

# HEALTH ASSIST INSURANCE TPA PVT LTD

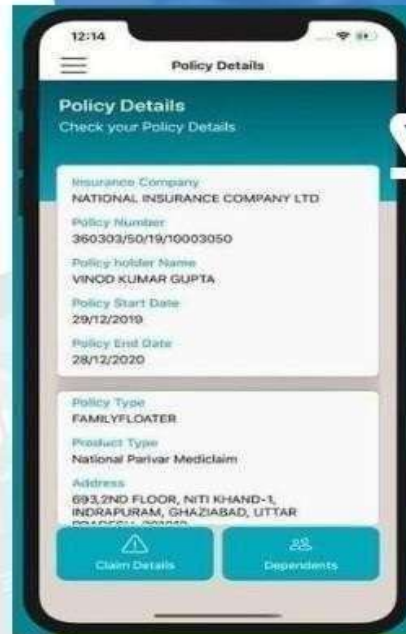
Formerly known "Safeway Insurance TPA Pvt. Ltd."

## PROCESS FLOW FOR EMPLOYEE LOGIN

INTRODUCING  
UPDATED APP

# SAFEWAY TPA Mobile App

A Great tool for  
your Health  
Insurance



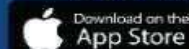
Scan Code  
to  
Download



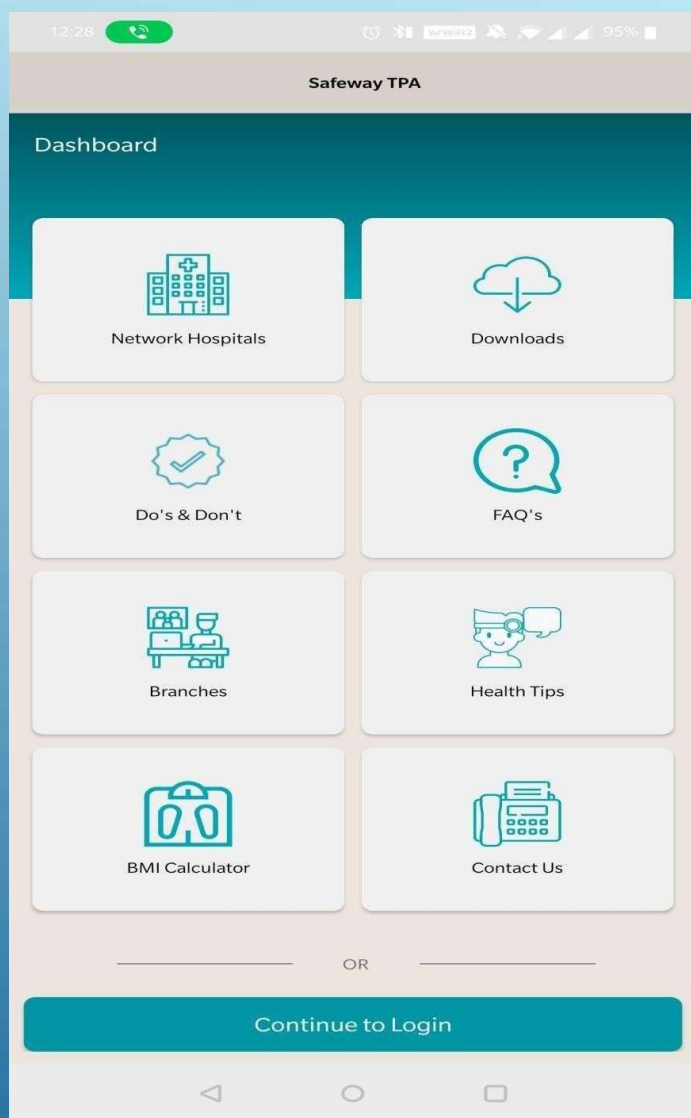
## KEY FEATURES

- ➔ Access - E\_Card
- ➔ Know your Policy
- ➔ Realtime Access of Claim Status
- ➔ Hospital Search with Navigation
- ➔ Access from Anywhere
- ➔ Exclusive login for all users

AVAILABLE ON:



# HOMEPAGE



**Click on "Continue to Login"**



**Select your Role as a User**

**Click on  
"Employee"**

[< Roles](#)**Login**

## Employee Login

Continue as Employee



Username\*



Employee Code + Dob (ddmmyyyy)

