



The New India Assurance Co. Ltd.

Beneficiary name: **Sudarshana Mogappu**  
Member ID: **4044442172**  
Employee code: **9767**  
Relation: **Self**  
Date of birth: **18-Sep-2000**  
Primary insured: **Sudarshana Mogappu**  
Valid upto: **05-Mar-2023**  
Policy holder: **WIPFLI INDIA LLP**  
Insurer ID: **MEMBER2056**



*hms, india*



**MA4044442172**

**Contact number: 1800 425 9449**

- 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.mediassisttpa.in](http://www.mediassisttpa.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: [www.mediassisttpa.in](http://www.mediassisttpa.in) Email: [rafeeque.t@mediassist.in](mailto:rafeeque.t@mediassist.in)

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The New India Assurance Co. Ltd.

Beneficiary name: **Jayanthi M**  
Member ID: **4044442173**  
Employee code: **9767**  
Relation: **Mother**  
Date of birth: **06-Mar-1968**  
Primary insured: **Sudarshana Mogappu**  
Valid upto: **05-Mar-2023**  
Policy holder: **WIPFLI INDIA LLP**  
Insurer ID: **MEMBER2058**



*hms, india*



**MA4044442173**

**Contact number: 1800 425 9449**

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The New India Assurance Co. Ltd.

Beneficiary name: **K Vishnu Prabhu**  
Member ID: **4044442174**  
Employee code: **9767**  
Relation: **Father**  
Date of birth: **15-Apr-1961**  
Primary insured: **Sudarshana Mogappu**  
Valid upto: **05-Mar-2023**  
Policy holder: **WIPFLI INDIA LLP**  
Insurer ID: **MEMBER2057**



*hms, india*



**MA4044442174**

**Contact number: 1800 425 9449**

- 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.
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