHY ANKLE AND FOOT
			UNSPECIFIED LOCAL INFECTION OF SKIN AND SUBCUTANEOUS TISSUE
			UPPER RESPIRATORY INFECTION (URTI / URI)
			VITAMIN D DEFICIENCY UNSPECIFIED / (RICKETS)
			VOMITING
8	7,232	1.4%	ACUTE GINGIVITIS NON-PLAQUE INDUCED
			CARBUNCLE / FURUNCLE
			CHECKUPS - ADULT
			DENTAL
			HEADACHE / HEAD PAIN
			KNEE PAIN
			LATERAL MENISCUS TEAR/ DERANGEMENT (KNEE)
			OTHER AND UNSPECIFIED SUPERFICIAL INJURY OF FINGERS WITHOUT MENTION OF INFECTION
			OTHER DISEASES OF RESPIRATORY SYSTEM NOT ELSEWHERE CLASSIFIED
			SPRAIN OF CRUCIATE LIGAMENT OF KNEE
			UPPER RESPIRATORY INFECTION (URTI / URI)
9	6,532	1.3%	ABNORMAL CHEST SOUNDS
			ACUTE GASTRITIS WITHOUT MENTION OF HEMORRHAGE

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Top 10 Claimant	Paid Amount	% of Total	Major Conditions
9	6,532	1.3%	BRONCHIOLITIS ACUTE
			CHECKUPS - CHILD / WELL BABY CARE
			COLIC
			COUGH
			DIARRHAEA
			DISORDER OF THYROID, UNSPECIFIED
			IMPACTED CERUMEN /EAR WAX
			INFECTIOUS COLITIS ENTERITIS AND GASTROENTERITIS
			INGUINAL HERNIA WITHOUT MENTION OF OBSTRUCTION OR GANGRENE BILATERAL (NOT SPECIFIED AS RECURRENT)
			PALLOR
			THYROID UNSPECIFIC DISEASE / DISORDER
			UNSPECIFIED BREAST DISORDER
			UNSPECIFIED DEFICIENCY ANEMIA
			UPPER RESPIRATORY INFECTION (URTI / URI)
			VOMITING
10	6,066	1.2%	BACK PAIN
			CENTRAL RETINAL VEIN OCCLUSION
			CHECKUPS - ADULT
			CYSTOID MACULAR DEGENERATION
			DIABETIC MACULAR EDEMA
			EYE DISORDER - UNSPECIFIC
			HYPERTENSION
			ISSUE OF REPEAT PRESCRIPTIONS
			LUMBAGO / LOW BACK PAIN
			MYOFASCITIS / MYALGIA
			OTHER VISUAL DISTORTIONS AND ENTOPTIC PHENOMENA
			PAIN IN JOINT MULTIPLE SITES
			SORE THROAT / PHARYNGITIS ACUTE
			UPPER RESPIRATORY INFECTION (URTI / URI)
Top 10	**85,110**	**16.5%**	
Others	**430,002**	**83.5%**	
Total	**515,113**	**100.0%**	

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CS Claims Analysis

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Incurred date from : 2021-09-01 to : 2022-08-31

Top 10 Providers	Paid Amount	% of Total
Muscat Private Hospital	103,034	22.0%
KIMS Oman Hospital	47,894	10.2%
STARCARE Hospital	37,635	8.0%
Burjeel Hospital(Lifeline Hospital LLC)-oman	34,913	7.5%
Al Raffah Hospital	26,050	5.6%
Badr Al Samaa Polyclinic	23,255	5.0%
OMAN INTERNATIONAL HOSPITAL	18,419	3.9%
Starcare Medical CentreAl Mabela	14,753	3.1%
Badr Al Sama- Al KhouldBranch	12,589	2.7%
Al Raffah Polyclinic Ma'abela	11,821	2.5%
Top 10	**330,363**	**70.5%**

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6030400000

Top 10 Providers	Paid Amount	% of Total
Muscat Private Hospital	1,868	17.5%
Finland Eye Center LLC-Qurum Branch	1,730	16.2%
Badr Al Samaa Polyclinic	996	9.4%
STARCARE Hospital	604	5.7%
KIMS Oman Hospital	530	5.0%
Badr Al Samaa- Al Khuwair Branch	530	5.0%
Burjeel Hospital(Lifeline Hospital LLC)-oman	383	3.6%
Burjeel Medical Center -Muscat	355	3.3%
Al Raffah Polyclinic Ma'abela	318	3.0%
NMC Specialty Hospital-Al Hail	309	2.9%
Top 10	**7,624**	**71.6%**
Others	**3,023**	**28.4%**
6030400000's Total	**10,647**	**100.0%**

6030420000

Top 10 Providers	Paid Amount	% of Total
Al Raffah Hospital	19	100.0%
Top 10	**19**	**100.0%**
6030420000's Total	**19**	**100.0%**

6030440000

Top 10 Providers	Paid Amount	% of Total
Muscat Private Hospital	101,088	22.5%
KIMS Oman Hospital	46,278	10.3%
STARCARE Hospital	37,032	8.2%
Burjeel Hospital(Lifeline Hospital LLC)-oman	34,461	7.7%
Al Raffah Hospital	24,841	5.5%
Badr Al Samaa Polyclinic	22,259	5.0%
OMAN INTERNATIONAL HOSPITAL	18,419	4.1%
Starcare Medical CentreAl Mabela	14,479	3.2%
Badr Al Sama- Al KhouldBranch	12,295	2.7%
Al Raffah Polyclinic Ma'abela	11,503	2.6%
Top 10	**322,654**	**71.8%**
Others	**126,983**	**28.2%**
6030440000's Total	**449,637**	**100.0%**

6030450000

Top 10 Providers	Paid Amount	% of Total
Sagar Polyclinic	2,163	26.3%

Note: This report does not include the outstanding claims amount (USD 14,773).
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**All Figures mentioned herein are in USD.

6030450000

Top 10 Providers	Paid Amount	% of Total
Badr Al Samaa- Al Khuwair Branch	1,793	21.8%
KIMS Oman Hospital	1,085	13.2%
Al Raffah Hospital	940	11.4%
Hatat House Pharmacy	731	8.9%
Starcare First Medical Centre	661	8.0%
Hatat Polyclinic	288	3.5%
Badr Al Sama- Al KhouldBranch	243	3.0%
Scientific Pharmacy	133	1.6%
Muscat Private Hospital	78	0.9%
Top 10	**8,116**	**98.8%**
Others	**102**	**1.2%**
6030450000's Total	**8,218**	**100.0%**

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MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2021-09-01 to : 2022-08-31

CASH Claims	Paid_usd			
	6030400000	6030440000	6030450000	**Total**
	OMAN	OMAN	OMAN	
ASIA	905	17,710	109	**18,725**
COUNTRY	98	25,298	131	**25,527**
EUROPE		345		**345**
GULF		781		**781**
MIDEAST		1,212		**1,212**

CASH Claims	Claim Count			
	6030400000	6030440000	6030450000	**Total**
	OMAN	OMAN	OMAN	
ASIA	1	55	1	**57**
COUNTRY	2	192	2	**196**
EUROPE		1		**1**
GULF		2		**2**
MIDEAST		7		**7**

PPO Claims	Paid_usd				
	6030400000	6030420000	6030440000	6030450000	**Total**
	OMAN	OMAN	OMAN	OMAN	
BLUE	401		24,272		**24,673**
GOLD	383		54,127	69	**54,579**
GREEN	4,683	19	194,040	7,122	**205,864**
SILVER	5,181		177,198	1,027	**183,406**

PPO Claims	Claim Count				
	6030400000	6030420000	6030440000	6030450000	**Total**
	OMAN	OMAN	OMAN	OMAN	
BLUE	16		637		**653**
GOLD	8		680	2	**690**
GREEN	175	1	5349	186	**5711**
SILVER	89		2356	26	**2471**

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MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2021-09-01 to : 2022-08-31

	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	**TOTAL**	% of Total
Employees	160,424	19,527	410	5,416	15,596	6,150	1,967	**209,490**	40.7%
Spouse	130,928	21,931		24,127	8,339	3,610	814	**189,748**	36.8%
Child	81,957	20,238			8,747	4,138	794	**115,874**	22.5%
Total claims	**373,308**	**61,696**	**410**	**29,543**	**32,682**	**13,899**	**3,575**	**515,113**	**100.0%**

Age	Paid Amount			Claim count		
	Male	Female	**Total**	Female	Male	**Total**
Under 21	47,505	43,034	**90,539**	1,340	1,312	**2,652**
21-25	10,680	9,944	**20,624**	250	206	**456**
26-30	2,347	3,862	**6,209**	84	84	**168**
31-35	2,745	23,261	**26,006**	387	112	**499**
36-40	14,234	42,660	**56,895**	729	305	**1,034**
41-45	45,771	45,077	**90,847**	730	697	**1,427**
46-50	32,043	58,990	**91,034**	771	660	**1,431**
51-55	44,624	25,250	**69,874**	296	739	**1,035**
56-60	23,247	10,254	**33,502**	215	425	**640**
61-65	15,801	5,857	**21,658**	64	276	**340**
66-69	7,409	518	**7,926**	17	89	**106**
Total	**246,407**	**268,706**	**515,113**	**4,883**	**4,905**	**9,788**

Note: PPO - Preferred Provider Organization, IP - In Patient, OP - Out Patient

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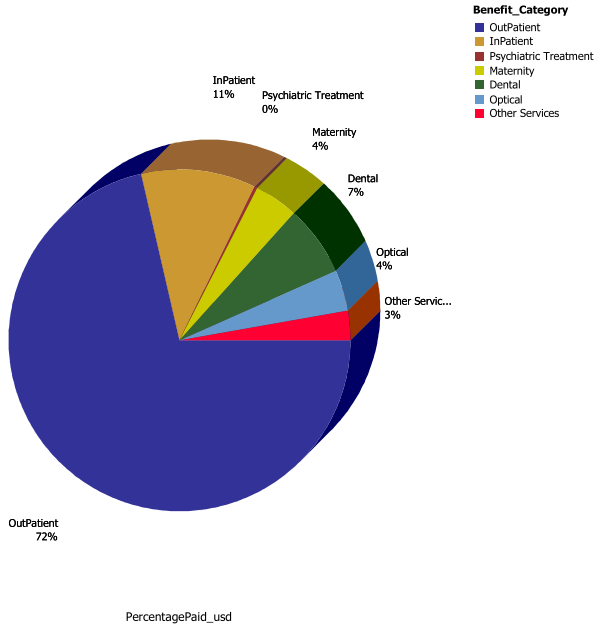
MetLife

CS Claims Analysis

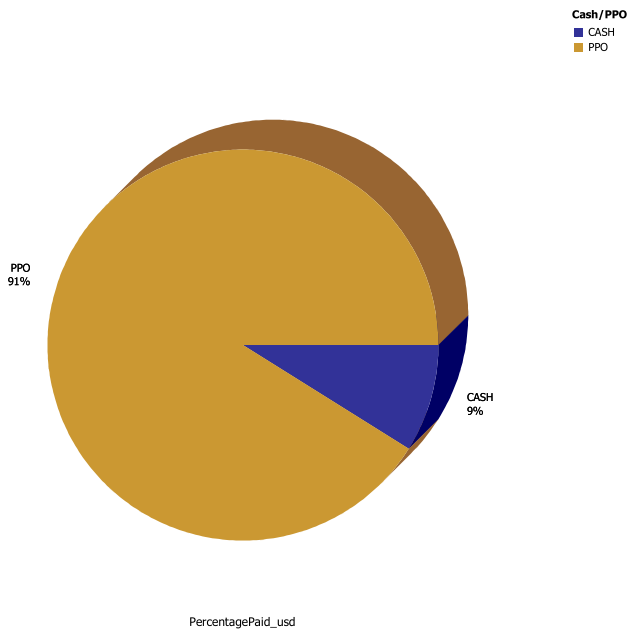
Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

Type of claims	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	Total	% of Total
6030440000	376,624	54,925	1,108	22,740	35,691	20,936	13,608	**525,632**	98%
6030450000	6,744	2,081			881	47	613	**10,367**	2%
Total	**383,368**	**57,006**	**1,108**	**22,740**	**36,572**	**20,984**	**14,221**	**535,999**	**100%**



Type of claims	CASH		PPO		Total
	Paid Amount	% of total	Paid Amount	% of total	
6030440000	47,782	9%	477,850	89%	**525,632**
6030450000	134	0%	10,233	2%	**10,367**
Total	**47,916**	**9%**	**488,083**	**91%**	**535,999**

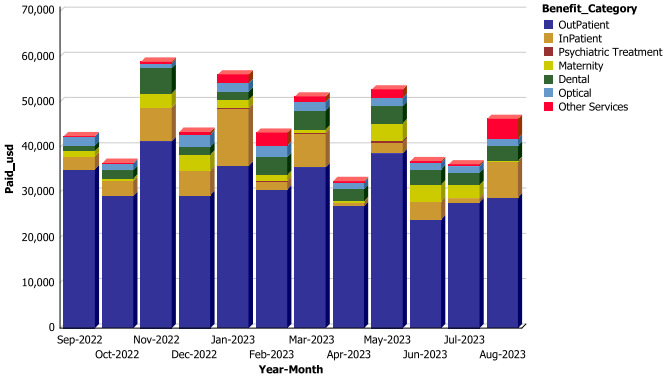


Note: This report does not include the outstanding claims amount (USD 8,460).

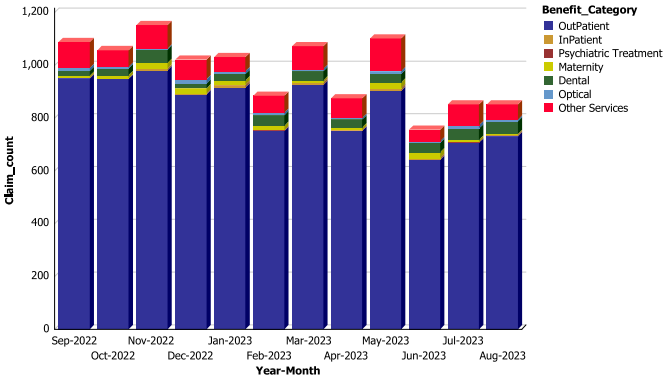
*Please note that this report does not include trend, claims under processing, suspended claims or any other expenses.

**All Figures mentioned herein are in USD.

Monthly claims (Paid Amount)	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	Total
Sep-2022	35,118	2,826		1,219	1,203	2,041	12	**42,419**
Oct-2022	29,208	3,305		557	1,863	1,421	149	**36,503**
Nov-2022	41,303	7,451		3,092	5,616	993	382	**58,837**
Dec-2022	29,397	5,304	115	3,519	1,793	2,669	553	**43,350**
Jan-2023	35,862	12,678	107	1,831	1,793	1,870	1,896	**56,037**
Feb-2023	30,630	1,806	125	1,270	3,990	2,446	2,925	**43,191**
Mar-2023	35,553	7,466	227	632	4,288	1,789	1,212	**51,168**
Apr-2023	27,000	816	3	239	2,706	1,526	177	**32,467**
May-2023	38,624	2,359	460	3,815	3,824	1,784	1,873	**52,739**
Jun-2023	23,996	4,052	1	3,693	3,340	1,492	297	**36,872**
Jul-2023	27,823	904	70	2,831	2,736	1,422	388	**36,174**
Aug-2023	28,854	8,039		42	3,421	1,532	4,355	**46,243**
Total	**383,368**	**57,006**	**1,108**	**22,740**	**36,572**	**20,984**	**14,221**	**535,999**



Monthly claims (Claim count)	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services
Sep-2022	950	3		8	18	11	98
Oct-2022	949	2		12	25	6	63
Nov-2022	981	7		21	50	4	89
Dec-2022	890	3	1	19	17	17	74
Jan-2023	916	9	2	16	24	11	53
Feb-2023	751	2	1	17	40	9	64
Mar-2023	926	9	1	7	35	8	86
Apr-2023	752	2	1	10	30	6	74
May-2023	903	7	3	22	32	10	124
Jun-2023	642	6	1	22	35	6	44
Jul-2023	707	1	1	9	43	12	79
Aug-2023	731	6		3	47	7	58
Total	**10,098**	**57**	**11**	**166**	**396**	**107**	**906**



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MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

Claims Range/USD	No.of claims	Count %	Paid Amount	% of Total
<= 100	10,309	92%	254,527	47%
101-250	653	6%	99,217	19%
251-500	197	2%	64,491	12%
501-1000	40	0%	30,143	6%
1001-2500	35	0%	54,486	10%
2501-5000	10	0%	33,134	6%
Total	**11,244**	**100%**	**535,999**	**100%**

Top 10 Diagnosis	No.of Claimant	Paid Amount	% of Total
UPPER RESPIRATORY INFECTION (URTI / URI)	308	25,533	4.8%
HYPERTENSION	69	24,872	4.6%
FEVER UNSPECIFIED	211	19,305	3.6%
OPTICAL	83	19,228	3.6%
DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED	57	18,822	3.5%
HYPERLIPIDEMIA/DISPLIPIDEMIA	48	16,334	3.0%
COUGH	148	13,620	2.5%
DENTAL	71	12,387	2.3%
ABDOMINAL PAIN UNSPECIFIED SITE	81	11,824	2.2%
DENTAL CARIES UNSPECIFIED	65	11,434	2.1%
Top 10		**173,359**	**32.3%**
Others		**362,640**	**67.7%**
Total		**535,999**	**100.0%**

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MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

Top 10 Claimant	Paid Amount	% of Total	Major Conditions
1	9,775	1.8%	BREAST TUMOR - MALIGNANT -FEMALE
			CARCINOMA IN SITU OF BREAST
			MALIGNANT NEOPLASM OF LOWER-INNER QUADRANT OF FEMALE BREAST
			MALIGNANT NEOPLASM OF NIPPLE AND AREOLA OF FEMALE BREAST
			UTERINE LEIOMYOMA / FIBROID UTERUS
2	7,963	1.5%	ABDOMINAL PAIN RIGHT UPPER QUADRANT
			ABDOMINAL PAIN UNSPECIFIED SITE
			ANEMIAS DUE TO DISORDERS OF GLUTATHIONE METABOLISM
			CATARRH / COLD / CORYZA / NASOPHARYNTIGIS /RHINOPHARINGITIS
			CHECKUPS - ADULT
			DYSMENORRHEA
			ENCOUNTER FOR CHANGE OR REMOVAL OF SURGICAL WOUND DRESSING
			FATTY LIVER
			FEVER UNSPECIFIED
			IRREGULAR MENSTRUATION
			OVARIAN CYST
			UNSPECIFIED DISORDER OF MENSTRUATION/ OTHER ABNORMAL VAGINAL BLEEDING FROM FEMALE GENITAL TRACT
			UPPER RESPIRATORY INFECTION (URTI / URI)
3	7,282	1.4%	ACUTE ATOPIC CONJUNCTIVITIS
			ALLERGIC RHINITIS / RHINORRHEA / HAY FEVER
			CENTRAL RETINAL VEIN OCCLUSION
			CHECKUPS - ADULT
			CONSTIPATION UNSPECIFIED
			DIABETES WITH OPHTHALMIC MANIFESTATIONS TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED
			DIABETIC MACULAR EDEMA
			DISORDER OF EYE UNSPECIFIED
			HORDEOLUM INTERNUM
			HYPERTENSION
			ISSUE OF REPEAT PRESCRIPTIONS
			LUMBAGO / LOW BACK PAIN
			NECK PAIN / CERVICALGIA
			OTHER AND UNSPECIFIED DISC DISORDER CERVICAL REGION
			OTHER CHANGES OF LACRIMAL PASSAGES
			OTHER DISORDERS OF LACRIMAL SYSTEM
			OTHER SPECIFIED DISORDERS OF EYE AND ADNEXA
			RETINAL EDEMA
			UPPER RESPIRATORY INFECTION (URTI / URI)
4	6,113	1.1%	ABDOMINAL PAIN RIGHT LOWER QUADRANT

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MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

Top 10 Claimant	Paid Amount	% of Total	Major Conditions
4	6,113	1.1%	ABDOMINAL PAIN UNSPECIFIED SITE
			ACUTE GASTRITIS WITHOUT MENTION OF HEMORRHAGE
			DENTAL
			DENTAL CARIES UNSPECIFIED
			DYSMENORRHEA
			HEADACHE / HEAD PAIN
			KIDNEY CALCULUS
			PAIN IN JOINT UPPER ARM
			PITYRIASIS / TINEA VERSICOLOR
			PULPITIS
			RENAL COLIC
			SWELLING SKIN
			UPPER RESPIRATORY INFECTION (URTI / URI)
			URIC ACID NEPHROLITHIASIS
			URINARY TRACT INFECTION (UTI)
5	5,766	1.1%	AORTIC VALVE DISEASE / STENOSIS / STRICTURE
			CHECKUPS - ADULT
			CHEST PAIN (UNSPECIFIC REASON)
			GOUT / HYPERURICEMIA
			HYPERLIPIDEMIA/DISPLIPIDEMIA
			HYPERTENSION
			OTHER ABNORMAL BLOOD CHEMISTRY
			OTHER SPECIFIED DISORDERS OF MALE GENITAL ORGANS
			PAIN IN LIMBS / HAND PAIN / LEG PAIN
			PROSTATITIS CHRONIC
			UNSPECIFIED FOLLOW-UP EXAMINATION
			VARICES OF OTHER SITES
6	5,758	1.1%	ABSCESS / CELLULITIS
			CATARRH / COLD / CORYZA / NASOPHARYNTIGIS /RHINOPHARINGITIS
			CELLULITIS AND ABSCESS OF LEG EXCEPT FOOT
			CONSTIPATION UNSPECIFIED
			DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED
			DIABETES WITH NEUROLOGICAL MANIFESTATIONS TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED
			DIABETES WITH OTHER SPECIFIED MANIFESTATIONS TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED
			ENCOUNTER FOR CHANGE OR REMOVAL OF NONSURGICAL WOUND DRESSING
			KNEE LEG ANKLE AND FOOT INJURY
			OPEN WOUND OF TOE(S)

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CS Claims Analysis

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Incurred date from : 2022-09-01 to : 2023-08-31

