DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED (INFORMATION AS AT 31.03.2022)

Name of the Insurance Company - SBI General Insurance Company Limited

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

Name of the TPA (If services rendered by TPA) - HERITAGE HEALTH INSURANCE TPA PVT LTD

Validity of agreement with the TPA: from 05/08/2021 to 05/08/2022

(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	0	5	0
Number of lives serviced	0	16097	0

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

Product	GMC
Andhra Pradesh	Yes
Arunachal Pradesh	Yes
Assam	Yes
Bihar	Yes
Chhattisgarh	Yes
Goa	Yes
Gujarat	Yes
Haryana	Yes
Himachal Pradesh	Yes
Jammu & Kashmir	Yes
Jharkhand	Yes
Karnataka	Yes
Kerala	Yes
Madhya Pradesh	Yes
Maharashtra	Yes
Manipur	Yes
Meghalaya	Yes
Mizoram	Yes
Nagaland	Yes
Odisha	Yes
Punjab	Yes
Rajasthan	Yes
Sikkim	Yes
Tamil Nadu	Yes
Telangana	Yes
Tripura	Yes
Uttar Pradesh	Yes
Uttrakhand	Yes
West Bengal	Yes
Andman & Niconar Is.	Yes
Chandigarh	Yes
Dadra & Nagra Haveli	Yes
Daman & Diu	Yes
Delhi	Yes
Lakshadweep	Yes
Puducherry	Yes

d. Data of number of claims processed:

i,	Outstanding number of claims at the beginning of the year	0
ii.	Number of claims received during the year	730
iii.	Number of claims paid during the year (specify % also in brackets)	573 (78%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	97 (13%)
V.	Number of claims outstanding at the end of the year	60

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

S. No.	Description	Individual Pol	Group Policies (in %)		
		TAT for pre-auth**	TAT for discharge***	TAT for pre-auth**	TAT for discharge***
1	Within <1 hour	0	0	551	0
2	Within 1-2 hours	0	0	42	0
3	Within 2-6 hours	0	0	15	0
4	Within 6-12 hours	0	0	0	0
5	Within 12-24 hours	0	0	0	0
6	>24 hours	0	0	0	0
	Total	0	0	608	0

Percentage to be calculated on total of the respective column.

Description (to be reckoned from the	Individual		Group		Government		Total	
date of receipt of last necessary document)	No. of Claims	Percentage						
Within 1 month	0	0%	564	84%	0%	0%	564	84%
Between 1-3 months	0	0%	102	15%	0%	0%	102	15%
Between 3 to 6 months	0	0%	4	1%	0%	0%	4	1%
More than 6 months	0	0%	0	0%	0%	0%	0	0%
Total	0	0%	670	100%	0%	0%	670	100%

Percentage shall be calculated on total of the respective column

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: 21.06.2022

Prakash Chandra Kandpal al Insurance Managing Director & CEO

^{**} 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