

## HEALTH CARD

Safeway

### TPA ID No.: SHEPL/0486//TG0100006427

Name of Insured Person: BHOOPENDRA KUMAR VERMA

Address: PLOT NO.29, SECTOR-- 4, IMT, MANESAR, GURUGRAM, HARYANA, 122050 verify Photo ID before

Age: 32 Gender : M Policy No.: 0239602544

Policy Period/Validity Period: 01/08/2022 - 31/07/2023 Name of Policyholder: BHOOPENDRA KUMAR VERMA (SARITA HANDA EXPORTS PRIVATE LIMITED)

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

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

For grievance redressal, login to insurance Company



# **HEALTH CARD**



## TPA ID No.: SHEPL/0486//TG0100006428

Name of Insured Person: BARFETA Address: PLOT NO.29, SECTOR-- 4, IMT. MANESAR, GURUGRAM, HARYANA, 122050

Please verify Photo ID before Admiceion

Gender :F Age: 25 Policy No.: 0239602544

Policy Period/Validity Period: 01/08/2022 - 31/07/2023 Name of Policyholder: BHOOPENDRA KUMAR VERMA (SARITA HANDA EXPORTS PRIVATE LIMITED)

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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- 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





### TPA ID No.: SHEPL/0486//TG0100006429

Name of Insured Person: MANSI VERMA Address: PLOT NO.29, SECTOR-- 4, IMT, MANESAR, GURUGRAM, HARYANA, 122050

ID before

Age: 1 Gender :F Policy No.: 0239602544

Policy Period/Validity Period: 01/08/2022 - 31/07/2023 Name of Policyholder: BHOOPENDRA KUMAR VERMA (SARITA HANDA EXPORTS PRIVATE LIMITED) 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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- 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