HEALTH CARDSafeway Insurance TPA PVL Ltd.TPA ID No. : 432/NI0300458889Name of Insured Person: Rev Fr Skariah Mathew Address: CATHOLICATE OFFICE, DEVALOKAM P.O MUTTAMBALAM VIA, KOTTAYAM, KERALA, 686004 Age: 49 Gender :MPlease verify Photo ID before AdmissionPolicy No.: 360700/50/24/10002641Policy Period/Validity Period: 03/09/2024 - 02/09/2025Name of Policyholder: Rev Fr Skariah Mathew (MALANKARA ORTHODOX SYRIAN CHURCH) Relationship with Policyholder: SELF	 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 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. 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. For grievance redressal, login to insurance Company
HEALTH CARDSafewayInsurance TPA PVL Ltd.TPA ID No. : 432/NI0300458890Name of Insured Person: Susan SkariahAddress: CATHOLICATE OFFICE,DEVALOKAM P.O MUTTAMBALAM VIA,KOTTAYAM, KERALA, 686004Age: 46Gender : FPolicy No.: 360700/50/24/10002641Policy Period/Validity Period: 03/09/2024 - 02/09/2025Name of Policyholder: Rev Fr Skariah Mathew(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 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. 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. For grievance redressal, login to insurance Company
HEALTH CARDSafewayInsurance TPA PVL.Ltd.TPA ID No. : 432/NI0300458891Name of Insured Person: Abel Mathew SkariahAddress: CATHOLICATE OFFICE,DEVALOKAM P.O MUTTAMBALAM VIA,KOTTAYAM, KERALA, 686004Age: 21 Gender :MPolicy No.: 360700/50/24/10002641Policy Period/Validity Period: 03/09/2024 - 02/09/2025Name of Policyholder: Rev Fr Skariah Mathew(MALANKARA ORTHODOX SYRIAN CHURCH)Relationship with Policyholder: SON	 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 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. 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. For grievance redressal, login to insurance Company
HEALTH CARD Safeway Insurance TPA PVL.Ltd. TPA ID No. : 432/NI0300458892 Name of Insured Person: Irene Ann Skariah Address: CATHOLICATE OFFICE, DEVALOKAM P.O MUTTAMBALAM VIA, Please KOTTAYAM, KERALA, 686004 Age: 14 Gender :F Policy No.: 360700/50/24/10002641 Policy Period/Validity Period: 03/09/2024 - 02/09/2025 Name of Policyholder: Rev Fr Skariah Mathew (MALANKARA ORTHODOX SYRIAN CHURCH) Relationship with Policyholder: DAUGHTER Elationship 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 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. 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. For grievance redressal, login to insurance Company