

FORM NO. NL-48**Public Disclosures on quantitative and qualitative Parameters of Health services rendered**Information as at **31/03/2024**Name of the Insurance Company **Manipal Cigna Health Insurance Company Limited****a. Specify whether In-house Claim Settlement or Services rendered by TPA**

Name of TPA	Service level Agreement number/Licence Number	Valid From DD/MM/YYYY	To DD/MM/YYYY
Paramount Health Services & Insurance TPA Pvt. Ltd.	006	23-Apr-21	22-Apr-24

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

Description	Individual	Group	Government	Total
Number of policies serviced	0	267	0	267
Number of lives serviced	0	165101	0	165101

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

Sr. No.	Name of State	Name of District
1	Gujarat	Ahmedabad
2	Karnataka	Bangalore
3	Punjab	Chandigarh
4	Telangana	Hyderabad
5	West Bengal	Kolkata
6	Maharashtra	Pune
7	Maharashtra	Mumbai
8	Delhi	New Delhi

d. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	555
ii.	Number of claims received during the year	7134
iii.	Number of claims paid during the year (specify % also in brackets)	6409 (95%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	304 (5%)
v.	Number of claims outstanding at the end of the year	224

* (ref. table# (d.iii): Settlement Ratio Calculated - Settled/Settled+Rejected/Closed (Excluding Rejected/Closed due to non submission of docs & Cancelled)

* (ref. table# (d.iv): Rejection Ratio Calculated - Rejected/Rejected+Settled (Excluding Rejected/Closed due to non submission of docs & Cancelled)

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

S. No.	Description	Individual Policies (in %)		Group Policies (in %)	
		TAT for pre-auth**	TAT for discharge***	TAT for pre-auth**	TAT for discharge***
1	Within <1 hour	0%	0%	77.5%	59.5%
2	Within 1-2 hours	0%	0%	19.5%	35.1%
3	Within 2-6 hours	0%	0%	2.5%	5.2%
4	Within 6-12 hours	0%	0%	0.2%	0.1%
5	Within 12-24 hours	0%	0%	0.3%	0.1%
6	>24 hours	0%	0%	0.1%	0.0%
	Total	0%	0%	100.0%	100.0%

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:

Description (to be reckoned from the date of receipt of last necessary document)	Individual		Group		Government		Total	
	No. of Claims	Percentage	No. of Claims	Percentage	No. of Claims	Percentage	No. of Claims	Percentage
Within 1 month	0	0%	6606	98.4%	0	0%	6606	98.4%
Between 1-3 months	0	0%	91	1.4%	0	0%	91	1.4%
Between 3 to 6 months	0	0%	7	0.1%	0	0%	7	0.1%
More than 6 months	0	0%	9	0.1%	0	0%	9	0.1%
Total	0	0%	6713	100.0%	0	0%	6713	100.0%

Percentage shall be calculated on total of the respective column

g. Data of grievances received against the TPA:

S. No.	Description	Number of Grievances
1	Grievances outstanding at the beginning of year	0
2	Grievances received during the year	0
3	Grievances resolved during the year	0
4	Grievances outstanding at the end of the year	0

Place: Mumbai
Date: 31-Mar-2024

Signature of CEO / Whole Time Director
ManipalCigna Health Insurance Company Ltd.