

**PERIODIC DISCLOSURES**

**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, 2024

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

Information as at March 31st, 2024

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

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

Validity of agreement with the TPA: from 16/12/2023 to 15/12/2026

(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	-	296	-
Number of lives serviced	-	273,557	-

**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
Maharashtra	Thane ,Hingoli, Jalgaon, Nappur, Nashik ,Pune, Kolhapur, Mumbai, Parbhani, Sangli, Solapur
Karnataka	Bangalore
Tamil nadu	Chennai
Delhi	Delhi
West Bengal	Kolkata
Gujarat	Ahmedabad, Surat , Baroda
Odisha	Bhubaneswar
Punjab	Chandigarh , Ludhiana
Kerala	Cochin
Assam	Guwahati
Telangana	Hyderabad
Madhya Pradesh	Indore, Bhopal
Rajasthan	Jaipur
Uttar Pradesh	Lucknow, Noida
Mizoram	Aizawl
Nagaland	Dimapur
Goa	Panaji
Bihar	Patna
Sikkim	Gangtok
Chhattisgarh	Raipur
Jharkhand	Ranchi

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

i.	Outstanding number of claims at the beginning of the year	1,335
ii.	Number of claims received during the year	33,681
iii.	Number of claims paid during the year (specify % also in brackets)	30,988 (92.73%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	2,431 (7.27%)
v.	Number of claims outstanding at the end of the year	1,597

**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	-	-	89.45%	67.90%
2	Within 1-2 hours	-	-	9.10%	28.03%
3	Within 2-6 hours	-	-	1.13%	4.01%
4	Within 6-12 hours	-	-	0.09%	0.00%
5	Within 12-24 hours	-	-	0.14%	0.02%
6	>24 hours	-	-	0.10%	0.02%
	<b>Total</b>	-	-	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:**

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	-	-	33,398	99.9%	-	-	33,398	99.9%
Between 1-3 months	-	-	21	0	-	-	21	0.1%
Between 3 to 6 months	-	-	-	0.0%	-	-	-	0.0%
More than 6 months	-	-	-	0.0%	-	-	-	0.0%
<b>Total</b>	-	-	33,419	100.0%	-	-	33,419	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	-
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.