

HEALTH CARD



TPA ID No.: 1820/NI0300456881

Name of Insured Person: Fr. Joji P Chacko Address: CATHOLICATE OFFICE,

DEVALOKAM P.O MUTTAMBALAM VIA,

KOTTAYAM, KERALA, 686004

Age: 31 Gender:M Policy No.: 360700/50/24/10002641

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

Name of Policyholder: Fr.Joji P Chacko

(MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SELF

TPA ID No.: 1820/NI0300456882

Address: CATHOLICATE OFFICE,

Name of Insured Person: Merin Susanna Kurian

DEVALOKAM P.O MUTTAMBALAM VIA,

ID before

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

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

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.

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

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

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Please verify Photo

Safeway Insurance TPA Pvt. Ltd.

KOTTAYAM, KERALA, 686004

Gender:F Age: 28

Policy No.: 360700/50/24/10002641

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

Name of Policyholder: Fr.Joji P Chacko

(MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SPOUSE

HEALTH CARD

HEALTH CARD



ID before

TPA ID No. : 1820/NI0300456883 Name of Insured Person: Georgin Jacob Joji Address: CATHOLICATE OFFICE,

DEVALOKAM P.O MUTTAMBALAM VIA,

KOTTAYAM KERALA 686004 Gender:M Age: 1

Policy No.: 360700/50/24/10002641

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

Name of Policyholder: Fr.Joji P Chacko

(MALANKARA ORTHODOX SYRIAN CHURCH)

Relationship with Policyholder: SON

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