Top 10 Claimant	Paid Amount	% of Total	Major Conditions
6	5,758	1.1%	OPTICAL
			OTHER ACUTE PAIN
			PAIN IN JOINT ANKLE AND FOOT
			PAIN IN JOINT MULTIPLE SITES
			PAIN IN LIMBS / HAND PAIN / LEG PAIN
			POLYNEUROPATHY IN DIABETES
			SWELLING SKIN
			UNSPECIFIED LOCAL INFECTION OF SKIN AND SUBCUTANEOUS TISSUE
			UPPER RESPIRATORY INFECTION (URTI / URI)
			WOUND
7	5,542	1.0%	ABDOMINAL PAIN OTHER SPECIFIED SITE
			CHRONIC GINGIVITIS NON-PLAQUE INDUCED
			DENTAL
			DENTAL CARIES UNSPECIFIED
			DERMATITIS (& CONTACT) / ECZEMA
			GASTRITIS
			GLAUCOMA
			HELICOBACTER PYLORI INFECTION
			HYPERTENSION
			IRRITABLE COLON / IRRITABLE BOWEL SYNDROME (IBS)
			KNEE PAIN
			LUMBAGO / LOW BACK PAIN
			MALAISE / FATIGUE
			MYOFASCITIS / MYALGIA
			OSTEOARTHROSIS LOCALIZED PRIMARY LOWER LEG
			OTHER ACUTE PAIN
			OTHER ACUTE SINUSITIS
			OTHER SPECIFIED DISEASES OF NAIL
			OTHER SPECIFIED PERIODONTAL DISEASES
			OTHER SPECIFIED PRURITIC CONDITIONS
			RENAL UNSPECIFIC DISORDER
			SEBORRHOEA
			SKIN RASH / SKIN ERUPTION
			SUPERFICIAL KERATITIS UNSPECIFIED
			TENOSYNOVITIS OF FOOT AND ANKLE
			UNSPECIFIED ERYTHEMATOUS CONDITION
			UNSPECIFIED RENAL COLIC
			UPPER RESPIRATORY INFECTION (URTI / URI)
			URIC ACID NEPHROLITHIASIS

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CS Claims Analysis

Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

Top 10 Claimant	Paid Amount	% of Total	Major Conditions
7	5,542	1.0%	URINARY SYSTEM GENERAL SYMPTOMS
			URINARY TRACT INFECTION (UTI)
			VERTIGO / DIZZINESS / GIDDINESS
			VITAMIN D DEFICIENCY UNSPECIFIED / (RICKETS)
8	5,519	1.0%	ABDOMINAL OR PELVIC SWELLING MASS OR LUMP UNSPECIFIED SITE
			BRONCHITIS ACUTE
			CATARRH / COLD / CORYZA / NASOPHARYNTIGIS /RHINOPHARINGITIS
			CHECKUPS - ADULT
			CONSTIPATION UNSPECIFIED
			COUGH
			DIABETES MELLITUS WITHOUT MENTION OF COMPLICATION TYPE II OR UNSPECIFIED TYPE NOT STATED AS UNCONTROLLED
			ENCOUNTER FOR CHANGE OR REMOVAL OF NONSURGICAL WOUND DRESSING
			HYPERLIPIDEMIA/DISPLIPIDEMIA
			HYPERTENSION
			KIDNEY CALCULUS
			NASAL OBSTRUCTION
			NECK PAIN / CERVICALGIA
			OTHER ACUTE SINUSITIS
			RENAL CALCULUS UNSPECIFIC
			SEBACEOUS CYST
			UNSPECIFIED AFTERCARE
			UNSPECIFIED CALCULUS LOWER URINARY TRACT
			UNSPECIFIED FOLLOW-UP EXAMINATION
			UPPER RESPIRATORY INFECTION (URTI / URI)
			URETER CALCULUS
			URIC ACID NEPHROLITHIASIS
9	5,139	1.0%	CARPAL TUNNEL SYNDROME (CTS)
			CHRONIC MIGRAINE WITHOUT AURA WITH INTRACTABLE MIGRAINE SO STATED WITH STATUS MIGRAINOSUS
			DE QUERVAIN'S DISEASE
			DENTAL
			DENTAL CARIES UNSPECIFIED
			GASTRITIS
			HEADACHE / HEAD PAIN
			HYPERPITUITARISM / HYPERPROLACTINEMIA
			KNEE PAIN
			ONYCHIA / PARONYCHIA - UNSPECIFIED
			OPTICAL
			ORTHOPEDIC UNSPECIFIC DISORDER

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MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

Top 10 Claimant	Paid Amount	% of Total	Major Conditions
9	5,139	1.0%	OTHER SPECIFIED AFTERCARE FOLLOWING SURGERY
			OTHER SPECIFIED PRE-OPERATIVE EXAMINATION
			PAIN IN JOINT FOREARM
			PLANTAR FASCIA FIBROMATOSIS / PLANTAR FACITIS
			TONSILLITIS ACUTE
			UNSPECIFIED DEFICIENCY ANEMIA
10	5,009	0.9%	ACUTE GASTRITIS WITHOUT MENTION OF HEMORRHAGE
			AMENORRHEA
			C/S DELIVERY ADMISSION (MEDICALLY NECESSARY) (MATERNITY)
			CHECKUPS - ADULT
			CHRONIC GINGIVITIS PLAQUE INDUCED
			COUGH
			ENCOUNTER FOR CESAREAN DELIVERY WITHOUT INDICATION (INSURED'S REQUEST) (MATERNITY)
			FEVER UNSPECIFIED
			IRRITABLE COLON / IRRITABLE BOWEL SYNDROME (IBS)
			KNEE PAIN
			LUMBAGO / LOW BACK PAIN
			NECK PAIN / CERVICALGIA
			OTHER ACUTE SINUSITIS
			PAIN IN OR AROUND EYE
			ROUTINE POSTPARTUM FOLLOW-UP
			SPONDYLOSIS CERVICAL
			SUPERVISION OF OTHER NORMAL PREGNANCY
			SUPERVISION OF UNSPECIFIED HIGH-RISK PREGNANCY
			UPPER RESPIRATORY INFECTION (URTI / URI)
			VERTIGO / DIZZINESS / GIDDINESS
Top 10	**63,865**	**11.9%**	
Others	**472,133**	**88.1%**	
Total	**535,999**	**100.0%**	

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MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

Top 10 Providers	Paid Amount	% of Total
Muscat Private Hospital	71,647	14.7%
OMAN INTERNATIONAL HOSPITAL	49,491	10.1%
KIMS Oman Hospital	49,306	10.1%
Burjeel Hospital(Lifeline Hospital LLC)-oman	36,816	7.5%
Al Raffah Hospital	32,273	6.6%
STARCARE Hospital	23,330	4.8%
Starcare Medical CentreAl Mabela	21,383	4.4%
NMC Specialty Hospital - Al Ghoubra	19,316	4.0%
Al Raffah Polyclinic Ma'abela	17,469	3.6%
Badr Al Samaa Polyclinic	13,729	2.8%
Top 10	**334,759**	**68.6%**

Note: This report does not include the outstanding claims amount (USD 8,460).
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**All Figures mentioned herein are in USD.

6030440000

Top 10 Providers	Paid Amount	% of Total
Muscat Private Hospital	71,585	15.0%
OMAN INTERNATIONAL HOSPITAL	49,491	10.4%
KIMS Oman Hospital	49,004	10.3%
Burjeel Hospital(Lifeline Hospital LLC)-oman	36,031	7.5%
Al Raffah Hospital	30,100	6.3%
STARCARE Hospital	23,330	4.9%
Starcare Medical CentreAl Mabela	21,383	4.5%
NMC Specialty Hospital - Al Ghoubra	19,316	4.0%
Al Raffah Polyclinic Ma'abela	17,469	3.7%
Badr Al Samaa Polyclinic	13,729	2.9%
Top 10	**331,437**	**69.4%**
Others	**146,414**	**30.6%**
6030440000's Total	**477,850**	**100.0%**

6030450000

Top 10 Providers	Paid Amount	% of Total
Badr Al Samaa- Al Khuwair Branch	3,426	33.5%
Al Raffah Hospital	2,173	21.2%
Scientific Pharmacy	817	8.0%
Burjeel Hospital(Lifeline Hospital LLC)-oman	784	7.7%
Hatat House Pharmacy	739	7.2%
Sagar Polyclinic	614	6.0%
Starcare First Medical Centre	507	5.0%
Hatat Polyclinic	418	4.1%
SRI SRI TATTVA PANCHAKARMA	329	3.2%
KIMS Oman Hospital	302	2.9%
Top 10	**10,108**	**98.8%**
Others	**125**	**1.2%**
6030450000's Total	**10,233**	**100.0%**

Note: This report does not include the outstanding claims amount (USD 8,460).
*Please note that this report does not include trend, claims under processing, suspended claims or any other expenses.
**All Figures mentioned herein are in USD.

MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

CASH Claims	Paid_usd		
	6030440000	6030450000	**Total**
	OMAN	OMAN	
ASIA	14,705	47	**14,753**
COUNTRY	30,963	87	**31,050**
GULF	1,504		**1,504**
	610		**610**

CASH Claims	Claim Count		
	6030440000	6030450000	**Total**
	OMAN	OMAN	
ASIA	62	1	**63**
COUNTRY	194	1	**195**
GULF	8		**8**
	3		**3**

PPO Claims	Paid_usd		
	6030440000	6030450000	**Total**
	OMAN	OMAN	
BLUE	17,639	329	**17,968**
GOLD	92,962	784	**93,747**
GREEN	225,284	8,070	**233,354**
SILVER	141,965	1,050	**143,015**

PPO Claims	Claim Count		
	6030440000	6030450000	**Total**
	OMAN	OMAN	
BLUE	785	3	**788**
GOLD	1180	9	**1189**
GREEN	6488	214	**6702**
SILVER	2275	21	**2296**

Note: This report does not include the outstanding claims amount (USD 8,460).
*Please note that this report does not include trend, claims under processing, suspended claims or any other expenses.
**All Figures mentioned herein are in USD.

MetLife

CS Claims Analysis

Policy number: 60304-

Incurred date from : 2022-09-01 to : 2023-08-31

	OutPatient	InPatient	Psychiatric Treatment	Maternity	Dental	Optical	Other Services	**TOTAL**	% of Total
Employees	180,290	24,376	730	9,000	19,375	9,336	5,822	**248,929**	46.4%
Spouse	109,935	16,614	9	13,740	7,644	5,688	3,020	**156,650**	29.2%
Child	93,144	16,016	369		9,552	5,960	5,380	**130,420**	24.3%
Total claims	**383,368**	**57,006**	**1,108**	**22,740**	**36,572**	**20,984**	**14,221**	**535,999**	**100.0%**

Age	Paid Amount			Claim count		
	Male	Female	**Total**	Female	Male	**Total**
Under 21	48,931	53,547	**102,479**	1,749	1,639	**3,388**
21-25	15,482	10,390	**25,872**	255	243	**498**
26-30	5,835	6,550	**12,385**	126	51	**177**
31-35	5,921	23,756	**29,678**	361	162	**523**
36-40	17,772	49,316	**67,087**	903	383	**1,286**
41-45	40,096	42,461	**82,557**	805	792	**1,597**
46-50	45,273	57,280	**102,554**	985	828	**1,813**
51-55	52,019	15,211	**67,230**	263	850	**1,113**
56-60	19,274	4,950	**24,224**	108	338	**446**
61-65	18,080	724	**18,804**	13	306	**319**
66-69	1,458	1,670	**3,129**	61	23	**84**
Total	**270,143**	**265,855**	**535,999**	**5,629**	**5,615**	**11,244**

Note: PPO - Preferred Provider Organization, IP - In Patient, OP - Out Patient

Note: This report does not include the outstanding claims amount (USD 8,460).
*Please note that this report does not include trend, claims under processing, suspended claims or any other expenses.
**All Figures mentioned herein are in USD.

Policy:

60304 - USA EMBASSY

Policy Performance Review

Review Period: September 1 2023 to August 31 2024

Navigating life together

IMPORTANT NOTE:

Please be aware that data for the most recent months is highly incomplete and hence figures presented in this report are subject to change once claims mature.

These numbers are for illustrative purposes only and are unadjusted for completeness; i.e. no reserve calculations. Furthermore, numbers presented in this report do not take into consideration other underwriting assumptions such as (but not limited to) sub-group movements, age-sex ratio changes, TOB changes throughout the different periods under consideration.

Data Extraction Date: Report reflects claims data refreshed as of July 15 2025G

ACRONYMS LEGEND:

LY = Last Year
Portf. BM = Portfolio Benchmark - this represents a sample of policies with similar size and renewal date
PMPM/PMPY = Per Member per Month/Year
OP / IP = Outpatient / Inpatient

Please note that amounts mentioned in this report are in US Dollars format.

Executive Summary:

The current analysis covers 12 months of data. Moreover, some of the months captured in this analysis may have immature claims. Analyzing claims without allowing at least 6 months of maturity may engender some bias.

The average number of lives insured during the analysis period is 738. Compared to the same period last year, there is a 2.4% increase in the number of people enrolled in the policy.

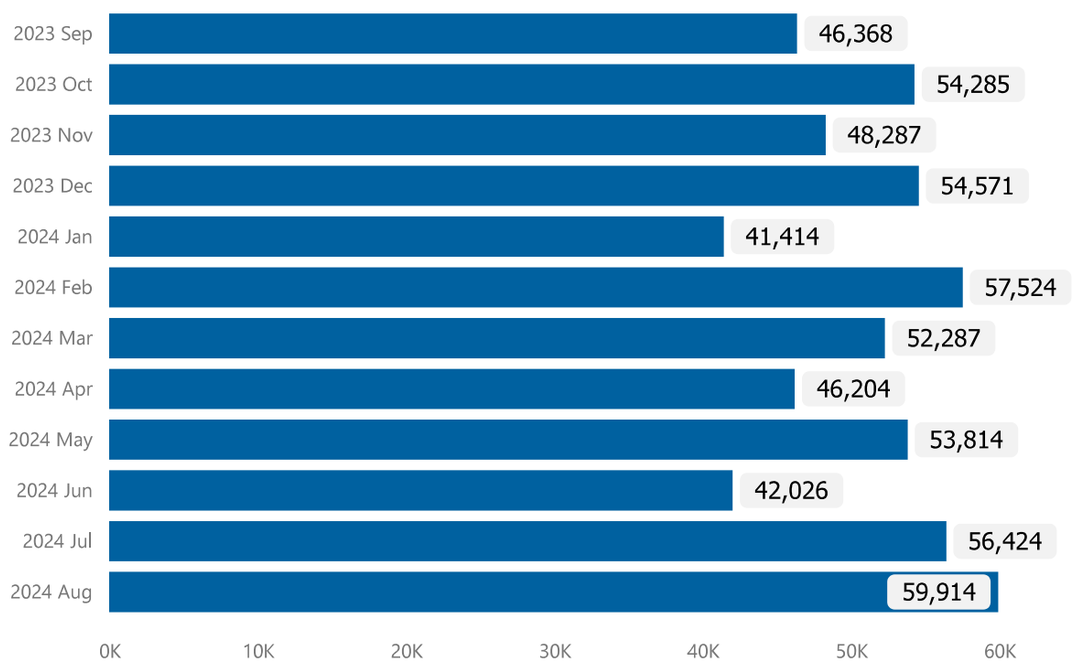
Considering the dollar value of claims, members made 6.9% of their claims outside of the MetLife network. This compares with 9.7% last year and 10.2% across the MetLife portfolio.

Overall Snapshot

Paid Claims	Average Lives	No. of Claimants
613,119	738	689

PPO	Cash	Members	Dependents	No. of Claims	Claims Per Member	Cost Per Claim
93.1%	6.9%	26.5%	73.5%	12,924	17.5	47.44

Paid Claims by Month



Paid Claims by Subgroup

Policy Name	Paid Amount	Number of Claims	Number of Claimants
EMBASSY OF UNITED STATES OF AMERICA -MUS	602,180	12,678	677
EMBASSY OF UNITED STATES OF AMERICA-ORE	10,602	243	10
EMBASSY OF USA- MUSCAT-SG 6030440000	338	3	2
Total	**613,119**	**12,924**	**689**

