NAS

Member Guide

NAS is your primary Third Party Administrator (TPA) and your main point of contact for day-to-day use of your cover. NAS provides 24/7 member support, including assistance from qualified medical professionals, answers to treatment and claims queries, and access to a wide network of medical providers.

A network of providers, including hospitals, clinics and pharmacies, and where specifically covered by your plan dentists and opticians, has been made available to you. If you visit a network provider for eligible treatment, services or supplies, costs will usually be settled directly on your behalf, so you do not have to pay first and later seek reimbursement.

All members receive a NAS digital membership card with a membership number, which can be viewed in the Wellx app. In practice, member identification in the UAE is also commonly linked to the member's Emirates ID.

Network access	Use your NAS network card details in the Wellx app and visit an eligible network provider for direct billing, subject to your plan terms.
Outside the network	If you use a provider outside the network, you will usually need to pay first and submit a reimbursement claim to NAS.
Member support	NAS is available 24/7 to answer queries, guide members, and support access to care.
Identification	Your NAS digital card and membership number are available in the Wellx app, with Emirates ID commonly used for validation in the UAE.

How the network works

- If you visit a provider within the NAS network for eligible treatment, services or supplies, costs will usually be settled directly on your behalf.
- This means you can access care on a direct-billing basis instead of paying from your own pocket and then claiming reimbursement later.
- Direct billing remains subject to your policy terms, area of cover, provider arrangements, and any applicable medical review.

When NAS reviews treatment requests

- Most routine access flows through smoothly at network providers.
- Where treatment exceeds certain cost thresholds or requires clinical review, NAS may assess the request based on the medical details submitted by the provider.
- This is part of the normal claims and care access process and helps ensure treatment is aligned with the terms of cover.

If you go outside the network

- If you visit a provider outside the network, you will usually need to pay first and then submit a claim to NAS for reimbursement, subject to your policy terms and area of cover.