

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: March 31, 2025					
Registration No. 115 dated August 03, 2001								
CIN: L67200MH2000PLC129408								
Information as at March 31, 2025								
a. Specify whether In-house Claim Settlement or Services rendered by TPA -								
Name of the TPA (If services rendered by TPA) - Medi Assist Insurance TPA Pvt Ltd								
Validity of agreement with the TPA: from 22/09/2022 to 21/09/2025								
(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	-	231	-					
Number of lives serviced	-	536,452	-					
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							
Karnataka	Bengaluru, Hubballi, Mangalore							
Gujarat	Surat, Baroda, Ahmedabad							
Orissa	Bhubaneswar							
Punjab	Chandigarh							
Tamilnadu	Chennai, Coimbatore, Madurai							
Kerala	Cochin, Thrissur							
Jharkhand	Jamshedpur, Ranchi							
Madhya Pradesh	Indore							
Goa	Goa Panaji							
Assam	Guwahati							
Telangana	Hyderabad							
Jharkhand	Jamshedpur							
West Bengal	Kolkata, Siliguri							
Uttar Pradesh	Lucknow, Noida							
Maharashtra	Mumbai, Pune, Kolhapur, Nashik							
Bihar	Patna, Ranchi							
Chattisgarh	Raipur							
Andhra Pradesh	Visakhapatnam							
d. Data of number of claims processed:								
i.	Outstanding number of claims at the beginning of the year			2,853				
ii.	Number of claims received during the year			60,242				
iii.	Number of claims paid during the year (specify % also in brackets)			54,163(91.02%)				
iv.	Number of claims repudiated during the year (specify % also in brackets)			5,345(8.98%)				
v.	Number of claims outstanding at the end of the year			3,587				
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	-	-	93.18%	80.62%			
2	Within 1-2 hours	-	-	5.41%	14.92%			
3	Within 2-6 hours	-	-	1.01%	3.80%			
4	Within 6-12 hours	-	-	0.09%	0.36%			
5	Within 12-24 hours	-	-	0.20%	0.17%			
6	>24 hours	-	-	0.11%	0.13%			
	Total	-	-	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	-	-	59,457	99.91%	-	-	59,457	99.91%
Between 1-3 months	-	-	51	0.09%	-	-	51	0.09%
Between 3 to 6 months	-	-	-	0%	-	-	-	0%
More than 6 months	-	-	-	0%	-	-	-	0%
Total	-	-	59,508	100%	-	-	59,508	100%
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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	19						
3	Grievances resolved during the year	19						
4	Grievances outstanding at the end of the year	-						
Refer Health TPA Regulations, as amended from time to time.								

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Name of the TPA (If services rendered by TPA) - Volo Health Insurance TPA Pvt. Ltd. (Formerly known as East West Assist Insurance TPA Pvt Ltd)																					
Validity of agreement with the TPA: from 30/03/2022 to 29/03/2025																					
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Rajasthan					Jaipur																
Karnataka					Bengaluru																
Tamilnadu					Chennai																
Telangana					Hyderabad																
Chandigarh					Chandigarh																
Maharashtra					Mumbai, Pune																
d. Data of number of claims processed:																					
i. Outstanding number of claims at the beginning of the year					41																
ii. Number of claims received during the year					365																
iii. Number of claims paid during the year (specify % also in brackets)					335(93.31%)																
iv. Number of claims repudiated during the year (specify % also in brackets)					24(6.69%)																
v. Number of claims outstanding at the end of the year					47																
e. Turn Around Time (TAT) for cashless claims (in respect of number of claims):																					
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1	Within <1 hour	-	-	75.00%	54.00%																
2	Within 1-2 hours	-	-	17.00%	39.00%																
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More than 6 months	-	-	-	0%	-	-	-	0%													
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PERIODIC DISCLOSURES

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

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Date: March 31, 2025

Registration No. 115 dated August 03, 2001

CIN: L67200MH2000PLC129408

Information as at March 31, 2025

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

Name of the TPA (If services rendered by TPA) - Family Health Plan Insurance TPA Ltd

Validity of agreement with the TPA: from 30/03/2023 to 29/03/2026

(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	-	34	-
Number of lives serviced	-	84,446	-