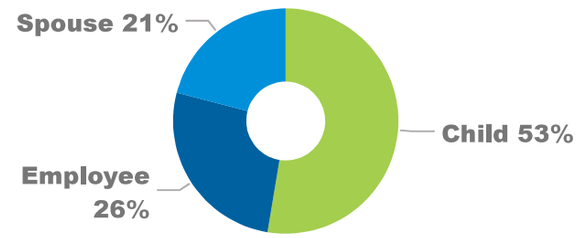
Overview of Insured Lives

Average Lives

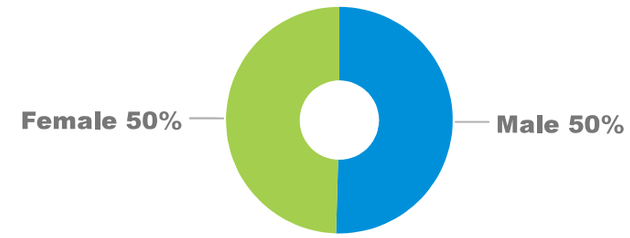
738

Employees	Spouses	Children
195	**154**	**388**

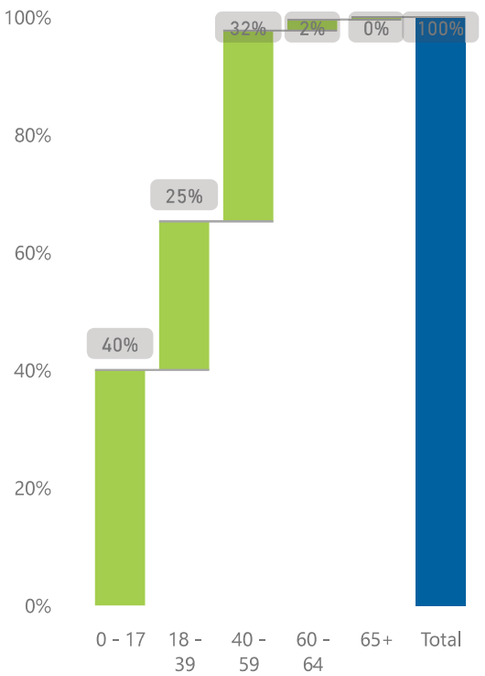
Average Lives by Dependent



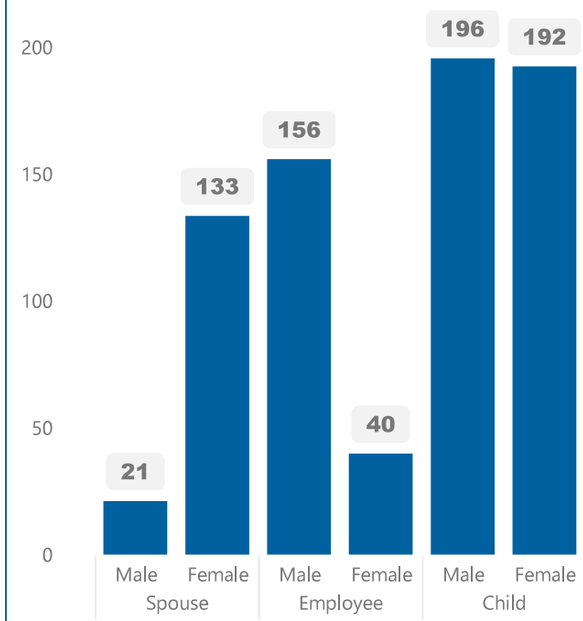
Average Lives by Gender



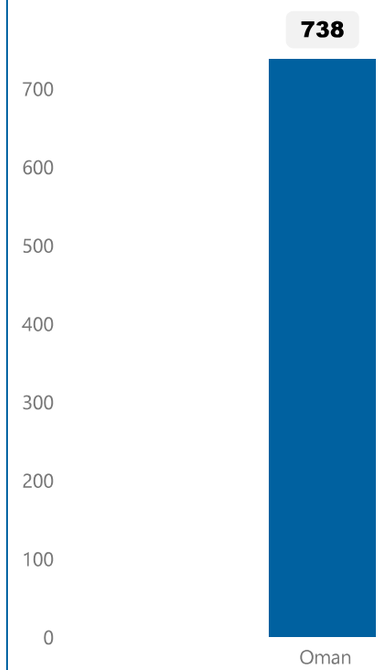
Age Distribution of Members



Average Lives by Dependent and Gender



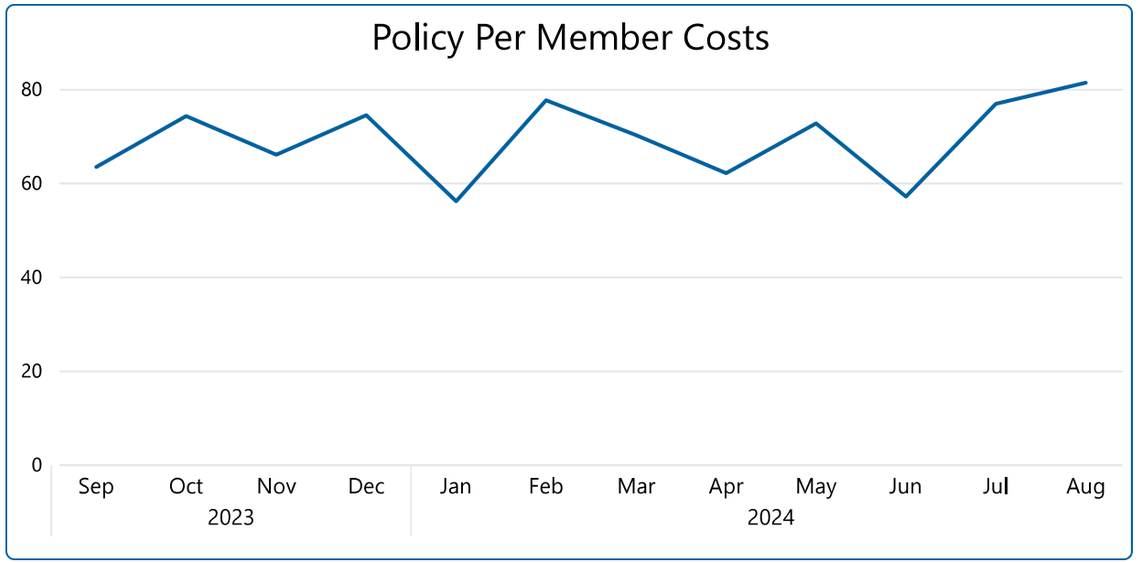
Average Lives by Country

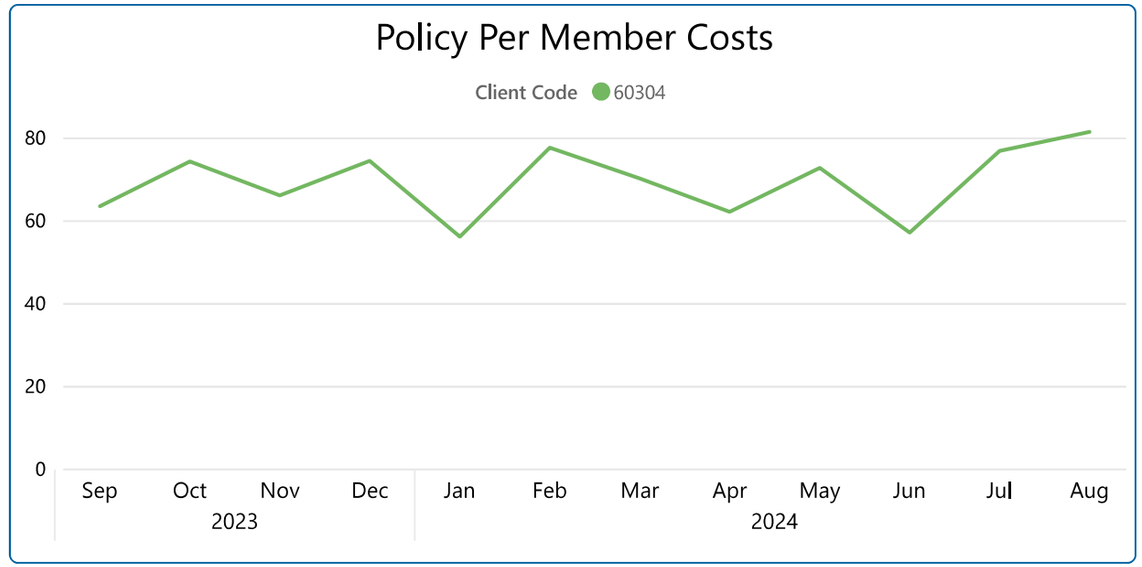


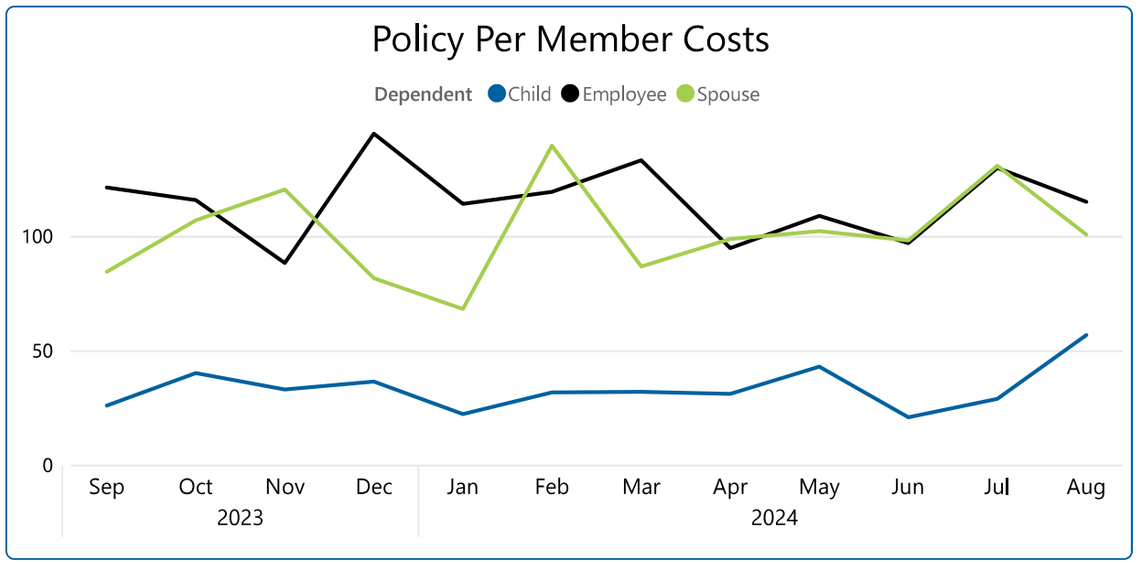
Sub-Policies

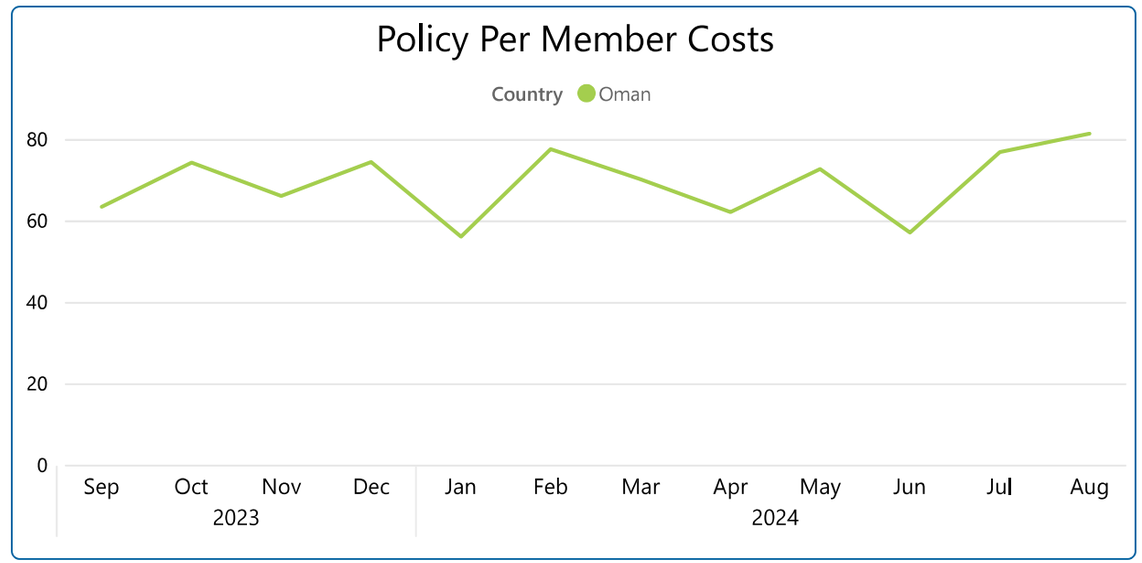
Policy Number	Average Lives	Average Lives LY
6030440000	729	711
6030450000	9	9
Total	**738**	**720**

Average Cost Per Insured Trend

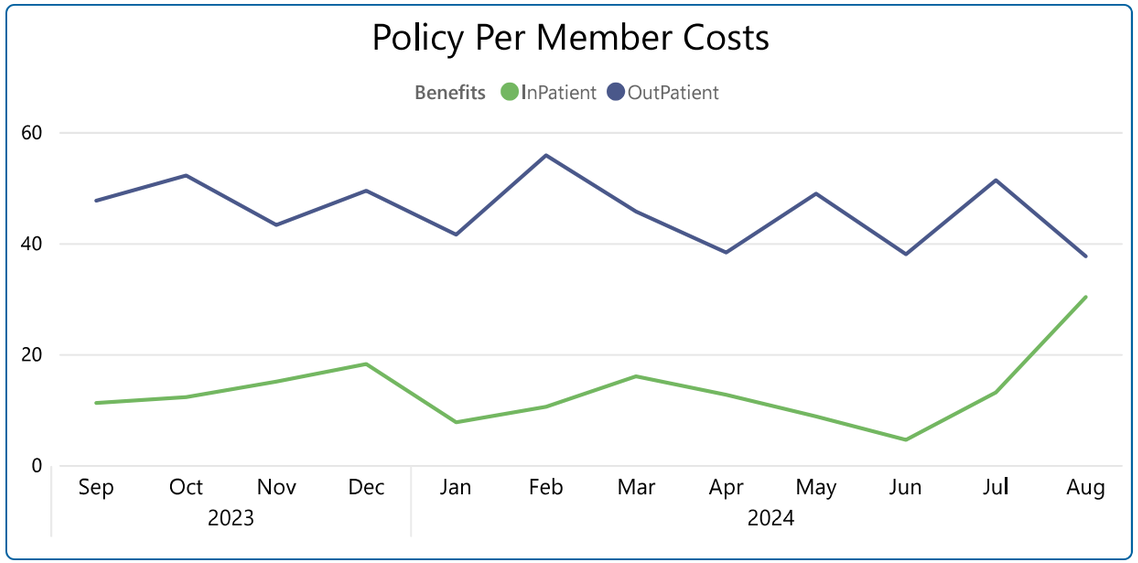


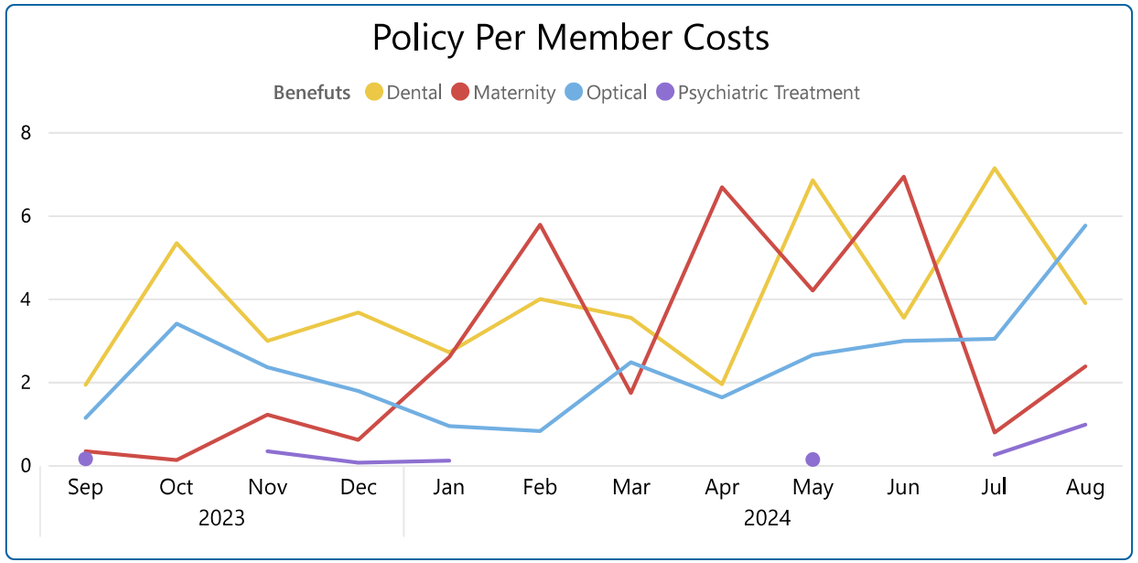


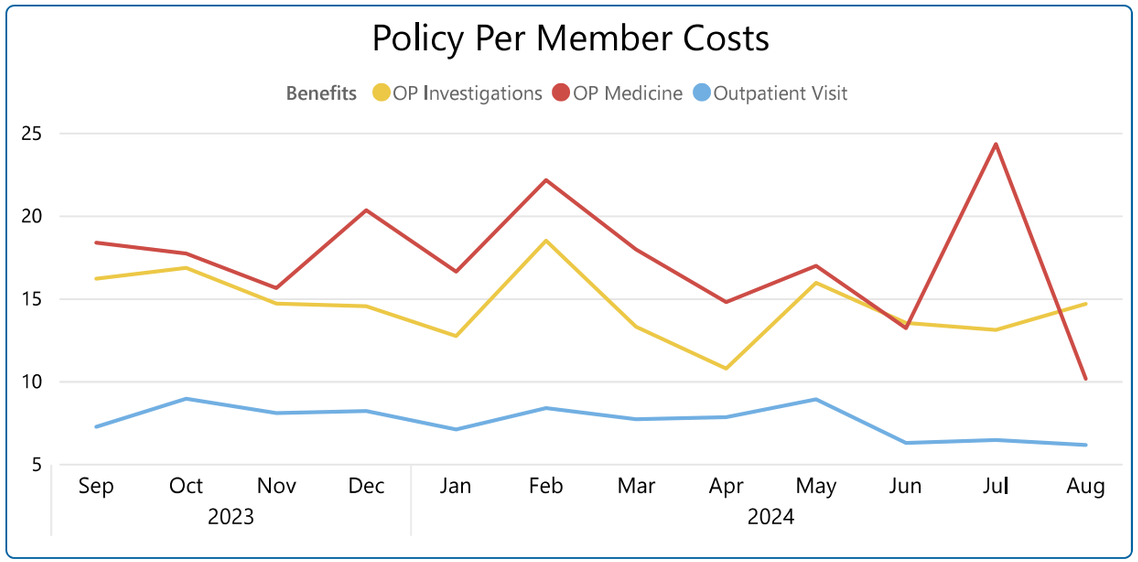


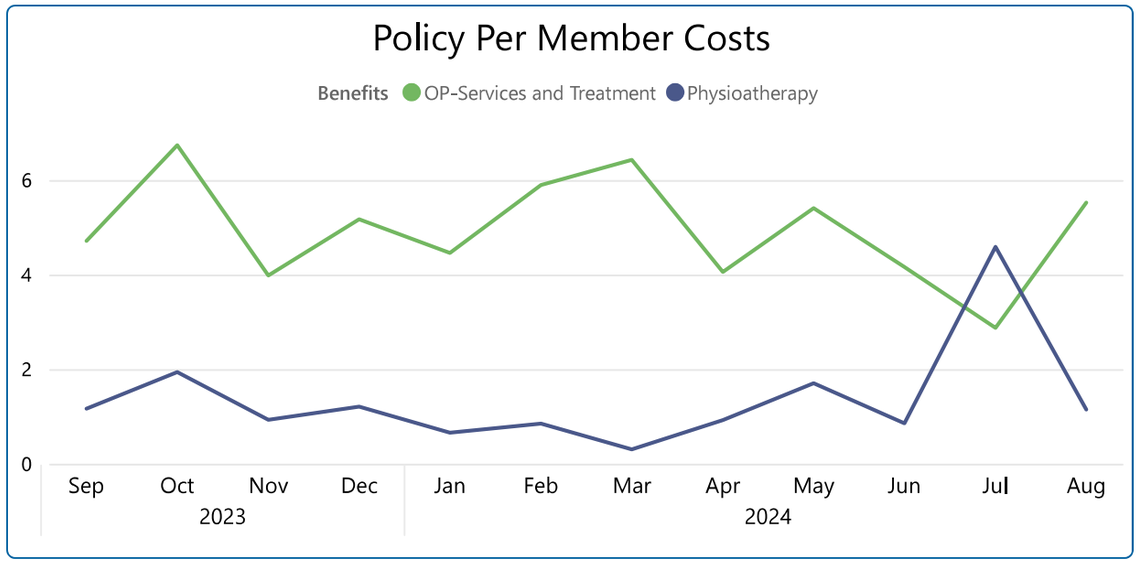


Average Cost Per Insured Trend







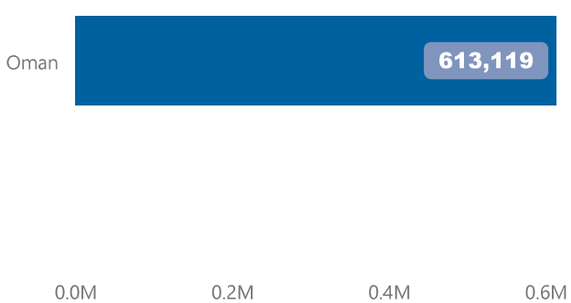


Average Cost Per Insured Trend

831	17.5	47.44
Per Member Cost	Claims Per Member	Cost Per Claim

493	1,720	9.9	11.5	50	149
Per Member Cost LY	Per Member Cost (Portf. BM)	Claims Per Member LY	Claims Per Member (Portf. BM)	Cost Per Claim LY	Cost per Claim (Portf. BM)

Paid Amount by Country

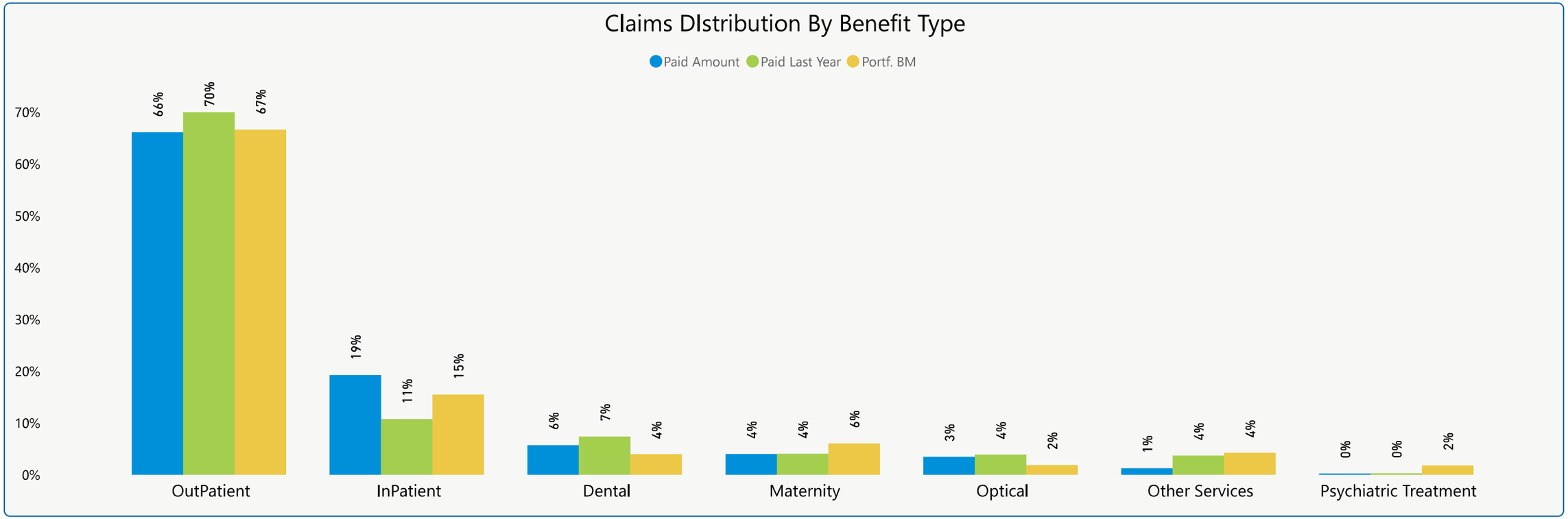


Total Paid Claims	613,119
Number of Claimants	689
Number of Claims	12,924
Claims per Claimant	18.8
Number of Initial Doctor's Visits	4,462
Number of Insured Lives	738

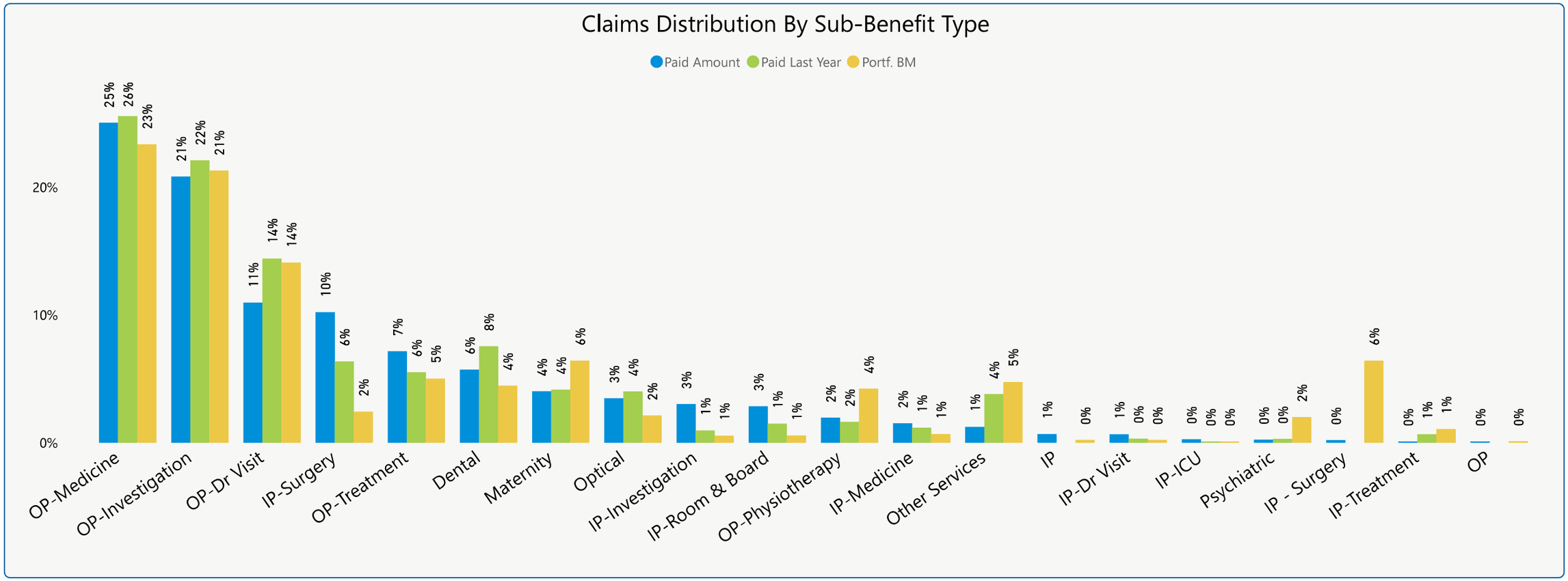
Average Summary

Country	Per Member Cost	Cost Per Claim	Claims Per Member
Oman	831	47.44	17.5
Total	**831**	**47.44**	**17.5**

Benefit Utilization

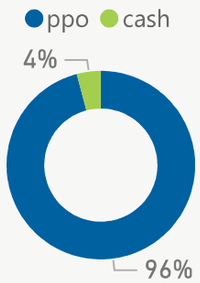


Sub Benefit Utilization

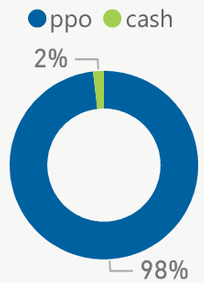


Benefit Utilization by Cost

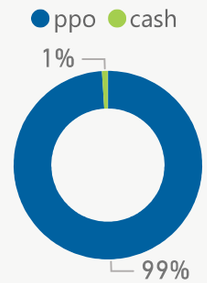
Outpatient (excl. Medicine)



