HEALTH CARD FINE Services HEALTH CARD TYPE I Services Services Instructions Insurance Insurance I Insurance I Insured Person: Rev Fr Abraham Karamel Address: CATHOLICATE OFFICE, DEVALOKAM P.O MUTTAMBALAM VIA, KOTTAYAM, KERALA, 686004 Age: 58 Gender :M	Admission 3. For planned hospitalization inform TPA at lea	 Toll Free No. of TPA.: 18001025671 Email ID of TPA: info@safewaytpa.in website:www.safewaytpa.in Terms & Conditions 1. This card is for identification purposes only. 2. For cashless benefit, treatment has to be taken in network hospitals only. Preauthorization is compulsory for cashless.
Policy No.: 360700/50/24/10002641 Policy Period/Validity Period: 03/09/2024 - 02/09/2025 Name of Policyholder: Rev Fr Abraham Karamel (MALANKARA ORTHODOX SYRIAN CHURCH) Relationship with Policyholder: SELF		 For reimbursement claims, TPA has to be intimated within 7 days of hospitalization and prior to discharge All terms and conditions of the Insurance policy are applicable. For grievance redressal, login to insurance Company
Figures greatives HEALTH CARD TPA ID No. : 1271/NI0300457905 Name of Insured Person: Sindhu Abraham	afeway urance TPA Pvt. Ltd.	Emergency Contact no. of TPA: 011-45451300 Toll Free No. of TPA.: 18001025671 Email ID of TPA: info@safewaytpa.in website:www.safewaytpa.in Terms & Conditions
Address: CATHOLICATE OFFICE, DEVALOKAM P.O MUTTAMBALAM VIA, KOTTAYAM, KERALA, 686004 Age: 51 Gender :F Policy No.: 360700/50/24/10002641 Policy Period/Validity Period: 03/09/2024 - 02/09/2025 Name of Policyholder: Rev Fr Abraham Karamel	Please verify Photo ID before Admission	Please erify Photo ID before Admission 1. This card is for identification purposes only. 2. For cashless benefit, treatment has to be taken in network hospital only. Preauthorization is compulsory for cashless. 3. For planned hospitalization inform TPA at least 7 days before. For emergency cases, inform within 24 hours of admission 4. For reimbursement claims, TPA has to be intimated within 7 days of hospitalization and prior to discharge 5. All terms and conditions of the Insurance policy are applicable.
(MALANKARA ORTHODOX SYRIAN CHURCH) Relationship with Policyholder: SPOUSE		For grievance redressal, login to insurance Company