#### FORM NO. NL-48

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

Name of the Insurance Company : Kshema General Insurance Limited	Date: March 31, 2024
Information as at	

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

Name of the TPA (If services rendered by TPA) -

Validity of agreement with the TPA: **from** dd/mm/yyyy **to** dd/mm/yyyy

(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			
serviced			
Number of lives			
serviced			

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

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Name of the State	Name of the Districts				

#### d. Data of number of claims processed:

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

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				
2	Within 1-2 hours				
3	Within 2-6 hours				
4	Within 6-12 hours				
5	Within 12-24 hours				
6	>24 hours				
	Total				

Percentage to be calculated on total of the respective column.

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

Description (to be reckoned from the date of receipt of last necessary	Individual		Group		Government		Total	
document	nent No. of Claims Percentage No. of Claims P		Percentage	No. of Claims	Percentage	No. of Claims	Percentage	
Within 1 month								
Between 1-3 months								
Between 3 to 6 months								
More than 6 months								
Total								

Percentage shall be calculated on total of the respective column

<sup>\*\*</sup> 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

# g. Data of grievances received against the TPA:

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

Refer Health TPA Regulations , as amended from time to time