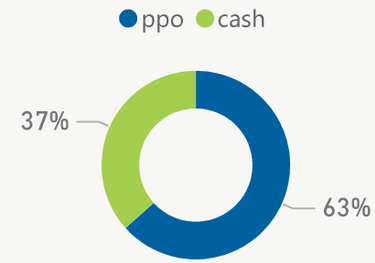
In Patient



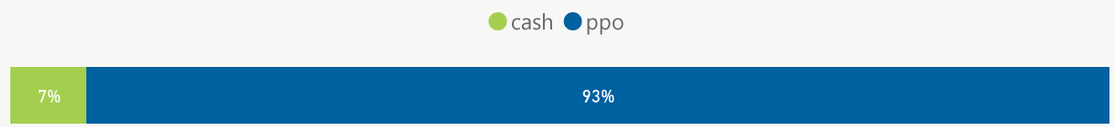
Maternity



Dental / Optical

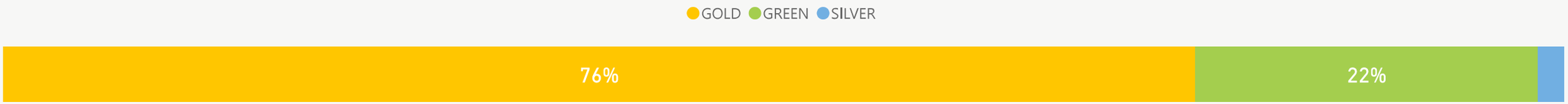


All Benefits

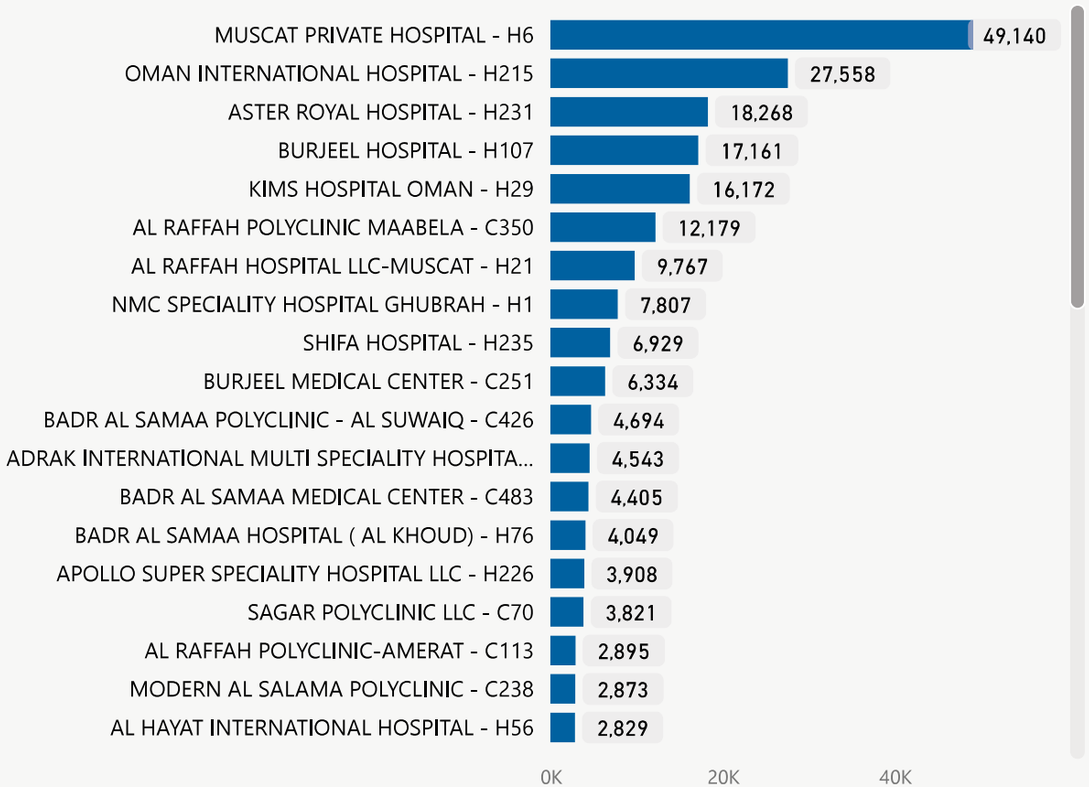


Network Tier Usage and Top Medical Providers

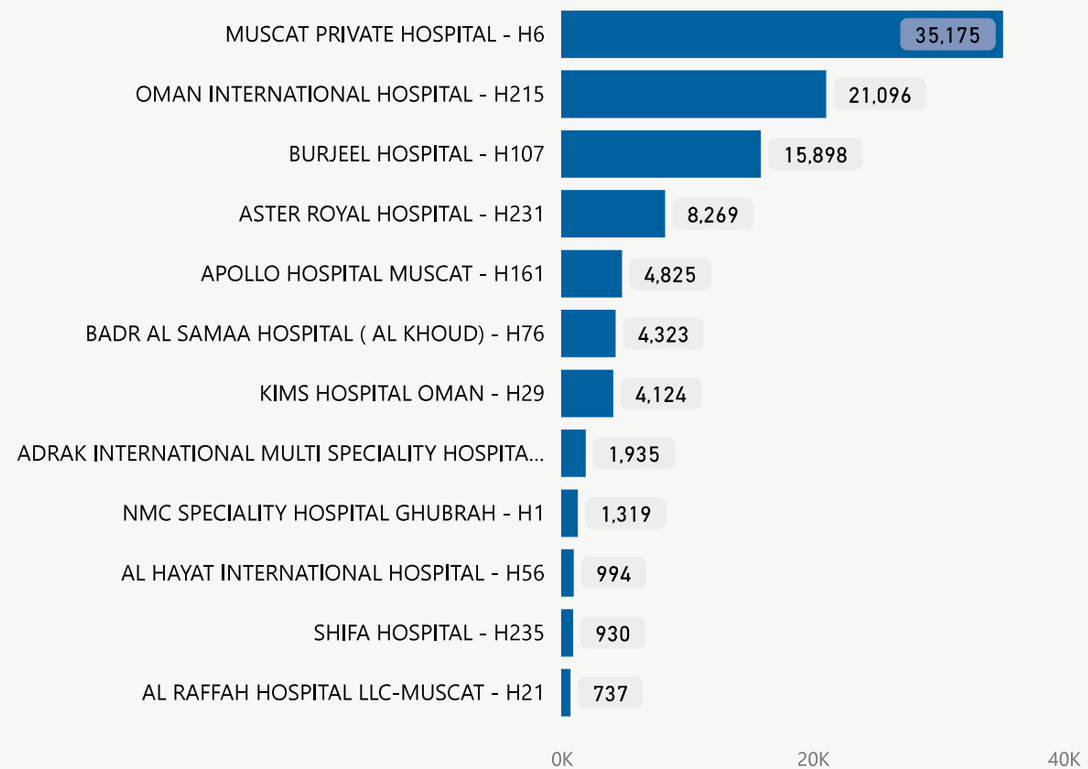
Network Tier (excl. OP Medicine)



Top Outpatient Providers (excl. OP Medicine)



Top Inpatient Providers



User Experience (Membershare, and Top Claims)

Member Contribution

98%

Member Contribution Last Year

97%

689

Number of Claimants

12,924

Number of Claims

Top Claimants

Claimant #	Paid Amount	Number of Claims
1	14,276	148
2	13,747	18
3	13,469	27
4	10,223	87
5	7,580	27
6	7,412	127
7	6,820	78
8	5,907	37
9	5,828	15
10	5,118	55
11	4,943	73
12	4,933	46
13	4,818	40
14	4,736	89
15	4,720	38
16	4,543	126
17	4,423	35
18	4,416	74
19	4,334	111
20	4,332	35
21	4,255	62
22	4,057	148
23	3,838	65
24	3,824	27
25	3,681	54

Top Claims

Claims #	Claimant #	Diagnosis Type	Paid Amount
116480	61523	TETRALOGY OF FALLOT	10,831
113110	61379	Arthropathic psoriasis, unspecified	10,000
109477	61224	Varicose veins of right lower extremities with pain	5,932
106979	61117	CHEST PAIN, UNSPECIFIED	5,388
111393	61301	Malignant neoplasm of unspecified ovary	4,668
109149	61203	MATERNAL CARE FOR SCAR FROM PREVIOUS CESAREAN DELIVERY	4,266
116632	61529	Diabetes	3,853
113118	61379	Arthropathic psoriasis, unspecified	3,333
99563	60836	Oth meniscus derangements, unsp medial meniscus, right knee	3,103
106349	61092	Pain in left knee	3,017
117018	61535	Derang of medial meniscus due to old tear/inj, left knee	2,734
113845	61407	Oth tear of lat mensc, current injury, right knee, init	2,693
115272	61463	PAIN IN UNSPECIFIED KNEE	2,501
106632	61105	Disorder of ligament, unspecified ankle	2,485
115491	61477	CALCULUS OF KIDNEY	2,473
113311	61389	UMBILICAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE	2,388
117751	61564	Derangement of unsp meniscus due to old tear/inj, right knee	2,305
107234	61126	DENTAL CARIES, UNSPECIFIED	2,184
116631	61529	Diabetes	2,103
104139	61001	CARPAL TUNNEL SYNDROME, UNSPECIFIED UPPER LIMB	1,872
114444	61434	Derang of medial meniscus due to old tear/inj, right knee	1,845
110178	61245	CERVICALGIA	1,816
112358	61347	Cholecystitis, unspecified	1,816
105166	61041	Incisional hernia without obstruction or gangrene	1,815
99284	60815	MATERNAL CARE FOR SCAR FROM PREVIOUS CESAREAN DELIVERY	1,635

Member Health Overview

1.5%	2.7%	15.0%	11.7%	8.9%	5.6%
Cancer Prevalence	PF Trend	Hypertension Prevalence	PF Trend	Diabetes Prevalence	PF Trend

Top Disease Diagnoses

DiagDesc1	Paid Amount	Number of Claims	Number of Claimants
ACUTE UPPER RESPIRATORY INFECTION, UNSPECIFIED	37,806	1,885	400
Essential (primary) hypertension	32,020	531	85
TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS	18,847	267	55
DENTAL CARIES, UNSPECIFIED	15,442	217	102
HYPERLIPIDEMIA, UNSPECIFIED	13,805	200	50
Arthropathic psoriasis, unspecified	13,420	8	1
MYOPIA, UNSPECIFIED EYE	12,917	90	65
UNSPECIFIED ABDOMINAL PAIN	11,437	229	80
CHEST PAIN, UNSPECIFIED	11,250	106	30
LOW BACK PAIN	11,239	320	72
TETRALOGY OF FALLOT	10,831	1	1
UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTION	9,245	177	43
ACUTE BRONCHITIS, UNSPECIFIED	8,940	298	92
ACUTE PHARYNGITIS, UNSPECIFIED	8,873	290	104
FEVER, UNSPECIFIED	8,583	305	106
GASTRITIS, UNSPECIFIED, WITHOUT BLEEDING	7,687	147	52
HYPOTHYROIDISM, UNSPECIFIED	6,934	134	27
CERVICALGIA	6,613	149	38
INFECTIOUS GASTROENTERITIS AND COLITIS, UNSPECIFIED	6,473	143	47
MATERNAL CARE FOR SCAR FROM PREVIOUS CESAREAN DELIVERY	6,336	11	2

Top Disease Categories (ICD Chapter Classification)

ICD Chapter Classification	%GT Paid Amount	Number of Claims	Number of Claimants
Certain Conditions Originating In The Perinatal Period	0.01%	3	2
Certain Infectious And Parasitic Diseases	2.79%	316	99
Diseases Of The Blood And Blood-Forming Organs And Certain Disorders Involving The Immune Mechanism	2.39%	165	43
Diseases Of The Circulatory System	7.73%	553	87
Diseases Of The Digestive System	10.27%	873	236
Diseases Of The Ear And Mastoid Process	0.55%	114	52
Diseases Of The Eye And Adnexa	5.05%	262	139
Diseases Of The Genitourinary System	6.32%	572	115
Diseases Of The Musculoskeletal System And Connective Tissue	7.44%	938	153
Diseases Of The Nervous System	1.36%	43	19
Diseases Of The Respiratory System	19.06%	3,398	505
Diseases Of The Skin And Subcutaneous Tissue	2.64%	394	138
Endocrine, Nutritional And Metabolic Diseases	12.54%	834	134
Factors Influencing Health Status And Contact With Health Services	0.81%	129	46
Injury, Poisoning And Certain Other Consequences Of External Causes	0.02%	3	2
Mental, Behavioral And Neurodevelopmental Disorders	0.43%	21	8
Neoplasms	2.92%	68	11
Pregnancy, Childbirth And The Puerperium	2.44%	54	8
Symptoms, Signs And Abnormal Clinical And Laboratory Findings, Not Elsewhere Classified	15.23%	1,586	333

Subgroup Details

Policy_Name	Average Lives	Outpatient	In Patient	Maternity	Dental	Optical	Psychiatric	Other Services	Total Claims
EMBASSY OF UNITED STATES OF AMERICA -MUS	729	397,877	117,884	24,635	33,096	20,333	1,446	7,247	602,518
Total	**729**	**397,877**	**117,884**	**24,635**	**33,096**	**20,333**	**1,446**	**7,247**	**602,518**

*Above table does not show details of SG's with members less than 10 for confidentiality purpose.

Additional Information (1/2)

PPO vs Cash with Benefits

PPO vs CASH Benefits	cash Paid Amount	Number of Claims	Number of Claimants	ppo Paid Amount	Number of Claims	Number of Claimants	Total Paid Amount	Number of Claims	Number of Claimants
OutPatient	16,162	246	62	389,088	11,152	668	**405,250**	**11,398**	**673**
InPatient	2,210	6	6	115,674	116	77	**117,884**	**122**	**83**
Dental	8,936	60	31	26,070	555	155	**35,006**	**615**	**181**
Maternity	254	25	7	24,381	372	27	**24,635**	**397**	**32**
Optical	11,674	77	54	9,620	113	77	**21,294**	**190**	**113**
Other Services	1,855	21	11	5,750	246	47	**7,605**	**267**	**55**
Psychiatric Treatment	1,188	8	6	257	9	4	**1,446**	**17**	**9**
Total	**42,279**	**417**	**120**	**570,840**	**12,507**	**680**	**613,119**	**12,924**	**689**

Age Wise Claims

Age Bracket	Paid Amount	Number of Claims
0 - 21	137,004	3,847
21 - 24	13,343	417
25 - 29	12,222	289
30 - 34	33,137	758
35 - 39	68,191	1,521
40 - 44	98,724	1,954
45 - 49	126,305	1,960
50 - 54	73,804	1,267
55 - 59	31,804	531
60 - 64	15,234	308
65 - 69	3,350	73

Claims Range

Claims_Range	Paid Amount	Number of Claims
0 - 100	374,911	12,628
101 - 250	96,432	564
251 - 500	31,915	87
501 - 1000	26,996	38
1001 - 5000	59,633	29
5001 - 10000	23,232	3

Gender Wise Claims

Gender	Paid Amount	Number of Claims	Number of Claimants
FEMALE	297,254	6,611	339
MALE	315,866	6,313	350
Total	**613,119**	**12,924**	**689**

Additional Information (2/2)

Dependent Wise Claims (extended view)

Dependent Benefits	Child Paid Amount	Number of Claims	Number of Claimants	Employee Paid Amount	Number of Claims	Number of Claimants	Spouse Paid Amount	Number of Claims	Number of Claimants	Total Paid Amount	Number of Claims	Number of Claimants
OutPatient	95,469	3,989	341	183,903	4,315	194	125,878	3,094	138	**405,250**	**11,398**	**673**
InPatient	41,899	57	34	53,022	43	33	22,963	22	16	**117,884**	**122**	**83**
Dental	9,237	194	70	15,321	250	68	10,448	171	43	**35,006**	**615**	**181**
Maternity	0	10	6	3,576	55	9	21,059	332	17	**24,635**	**397**	**32**
Optical	7,149	80	41	8,800	68	46	5,345	42	26	**21,294**	**190**	**113**
Other Services	1,313	40	15	4,168	134	23	2,124	93	17	**7,605**	**267**	**55**
Psychiatric Treatment	427	4	3	1,018	13	6				**1,446**	**17**	**9**
Total	**155,495**	**4,357**	**350**	**269,807**	**4,844**	**196**	**187,818**	**3,723**	**143**	**613,119**	**12,924**	**689**

Dependent Wise Claims

Benefits	Child	Employee	Spouse	Total
OutPatient	95,469	183,903	125,878	**405,250**
InPatient	41,899	53,022	22,963	**117,884**
Dental	9,237	15,321	10,448	**35,006**
Maternity	0	3,576	21,059	**24,635**
Optical	7,149	8,800	5,345	**21,294**
Other Services	1,313	4,168	2,124	**7,605**
Psychiatric Treatment	427	1,018		**1,446**
Total	**155,495**	**269,807**	**187,818**	**613,119**

Policy:

60304 - USA EMBASSY

Policy Performance Review

Review Period: September 1 2024 to May 31 2025

Navigating life together

IMPORTANT NOTE:

Please be aware that data for the most recent months is highly incomplete and hence figures presented in this report are subject to change once claims mature.

These numbers are for illustrative purposes only and are unadjusted for completeness; i.e. no reserve calculations. Furthermore, numbers presented in this report do not take into consideration other underwriting assumptions such as (but not limited to) sub-group movements, age-sex ratio changes, TOB changes throughout the different periods under consideration.

Data Extraction Date: Report reflects claims data refreshed as of July 15 2025G

ACRONYMS LEGEND:

LY = Last Year
Portf. BM = Portfolio Benchmark - this represents a sample of policies with similar size and renewal date
PMPM/PMPY = Per Member per Month/Year
OP / IP = Outpatient / Inpatient

Please note that amounts mentioned in this report are in US Dollars format.

Executive Summary:

The current analysis covers 9 months of data. Moreover, some of the months captured in this analysis may have immature claims. Analyzing claims without allowing at least 6 months of maturity may engender some bias.

The average number of lives insured during the analysis period is 728. Compared to the same period last year, there is a -1.3% decrease in the number of people enrolled in the policy.

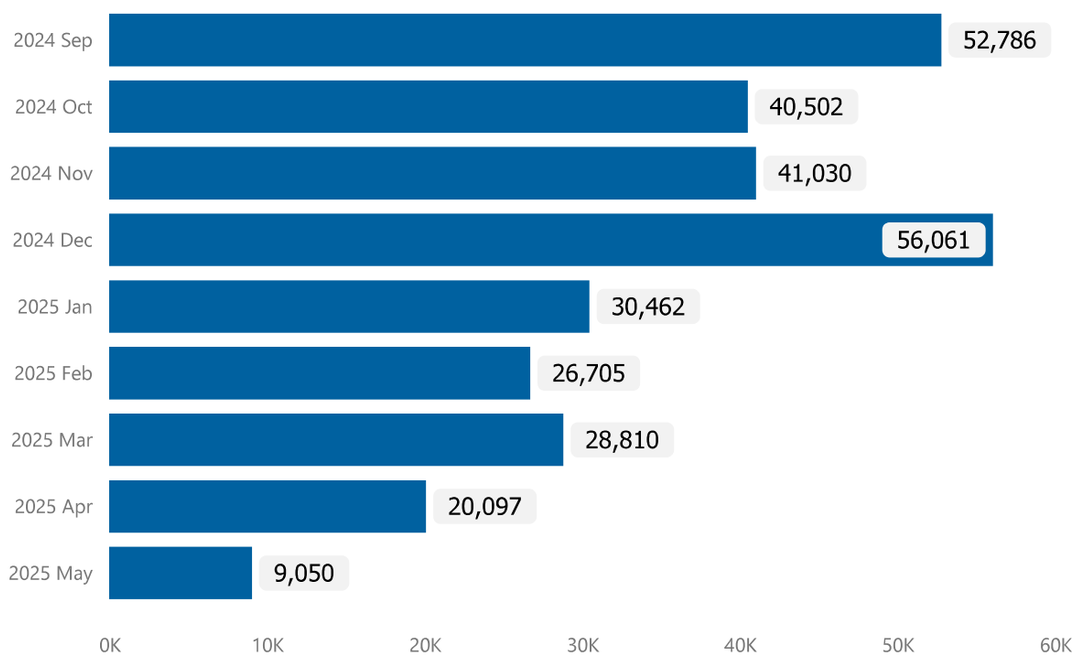
Considering the dollar value of claims, members made 12.2% of their claims outside of the MetLife network. This compares with 5.4% last year and 9.9% across the MetLife portfolio.

