



The New India Assurance Co. Ltd.

Name: V Kumar
Member ID: 4065376487
Employee code: 18646
Relation: Self
DOB: 01 Sep 1957
Primary Member: V Kumar
Policy No: 87000034240400000429
Policy Period: 01 Oct 2024 To 30 Sep 2025
Policy Holder: Beml



V. Kumar

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, Kamataka 560029.CIN: U85199KA1999PTC025676
Website: mediassisttpa.in Email: info@mediassist.in

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The New India Assurance Co. Ltd.

Name: Pallavi Kumar V
Member ID: 4065376488
Employee code: 18646
Relation: Spouse
DOB: 16 Jun 1966
Primary Member: V Kumar
Policy No: 87000034240400000429
Policy Period: 01 Oct 2024 To 30 Sep 2025
Policy Holder: Beml



P. Kumar

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.
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