TPA PUBLIC DISCLOSURE 2019-20

a.1 TPA NAME

No TPA

From

NA

To

NA

b Policy Particulars

Validity of agreement

| Description | Retail | Group | Govt. |
|--------------------------|--------|-------|-------|
| No. of Policies serviced | 5019 | 118 | 0 |
| No. of Lives Covered | 8772 | 93544 | 0 |

c 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: | 11526 | NA | |
| ii | Number of claims received during the year | 12961 | NA | |
| iii | Number of claims paid during the year: (Number & Percentage) | 10101 | 41.25% | |
| iv | Number of Claims repudiated during the year:(Number & Percentage) | 1833 | 7.49% | |
| v | Number of claims outstanding at the end of the year: | 12553 | 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 ** | TAT for discharge# | TAT for pre-auth ** | TAT for discharge# | |
| 1 | Within < 1 hour | NA | NA | NA | NA | |
| 2 | Within 1-2 hours | NA | NA | NA | NA | |
| 3 | Within 2-6 hours | NA | NA | NA | NA | |
| 4 | Within 6-12 hours | NA | NA | NA | NA | |
| 5 | Within 12-24 hours | NA | NA | NA | NA | |
| 6 | >24 hours | NA | NA | NA | NA | |
| | 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

| TAT in case of Payment / Repudi | ation of Claims | | | | | | | | |
|--|-----------------|------------|---------------|-------|------------|-----------------|-------------|------------------|------------|
| Description (to be reckoned from the date of receipt of last | Indivi | dual | | Group | | Govern | ment | Tot | al |
| necessary document) | | 1 | No. of Claims | | Percentage | | | | Percentage |
| necessary document) | NO. Of Claims | rercentage | NO. Of Claims | | reicentage | NO. OI CIAIITIS | reiteiltage | INO. OI CIAIIIIS | - |
| Within 1 Month | 4108 | 84.08% | | 26674 | 88.71% | 0 | 0.00% | 30782 | 88.06% |
| Between 1-3 months | 725 | 14.84% | | 3082 | 10.25% | 0 | 0.00% | 3807 | 10.89% |
| Between 3-6 months | 53 | 1.08% | | 313 | 1.04% | 0 | 0.00% | 366 | 1.05% |
| More than 6 months | 0 | 0.00% | | 0 | 0.00% | 0 | 0.00% | 0 | 0.00% |
| Total | 4886 | 100.00% | | 30069 | 100.00% | 0 | 0.00% | 34955 | 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 01/04/2019 | 0 |
| 2 | Grievances received during 2019-20 | 175 |
| 3 | Grievances resolved during 2019-20 | 175 |
| 4 | Grievance outstanding as on 31/03/2020 | 0 |

Place:

Chennai

Date :

18/12/2020

Signature of CEO

United India Insurance Co Ltd

KE.

^{**}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

Annexure A

TPA Name: In house

Geographical Area in which services are rendered by the TPA

| Sno. | Name of State | Name of District |
|------|---------------|------------------|
| 1 | All States | All Districts |