Overall Snapshot

Paid Claims	Average Lives	No. of Claimants
305,502	728	654

PPO	Cash	Members	Dependents	No. of Claims	Claims Per Member	Cost Per Claim
87.8%	12.2%	26.7%	73.3%	7,002	9.6	43.63

Paid Claims by Month



Paid Claims by Subgroup

Policy Name	Paid Amount	Number of Claims	Number of Claimants
EMBASSY OF UNITED STATES OF AMERICA -MUS	298,473	6,880	646
EMBASSY OF UNITED STATES OF AMERICA-ORE	7,030	122	8
Total	**305,502**	**7,002**	**654**

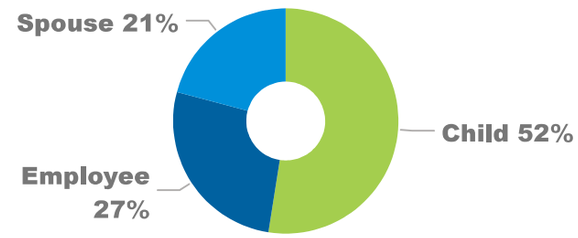
Overview of Insured Lives

Average Lives

728

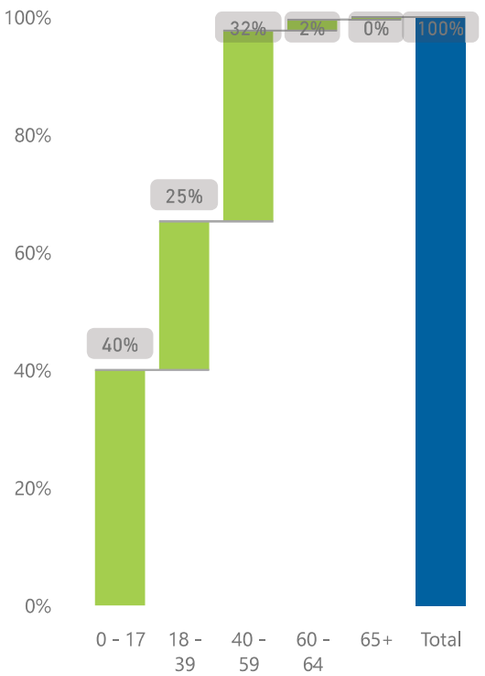
Employees	Spouses	Children
194	**152**	**382**

Average Lives by Dependent

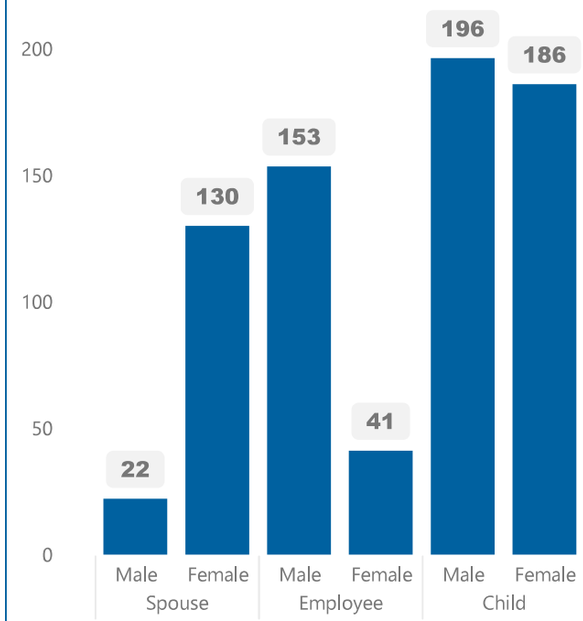


Average Lives by Gender

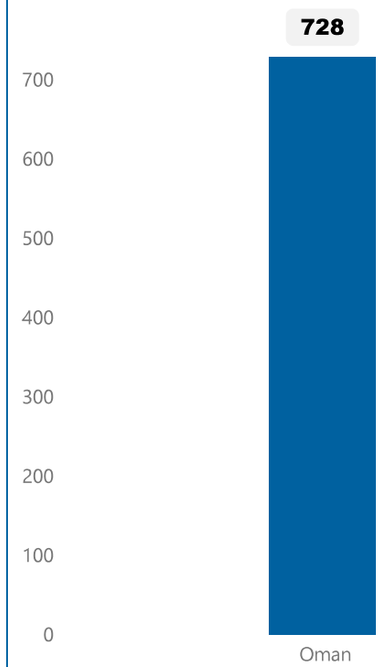
Age Distribution of Members



Average Lives by Dependent and Gender



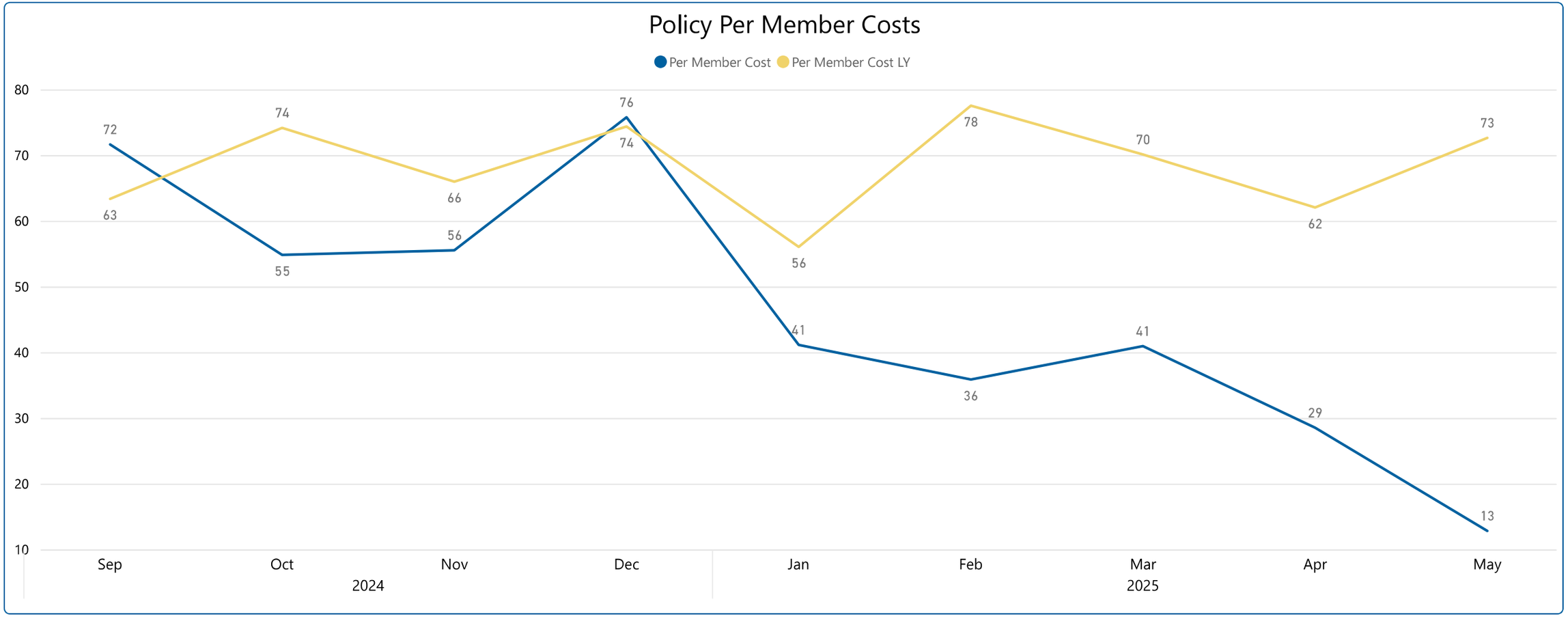
Average Lives by Country



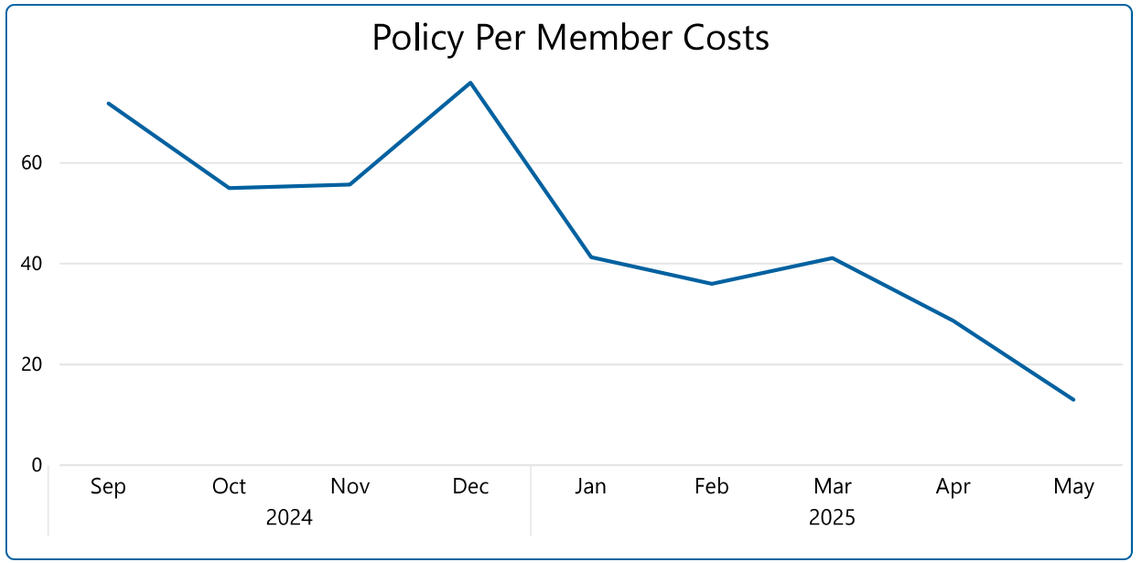
Sub-Policies

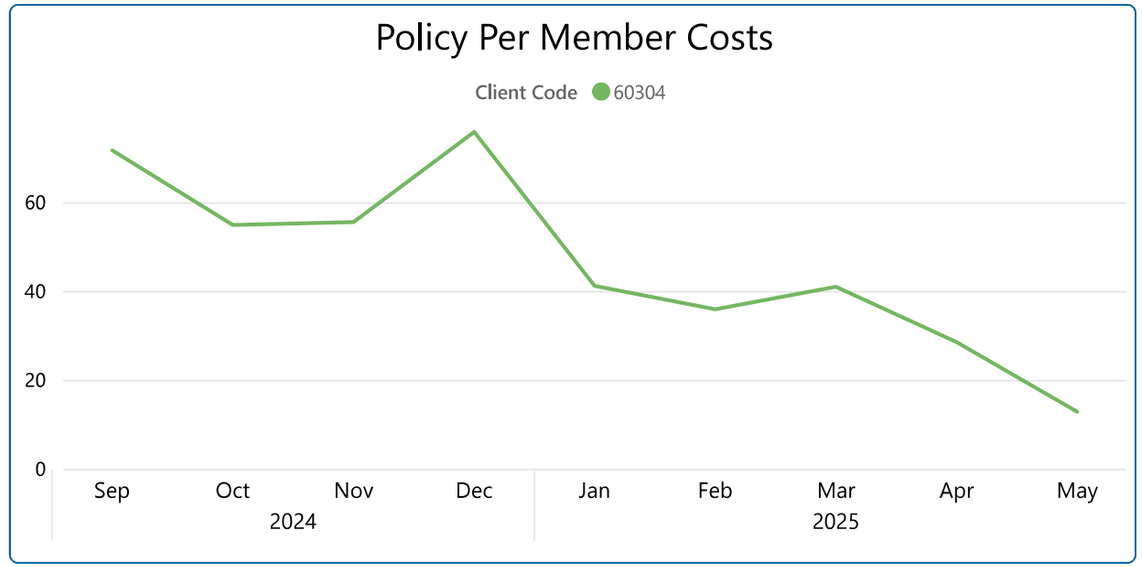
Policy Number	Average Lives	Average Lives LY
6030440000	721	729
6030450000	8	9
Total	**728**	**738**

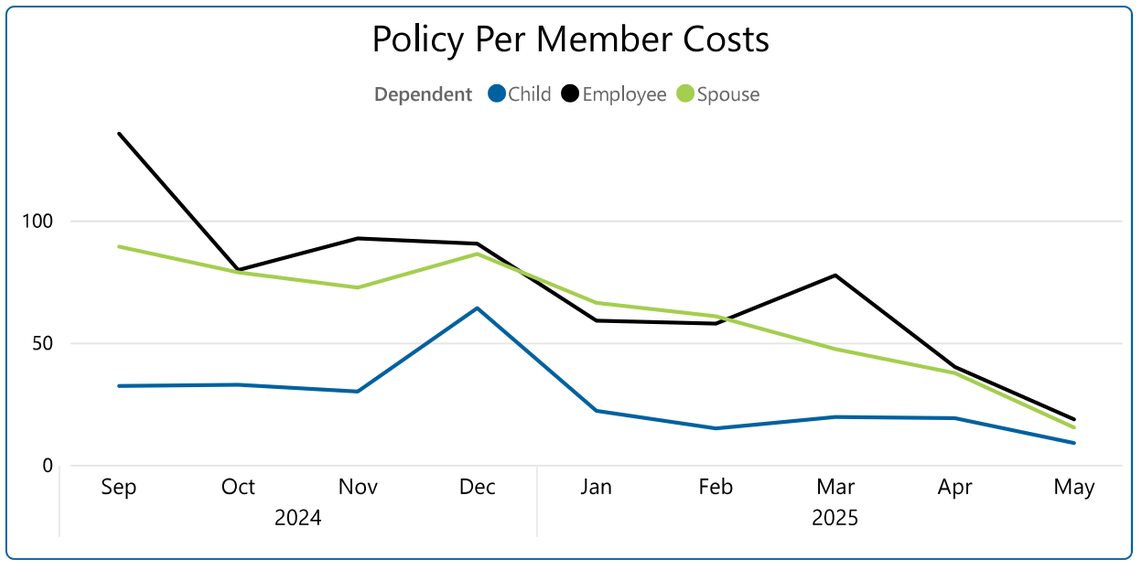
Average Cost Per Insured Trend

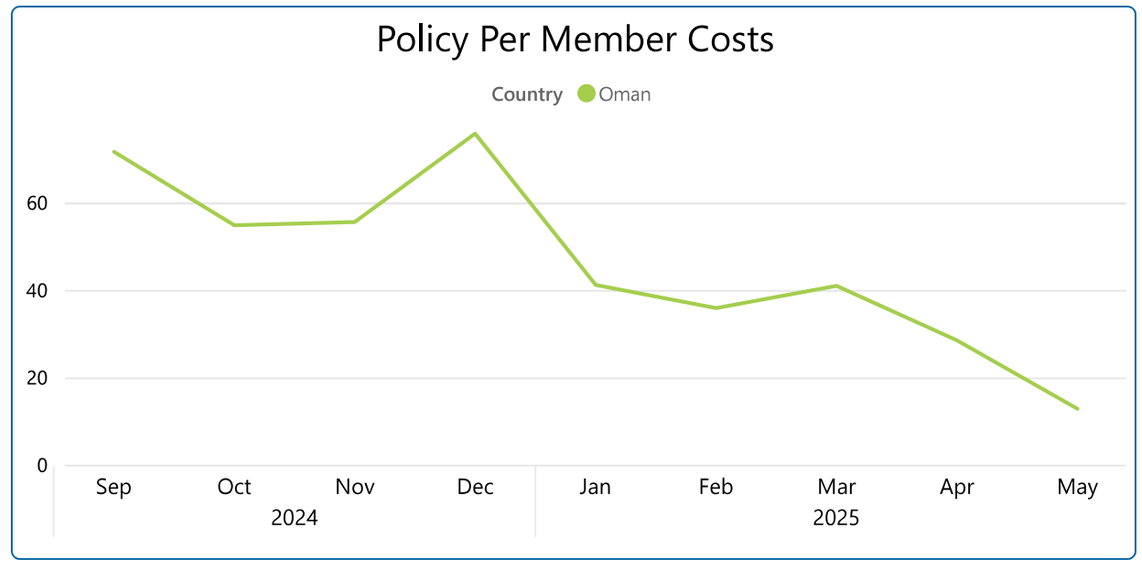


Average Cost Per Insured Trend

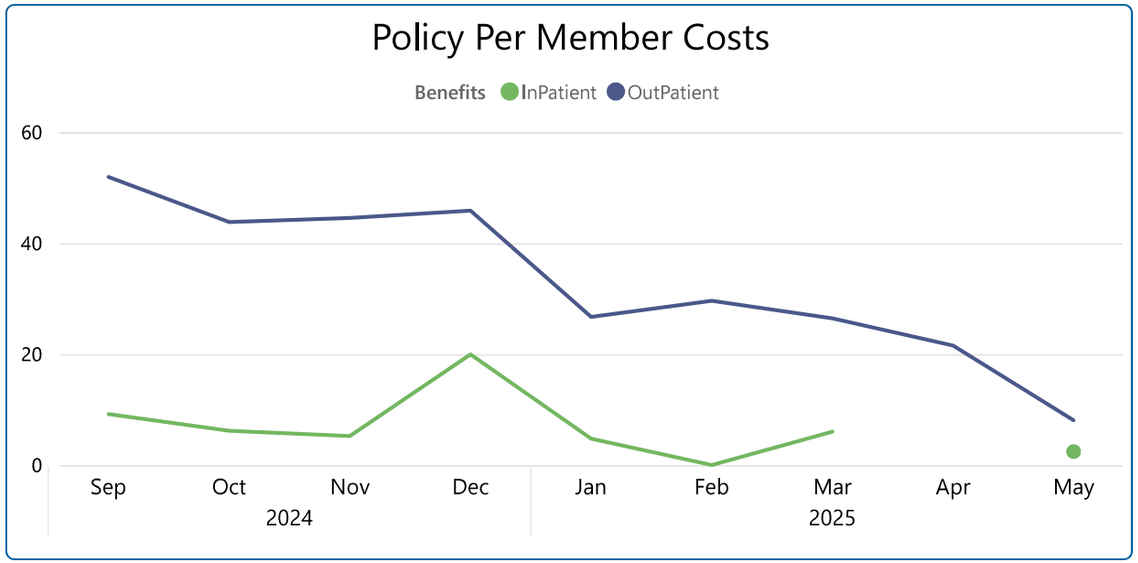


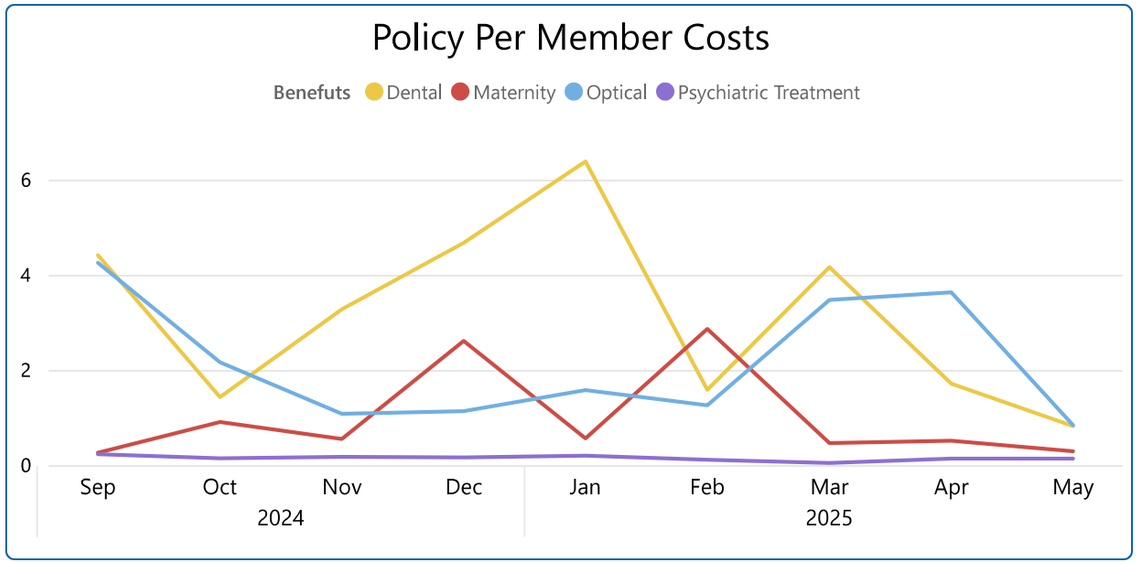


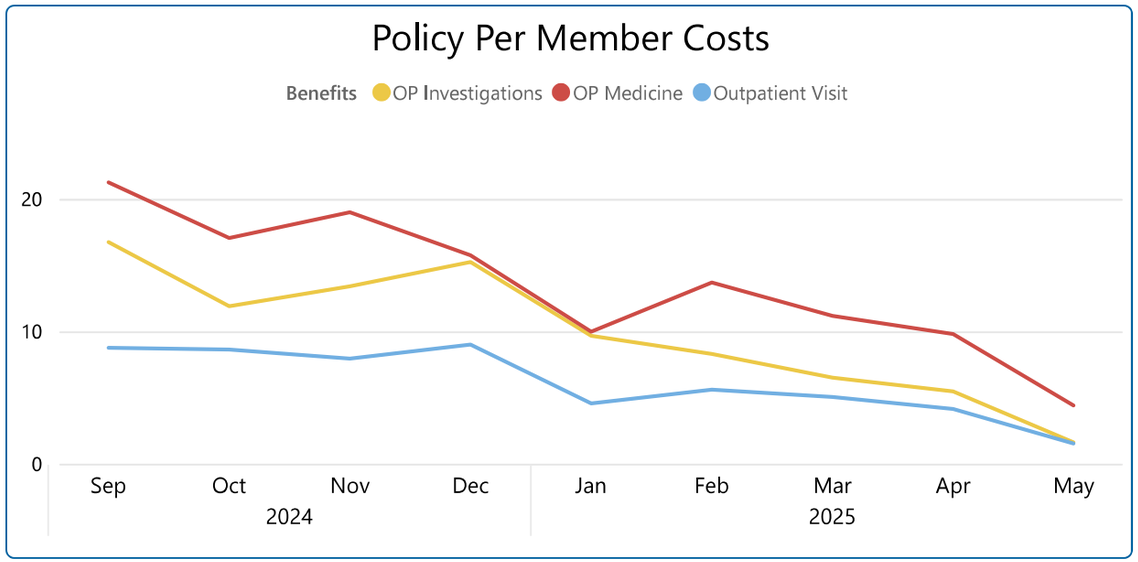


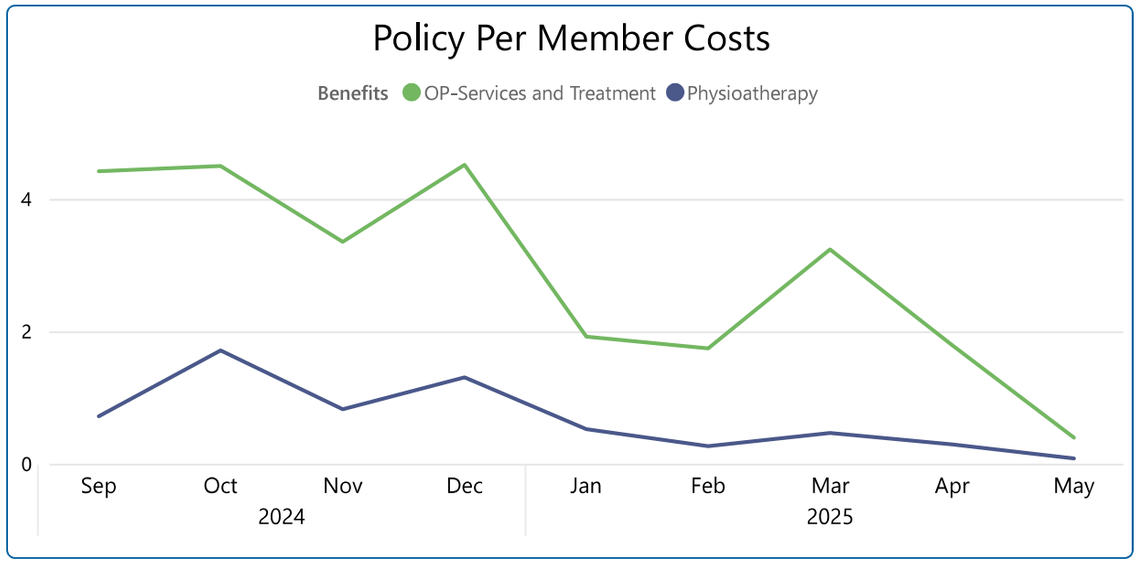


Average Cost Per Insured Trend







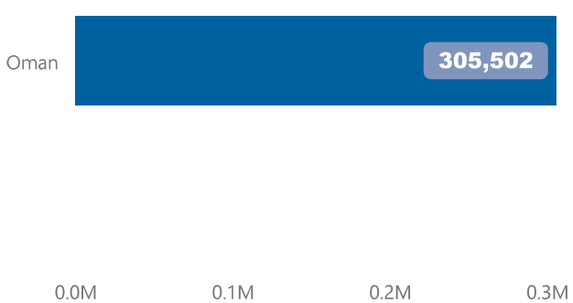


Average Cost Per Insured Trend

419	9.6	43.63
Per Member Cost	Claims Per Member	Cost Per Claim

616	1,409	13.7	9.2	45	153
Per Member Cost LY	Per Member Cost (Portf. BM)	Claims Per Member LY	Claims Per Member (Portf. BM)	Cost Per Claim LY	Cost per Claim (Portf. BM)

