

digit

Beneficiary name: **Amrita Karki**
Member ID: **4052763718**
Employee code: **1008518**
Relation: **Self**
Date of birth: **22-Apr-1997**
Primary insured: **Amrita Karki**
Valid upto: **22-Sep-2024**
Policy holder: **MAVERIC SYSTEMS LIMITED ? PUNE**
Insurer ID: **P01001097767**


MA4052763718
Contact number: 18002089449






- This card is only for identification and is not an authorization to proceed with the treatment of 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 ID Card / 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, login to www.mediassist.in

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: vinitha.v@mediassist.in

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Beneficiary name: **Deepa Karki**
Member ID: **4052807185**
Employee code: **1008518**
Relation: **Mother**
Date of birth: **21-Jul-1972**
Primary insured: **Amrita Karki**
Valid upto: **22-Sep-2024**
Policy holder: **MAVERIC SYSTEMS LIMITED ? PUNE**
Insurer ID: **P01001215113**


MA4052807185
Contact number: 18002089449

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Beneficiary name: **Govind Singh Karki**
Member ID: **4052807186**
Employee code: **1008518**
Relation: **Father**
Date of birth: **24-Nov-1964**
Primary insured: **Amrita Karki**
Valid upto: **22-Sep-2024**
Policy holder: **MAVERIC SYSTEMS LIMITED ? PUNE**
Insurer ID: **P01001215112**


MA4052807186
Contact number: 18002089449






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