

HEALTH CARD



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TPA ID No · 1299/NI0300457983

Name of Insured Person: Rev Fr Paul Mathai (Surej)

Address: CATHOLICATE OFFICE,

DEVALOKAM P.O MUTTAMBALAM VIA,

KOTTAYAM KERALA 686004

Age: 45 Gender:M Policy No.: 360700/50/24/10002641

Policy Period/Validity Period: 03/09/2024 - 02/09/2025 Name of Policyholder: Rev Fr Paul Mathai (Surej) (MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SELF

Toll Free No. of TPA.: 18001025671 Email ID of TPA: info@safewaytpa.in website:www.safewaytpa.in Terms & Conditions

This card is for identification purposes only.

Emergency Contact no. of TPA: 011-45451300

2. For cashless benefit, treatment has to be taken in network hospitals 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

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. 5.

For grievance redressal, login to insurance Company

HEALTH CARD



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Admiceion

TPA ID No.: 1299/NI0300457984 Name of Insured Person: Feby Mariam John Address: CATHOLICATE OFFICE, DEVALOKAM P.O MUTTAMBALAM VIA,

KOTTAYAM, KERALA, 686004 Gender:F Age: 40

Policy No.: 360700/50/24/10002641

Policy Period/Validity Period: 03/09/2024 - 02/09/2025 Name of Policyholder: Rev Fr Paul Mathai (Surej) (MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SPOUSE

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

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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.

For grievance redressal, login to insurance Company

HEALTH CARD



ID before

TPA ID No. : 1299/NI0300457985

Name of Insured Person: Naidhel Ann Surej Address: CATHOLICATE OFFICE,

DEVALOKAM P.O MUTTAMBALAM VIA,

KOTTAYAM KERALA 686004 Gender:F

Age: 8 Policy No.: 360700/50/24/10002641

Policy Period/Validity Period: 03/09/2024 - 02/09/2025 Name of Policyholder: Rev Fr Paul Mathai (Surei)

(MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: DAUGHTER

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

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of hospitalization and prior to discharge

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For grievance redressal, login to insurance Company



HEALTH CARD



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Admission

TPA ID No.: 1299/NI0300457986

Name of Insured Person: Nell Ann Surei Address: CATHOLICATE OFFICE,

DEVALOKAM P.O MUTTAMBALAM VIA,

KOTTAYAM, KERALA, 686004 Age: 16 Gender :F

Policy No.: 360700/50/24/10002641

Policy Period/Validity Period: 03/09/2024 - 02/09/2025 Name of Policyholder: Rev Fr Paul Mathai (Surej)

(MALANKARA ORTHODOX SYRIAN CHURCH) Relationship with Policyholder: DAUGHTER

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

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5. All terms and conditions of the Insurance policy are applicable.

For grievance redressal, login to insurance Company