**LOGIN**

**Enter User (Emp. Code)  
&  
Password (Emp. Code+DOB)**

**Click on "Login"**

1:48 AM | 0.0KB/s

Policy Details

See your Policy Details

**Insurance Company**  
UNITED INDIA INSURANCE COMPANY

**Policy Number**  
[REDACTED]

**Policy Start Date**  
01/10/2019

**Policy End Date**  
30/09/2020

**Policy Type**  
FAMILYFLOATER

**Product Type**  
Group Mediclaim with family floater Policy

**Address**  
KOTAK MAHINDRA BANK, MUMBAI, MUMBAI, MAHARASHTRA, 400011

[Claim Details](#) [Dependents](#)

Click on Claim Details to view all the registered claims

3:46:35

Claim Details

List of Claim Details  
Filter Claims by Type and Number

**Claim Type**

**Claim Number**

**Claim No** [REDACTED]

**Card:** RS0100001789

**Patient Name:** VIKRAM SINGH

**Hospital Name:** Shri Shyam Hospital

**Admission Date:** 10/08/2020

**Discharge Date:** 11/08/2020

**Claim Amount:** 8235

**Pass Amount:** 7035

**Claim Status:** Query Raised on Claim Bills (1)

**Deduction Remarks:** 0 500.00 AS PER RR CAPPING FOR DAYCARE, 500.00 PRESCRIPTION AND DIGITAL REPORT NOT GIVEN, 200.00 PRESCRIPTION NOT GIVEN,

**Query/Rejection Remarks:** 1.HOSPITAL REGISTRATION/FACILITY/ROHINI NUMBER CERTIFICATE AND REASON OF NO INTIMATION BEFORE OR DURING HOSPITALIZATION 2.DISCHARGE SUMMARY TO BE DULY SIGNED STAMPED BY TREATING DOCTOR WITH REGISTRATION NUMBER(IN GIVEN DISCHARGE SUMMARY NO DETAILS OF TREATING DOCTOR IS MENTIONED) 3.BREAK-UP OF RS 1095/-AGAINST MEDICINE(IN GIVEN BILL DETAILS OF MEDICINE ARE NOT MENTIONED)

**UTR Number:**

**UTR Date:**

[Get Documents](#)

3:46:35 81%

Claim Details

List of Claim Details  
Filter Claims by Type and Number

Claim Type

Claim Number

Claim No. RS-1-148 (Reimbursement)  
Card: RS0100001789  
Patient Name: VIKRAM SINGH  
Hospital Name: Shri Shyam Hospital  
Admission Date: 10/08/2020  
Discharge Date: 11/08/2020  
Claim Amount: 8235  
Pass Amount: 7035  
Claim Status: Query Raised on Claim Bills (1)  
Deduction Remarks: 0 500.00 AS PER RR CAPPING FOR DAYCARE, 500.00 PRESCRIPTION AND DIGITAL REPORT NOT GIVEN, 200.00 PRESCRIPTION NOT GIVEN.  
Query/Rejection Remarks: 1.HOSPITAL REGISTRATION/FACILITY/ROHINI NUMBER CERTIFICATE AND REASON OF NO INTIMATION BEFORE OR DURING HOSPITALIZATION 2.DISCHARGE SUMMARY TO BE DULY SIGNED STAMPED BY TREATING DOCTOR WITH REGISTRATION NUMBER(IN GIVEN DISCHARGE SUMMARY NO DETAILS OF TREATING DOCTOR IS MENTIONED) 3.BREAK-UP OF RS 1095/-AGAINST MEDICINE(IN GIVEN BILL DETAILS OF MEDICINE ARE NOT MENTIONED)  
UTR Number:  
UTR Date:

Get Documents

All the claim related details will appear here with "LIVE CLAIM STATUS"

Scanned Documents can be viewed and e-mailed to selected mail id

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Downloads

Documents  
List of important documents

Documents

1. BILLS

Send to Mail Get Document

2. Claims Query Letter Replied

Send to Mail Get Document



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**Policy Details**

See your Policy Details

**Insurance Company**  
UNITED INDIA INSURANCE COMPANY

**Policy Number**  
500100/28/19/P111/089633

**Policy Holder Name**  
KOTAK MAHINDRA BANK

**Policy Start Date**  
01/10/2019

**Policy End Date**  
30/09/2020

**Policy Type**  
FAMILYFLOATER

**Product Type**  
Group Mediciclaim with family floater Policy  
MAHARASHTRA, 400011

**Claim Details** **Dependents**

**Dependent details  
and e-cards can be  
viewed here**

3:38:52

**Dependent Details** **Home**

**RAHUL**  
27 years | MALE | SELF  
Card: RS0100001673  
Employee Code: KSH-039  
Sum Insured: 100000  
Cumulative Bonus: 0  
Total Sum Insured: 100000  
Sum Insured Balance: 55689  
Domiciliary Balance: 0

