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

In House

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		2		
No. of Lives Covered		15,095		

- Geographical Area in which services are rendered by the TPA (As per Annexure A)
- d Data of number of claims processed:

Description	No.	Percentage	
Outstanding number of claims at the beginning of the year:	968	NA	
ii Number of claims received during the year	61	NA	
iii Number of claims paid during the year: (Number & Percentage)	190	18.46%	
iv Number of Claims repudiated during the year:(Number & Percentage)	64	6.22%	
v Number of claims outstanding at the end of the year:	775	NA	

e Turn Around Time *

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

	Individual Po	licies (in %)	Group Policies (in %)		
Description	TAT for pre-auth	The second secon	TAT for pre-auth **	TAT for discharge#	
Within < 1 hour	0.00%	0.00%	0.00%	0.00%	
Within 1-2 hours	0.00%	0.00%	0.00%	0.00%	
Within 2-6 hours	0.00%	0.00%	0.00%	0.00%	
Within 6-12 hours	0.00%	0.00%	0.00%	0.00%	
Within 12-24 hours	0.00%	0.00%	0.00%	0.00%	
>24 hours	0.00%	0.00%	0.00%	0.00%	
Total	0.00%	0.00%	0.00%	0.00%	

^{*}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	Percentage	No. of Claims	Percentage
Within 1 Month	104	74.00%		79	69.00%		0.00%	183	72.05%
Between 1-3 months	36	26.00%		35	31.00%		0.00%	71	27.95%
Between 3-6 months	1000	0.00%			0.00%		0.00%		0.00%
More than 6 months		0.00%			0.00%		0.00%	-/-	0.00%
Total	140	100.00%		114	100.00%		0.00%	254	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	0	
Grievances resolved during 2023-24	0	
Grievance outstanding as on 31/03/2024	0	

Place:

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: In house

Geographical Area in which services are rendered by the TPA

Sr.no.	Statename	District Name	
1	All States	All Districts	