

Annexure-1

PUBLIC DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED AS ON 31ST MARCH 2023

Name of the Insurance Company : Future Generali India Insurance Company Limited

a. Specify in-house claim settlement (if, data is in respect of in-house claim settlement)/ Specify name of the TPA with whom insurer entered into service level agreement(if data relates to the health services rendered by TPA) as may be the case - **In-house claim settlement**

(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)

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

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

Description	Individual	Group	Government
Number of policies serviced	127924	1607	0
Number of lives serviced	333796	2271375	0

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
Not Applicable	Not Applicable

d. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	7675
ii.	Number of claims received during the year	135277
iii.	Number of claims paid during the year (specify % also in brackets)	119839 (89%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	14945 (11%)
v.	Number of claims outstanding at the end of the year	8168

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	38%	33%	39%	30%
2	Within 1-2 hours	46%	51%	47%	53%
3	Within 2-6 hours	10%	15%	10%	16%
4	Within 6-12 hours	2%	0%	2%	0%
5	Within 12-24 hours	5%	0%	2%	0%
6	>24 hours	0%	0%	0%	0%
	Total	100%	100%	100%	100%

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	5395	17%	6884	7%	0	0	12279	9%
Between 1-3 months	27154	83%	95351	93%	0	0	122505	91%
Between 3 to 6 months	0	0%	0	0%	0	0	0	0%
More than 6 months	0	0%	0	0%	0	0	0	0%
Total	32549	100%	102235	100%	0	0	134784	100%

*Percentage shall be calculated on total of the respective column

g. Data of grievances received against the TPA: NA

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