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

Vidal Health Insurance TPA 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	1,24,050	4,067	2
No. of Lives Covered	3,00,715	12,78,029	1,59,10,583

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

Description	No.	Percentage
I Outstanding number of claims at the beginning of the year:	81,087	NA
ii Number of claims received during the year	6,63,680	NA
ii Number of claims paid during the year: (Number & Percentage)	5,78,635	77.69%
v Number of Claims repudiated during the year:(Number & Percentage)	91,253	12.25%
v Number of claims outstanding at the end of the year:	74,879	NA

e Turn Around Time *

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

the state of the second	Individual Po	licies (in %)	Group Policies (in %)		
Description	TAT for pre-auth	A STATE OF THE STA	TAT for pre-auth **	TAT for discharge#	
Within < 1 hour	72.45%	47.37%	87.34%	73.82%	
Within 1-2 hours	14.23%	24.44%	7.61%	15.00%	
Within 2-6 hours	12.54%	27.31%	4.85%	10.83%	
Within 6-12 hours	0.79%	0.87%	0.20%	0.35%	
Within 12-24 hours	0.00%	0.00%	0.00%	0.00%	
>24 hours	0.00%	0.00%	0.00%	0.00%	
Total	100.00%	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	Indivi	dual							
the date of receipt of last	indivi	dual		Group		Govern	iment	Tot	al
necessary document)	No. of Claims	Percentage	No. of Claims		Percentage	No. of Claims	Percentage	No. of Claims	Percentage
Within 1 Month	47,078	91.75%		1,09,358	93.16%	4,45,989	88.99%	6,02,425	89.93%
Between 1-3 months	3,092	6.03%		6,697	5.70%	55,202	11.01%	64,991	9.70%
Between 3-6 months	792	1.54%		816	0.70%	-	0.00%	1,608	0.24%
More than 6 months	348	0.68%		516	0.44%		0.00%	864	0.13%
Total	51,310	100.00%		1,17,387	100.00%	5,01,191	100.00%	6,69,888	100.00%

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

g Data of grievances received against the TPA:

Description	NO.
1 Grievance outstanding as on 01/04/2023	7
2 Grievances received during 2023-24	574
3 Grievances resolved during 2023-24	580
4 Grievance outstanding as on 31/03/2024	1

. 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: Vidal Health Insurance TPA Pvt Ltd

Geographical Area in which services are rendered by the TPA

Sr.no.	Statename	District Name
1	Andhra Pradesh	Visakhapatnam
2	Chandigarh	Chandigarh
3	Delhi	Delhi
4	Gujarat	Ahmedabad
5	Karnataka	Bangalore
6	Madhya Pradesh	Indore
7	Maharashtra	Mumbai
8	Maharashtra	Pune
' 9	Rajasthan	Jaipur
10	Tamil Nadu	Chennai
11	Tamil Nadu	Coimbatore
12	Telangana	Hyderabad
13	West Bengal	Kolkata
14	Kerala	Kochi
15	Uttarakhand	Dehradun
16	Tamilnadu	Chengalpet
17	Tamilnadu	Chennai
18	Tamilnadu	Dharmapuri
19	Tamilnadu	Dindigul
20	Tamilnadu	Kancheepuram
21	Tamilnadu	Namakkal
22	Tamilnadu	Thanjavur
23,	Tamilnadu	Tiruvallur
24	Tamilnadu	Tiruvannamalai
25	Tamilnadu	Tiruchirapalli
26	Tamilnadu	Virudhunagar