FORM NO. NL-48

DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED (ANNUAL DISCLOSURE)

Name of the Insurance Company: United India Insurance Company Limited

Information as at 31/03/2024

a. Specify whether In-house Claim Settlement or Services rendered by TPA

a.1 TPA NAME

Healthindia Insurance TPA Services Pvt. Ltd.

Validity of agreement

From 01-04-2021

To _31-03-2024

b. Number of policies and lives services in respect of which public disclosures are made:

Description	Retail	Group	Govt.
No. of Policies serviced	61,538	450	
No. of Lives Covered	1,36,959	1,50,486	

Geographical Area in which services are rendered by the TPA (As per Annexure A)

d Data of number of claims processed:

No.	Percentage
1.937	NA
	NA
	83.77%
	12.11%
	NA
	1,937 36,239 31,979 4,625 1,572

e Turn Around Time *

TAT for cashless claims (in respect of number of claims):

	Individual Po	olicies (in %)	Group Policies (in %)		
Description	TAT for pre-auth	A STATE OF THE STA	TAT for pre-auth **	TAT for discharge#	
Within < 1 hour	91.40%				
Within 1-2 hours	8.59%	9.54%			
Within 2-6 hours	0.00%	0.00%	0.00%	111270	
Within 6-12 hours	0.00%	0.00%	0.00%	0.0070	
Within 12-24 hours	0.00%	0.00%	0.00%	010070	
>24 hours	0.00%	0.00%	70.00	0.0070	
Total	100.00%	100.00%		100.00%	

^{*}Percentage to be calculated on total of the respective column

f TAT in case of Payment /Repudiation of Claims

Description (to be reckoned from									
the date of receipt of last	Individual		Group		Government		Total		
necessary document)	No. of Claims	Percentage	No. of Claims		Percentage	No. of Claims			
Within 1 Month	24,523	99.18%			-	Control of the control of	-		Percentage
Between 1-3 months				11,719	98.65%		0.00%	36,242	99.01%
	202	0.82%		160	1.35%		0.00%	362	0.99%
Between 3-6 months		0.00%			0.00%				
More than 6 months	THE DESIGNATION OF THE PARTY OF	0.00%				•	0.00%		0.00%
Total					0.00%		0.00%		0.00%
Total	24,725	100.00%		11,879	100.00%		0.00%	36,604	100.00%

^{*}Percentage to be calculated on total of the respective column

g Data of grievances received against the TPA:

Description	NO.
Grievance outstanding as on 01/04/2023	0
Grievances received during 2023-24	28
Grievances resolved during 2023-24	28
Grievance outstanding as on 31/03/2024	28

Place: Date:

Chennai

Signature of the CMD
United India Insurance Co Ltd.

^{**}reckoned from the time last necessary document is received by insurer/TPA (whichever is earlier) and till final pre-auth is issued to the hospitals #reckoned as final discharge summary sent to hospital from the time discharge bill is received by TPA

TPA PUBLIC DISCLOSURE 2023-24

Annexure A

TPA Name: Health India Insurance TPA Services Pvt. Ltd.

Geographical Area in which services are rendered by the TPA

Sr.no.	Statename	District Name
1	Maharashtra	Mumbai
2	Maharashtra	Mumbai
3	Gujarat	Ahmedabad
4	Maharashtra	Aurangabad
. 5	Karnataka	Bangalore
6	Madhya Pradesh	Bhopal
7	Tamil nadu	Chennai
8	Kerala	Cochin
9	Haryana	Gurgaon
10	Telangana	Hyderabad
11	Madhya Pradesh	Indore
12	Rajasthan	Jaipur
13	Maharashtra	Kolhapur
14	west Bengal	Kolkata
15	Uttar Pradesh	Lucknow
. 16	Tamil nadu	Madurai
17	Karnataka	Mangalore
18	Maharashtra	Nagpur
19	Maharashtra	Nashik
20	Maharashtra	Pune
21	Chhattisgarh	Raipur
22	Gujarat	Rajkot
23	Maharashtra	Solapur
24	Gujarat	Surat
25	Gujarat	Vadodara
26	Maharashtra	Borivali (W)
. 27	Odisha	Bhubaneswar
28	Bihar	PATNA
29	Gujarat	VALSAD
30	Uttarakhand	DEHARADHUN
31	Tamil nadu	Coimbatore
32	JHARKHAND	Ranchi
33	Assam	Guwahati
34	Punjab	Chandigarh