Paid Amount by Country

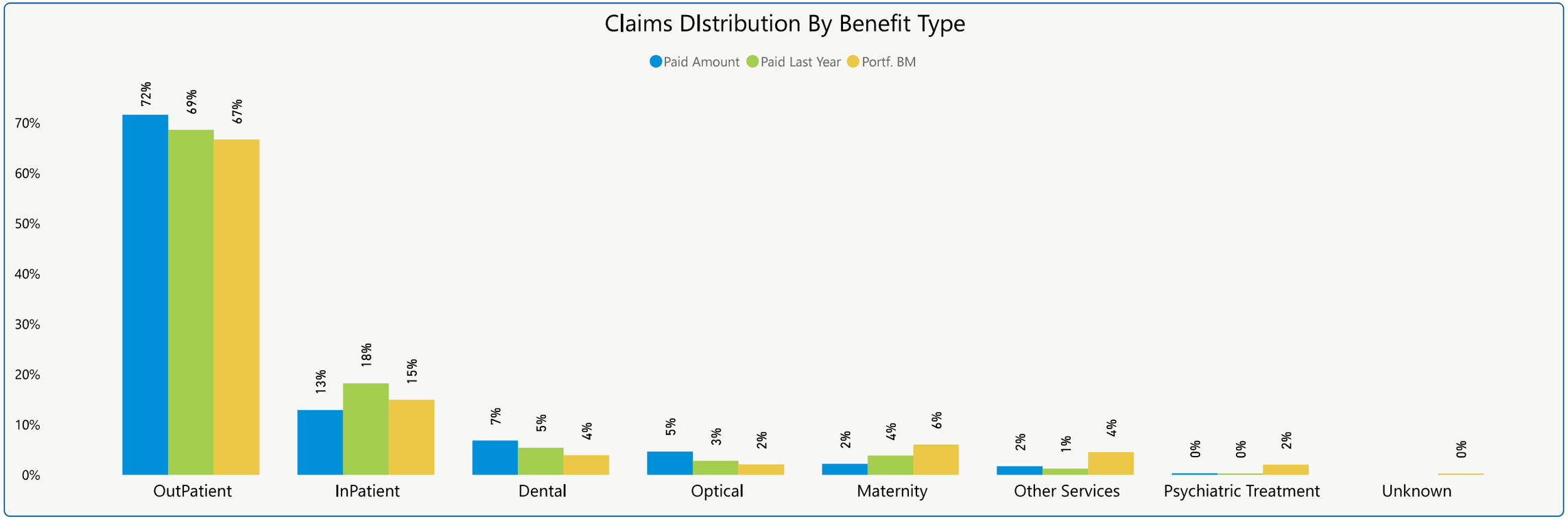


Total Paid Claims	305,502
Number of Claimants	654
Number of Claims	7,002
Claims per Claimant	10.7
Number of Initial Doctor's Visits	2,883
Number of Insured Lives	728

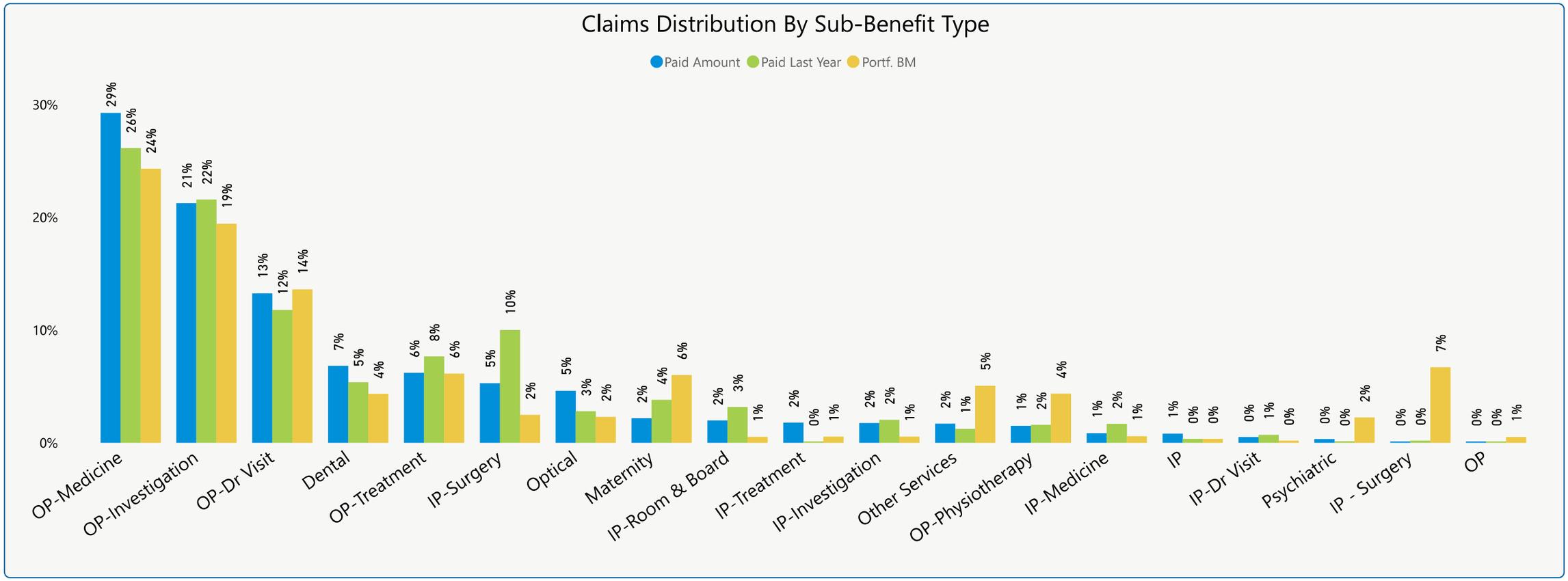
Average Summary

Country	Per Member Cost	Cost Per Claim	Claims Per Member
Oman	419	43.63	9.6
Total	**419**	**43.63**	**9.6**

Benefit Utilization



Sub Benefit Utilization

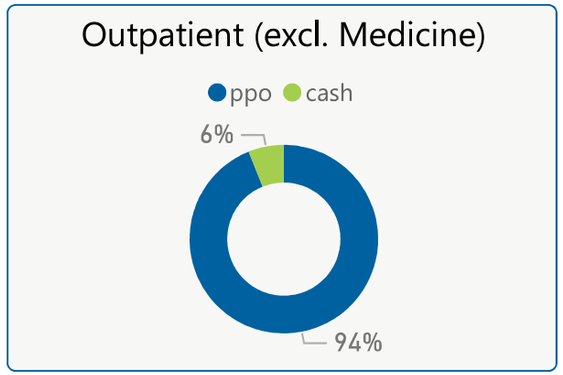


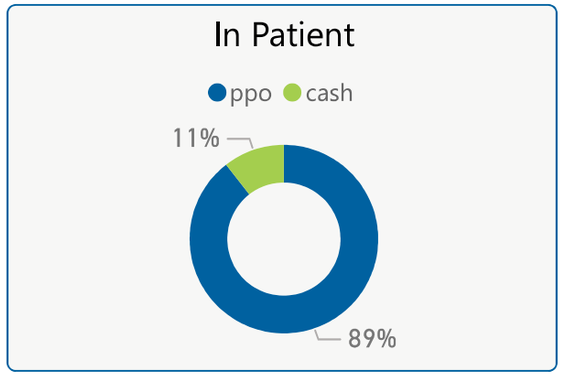
Benefit Utilization

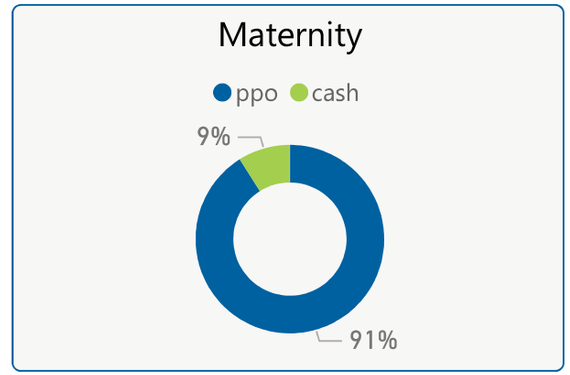
Category	Benefit Type	Paid Amount	Paid (%)	Per Member Cost	Per Member Cost % Diff	Claims Per Member	Claims Per Member % Diff	Cost Per Claim	Cost Per Claim % Diff	Claims per Claimant	Claims per Claimant % Diff	Incidence	Incidence % Diff
OutPatient	OP-Medicine	89,390	29%	123	-23.5%	3.9	-21.5%	31.64	-2.5%	4.7	-19.5%	82.5%	-2.6%
	OP-Investigation	64,892	21%	89	-32.7%	1.7	-18.3%	52.21	-17.7%	2.9	-13.7%	59.3%	-5.3%
	OP-Dr Visit	40,432	13%	56	-23.2%	4.0	-18.0%	14.02	-6.3%	4.6	-16.8%	86.2%	-1.5%
	OP-Treatment	18,939	6%	26	-44.6%	1.3	-25.9%	20.61	-25.2%	2.3	-15.9%	54.0%	-11.9%
	OP-Physiotherapy	4,541	1%	6	-35.5%	0.2	-33.4%	31.53	-3.1%	4.5	-21.9%	4.4%	-14.7%
	IP - Surgery	323	0%	0	-51.1%	0.0	52.0%	26.91	-67.9%	3.0	200.0%	0.5%	-49.3%
	OP	93	0%	0	156.4%	0.1	-8.5%	1.66	180.2%	1.6	5.8%	4.8%	-13.5%
	Total	**218,610**	**72%**	**300**	**-29.0%**	**8.5**	**-30.2%**	**35.41**	**1.8%**	**9.7**	**-29.6%**	**87.0%**	**-0.9%**
InPatient	IP-Surgery	16,104	5%	22	-64.0%	0.0	-49.3%	447.34	-28.9%	1.2	1.6%	4.3%	-50.1%
	IP-Room & Board	6,019	2%	8	-57.4%	0.0	-49.3%	240.78	-15.9%	1.3	12.5%	2.7%	-55.0%
	IP-Treatment	5,414	2%	7	49919.4%	0.0	1.3%	5,414.49	49264.3%	1.0	0.0%	0.1%	1.3%
	IP-Investigation	5,300	2%	7	-41.5%	0.0	-51.1%	196.30	19.7%	1.2	-3.6%	3.2%	-49.3%
	IP-Medicine	2,545	1%	3	-65.7%	0.1	-22.1%	50.90	-56.0%	2.0	63.1%	3.4%	-52.2%
	IP	2,449	1%	3	64.0%	0.0	-52.9%	122.46	248.0%	1.2	4.0%	2.3%	-54.7%
	IP-Dr Visit	1,512	0%	2	-50.8%	0.0	-56.6%	72.01	13.4%	1.1	-3.0%	2.6%	-55.2%
	Total	**39,345**	**13%**	**54**	**-50.7%**	**0.1**	**-28.2%**	**578.60**	**-31.4%**	**1.9**	**35.6%**	**4.8%**	**-47.1%**
Dental	Dental	20,792	7%	29	-13.3%	0.5	-23.5%	59.07	13.3%	2.4	-20.8%	20.0%	-3.3%
	Total	**20,792**	**7%**	**29**	**-13.3%**	**0.5**	**-23.5%**	**59.07**	**13.3%**	**2.4**	**-20.8%**	**20.0%**	**-3.3%**
Optical	Optical	14,051	5%	19	12.7%	0.2	39.0%	90.65	-18.9%	1.7	14.3%	12.4%	21.6%
	Total	**14,051**	**5%**	**19**	**12.7%**	**0.2**	**39.0%**	**90.65**	**-18.9%**	**1.7**	**14.3%**	**12.4%**	**21.6%**
Maternity	Maternity	6,620	2%	9	-61.0%	0.2	-55.8%	46.95	-11.9%	7.1	-36.7%	2.7%	-30.1%
	Total	**6,620**	**2%**	**9**	**-61.0%**	**0.2**	**-55.8%**	**46.95**	**-11.9%**	**7.1**	**-36.7%**	**2.7%**	**-30.1%**
Other Services	Other Services	5,131	2%	7	-5.9%	0.2	-36.2%	39.17	47.4%	3.2	-27.8%	5.6%	-11.6%
	Total	**5,131**	**2%**	**7**	**-5.9%**	**0.2**	**-36.2%**	**39.17**	**47.4%**	**3.2**	**-27.8%**	**5.6%**	**-11.6%**
Psychiatric Treatment	Psychiatric	954	0%	1	75.3%	0.0	128.0%	52.99	-23.1%	2.3	12.5%	1.1%	102.7%
	Total	**954**	**0%**	**1**	**75.3%**	**0.0**	**128.0%**	**52.99**	**-23.1%**	**2.3**	**12.5%**	**1.1%**	**102.7%**
Total		**305,502**	**100%**	**419**	**-31.7%**	**9.6**	**-29.8%**	**43.63**	**-2.6%**	**10.7**	**-30.0%**	**89.8%**	**0.3%**

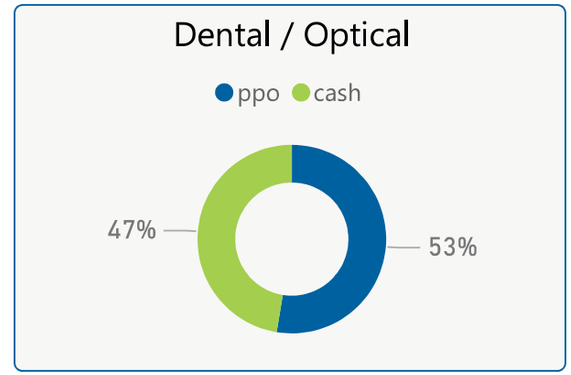
Note: Benefit categories have been revised wherein new codes falling under Other Services have been assigned to respective IP/OP benefits. "Other Services" comprises of only Alternative Medicine/Treatments, Vaccines & Special Needs (e.g Hearing Aid etc.)

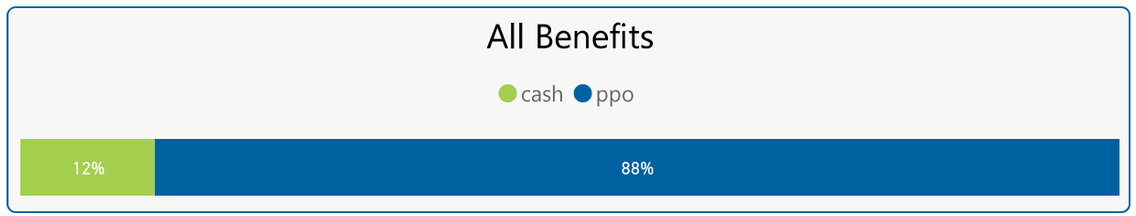
Benefit Utilization by Cost





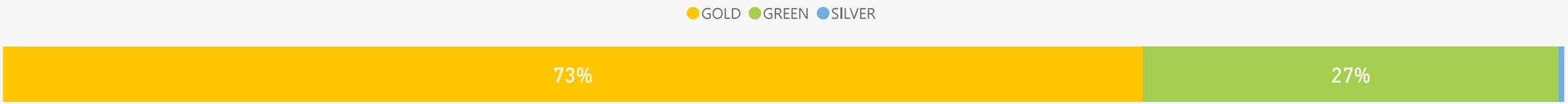




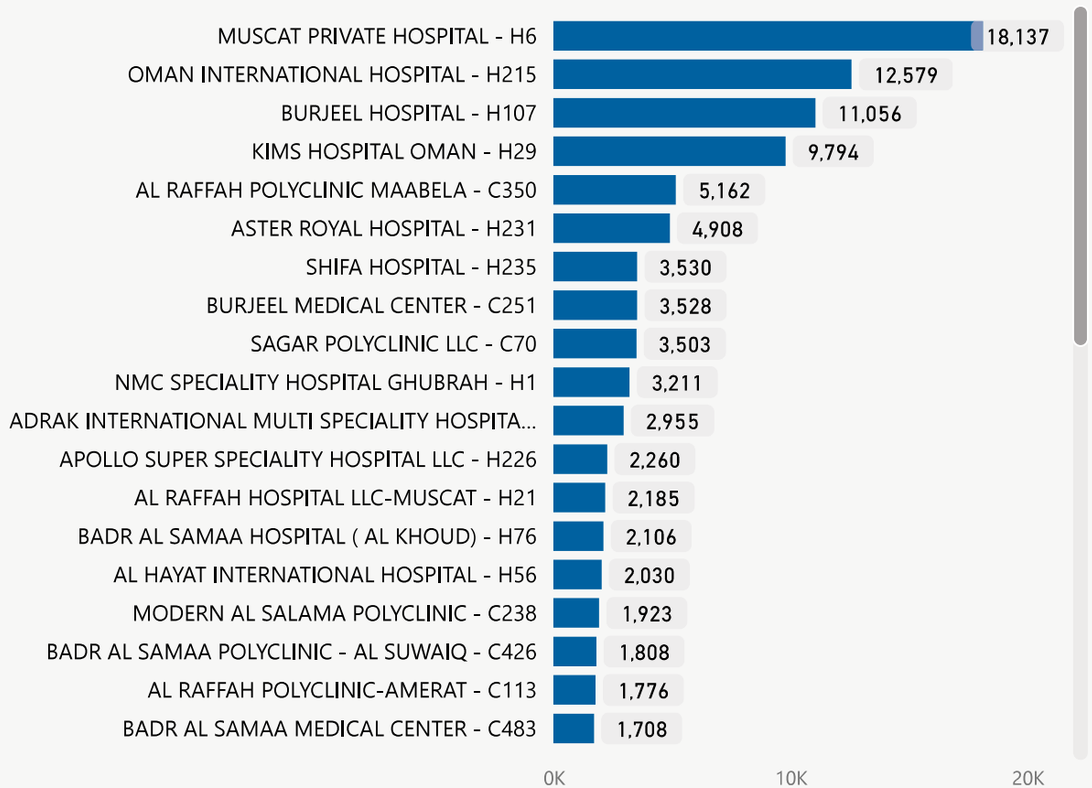


Network Tier Usage and Top Medical Providers

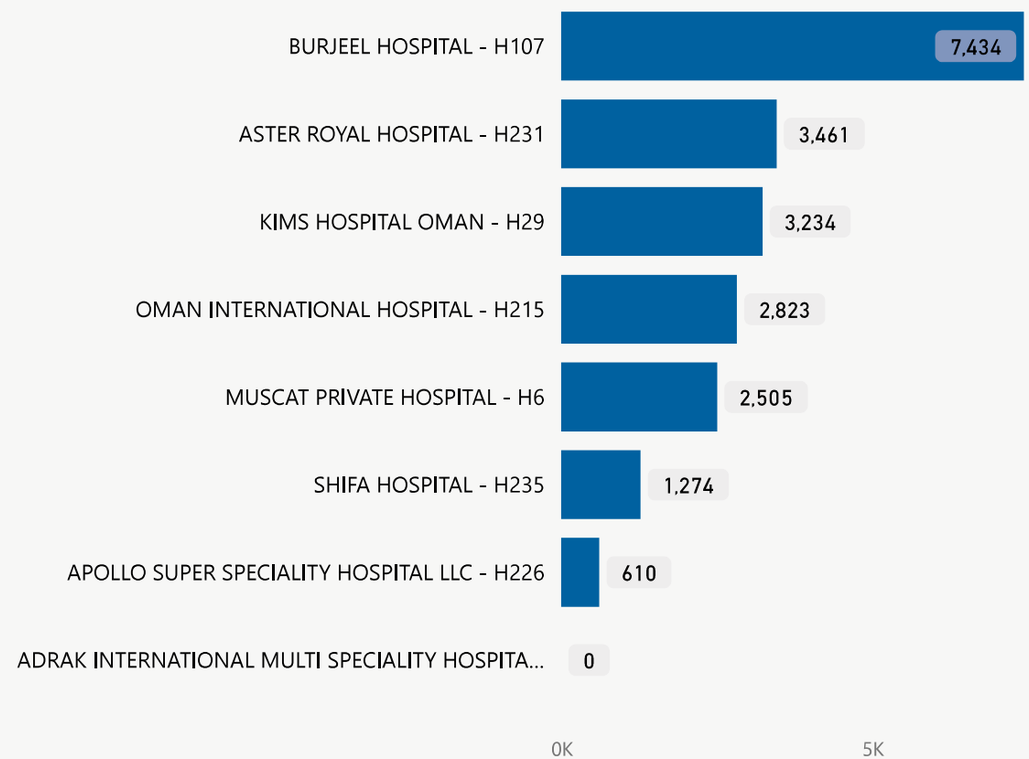
Network Tier (excl. OP Medicine)



Top Outpatient Providers (excl. OP Medicine)



Top Inpatient Providers



User Experience (Membershare, and Top Claims)

Member Contribution

97%

Member Contribution Last Year

99%

654

Number of Claimants

7,002

Number of Claims

Top Claimants

Claimant #	Paid Amount	Number of Claims
1	17,111	74
2	5,278	80
3	4,412	86
4	4,096	54
5	3,414	24
6	3,218	53
7	3,005	5
8	2,822	46
9	2,727	14
10	2,668	15
11	2,589	22
12	2,539	21
13	2,536	38
14	2,370	22
15	2,321	46
16	2,176	20
17	2,150	40
18	2,148	23
19	2,132	20
20	2,035	45
21	1,982	32
22	1,978	17
23	1,955	33
24	1,900	23
25	1,855	22

Top Claims

Claims #	Claimant #	Diagnosis Type	Paid Amount
102538	60947	HEADACHE	10,031
106822	61112	Laceration w/o fb of right eyelid and periocular area, init	2,903
102572	60947	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	2,352
53941	56787	Calculus of gallbladder w acute cholecyst w/o obstruction	2,268
111317	61298	DENTAL CARIES, UNSPECIFIED	2,116
110063	61241	36 WEEKS GESTATION OF PREGNANCY	1,672
106667	61107	ACUTE TONSILLITIS, UNSPECIFIED	1,610
101099	60900	Supervision of elderly multigravida, third trimester	1,602
102997	60959	Complex tear of medial mensc, current injury, r knee, init	1,448
110840	61280	NASAL POLYP, UNSPECIFIED	1,438
103893	60988	Acute Pancreatitis With Infected Necrosis, Unspecified	1,385
102588	60947	Acute respiratory failure with hypoxia	1,258
116756	61529	Diabetes	1,247
35392	51578	Acute abdomen	1,206
62518	57789	Constipation, unspecified	1,174
116757	61529	Diabetes	978
108396	61181	FEVER, UNSPECIFIED	966
58577	57366	Tubulo-interstitial nephritis, not spcf as acute or chronic	963
116991	61535	Hypertension/Hyperlipidemia	876
56491	57134	ACUTE BRONCHIOLITIS, UNSPECIFIED	834
102571	60947	VOMITING, UNSPECIFIED	827
105298	61043	DENTAL CARIES, UNSPECIFIED	821
103229	60969	Foreign body granuloma of soft tissue, NEC, right ank/ft	761
113647	61402	PALPITATIONS	732
104633	61023	Benign neoplasm of unspecified part of mouth	723

Member Health Overview

1.2%	2.1%	13.5%	12.8%	7.7%	6.4%
Cancer Prevalence	PF Trend	Hypertension Prevalence	PF Trend	Diabetes Prevalence	PF Trend

