

**INFORMATION ON GROUP HEALTH INSURANCE POLICY
OF TSHCL EMPLOYEES FOR THE YEAR 2022-23**

Sl. No.	Particulars	
1	Name of the Insurance Company	M/s.The New India Assurance Co.Ltd., Divisional Office, 9 th Floor, Parishram Bhavan, Basheerbagh, Hyderabad-500004 Ph.No.040-2323646343/23240160 e-mail – nia.610200@newindia.co.in
2	Name of the Third Party Administrator(TPA)	Medsave Health Insurance TPA Limited, 2d, 2 nd Floor, Dhruvatara Apartments, Behind Nova, ENT Hospital, Erramanzil, Somajiguda, Hyderabad-500082 Ph.No.040-40242077/40213788 e-mail-hyderabadclaims@medsave.in
3	Sum Insured Amount	Rs.5.00 lakhs to each employee (including family members)
4	Sum Insured Premium Amount paid by TSHCL	@Rs.30,633.00 each
5	Validity period of Insurance	10.4.2022 to 9.4.2023
6	Contact persons of TPA	1)Mahesh Cell No.8800511176 2)Syed Mathin, CRM Cell.No.8800335180 3)S.Srinivas, Assistant Manager Cell No.9910399334
7	Download TPA Mobile App to know all the information & steps to follow for Registration by the card holders	
8	Download " Mediwheel " Mobile App from Play store	
	<ul style="list-style-type: none"> ➤ Click on Registration for Medsave Card holder ➤ Select User Type – Corporate & Login then; ➤ Enter your details – Enter your Mobile No. <ul style="list-style-type: none"> - Enter your Employee Code (as per previous year Health Card) - Enter your Policy No./Unique Code (Policy No.61020034220400000004) - Login then; ➤ Set your 4 Digit Pin – Enter Your PIN <ul style="list-style-type: none"> - Re-Enter Your PIN - Click on Enter - After Pin Successfully created – Please Re-login to continue by enter Your 4 Digit PIN then Home Page view 	
9	On HOME Page the following services are available:- My Health – Hospital Search – E-Cards – Claim Intimation – Claim Status – Quick Discharge request – Download Forms	