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
Telangana	Hyderabad
Gujarat	Ahmedabad, Vadodara
Karnataka	Bangalore
Madhya Pradesh	Bhopal, Indore
Haryana and Punjab	Chandigarh, Gurugram
Tamil Nadu	Coimbatore, Madurai, Chennai
Rajasthan	Jaipur
Kerala	Kochi, Trivandrum
West Bengal	Kolkata
Uttar Pradesh	Lucknow
Maharashtra	Mumbai, Pune, Nagpur, Solapur, Borivali
Odisha	Bhubaneswar
Andhra Pradesh	Krishna, Visakhapatnam
Assam	Guwahati
Goa	Goa, Mapusa
Nagaland	Dimapur
Punjab	Mohali
Jharkhand	Jamshedpur
Delhi	Delhi
Himachal Pradesh	Shimla

d. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	178
ii.	Number of claims received during the year	5,452
iii.	Number of claims paid during the year (specify % also in brackets)	4,928(93.25%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	357(6.75%)
v.	Number of claims outstanding at the end of the year	345

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	22.22%	20.70%	71.84%	43.69%
2	Within 1-2 hours	11.11%	34.50%	19.09%	35.19%
3	Within 2-6 hours	17.78%	31.00%	7.17%	20.17%
4	Within 6-12 hours	6.66%	13.80%	1.09%	0.60%
5	Within 12-24 hours	15.56%	-	0.76%	0.33%
6	>24 hours	26.67%	-	0.05%	0.03%
	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	138	100.00%	5,142	99.90%	-	-	5,280	99.91%
Between 1-3 months	-	0%	5	0.10%	-	-	5	0.09%
Between 3 to 6 months	-	0%	-	0%	-	-	-	0%
More than 6 months	-	0%	-	0%	-	-	-	0%
Total	138	100%	5,147	100%	-	-	5,285	100%

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	5
3	Grievances resolved during the year	5
4	Grievances outstanding at the end of the year	-

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

PD/2024-25/FY/Ver. Dated April 15, 2025

PERIODIC DISCLOSURES																																																																							
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Total	-	-	12,377	100%	-	-	12,377	100%																																																															
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Name of the Insurer: ICICI Lombard General Insurance Company Limited					Date: March 31, 2025																
Registration No. 115 dated August 03, 2001 CIN: L67200MH2000PLC129408																					
Information as at March 31, 2025																					
a. Specify whether In-house Claim Settlement or Services rendered by TPA -																					
Name of the TPA (If services rendered by TPA) - Raksha Health Insurance TPA PVT LTD																					
Validity of agreement with the TPA: from 31/05/2021 to 30/05/2024																					
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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																			
Tamil Nadu		Chennai																			
Haryana		Faridabad																			
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Rajasthan		Jaipur																			
Punjab		Chandigarh, Ludhiana																			
Maharashtra		Mumbai, Pune																			
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Kerala		Cochin																			
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Gujarat		Ahmedabad, Vadodara																			
d. Data of number of claims processed:																					
i.	Outstanding number of claims at the beginning of the year								17												
ii.	Number of claims received during the year								3												
iii.	Number of claims paid during the year (specify % also in brackets)								16(88.89%)												
iv.	Number of claims repudiated during the year (specify % also in brackets)								2(11.11%)												
v.	Number of claims outstanding at the end of the year								2												
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	-	-	100%	0%																
2	Within 1-2 hours	-	-	-	-																
3	Within 2-6 hours	-	-	-	-																
4	Within 6-12 hours	-	-	-	-																
5	Within 12-24 hours	-	-	-	-																
6	>24 hours	-	-	-	-																
Total		-	-	100%	0%																
Percentage to be calculated on total of the respective column.																					
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**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: March 31, 2025

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

Information as at March 31, 2025

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

Name of the TPA (If services rendered by TPA) - Good Health Insurance TPA Limited

Validity of agreement with the TPA: from 09/06/2023 to 08/06/2026

(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	-	3	-
Number of lives serviced	-	3,894	-

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
Telangana	Hyderabad
Karnataka	Bengaluru
Tamilnadu	Chennai, Madurai, Coimbatore
Andhra Pradesh	Visakhapatnam
Delhi	New Delhi
Maharashtra	Mumbai

d. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	31
ii.	Number of claims received during the year	387
iii.	Number of claims paid during the year (specify % also in brackets)	308(90.86%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	31(9.14%)
v.	Number of claims outstanding at the end of the year	79

