



Beneficiary name: **Vinay Padole**  
Member ID: **9139703**  
Employee code: **799680**  
Relation: **Self**  
Date of birth: **03-Mar-1990**  
Primary insured: **Vinay Padole**  
Valid upto: **31-Oct-2020**  
Policy holder: **Cognizant Technology Solutions-Non SEZ**  
Insurer ID: **--**



Contact number: 08067617574 1800 258 5895(Backup)

- 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 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.medibuddy.in](http://www.medibuddy.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.medibuddy.in](http://www.medibuddy.in) Email: [cts@mediassistindia.com](mailto:cts@mediassistindia.com)

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Beneficiary name: **Pranjal Kaware**  
Member ID: **13434681**  
Employee code: **799680**  
Relation: **Spouse**  
Date of birth: **10-May-1994**  
Primary insured: **Vinay Padole**  
Valid upto: **31-Oct-2020**  
Policy holder: **Cognizant Technology Solutions-Non SEZ**  
Insurer ID: **--**



CA13434681

Contact number: 08067617574 1800 258 5895(Backup)

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Beneficiary name: **Mangesh Padole**  
Member ID: **13434682**  
Employee code: **799680**  
Relation: **Father**  
Date of birth: **01-Jul-1964**  
Primary insured: **Vinay Padole**  
Valid upto: **31-Oct-2020**  
Policy holder: **Cognizant Technology Solutions-Non SEZ**  
Insurer ID: **--**



CA13434682

Contact number: 08067617574 1800 258 5895(Backup)

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Beneficiary name: **Shakuntala Padole**  
Member ID: **13434683**  
Employee code: **799680**  
Relation: **Mother**  
Date of birth: **01-Sep-1966**  
Primary insured: **Vinay Padole**  
Valid upto: **31-Oct-2020**  
Policy holder: **Cognizant Technology Solutions-  
Non SEZ**  
Insurer ID: **--**



**CA13434683**

**Contact number: 08067617574 1800 258 5895(Backup)**

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