



Date : 18 Sep 2020

To,

Pavan Dhondu Vadle,
Innovsource Services Pvt Ltd And Group Companies
A-2, Kailash Ind Complex
Park Site, Vikhroli W, Mumbai-400079
PH:- 8000496070

Dear Member,

Employee ID	301802792
Employee Name	Pavan Dhondu Vadle
Medi Assist ID	5045727270
Policy Holder	Innovsource Services Pvt Ltd And Group Companies
Insurer Claim No	TP00313130020900000217
Insurer Member ID	MEMBER7596

Please refer to our earlier correspondence dated 12 Sep 2020 requesting you to furnish the following information related to your reimbursement claim (22756510).

- Claim form ? Part a: duly completed by the insured on the prescribed format - original-not given
- Pre numbered paid receipt for the amount collected from the patient on 18/06/20 for Rs. 43000-paid against final bill

We regret to observe that we have not received the same till date. We request you to furnish the information within 7 days from the date of this letter, failing which we will be constrained to recommend the insurance company for denial of your claim.



We assure you the best of our services, always.

QUICK LINKS:

Submit reimbursement claim and missing [documents online now](#).

Track this claim on [MediBuddy](#)

Learn more about [reducing cost of care](#). Plan your hospitalization with [MediBuddy](#)

Get the MediBuddy app  

This is an automated mail.

If additional documents, as requested, have already been submitted, please ignore.

Warm Regards,
Medi Assist Insurance TPA Pvt. Ltd
(Formerly known as Medi Assist India TPA Private Limited)
CIN: U85199KA1999PTC025676. Regd Off: Tower "D", 4th floor, IBC Knowledge Park, 4/1, Bannerghatta Road, Bangalore - 560 029.
Helpline: 1800 425 9449 | Contact: medibuddy.in/contactus/



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