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	-	-	99.51%	56.37%
2	Within 1-2 hours	-	-	0.49%	26.96%
3	Within 2-6 hours	-	-	-	16.67%
4	Within 6-12 hours	-	-	-	-
5	Within 12-24 hours	-	-	-	-
6	>24 hours	-	-	-	-
	<b>Total</b>	-	-	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	-	-	337	99.41%	-	-	337	99.41%
Between 1-3 months	-	-	2	1%	-	-	2	1%
Between 3 to 6 months	-	-	-	0%	-	-	-	0%
More than 6 months	-	-	-	0%	-	-	-	0%
<b>Total</b>	-	-	339	100%	-	-	339	100%

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.

**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: March 31, 2025

Registration No. 115 dated August 03, 2001

CIN: L67200MH2000PLC129408

Information as at March 31, 2025

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

Name of the TPA (If services rendered by TPA) - MDIndia Health Insurance TPA PVT LTD

Validity of agreement with the TPA: from 05/07/2021 to 04/07/2024

(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 serviced	-	6	-
Number of lives serviced	-	18,200	-

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	Pune, Nashik, Nagpur, Mumbai, Ahmednagar, Akola, Amravati, Beed, Bhandara, Dhule, Gadchiroli
Andhra Pradesh	Visakhapatnam, Vijayawada
Telangana	Hyderabad
Bihar	Patna
West Bengal	Kolkata, Asansol, Durgapur, Siliguri
Goa	Panaji
Karnataka	Bangalore, Bhadravati
Arunachal Pradesh	Nirjuli
Assam	Guwahati
Chattisgarh	Bhilai, Raipur
Jammu & Kashmir	Jammu, Srinagar
Jharkhand	Bokaro, Dhanbad, Ranchi
Orissa	Rourkela
Punjab	Ludhiana, Mohali
Rajasthan	Ajmer, Barmer, Bhilwara, Jaipur, Jalore, Jodhpur, Pali, Rajasamand, Sirahi
Uttaranchal	Dehradun
Kerala	Kochi (Cochin)
Madhya Pradesh	Indore, Bhopal
Delhi	New Delhi
Tamil Nadu	Erode, Chennai, Coimbatore, Cuddalore, Dindigul, Kanchipuram, Kanyakumari, Madurai, Ramenat
Uttar Pradesh	Lucknow, Badaun, Balampur, Bareilly, Bhaerich, Gonda, Lucknow, Noida, Firozabad, Shahjahanpur, Sitapur
Gujarat	Ahmedabad, Surat, Baroda

d. Data of number of claims processed:

i. Outstanding number of claims at the beginning of the year	343
ii. Number of claims received during the year	1,699
iii. Number of claims paid during the year (specify % also in brackets)	1,486 (82.18%)
iv. Number of claims repudiated during the year (specify % also in brackets)	126 (7.82%)
v. Number of claims outstanding at the end of the year	430

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	-	-	96.56%	81.40%
2	Within 1-2 hours	-	-	1.05%	12.50%
3	Within 2-6 hours	-	-	2.25%	2.83%
4	Within 6-12 hours	-	-	0.15%	0.15%
5	Within 12-24 hours	-	-	-	-
6	>24 hours	-	-	-	-
	Total	-	-	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	-	-	1,609	99.81%	-	-	1,609	99.81%
Between 1-3 months	-	-	3	0%	-	-	3	0%
Between 3 to 6 months	-	-	-	0%	-	-	-	0%
More than 6 months	-	-	-	0%	-	-	-	0%
Total	-	-	1,612	100%	-	-	1,612	100%

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	1
3	Grievances resolved during the year	1
4	Grievances outstanding at the end of the year	-

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



**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: March 31, 2025

Registration No. 115 dated August 03, 2001

CIN: L67200MH2000PLC129408

Information as at March 31, 2025

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

Name of the TPA (If services rendered by TPA) - Medsave Health Insurance TPA Limited

Validity of agreement with the TPA: from 14/07/2021 to 13/07/2024

(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 serviced	-	1	-
Number of lives serviced	-	1,577	-

