# FORM NL 48 - DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED

Name of the Insurer: ICICI Lombard General Insurance Company Limited Date: 31st March. 2022

Registration No. 115 dated August 03, 2001 CIN: L67200MH2000PLC129408

Information as at March 31st, 2022

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

Name of the TPA (If services rendered by TPA) - Heritage Health Insurance TPA Pvt. Ltd

Validity of agreement with the TPA: from 31/05/2021 to 30/05/2024

(Data shall be consolidated at insurer level in case of in-house claim settlements and

at the level of concerned TPA in case of services rendered by TPA)

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

Description	Individual	Group	Government
Number of policies	_	1	_
serviced	_	1	•
Number of lives		717	
serviced		/1/	_

### Information with regard to the geographical area in which services are rendered by the TPAs/Insurer

c. Information with regard to the geographical area in which services are rendered by the TPAS/Insurer					
Name of the State	Name of the Districts				
West Bengal	Kolkata, Paschim Bardhaman				
Maharastra	Mumba, Pune,				
Gujarat	Ahmedabad, Baroda, Surat				
Telengana	Hyderabad				
Karnataka	Bangalore				
Andhra Pradesh	Vishakapatnam				
Tamil Nadu	Chennai, Coimbatore				
Delhi	East Delhi				
Rajasthan	Jaipur				
Madhya pradesh	Indore				
Bihar	Patna				
Orissa	Khorda				
Jharkhand	Ranchi				
Kerala	Ernakulam , Thrissur				
Uttar Pradesh	Lucknow				
Tripura	West Tripura				

# d. Data of number of claims processed:

I	i.	Outstanding number of claims at the beginning of the year	1
I	ii.	Number of claims received during the year	17
I	iii.	Number of claims paid during the year (specify % also in brackets)	15 (88.24%)
I	iv.	Number of claims repudiated during the year (specify % also in brackets)	2 (11.76%)
I	٧.	Number of claims outstanding at the end of the year	1

# e. Turn Around Time (TAT) for cashless claims (in respect of number of claims):

		Individual	Policies (in %)	Group Policies (in %)		
S. No.	Description	TAT for pre-auth**	TAT for discharge***	TAT for pre-auth**	TAT for discharge***	
1	Within <1 hour	-	-	72.73%	54.55%	
2	Within 1-2 hours	-	-	18.18%	36.36%	
3	Within 2-6 hours	-	-	9.09%	9.09%	
4	Within 6-12 hours	-	-	0.00%	0.00%	
5	Within 12-24 hours	-	-	0.00%	0.00%	
6	>24 hours	-	-	0.00%	0.00%	
	Total	-	-	100.00%	100.00%	

Percentage to be calculated on total of the respective column.

\*\* 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

## f. Turn Around Time in case of payment / repudiation of claims:

i. Turii Arouna Tiii	e in case of payment / repudiation of claims.							
Description (to be reckoned from the date of receipt of last necessary	Individual		Group		Government		Total	
document	No. of Claims	Percentage	No. of Claims	Percentage	No. of Claims	Percentage	No. of Claims	Percentage
Within 1 month	_	-	15	88.24%	_	_	15	88.24%
Between 1-3 months	-	-	2	11.76%	_	-	2	11.76%
Between 3 to 6 months	_	-	-	0.00%	-	-	-	0.00%
More than 6 months	_	-	-	0.00%	-	-	-	0.00%
Total	-	-	17	100.00%	-	-	17	100.00%

Percentage shall be calculated on total of the respective column

# g. Data of grievances received against the TPA:

	S. No.	Description	Number of Grievances
ı	1	Grievances outstanding at the beginning of year	-
ı	2	Grievances received during the year	-
ı	3	Grievances resolved during the year	-
ı	4	Grievances outstanding at the end of the year	-

Refer Health TPA Regulations, as amended from time to time.