



The New India Assurance Co. Ltd.

Name: Kokilavani M
Member ID: 4063115040
Employee code: 17739
Relation: Self
DOB: 21 Apr 1960
Primary Member: Kokilavani M
Policy No: 87000034240400000335
Policy Period: 01 Aug 2024 To 30 Jul 2025
Policy Holder: Beml



Signature

Contact number: 0120-6937324

- This card is only for identification and is not an authorization to proceed with the treatment or a guarantee for payment.
- In the case of photoless identity cards issued to beneficiaries, acceptable proof of identity such as Aadhar Card/Passport/Driver License/ Ration Card / Voters IDCard / PAN Card should be presented at hospitals.
- This non-transferable identification card is valid at selected Network Hospitals & will enable Card Holder to avail cashless hospitalization only on the basis of preauthorization by Medi Assist.
- For the latest updated Network Hospital list, logon to www.mediassisttpa.in
- Validity of the card is subject to the holder being covered under valid policy of Insurer

MEDI ASSIST INSURANCE TPA PRIVATE LIMITED.

Tower D, 4th Floor, IBC Knowledge Park, 4/1, Bannerghatta Road, K.M.Layout, Bengaluru, Karnataka 560029.CIN: U85199KA1999PTC025676
Website: mediassisttpa.in Email: info@mediassist.in

Generated On : 05-08-2024 10:33:39