**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
Delhi	New Delhi
Gujarat	Ahmedabad, Vadodara
Punjab	Amritsar
Karnataka	Bangalore
Madhya Pradesh	Bhopal, Indore
Chandigarh	Chandigarh
Tamil Nadu	Chennai
Telangana	Hyderabad
West Bengal	Kolkata
Maharashtra	Mumbai, Nashik, Pune
Bihar	Patna
Chhattisgarh	Raipur
Andhra Pradesh	Vijayawada

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

i.	Outstanding number of claims at the beginning of the year	12
ii.	Number of claims received during the year	58
iii.	Number of claims paid during the year (specify % also in brackets)	55(96.49%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	2(3.51%)
v.	Number of claims outstanding at the end of the year	13

**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	-	-	75.00%	27.91%
2	Within 1-2 hours	-	-	18.18%	51.16%
3	Within 2-6 hours	-	-	6.82%	20.93%
4	Within 6-12 hours	-	-	-	-
5	Within 12-24 hours	-	-	-	-
6	>24 hours	-	-	-	-
	<b>Total</b>	-	-	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-outh 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	-	-	57	100%	-	-	57	100%
Between 1-3 months	-	-	-	0%	-	-	-	0%
Between 3 to 6 months	-	-	-	0%	-	-	-	0%
More than 6 months	-	-	-	0%	-	-	-	0%
<b>Total</b>	-	-	57	100%	-	-	57	100%

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.

**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: March 31, 2025

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

Information as at March 31, 2025

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	-	276	-
Number of lives serviced	-	269,227	-

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, Fingoli, Jalgaon, Nagpur, 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	1,597
ii.	Number of claims received during the year	43,127
iii.	Number of claims paid during the year (specify % also in brackets)	39,626(91.53%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	3,666(8.47%)
v.	Number of claims outstanding at the end of the year	1,432

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	-	-	84.05%	50.65%
2	Within 1-2 hours	-	-	13.65%	32.48%
3	Within 2-6 hours	-	-	1.96%	6.74%
4	Within 6-12 hours	-	-	0.02%	0.06%
5	Within 12-24 hours	-	-	0.02%	0.08%
6	>24 hours	-	-	-	-
	Total	-	-	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	-	-	43,021	99.37%	-	-	43,021	99.37%
Between 1-3 months	-	-	271	0.63%	-	-	271	0.63%
Between 3 to 6 months	-	-	-	0%	-	-	-	0%
More than 6 months	-	-	-	0%	-	-	-	0%
Total	-	-	43,292	100%	-	-	43,292	100%

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	18
3	Grievances resolved during the year	18
4	Grievances outstanding at the end of the year	-

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

**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: March 31, 2025

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

Information as at March 31, 2025

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

Name of the TPA (If services rendered by TPA) - ICICI Lombard General Insurance Company Limited (Inhouse)

(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	862,547	20,688	-
Number of lives serviced	1,766,990	24,864,601	-

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
<a href="https://www.icicilombard.com/support/contact-us">https://www.icicilombard.com/support/contact-us</a>	

d. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	31,617
ii.	Number of claims received during the year	1,093,410
iii.	Number of claims paid during the year (specify % also in brackets)	9,24,951 (84.64%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	1,67,906 (15.36%)
v.	Number of claims outstanding at the end of the year	32,170

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	77.88%	61.57%	80.80%	57.10%
2	Within 1-2 hours	17.58%	33.59%	13.17%	37.16%
3	Within 2-6 hours	4.08%	4.62%	4.76%	5.52%
4	Within 6-12 hours	0.27%	0.13%	0.54%	0.15%
5	Within 12-24 hours	0.11%	0.07%	0.35%	0.06%
6	>24 hours	0.07%	0.02%	0.36%	0.02%
	<b>Total</b>	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	158,951	99.92%	933,326	99.95%	6	100.00%	1,092,283	99.95%
Between 1-3 months	131	0.08%	441	0.05%	-	0.00%	572	0.05%
Between 3 to 6 months	-	0%	2	0%	-	0%	2	0%
More than 6 months	-	0%	-	0%	-	0%	-	0%
<b>Total</b>	159,082	100%	933,769	100%	6	100%	1,092,857	100%

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	39
2	Grievances received during the year	2,271
3	Grievances resolved during the year	2,280
4	Grievances outstanding at the end of the year	30

Refer Health TPA Regulations, as amended from time to time

\* Out of 32,170 outstanding claims at the end of the period, 18,543 claims are outstanding due to document not received from customer / cashless approved and awaiting documents from hospitals.