**Send to Mail** **Get E-Card**

**KANCHAN**  
20 years | FEMALE | SPOUSE  
Card: RS0100001674  
Employee Code: KSH-039  
Sum Insured: 100000  
Cumulative Bonus: 0  
Total Sum Insured: 100000  
Sum Insured Balance: 55689  
Domiciliary Balance: 0

**Send to Mail** **Get E-Card**


**Dependent  
details can be  
viewed here**



1:55 AM | 1.6KB/s

**E-Card**


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**KAPPUSWAMY**  
53 years | MALE | SELF  
Card: [REDACTED]  
Employee Code: [REDACTED]  
Sum Insured: 400000  
Cumulative Bonus: 0  
Total Sum Insured: 400000  
Sum Insured Balance: 272022  
Domiciliary Balance: 272022

[Send to Mail](#) [Get E-Card](#)


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**SARASWATHI**  
51 years | FEMALE | SPOUSE  
Card: [REDACTED]  
Employee Code: [REDACTED]  
Sum Insured: 400000  
Cumulative Bonus: 0  
Total Sum Insured: 400000  
Sum Insured Balance: 272022  
Domiciliary Balance: 272022

[Send to Mail](#) [Get E-Card](#)

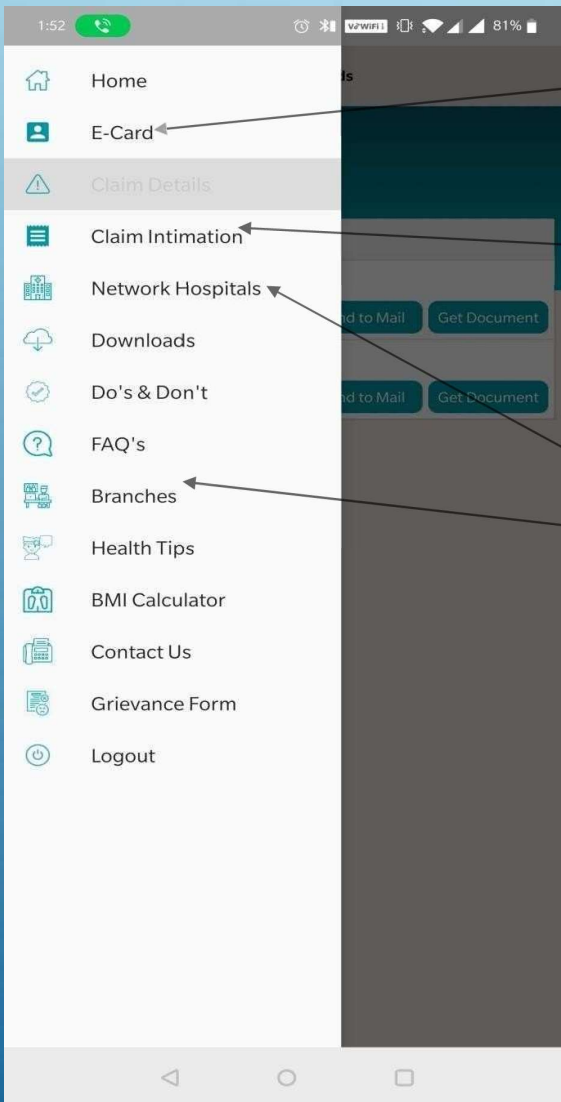
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**VIGNESHWARAN V**  
25 years | MALE | SON  
Card: [REDACTED]  
Employee Code: [REDACTED]  
Sum Insured: 400000  
Cumulative Bonus: 0

**Click on "Send to Mail" & enter the email Id on which you want the E-cards.**

**Click on "Get Card" to view the E-card.**



**E-cards can also be downloaded and e-mailed to the registered mail id.**

**Claim Intimation can also be done.**

**Details of various branches and Network hospitals can be searched**

Thank  
you