

HEALTH CARD



TPA ID No · 1529/NI0300460321

Name of Insured Person: Fr. Anish Mathew Address: CATHOLICATE OFFICE, DEVALOKAM P.O MUTTAMBALAM VIA.

KOTTAYAM KERALA 686004

Gender:M Age: 43

Policy No.: 360700/50/24/10002641

Policy Period/Validity Period: 03/09/2024 - 02/09/2025

Name of Policyholder: Fr.Anish Mathew

(MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SELF

ID before

2. 3.

> Emergency Contact no. of TPA: 011-45451300 Toll Free No. of TPA.: 18001025671 Email ID of TPA: info@safewaytpa.in

For grievance redressal, login to insurance Company

Emergency Contact no. of TPA: 011-45451300

This card is for identification purposes only.

For cashless benefit, treatment has to be taken in network

hospitals only. Preauthorization is compulsory for cashless

emergency cases, inform within 24 hours of admission

For planned hospitalization inform TPA at least 7 days before. For

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.

Toll Free No. of TPA.: 18001025671 Email ID of TPA: info@safewaytpa.in

website:www.safewaytpa.in

Terms & Conditions

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website:www.safewaytpa.in Terms & Conditions

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Terms & Conditions

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HEALTH CARD

Safeway
Insurance TPA Pvt. Ltd.

verify Photo

ID before

Admiceion

TPA ID No.: 1529/NI0300460322 Name of Insured Person: Sheena Joseph 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: Fr.Anish Mathew

(MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SPOUSE

HEALTH CARD



TPA ID No. : 1529/NI0300460323 Name of Insured Person: Chris Mathew Address: CATHOLICATE OFFICE, DEVALOKAM P.O MUTTAMBALAM VIA,

KOTTAYAM KERALA 686004

Gender:M Age: 14 Policy No.: 360700/50/24/10002641

Policy Period/Validity Period: 03/09/2024 - 02/09/2025

Name of Policyholder: Fr.Anish Mathew

(MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SON

ID before

HEALTH CARD



verify Photo

ID before

Admission

TPA ID No.: 1529/NI0300460324

Name of Insured Person: Asher Mathew Address: CATHOLICATE OFFICE,

DEVALOKAM P.O MUTTAMBALAM VIA,

KOTTAYAM, KERALA, 686004 Age: 7 Gender :M

Policy No.: 360700/50/24/10002641

Policy Period/Validity Period: 03/09/2024 - 02/09/2025

Name of Policyholder: Fr.Anish Mathew

(MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SON

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Email ID of TPA: info@safewaytpa.in website:www.safewaytpa.in Terms & Conditions

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