Top Disease Diagnoses

DiagDesc1	Paid Amount	Number of Claims	Number of Claimants
ACUTE UPPER RESPIRATORY INFECTION, UNSPECIFIED	19,739	944	297
Essential (primary) hypertension	18,132	294	73
DENTAL CARIES, UNSPECIFIED	13,582	126	75
TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS	12,621	146	40
HEADACHE	10,421	33	17
MYOPIA, UNSPECIFIED EYE	8,910	67	47
HYPERLIPIDEMIA, UNSPECIFIED	5,413	85	29
FEVER, UNSPECIFIED	5,225	150	69
LOW BACK PAIN	4,124	142	50
ACUTE BRONCHITIS, UNSPECIFIED	3,904	183	59
MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	3,750	25	1
ACUTE TONSILLITIS, UNSPECIFIED	3,737	92	35
UNSPECIFIED ABDOMINAL PAIN	3,601	124	40
HYPOTHYROIDISM, UNSPECIFIED	3,599	74	19
UNSPECIFIED ACUTE LOWER RESPIRATORY INFECTION	3,590	112	43
INFECTIOUS GASTROENTERITIS AND COLITIS, UNSPECIFIED	3,588	117	43
CERVICALGIA	3,173	88	27
Malignant neoplasm of unsp site of unspecified female breast	3,092	48	1
Acute nasopharyngitis [common cold]	3,049	161	72
Type 2 diabetes mellitus with foot ulcer	3,025	31	1

Top Disease Categories (ICD Chapter Classification)

ICD Chapter Classification	%GT Paid Amount	Number of Claims	Number of Claimants
Certain Infectious And Parasitic Diseases	2.42%	199	81
Congenital Malformations, Deformations And Chromosomal Abnormalities	0.04%	2	1
Diseases Of The Blood And Blood-Forming Organs And Certain Disorders Involving The Immune Mechanism	1.40%	57	22
Diseases Of The Circulatory System	8.54%	317	76
Diseases Of The Digestive System	11.64%	490	200
Diseases Of The Ear And Mastoid Process	0.34%	48	20
Diseases Of The Eye And Adnexa	6.12%	172	92
Diseases Of The Genitourinary System	5.50%	359	89
Diseases Of The Musculoskeletal System And Connective Tissue	6.54%	464	115
Diseases Of The Nervous System	0.54%	11	9
Diseases Of The Respiratory System	18.84%	1,783	405
Diseases Of The Skin And Subcutaneous Tissue	2.29%	205	94
Endocrine, Nutritional And Metabolic Diseases	12.95%	427	102
Factors Influencing Health Status And Contact With Health Services	1.52%	70	30
Injury, Poisoning And Certain Other Consequences Of External Causes	0.12%	15	5
Mental, Behavioral And Neurodevelopmental Disorders	0.66%	20	8
Neoplasms	4.21%	125	9
Pregnancy, Childbirth And The Puerperium	0.10%	3	1
Symptoms, Signs And Abnormal Clinical And Laboratory Findings, Not Elsewhere Classified	16.23%	708	237

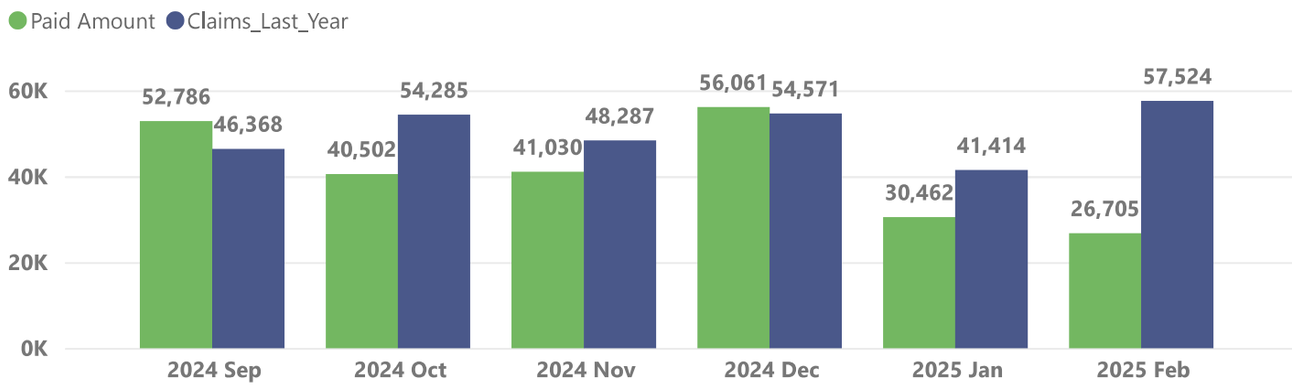
Comparison YOY (6 Months)

247,546
Paid Amount

302,450
Paid Amount LY

Note: Recent current year's claims are highly in-complete and take up to 6 months to give a completed view.

Paid Claims by Month



Policy Number	Paid Amount	Paid Amount LY	VOL Claims %	Average Lives % Change
6030440000	244,281	297,148	-17.8%	0.8%
6030450000	3,265	5,302	-38.4%	-13.0%
6030400000			-100.0%	
6030420000			-100.0%	
6030430000			-100.0%	
Total	**247,546**	**302,450**	**-18.2%**	**0.7%**

Benefit Category	Paid Amount	Paid Amount LY	VOL Claims %	VOL Cost Per Claim %	VOL Cost Per Claimant %	VOL Number of Claims %
OutPatient	179,190	213,049	-15.9%	2.6%	-0.17	-18.06%
InPatient	33,417	54,885	-39.1%	-18.4%	-0.14	-25.40%
Dental	16,086	15,137	6.3%	31.0%	0.02	-18.86%
Optical	8,459	7,626	10.9%	-8.5%	0.00	21.25%
Maternity	5,739	7,848	-26.9%	32.7%	-0.22	-44.90%
Other Services	3,922	3,450	13.7%	108.6%	0.27	-45.51%
Psychiatric Treatment	735	456	61.3%	-35.5%	-0.08	150.00%
			-100.0%	-100.0%	-1.00	-100.00%
Total	**247,546**	**302,450**	**-18.2%**	**1.0%**	**-0.20**	**-18.99%**

Country	Paid Amount	Paid Amount LY	VOL Claims %	VOL Avg Lives %
Oman	247,546	302,450	-18.2%	0.7%

Appendix

Subgroup Details

Policy_Name	Average Lives	Outpatient	In Patient	Maternity	Dental	Optical	Psychiatric	Other Services	Total Claims
EMBASSY OF UNITED STATES OF AMERICA -MUS	721	214,815	37,077	6,620	20,149	13,726	954	5,131	298,473
Total	**721**	**214,815**	**37,077**	**6,620**	**20,149**	**13,726**	**954**	**5,131**	**298,473**

*Above table does not show details of SG's with members less than 10 for confidentiality purpose.

Additional Information (1/2)

PPO vs Cash with Benefits

PPO vs CASH Benefits	cash Paid Amount	Number of Claims	Number of Claimants	ppo Paid Amount	Number of Claims	Number of Claimants	Total Paid Amount	Number of Claims	Number of Claimants
OutPatient	13,762	306	53	204,847	5,867	631	**218,610**	**6,173**	**634**
InPatient	4,134	23	5	35,211	45	31	**39,345**	**68**	**35**
Dental	8,380	65	40	12,412	287	111	**20,792**	**352**	**146**
Optical	8,143	54	40	5,908	101	66	**14,051**	**155**	**90**
Maternity	592	17	4	6,029	124	18	**6,620**	**141**	**20**
Other Services	1,578	19	14	3,552	112	30	**5,131**	**131**	**41**
Psychiatric Treatment	775	9	4	178	9	4	**954**	**18**	**8**
Total	**37,365**	**478**	**110**	**268,138**	**6,524**	**643**	**305,502**	**7,002**	**654**

Age Wise Claims

Age Bracket	Paid Amount	Number of Claims
0 - 21	83,975	2,305
21 - 24	10,793	277
25 - 29	6,571	191
30 - 34	18,103	350
35 - 39	26,790	692
40 - 44	52,751	1,030
45 - 49	42,845	970
50 - 54	36,387	646
55 - 59	16,006	340
60 - 64	8,110	141
65 - 69	3,171	61

Claims Range

Claims_Range	Paid Amount	Number of Claims
0 - 100	206,442	6,874
101 - 250	47,995	271
251 - 500	17,672	50
501 - 1000	9,485	13
1001 - 5000	18,494	9
5001 - 10000	5,414	1

Gender Wise Claims

Gender	Paid Amount	Number of Claims	Number of Claimants
FEMALE	156,433	3,547	320
MALE	149,069	3,455	334
Total	**305,502**	**7,002**	**654**

Additional Information (2/2)

Dependent Wise Claims (extended view)

Dependent Benefits	Child Paid Amount	Number of Claims	Number of Claimants	Employee Paid Amount	Number of Claims	Number of Claimants	Spouse Paid Amount	Number of Claims	Number of Claimants	Total Paid Amount	Number of Claims	Number of Claimants
OutPatient	58,819	2,335	315	97,231	2,226	186	62,560	1,612	133	**218,610**	**6,173**	**634**
InPatient	21,459	35	14	14,473	25	14	3,413	8	7	**39,345**	**68**	**35**
Dental	6,838	142	64	7,400	119	45	6,554	91	37	**20,792**	**352**	**146**
Optical	4,629	61	31	5,134	55	34	4,288	39	25	**14,051**	**155**	**90**
Maternity				180	7	3	6,441	134	17	**6,620**	**141**	**20**
Other Services	1,437	40	20	2,250	52	13	1,444	39	8	**5,131**	**131**	**41**
Psychiatric Treatment	446	8	3	478	7	3	29	3	2	**954**	**18**	**8**
Total	**93,629**	**2,611**	**327**	**127,145**	**2,480**	**189**	**84,728**	**1,911**	**138**	**305,502**	**7,002**	**654**

Dependent Wise Claims

Benefits	Child	Employee	Spouse	Total
OutPatient	58,819	97,231	62,560	**218,610**
InPatient	21,459	14,473	3,413	**39,345**
Dental	6,838	7,400	6,554	**20,792**
Optical	4,629	5,134	4,288	**14,051**
Maternity		180	6,441	**6,620**
Other Services	1,437	2,250	1,444	**5,131**
Psychiatric Treatment	446	478	29	**954**
Total	**93,629**	**127,145**	**84,728**	**305,502**

OutPatient (Utilization Details)

Member Contribution

Member Share P... Paid Amount

100%

PPO vs CASH

cash ppo

94%

634
Number of Claimants

6,173
Number of Claims

218,610
Paid Amount

Top Claimants

Claimant Serial	Paid Amount	Number of Claims
1	4,408	45
2	3,296	38
3	2,977	74
4	2,764	53
5	2,663	13
6	2,589	22
7	2,539	21
8	2,308	29
9	2,255	20
10	2,115	80

Top Claims

Claims (Masked)	Claimant (Masked)	Diagnosis Type	Paid Amount
102572	60947	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	2,352
116991	61535	Hypertension/Hyperlipidemia	876
113647	61402	PALPITATIONS	732
104633	61023	Benign neoplasm of unspecified part of mouth	723
109834	61231	Polyneuropathy, unspecified	695
112443	61358	VITAMIN D DEFICIENCY, UNSPECIFIED	576
112445	61358	Diabetes	565
115087	61457	SHORTNESS OF BREATH	559
103166	60968	Chronic migraine w/o aura, not intractable, w/o stat migr	556
103167	60968	Chronic migraine w/o aura, not intractable, w/o stat migr	540

Top Disease Diagnoses

DiagDesc1	Paid Amount	Number of Claims
ACUTE UPPER RESPIRATORY INFECTIO...	19,187	942
Essential (primary) hypertension	18,132	294
TYPE 2 DIABETES MELLITUS WITHOUT...	12,107	143
HYPERLIPIDEMIA, UNSPECIFIED	5,413	85
ACUTE BRONCHITIS, UNSPECIFIED	3,904	183
LOW BACK PAIN	3,764	134
MALIGNANT NEOPLASM OF BRAIN, U...	3,750	25
FEVER, UNSPECIFIED	3,665	146
UNSPECIFIED ABDOMINAL PAIN	3,601	124
UNSPECIFIED ACUTE LOWER RESPIRA...	3,590	112

Top Providers

ProviderName	Paid Amount
MUSCAT PRIVATE HOSPITAL - H6	22,196
OMAN INTERNATIONAL HOSPITAL ...	16,920
KIMS HOSPITAL OMAN - H29	16,777
BURJEEL HOSPITAL - H107	15,640
BADR AL SAMAA HOSPITAL-RUWI -...	11,252
AL RAFFAH POLYCLINIC MAABELA -...	9,437
BURJEEL MEDICAL CENTER - C251	8,907
ASTER ROYAL HOSPITAL - H231	7,274
SAGAR POLYCLINIC LLC - C70	5,867
ADRAK INTERNATIONAL MULTI SPE...	5,544
BADR AL SAMAA HOSPITAL (AL KH...	5,364

Paid Claims by Subgroup

Policy_Name	Paid Amount
EMBASSY OF UNITED STATES OF AMERICA...	214,815
EMBASSY OF UNITED STATES OF AMERICA...	3,794

InPatient (Utilization Details)

Member Contribution

Member Share P... Paid Amount

100%

PPO vs CASH

cash ppo

89%

35
Number of Claimants

68
Number of Claims

39,345
Paid Amount

Top Claimants

Claimant Serial	Paid Amount	Number of Claims
1	12,569	19
2	2,903	1
3	2,297	6
4	2,268	1
5	1,995	3
6	1,610	1
7	1,448	1
8	1,438	1
9	1,206	1
10	1,174	1

Top Claims

Claims (Masked)	Claimant (Masked)	Diagnosis Type	Paid Amount
102538	60947	HEADACHE	10,031
106822	61112	Laceration w/o fb of right eyelid and periocular area, init	2,903
53941	56787	Calculus of gallbladder w acute cholecyst w/o obstruction	2,268
106667	61107	ACUTE TONSILLITIS, UNSPECIFIED	1,610
102997	60959	Complex tear of medial mensc, current injury, r knee, init	1,448
110840	61280	NASAL POLYP, UNSPECIFIED	1,438
103893	60988	Acute Pancreatitis With Infected Necrosis, Unspecified	1,385
102588	60947	Acute respiratory failure with hypoxia	1,258
116756	61529	Diabetes	1,247
35392	51578	Acute abdomen	1,206

Top Disease Diagnoses

DiagDesc1	Paid Amount	Number of Claims
HEADACHE	10,031	1
Laceration w/o fb of right eyelid and p...	2,903	1
Type 2 diabetes mellitus with foot ulcer	2,297	6
Calculus of gallbladder w acute cholec...	2,268	1
Acute Pancreatitis With Infected Necr...	1,995	3
Acute respiratory failure with hypoxia	1,694	16
ACUTE TONSILLITIS, UNSPECIFIED	1,610	1
FEVER, UNSPECIFIED	1,560	4
Acute abdomen	1,542	5
Complex tear of medial mensc, curren...	1,448	1

Top Providers

ProviderName	Paid Amount
MedNet UAE_ Inter Gulf Calims Pro...	10,164
BURJEEL HOSPITAL - H107	7,434
ASTER ROYAL HOSPITAL - H231	3,461
BADR AL SAMAA HOSPITAL-RUWI -...	3,371
KIMS HOSPITAL OMAN - H29	3,234
OMAN INTERNATIONAL HOSPITAL ...	2,823
MUSCAT PRIVATE HOSPITAL - H6	2,505
SHIFA HOSPITAL - H235	1,274
APOLLO SUPER SPECIALITY HOSPIT...	610
NMC SPECIALITY HOSPITAL , AL HA...	335
ADRAK INTERNATIONAL MULTI SPE...	0

Paid Claims by Subgroup

Policy_Name	Paid Amount
EMBASSY OF UNITED STATES OF AMERICA...	37,077
EMBASSY OF UNITED STATES OF AMERICA...	2,268

Maternity (Utilization Details)

Member Contribution

Member Share P... Paid Amount

100%

PPO vs CASH

cash ppo

9% 91%

20
Number of Claimants

141
Number of Claims

6,620
Paid Amount

Top Claimants

Claimant Serial	Paid Amount	Number of Claims
1	2,020	32
2	1,978	18
3	814	29
4	453	10
5	403	7
6	217	8
7	185	9
8	125	3
9	82	2
10	64	2

Top Claims

Claims (Masked)	Claimant (Masked)	Diagnosis Type	Paid Amount
110063	61241	36 WEEKS GESTATION OF PREGNANCY	1,672
101099	60900	Supervision of elderly multigravida, third trimester	1,602
100911	60893	Malignant neoplasm of unsp site of unspecified female breast	205
100934	60893	Malignant neoplasm of unsp site of unspecified female breast	200
117300	61545	Supervision of other high risk pregnancies, second trimester	180
110037	61241	Supervision of other high risk pregnancies, third trimester	164
101110	60900	22 WEEKS GESTATION OF PREGNANCY	147
107736	61146	Pregnancy related conditions, unsp, unspecified trimester	108
117290	61545	Supervision of other high risk pregnancies, third trimester	100
107738	61146	Pregnancy related conditions, unsp, unspecified trimester	89

Top Disease Diagnoses

DiagDesc1	Paid Amount	Number of Claims
36 WEEKS GESTATION OF PREGNANCY	1,672	1
Supervision of elderly multigravida, thi...	1,602	17
Malignant neoplasm of unsp site of u...	453	10
Supervision of other high risk pregnan...	414	26
Supervision of other high risk pregnan...	348	7
Pregnancy related conditions, unsp, u...	281	5
LESS THAN 8 WEEKS GESTATION OF P...	187	7
22 WEEKS GESTATION OF PREGNANCY	186	3
Encntr for suprvsn of normal first preg...	92	4
Supervision of young multigravida, se...	90	3

Top Providers

ProviderName	Paid Amount
MUSCAT PRIVATE HOSPITAL - H6	2,527
SAADA HOSPITAL - H259	1,818
LIFELINE HOSPITAL-SALALAH - H36	345
BURJEEL HOSPITAL - H107	273
ASTER ROYAL HOSPITAL - H231	240
BADR AL SAMAA MEDICAL CENTER...	232
OMAN INTERNATIONAL HOSPITAL ...	100
MODERN AL SALAMA POLYCLINIC ...	93
AZHAR POLYCLINIC AL MABELAH - ...	82
IBRI CITY POLYCLINIC - C225	70
AL RAFFAH POLYCLINIC-AMERAT - ...	70

Paid Claims by Subgroup

Policy_Name	Paid Amount
EMBASSY OF UNITED STATES OF AMERICA...	6,620

Dental (Utilization Details)

Member Contribution

Member Share P... Paid Amount

PPO vs CASH

cash ppo

146
Number of Claimants

352
Number of Claims

20,792
Paid Amount

Top Claimants

Claimant Serial	Paid Amount	Number of Claims
1	2,175	2
2	979	2
3	842	4
4	838	4
5	672	2
6	657	2
7	657	1
8	638	5
9	615	3
10	610	5

Top Claims

Claims (Masked)	Claimant (Masked)	Diagnosis Type	Paid Amount
111317	61298	DENTAL CARIES, UNSPECIFIED	2,116
105298	61043	DENTAL CARIES, UNSPECIFIED	821
110179	61245	DENTAL CARIES, UNSPECIFIED	663
113939	61409	DENTAL CARIES, UNSPECIFIED	657
106993	61119	DENTAL CARIES, UNSPECIFIED	653
68665	58298	Dental caries on pit and fissure surface penetrat into pulp	621
104679	61026	DENTAL CARIES, UNSPECIFIED	611
102302	60939	DISTURBANCES IN TOOTH ERUPTION	586
106722	61109	DENTAL CARIES, UNSPECIFIED	411
110683	61274	DENTAL CARIES, UNSPECIFIED	364

Top Disease Diagnoses

DiagDesc1	Paid Amount	Number of Claims
DENTAL CARIES, UNSPECIFIED	13,424	126
CHRONIC GINGIVITIS, PLAQUE INDUC...	1,199	53
PERIAPICAL ABSCESS WITHOUT SINUS	841	20
PULPITIS	792	14
Dental caries on pit and fissure surfac...	747	5
Irreversible pulpitis	738	8
DISTURBANCES IN TOOTH ERUPTION	613	11
Abrasion of teeth	462	6
ACUTE GINGIVITIS, PLAQUE INDUCED	324	20
Perforation of root canal space due to...	314	2

Top Providers

ProviderName	Paid Amount
EURO ARABIAN SPECIALIST DENTA...	3,262
KIMS HOSPITAL OMAN - H29	1,556
BADR AL SAMAA POLYCLINIC -AL K...	1,238
MODERN AL SALAMA POLYCLINIC ...	842
AL AMAL MEDICAL & HEALTH CAR...	703
MUSCAT PRIVATE HOSPITAL - H6	693
SUN DENTAL CENTRE - C222	677
ELITE DENTAL MEDICAL CENTER - C...	535
BADR AL SAMAA MEDICAL CENTER...	525
ABEER HOSPITAL - H146	481
AL RAFFAH POLYCLINIC MAABELA -...	266

Paid Claims by Subgroup

Policy_Name	Paid Amount
EMBASSY OF UNITED STATES OF AMERICA...	20,149
EMBASSY OF UNITED STATES OF AMERICA...	642

Optical (Utilization Details)

Member Contribution

Member Share P... Paid Amount

22% 78%

PPO vs CASH

cash ppo

58% 42%

90
Number of Claimants

155
Number of Claims

14,051
Paid Amount

Top Claimants

Claimant Serial	Paid Amount	Number of Claims
1	305	2
2	305	1
3	305	2
3	305	3
3	305	3
3	305	2
4	305	1
4	305	1
4	305	2
4	305	1

Top Claims

Claims (Masked)	Claimant (Masked)	Diagnosis Type	Paid Amount
111652	61312	HYPERMETROPIA, BILATERAL	305
112194	61333	MYOPIA, UNSPECIFIED EYE	305
114064	61416	PRESBYOPIA	305
114068	61417	MYOPIA, BILATERAL	305
117672	61560	MYOPIA, UNSPECIFIED EYE	305
117725	61561	MYOPIA, RIGHT EYE	305
106387	61092	PRESBYOPIA	305
99961	60846	MYOPIA, UNSPECIFIED EYE	305
99668	60838	PRESBYOPIA	305
117203	61543	MYOPIA, UNSPECIFIED EYE	303

Top Disease Diagnoses

DiagDesc1	Paid Amount	Number of Claims
MYOPIA, UNSPECIFIED EYE	8,829	65
MYOPIA, BILATERAL	2,202	29
PRESBYOPIA	1,958	16
HYPERMETROPIA, BILATERAL	313	2
MYOPIA, RIGHT EYE	305	1
Other disorders of refraction	115	8
Irregular astigmatism, bilateral	109	2
UNSPECIFIED DISORDER OF REFRACTI...	51	7
Unspecified glaucoma	37	3
Keratoconjunct sicca, not specified as ...	25	1

