

1. Provide health insurance for their employees and their dependent, by concluding a health insurance Policy with a health Insurance Company.

2. Explain and clarify to beneficiaries all articles of the Policy and the limits of the coverage provided to the Beneficiaries, through appropriate means like booklets, educational texts.

Pay the premium agreed upon with the Insurance Company, noting that if any part of this insurance subscription is not paid, the Policy shall not remain valid for a period longer than the period covered by the paid part of the subscription, and the Employer shall be responsible for providing an alternative insurance.
Provide the Insurance Company with the basic data required to conclude the Policy in accordance with the Medical Disclosure Form, and the Insurance Company may request additional data, or waive the request to fill out all or some of such data and in such case the insurance company has no right to refuse any coverage related to this waiver.

5. Maintain a record that includes the data and information of their employees and their family members insured under the Policy. In addition, allow the Council or the Insurance Company to access such records whenever they request to verify the validity of information provided by the Policyholder.

6. If the Employer wants to change the current Insurance Company or cancel the policy, the Employer shall submit a letter to notify the Insurance Company at least (30) working days prior to the date of the required cancellation, and a copy of such letter shall be submitted to the Council, Further, the Employer shall arrange another insurance Policy with a qualified Insurance Company so that the new coverage starts from the date following the cancellation of the previous Policy, provided that the Insurance Company shall notify the Council in this regard.