



Date: 28-07-2025 11:36:00 AM

To,  
Ozone Hospitals Medchal  
Bungalow No 56 Sy No 606 Opp Rythu Bazar Parking G V Reddy Colony Alwal  
City :Secunderabad  
State :500010

CLAIM ID : 1530391  
PATIENT NAME : PABBATHI NARASIMHULU  
EMPLOYEE NAME: SANDEEP PABBATHI  
EMPLOYEE NO : 260003010  
COMPANY NAME : GE

**SUBJECT: Additional Information Request**

Dear Sir /Madam,

With response to your requisition for offering CASHLESS hospitalisation to the mentioned patient , we would require the following information to ascertain the coverage for the patient.

Query Reason	Description
Surgical management	Provide highlited tariff page (surgeon,OT, anesthesist, assistant) for the said procedure as per agreed tariff

We request you to submit the above information on Hospital/ Doctor's letterhead by Treating Doctor in the next 24 hours or before discharge, whichever is earlier, else the same will be considered 'Denied for CASHLESS Benefits'.

Thanks & Regards,

**Tel No.:** 011-47222601, 47222615, 47222626, 7838807980

**E-mail:** support@volohealthtpa.com

Volo Health Insurance TPA Pvt Ltd (Formerly known as East West Assist Insurance TPA Pvt Ltd)