Top Providers

ProviderName	Paid Amount
IBSAR OPTICALS-MAWALEH SOUTH...	2,628
RIVOLI CO LLC - C604	1,553
RIVOLI & Co.LLC - C630	611
RIVOLI & Co.LLC - C623	303
SHAMI OPTICS - MUSCAT GRAND ...	248
KIMS HOSPITAL OMAN - H29	137
AL HAYAT INTERNATIONAL HOSPIT...	104
SAGAR POLYCLINIC LLC - C70	71
OMAN INTERNATIONAL HOSPITAL ...	51
BURJEEL MEDICAL CENTER - C251	42
MODERN AL SALAMA POLYCLINIC ...	39

Paid Claims by Subgroup

Policy_Name	Paid Amount
EMBASSY OF UNITED STATES OF AMERICA...	13,726
EMBASSY OF UNITED STATES OF AMERICA...	325

Psychiatric (Utilization Details)

Member Contribution

Member Share P... Paid Amount

90%

PPO vs CASH

cash ppo

81% 19%

8
Number of Claimants

18
Number of Claims

954
Paid Amount

Top Claimants

Claimant Serial	Paid Amount	Number of Claims
1	379	3
2	367	4
3	79	3
4	78	3
5	29	1
6	21	1
7	0	2
7	0	1
7		
7		

Top Claims

Claims (Masked)	Claimant (Masked)	Diagnosis Type	Paid Amount
115121	61457	Major depressv disorder, recurrent severe w/o psych features	189
114986	61455	GENERALIZED ANXIETY DISORDER	118
114995	61455	GENERALIZED ANXIETY DISORDER	107
114998	61455	GENERALIZED ANXIETY DISORDER	95
115114	61457	MAJOR DEPRESSIVE DISORDER, SINGLE EPISODE, UNSPECIFIED	95
115115	61457	MAJOR DEPRESSIVE DISORDER, SINGLE EPISODE, UNSPECIFIED	95
112292	61339	DEVELOPMENTAL DISORDER OF SPEECH AND LANGUAGE, UNSPECIFIED	50
114997	61455	GENERALIZED ANXIETY DISORDER	47
113030	61377	GENERALIZED ANXIETY DISORDER	35

Top Disease Diagnoses

DiagDesc1	Paid Amount	Number of Claims
GENERALIZED ANXIETY DISORDER	466	8
MAJOR DEPRESSIVE DISORDER, SING...	219	3
Major depressv disorder, recurrent sev...	189	1
DEVELOPMENTAL DISORDER OF SPEE...	79	3
Other developmental disorders of spe...	0	1
PANIC DISORDER WITHOUT AGORAP...	0	2

Top Providers

ProviderName	Paid Amount
BADR AL SAMAA HOSPITAL-RUWI -...	99
AL RAFFAH HOSPITAL LLC-MUSCAT...	79
SHIFA HOSPITAL - H235	0

Paid Claims by Subgroup

Policy_Name	Paid Amount
EMBASSY OF UNITED STATES OF AMERICA...	954

Other Services (Utilization Details)

Member Contribution

Member Share P... Paid Amount

91%

PPO vs CASH

cash ppo

31% 69%

41
Number of Claimants

131
Number of Claims

5,131
Paid Amount

Top Claimants

Claimant Serial	Paid Amount	Number of Claims
1	463	2
2	421	10
3	421	13
3	421	10
4	372	6
5	302	2
6	301	8
7	218	9
8	211	3
9	197	1

Top Claims

Claims (Masked)	Claimant (Masked)	Diagnosis Type	Paid Amount
69628	58363	DEVELOPMENTAL DISORDER OF SPEECH AND LANGUAGE, UNSPECIFIED	332
102677	60949	Cervical disc disorder w radiculopathy, unsp cervical region	241
113752	61405	LUMBAGO WITH SCIATICA, UNSPECIFIED SIDE	208
108273	61173	Thalassemia, unspecified	197
111857	61320	ECTOPIC PREGNANCY, UNSPECIFIED	197
102770	60952	LOW BACK PAIN	182
107266	61128	LUMBAGO WITH SCIATICA, UNSPECIFIED SIDE	175
113803	61406	CERVICALGIA	156
115864	61496	Pain in left knee	149

Top Disease Diagnoses

Other Service Diagnosis	Paid Amount	Number of Claims
ML Ayurveda	3,579	97
ML Speech Therapy	463	3
ML In Hospital Cash Benefit	395	2
ML Vaccination Benefit	296	11
ML Check-up Benefit	201	7
ML Rolfing	85	5
ML Massage Therapy	64	3
ML Herbal Treatment	43	1
ML Alternative Consultation	5	1
ML Not Covered Vaccination	0	1

Top Providers

ProviderName	Paid Amount
COIMBATORE AYURVEDIC CENTRE ...	2,140
COIMBATORE AYURVEDIC CENTRE ...	311
KOTTAKKAL AYURVEDIC CENTER - ...	262
COIMBATORE AYURVEDIC CENTRE-...	218
OMAN INTERNATIONAL HOSPITAL ...	178
BURJEEL HOSPITAL - H107	168
SRI SRI AYURVEDA CLINIC - C207	165
BADR AL SAMMA ROYAL HOPSITAL...	85
KIMS HOSPITAL OMAN - H29	26

Paid Claims by Subgroup

Policy_Name	Paid Amount
EMBASSY OF UNITED STATES OF AMERICA...	5,131

Top Providers (Outpatient)

Top Outpatient Providers

ProviderName	Paid Amount	Number of Claims	Number of Claimants
MUSCAT PRIVATE HOSPITAL - H6	22,196	378	66
OMAN INTERNATIONAL HOSPITAL - H215	16,920	380	70
KIMS HOSPITAL OMAN - H29	16,777	344	88
BURJEEL HOSPITAL - H107	15,640	238	63
BADR AL SAMAA HOSPITAL-RUWI - H4	11,252	302	52
AL RAFFAH POLYCLINIC MAABELA - C350	9,437	325	50
BURJEEL MEDICAL CENTER - C251	8,907	156	32
ASTER ROYAL HOSPITAL - H231	7,274	187	56
SAGAR POLYCLINIC LLC - C70	5,867	194	28
ADRAK INTERNATIONAL MULTI SPECIALITY HOSPIT...	5,544	306	69
BADR AL SAMAA HOSPITAL (AL KHOUD) - H76	5,364	175	42
BADR AL SAMMA ROYAL HOPSITAL LLC - H303	5,351	119	27
BADR AL SAMAA MEDICAL CENTER - C483	4,944	296	54
AL RAFFAH HOSPITAL LLC-MUSCAT - H21	4,706	97	30
NMC SPECIALITY HOSPITAL GHUBRAH - H1	4,532	124	28
SHIFA HOSPITAL - H235	4,318	159	31
KIMS HEALTH MEDICAL CENTER - AL KHUWAIR - C...	4,199	42	9
MODERN AL SALAMA POLYCLINIC - C238	4,009	320	64
AL HAYAT INTERNATIONAL HOSPITAL - H56	3,923	69	22
BADR AL SAMAA POLYCLINIC -AL KHUWAIR - C14	3,651	154	35
BADR AL SAMAA POLYCLINIC - AL SUWAIQ - C426	3,530	203	27
SCIENTIFIC PHARMACY - P6	2,929	28	20
APOLLO SUPER SPECIALITY HOSPITAL LLC - H226	2,877	73	23
AL RAFFAH POLYCLINIC-AMERAT - C113	2,630	158	35
INTERNATIONAL SPECIALIZED CENTER FOR HEART ...	2,183	4	2
HATAT SPECIALITY CLINICS LLC - C607	2,065	83	11
AL AMAL MEDICAL & HEALTH CARE CENTRE (1) - C...	1,864	108	11
BADR AL SAMAA HOSPITAL- BARKA - H160	1,858	69	26
NMC SPECIALITY HOSPITAL , AL HAIL - H179	1,818	75	16
AL RAFFAH POLYCLINIC - AL KHOUD - C198	1,772	52	11

Top Outpatient Providers (excl OP Medicine)

ProviderName	Paid Amount	Number of Claims	Number of Claimants
MUSCAT PRIVATE HOSPITAL - H6	18,137	298	64
OMAN INTERNATIONAL HOSPITAL - H215	12,579	293	69
BURJEEL HOSPITAL - H107	11,056	201	62
KIMS HOSPITAL OMAN - H29	9,794	306	87
AL RAFFAH POLYCLINIC MAABELA - C350	5,162	206	50
ASTER ROYAL HOSPITAL - H231	4,908	153	54
BADR AL SAMAA HOSPITAL-RUWI - H4	4,227	217	52
BADR AL SAMMA ROYAL HOPSITAL LLC - H303	3,768	93	27
SHIFA HOSPITAL - H235	3,530	120	31
BURJEEL MEDICAL CENTER - C251	3,528	112	32
SAGAR POLYCLINIC LLC - C70	3,503	115	27
NMC SPECIALITY HOSPITAL GHUBRAH - H1	3,211	94	28
ADRAK INTERNATIONAL MULTI SPECIALITY HOSPI...	2,955	224	69
APOLLO SUPER SPECIALITY HOSPITAL LLC - H226	2,260	62	23
AL RAFFAH HOSPITAL LLC-MUSCAT - H21	2,185	65	30
INTERNATIONAL SPECIALIZED CENTER FOR HEAR...	2,183	4	2
BADR AL SAMAA HOSPITAL (AL KHOUD) - H76	2,106	139	42
AL HAYAT INTERNATIONAL HOSPITAL - H56	2,030	54	22
MODERN AL SALAMA POLYCLINIC - C238	1,923	210	64
BADR AL SAMAA POLYCLINIC - AL SUWAIQ - C426	1,808	142	27
AL RAFFAH POLYCLINIC-AMERAT - C113	1,776	106	35
BADR AL SAMAA MEDICAL CENTER - C483	1,708	186	54
KIMS HEALTH MEDICAL CENTER - AL KHUWAIR - ...	1,669	27	9
BADR AL SAMAA POLYCLINIC -AL KHUWAIR - C14	1,363	99	35
AL RAFFAH POLYCLINIC - AL KHOUD - C198	1,305	37	11
MedNet UAE_ Inter Gulf Calims Processing - H236	1,225	4	3
NMC SPECIALITY HOSPITAL , AL HAIL - H179	1,175	56	16
HATAT SPECIALITY CLINICS LLC - C607	1,018	50	11
AL AMAL MEDICAL & HEALTH CARE CENTRE (1) - ...	890	67	11
MEDICAL CITY POLYCLINIC - C221	882	10	1

Top Providers (Inpatient)

Top Inpatient Providers

ProviderName	Paid Amount	Number of Claims	Number of Claimants
MedNet UAE_ Inter Gulf Calims Processing - H236	10,164	2	2
BURJEEL HOSPITAL - H107	7,434	12	5
ASTER ROYAL HOSPITAL - H231	3,461	3	3
BADR AL SAMAA HOSPITAL-RUWI - H4	3,371	7	4
KIMS HOSPITAL OMAN - H29	3,234	2	2
OMAN INTERNATIONAL HOSPITAL - H215	2,823	3	3
MUSCAT PRIVATE HOSPITAL - H6	2,505	4	4
SHIFA HOSPITAL - H235	1,274	4	4
APOLLO SUPER SPECIALITY HOSPITAL LLC - H226	610	2	2
NMC SPECIALITY HOSPITAL , AL HAIL - H179	335	4	1
ADRAK INTERNATIONAL MULTI SPECIALITY HOSPIT...	0	1	1
SAADA HOSPITAL - H259	0	1	1

Top Inpatient Providers (excl IP Medicine)

ProviderName	Paid Amount	Number of Claims	Number of Claimants
MedNet UAE_ Inter Gulf Calims Processing - H236	10,164	2	2
BURJEEL HOSPITAL - H107	6,967	6	5
ASTER ROYAL HOSPITAL - H231	3,163	3	3
KIMS HOSPITAL OMAN - H29	3,074	2	2
BADR AL SAMAA HOSPITAL-RUWI - H4	3,003	4	4
OMAN INTERNATIONAL HOSPITAL - H215	2,753	3	3
MUSCAT PRIVATE HOSPITAL - H6	2,235	4	4
SHIFA HOSPITAL - H235	1,136	4	4
APOLLO SUPER SPECIALITY HOSPITAL LLC - H226	604	2	2
NMC SPECIALITY HOSPITAL , AL HAIL - H179	276	1	1
ADRAK INTERNATIONAL MULTI SPECIALITY HOSPI...	0	1	1
SAADA HOSPITAL - H259	0	1	1

Top Diagnosis (Inpatient & Outpatient)

Top Outpatient Diagnosis

DiagDesc1	Paid Amount	Number of Claims	Number of Claimants
ACUTE UPPER RESPIRATORY INFECTION, UNSPECIF...	19,187	942	296
Essential (primary) hypertension	18,132	294	73
TYPE 2 DIABETES MELLITUS WITHOUT COMPLICAT...	12,107	143	39
HYPERLIPIDEMIA, UNSPECIFIED	5,413	85	29
ACUTE BRONCHITIS, UNSPECIFIED	3,904	183	59
LOW BACK PAIN	3,764	134	46
MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	3,750	25	1
FEVER, UNSPECIFIED	3,665	146	68
UNSPECIFIED ABDOMINAL PAIN	3,601	124	40
UNSPECIFIED ACUTE LOWER RESPIRATORY INFECT...	3,590	112	43
HYPOTHYROIDISM, UNSPECIFIED	3,540	71	18
Acute nasopharyngitis [common cold]	3,049	161	72
INFECTIOUS GASTROENTERITIS AND COLITIS, UNS...	2,977	116	43
ACUTE PHARYNGITIS, UNSPECIFIED	2,856	130	63
TYPE 2 DIABETES MELLITUS WITH HYPERGLYCEMIA	2,734	36	14
CERVICALGIA	2,722	77	24
Malignant neoplasm of unsp site of unspecified fe...	2,638	48	1
ACUTE GASTRITIS WITHOUT BLEEDING	2,540	104	47
CHEST PAIN, UNSPECIFIED	2,157	36	19
ACUTE TONSILLITIS, UNSPECIFIED	2,127	91	35
Chronic migraine w/o aura, not intractable, w/o sta...	2,109	7	2
Urinary tract infection, site not specified	2,031	82	24
IRREGULAR MENSTRUATION, UNSPECIFIED	1,795	34	13
ANEMIA, UNSPECIFIED	1,720	33	14
Diabetes due to underlying condition w hyperglyce...	1,710	30	4
MIXED HYPERLIPIDEMIA	1,660	4	4
IRON DEFICIENCY ANEMIA, UNSPECIFIED	1,590	22	11
Cough	1,288	48	24
VITAMIN D DEFICIENCY, UNSPECIFIED	1,288	23	10
Type 2 diabetes mellitus with unspecified complica...	1,259	18	5

Top Inpatient Diagnosis

DiagDesc1	Paid Amount	Number of Claims	Number of Claimants
HEADACHE	10,031	1	1
Laceration w/o fb of right eyelid and periocular are...	2,903	1	1
Type 2 diabetes mellitus with foot ulcer	2,297	6	1
Calculus of gallbladder w acute cholecyst w/o obst...	2,268	1	1
Acute Pancreatitis With Infected Necrosis, Unspecif...	1,995	3	1
Acute respiratory failure with hypoxia	1,694	16	1
ACUTE TONSILLITIS, UNSPECIFIED	1,610	1	1
FEVER, UNSPECIFIED	1,560	4	4
Acute abdomen	1,542	5	2
Complex tear of medial mensc, current injury, r kne...	1,448	1	1
NASAL POLYP, UNSPECIFIED	1,438	1	1
Constipation, unspecified	1,174	1	1
Tubulo-interstitial nephritis, not spcf as acute or ch...	982	2	1
VOMITING, UNSPECIFIED	844	2	1
ACUTE BRONCHIOLITIS, UNSPECIFIED	834	1	1
Intervertebral disc disorders w radiculopathy, lumb...	789	2	2
Foreign body granuloma of soft tissue, NEC, right ...	778	2	1
Pain in throat	687	1	1
EXCESSIVE AND FREQUENT MENSTRUATION WITH...	644	1	1
INFECTIOUS GASTROENTERITIS AND COLITIS, UNS...	611	1	1
ACUTE UPPER RESPIRATORY INFECTION, UNSPECIF...	552	2	2
TYPE 2 DIABETES MELLITUS WITHOUT COMPLICAT...	472	2	1
DIZZINESS AND GIDDINESS	469	2	1
SHORTNESS OF BREATH	461	1	1
Sebaceous Cyst	379	1	1
ENCOUNTER FOR ROUTINE AND RITUAL MALE CIR...	251	1	1
ALLERGY TO OTHER FOODS	231	1	1
PELVIC AND PERINEAL PAIN	218	1	1
TETRALOGY OF FALLOT	133	1	1
Ganglion, right wrist	49	1	1

Cash Facility by Benefit

Outpatient

CashFacilityName	Paid Amount
Tata Memorial Centre-India-Non Netwo...	3,557
ST GREGORIOS MEDICAL MISSION HOS...	2,764
Amrita Enterprises Pvt- India-Non Netw...	1,945
VIP beauty clinics-Oman-NonNetwork - ...	738
BADR AL SAMAA HOSPITAL-RUWI - H4	628
Majan Specialist medical Center-Oman-...	368
SCIENTIFIC POLYCLINIC - SEEB - C410	247
Amritha Multispeciality clinic & diagnos...	219
Neethi lab - L7	188
New Era Hospitals -India-Non Network ...	188
TW-Physiotherapy Center-Oman-Non N...	182
TAIBA PHARMACY LLC - P39	167
KIMS HEALTH MEDICAL CENTER - AL K...	163
REIMBURSEMENT PROVIDER - India Ho...	161
WASSAN SPECIALITY DENTAL CENTER ...	158
Total	**13,762**

Inpatient

CashFacilityName	Paid Amount
Amrita Enterprises Pvt- India-Non Netw...	1,995
Kharghar Medicity Hospital - India- Non...	1,258
J.M Medical & general stores-India-Non...	436
OMAN INTERNATIONAL HOSPITAL - H2...	251
Jubilee Memorial Hospital -India -Non ...	144
PRAN Hospital-India-Non Network - C1...	49
Total	**4,134**

Maternity

CashFacilityName	Paid Amount
ST GREGORIOS MEDICAL MISSION HOS...	453
OMAN INTERNATIONAL HOSPITAL - H2...	68
BADR AL SAMAA HOSPITAL-RUWI - H4	59
MUSCAT PHARMACY AND STORES LLC ...	12
Total	**592**

Dental / Optical

CashFacilityName	Paid Amount
Muscat Dental Specialists -Oman-Non ...	1,411
Muscat dental centre- Non Network - C...	1,240
Classic Opticals-India-Non Network - C...	1,164
Lens & Frames Opticians -India -Non N...	1,081
WASSAN SPECIALITY DENTAL CENTER ...	987
SHAMI OPTICS - AVENUES MALL - C533	865
SHATTI AL QURUM MEDICAL CENTRE - ...	842
Oman dental college-Oman-Non Netwo...	821
Harub Dental Surgery_Oman_Non Netw...	657
Total	**16,523**

Other Services

CashFacilityName	Paid Amount
Integrated Medical Rehabilitation Cente...	332
COIMBATORE AYURVEDIC CENTRE LLC ...	302
Royal Hospital-Non Network - H63	197
Sultan Qaboos-Non Network - H58	197
Balance Degree LLC Ayurveda Center-O...	157
Therapedia Pediatric Rehabilitational ce...	132
Badarinath-India_Non Network - C1326	94
KIMS HEALTH MEDICAL CENTER - AL K...	62
KIMSHEALTH Medical Center B.S.C(c) - ...	62
Total	**1,578**

Psychiatric

CashFacilityName	Paid Amount
Al-Harub Medical Center -Oman-Non N...	746
MUSCAT PHARMACY AND STORES LLC ...	29
Total	**775**

Cash Utilization by Region

Overall Cash Claims by Provider Location

Provider Location	Paid Amount	Number of Claims	Number of Claimants
OMAN	19,047	186	91
Undefined	18,317	292	29
Total	37,365	478	110

Undefined Location Providers

CashFacilityName	Paid Amount	Number of Claims	Number of Claimants
Amrita Enterprises Pvt- India-Non Network - C1048	3,940	52	2
Tata Memorial Centre-India-Non Network - C1199	3,557	15	1
ST GREGORIOS MEDICAL MISSION HOSPITAL (India) - H243	3,218	53	1
Kharghar Medicity Hospital - India- Non network - H373	1,258	1	1
Classic Opticals-India-Non Network - C757	1,164	12	4
Lens & Frames Opticians -India -Non Network - C904	1,100	8	4
Eye Trend optics -India-Non Network - C1060	454	2	2
J.M Medical & general stores-India-Non Network - C1062	448	20	2
KIMS HEALTH MEDICAL CENTER - AL KHUWAIR - C488	225	7	1
REIMBURSEMENT PROVIDER - India Hospitals - Non Network - Z4	219	12	3
Amritha Multispeciality clinic & diagnostic centre- India- Non Network - C921	219	1	1
Renai medicity-India_ Non Network - C1346	215	16	3
Royal Hospital-Non Network - H63	197	1	1
Sultan Qaboos-Non Network - H58	197	1	1
Neethi lab - L7	188	11	1
New Era Hospitals -India-Non Network - H343	188	3	1
Total	18,317	292	29

Overall Cash Claims Top Providers

CashFacilityName	Paid Amount	Number of Claims	Number of Claimants
Amrita Enterprises Pvt- India-Non Network - C1048	3,940	52	2
Tata Memorial Centre-India-Non Network - C1199	3,557	15	1
ST GREGORIOS MEDICAL MISSION HOSPITAL (India) - H243	3,218	53	1
Muscat Dental Specialists -Oman-Non Network - C712	1,411	5	4
Kharghar Medicity Hospital - India- Non network - H373	1,258	1	1
Muscat dental centre- Non Network - C141	1,240	4	3
Classic Opticals-India-Non Network - C757	1,164	12	4
WASSAN SPECIALITY DENTAL CENTER Non Network - C671	1,145	12	7
Lens & Frames Opticians -India -Non Network - C904	1,100	8	4
SHAMI OPTICS - AVENUES MALL - C533	865	3	3
SHATTI AL QURUM MEDICAL CENTRE - C116	842	4	1
Oman dental college-Oman-Non Network - C1172	821	1	1
Al-Harub Medical Center -Oman-Non Network - C745	746	7	2
VIP beauty clinics-Oman-NonNetwork - C715	738	3	1
BADR AL SAMAA HOSPITAL-RUWI - H4	730	7	5
Total	37,365	478	110