

**PUBLIC DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS
OF HEALTH SERVICES RENDERED
(INFORMATION AS AT 31st MARCH 2021)**

NAME OF THE INSURANCE CO: ManipalCigna Health Insurance Company Limited

A. HealthIndia Insurance TPA Services Pvt. Ltd.

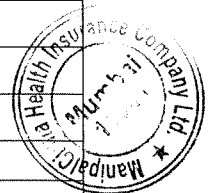
i. Validity of Agreement with TPA : 1st Sept 2020 to 31st Aug 2023

B. Number of policies and lives serviced in respect of which public disclosures are made:

Description	Individual	Group	Government
Number of policies serviced	0	3	0
Number of lives serviced	0	343	0

C. Information with regards to the geographical area in which services are rendered by the TPAs/insurer (States Names-District names shall be provided) in respect of which public disclosures are made.

Sr. No.	Name Of State	Name Of District
1	Maharashtra	Mumbai (Suburban) and Mumbai
2	Gujarat	Ahmadabad
3	Karnataka	Bangalore
4	Tamil Nadu	Chennai
5	Kerala	Ernakulam
6	Haryana	Gurgaon
7	Andhra Pradesh	Unnao
8	West Bengal	Kolkata
9	Maharashtra	Kolhapur
10	Uttar Pradesh	Lucknow
11	Maharashtra	Nagpur
12	Maharashtra	Pune
13	Gujarat	Surat
14	Maharashtra	Solapur
15	Tamil Nadu	Madurai
16	Rajasthan	Jaipur
17	Maharashtra	Nashik
18	Gujarat	Vadodara




ManipalCigna Health Insurance Company Limited
(Formerly known as CignaTTK Health Insurance Company Limited). CIN U66000MH2012PLC227948. IRDAI Reg. No. 151.
Reg. Office: 401/402, 4th Floor, Raheja Titanium, off Western Express Highway, Goregaon (East), Mumbai- 400 063.
Toll free number: 1800-102-4462, Website address: www.manipalcigna.com

Trade Name / Trade Logo belongs to MEMG International India Private Limited and Cigna Intellectual Property Inc. and is being used by ManipalCigna Health Insurance Company Limited under license.

19	Maharashtra	Murshidabad
20	Bihar	Patna
21	Madhya Pradesh	Bhopal
22	Madhya Pradesh	Indore
23	Chhattisgarh	Dehradun
24	Gujarat	Valsad
25	Odisha	sundargarh
26	Gujarat	Rajkot
27	Maharashtra	Jalgaon
28	Maharashtra	Satara
29	Chandigarh	Chandigarh

D. Data of number of claims processed:

1. Outstanding number of claims at the beginning of the year: 0
2. Number of claims received during the year:-238
3. Number of claims paid during the year: ---- 220 (92%)
4. Number of Claims repudiated during the year: --- 9 (4%)
5. Number of claims outstanding at the end of the year: --- 9

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%	46%	38%
2	Within 1-2 hours	0%	0%	28%	46%
3	Within 2-6 hours	0%	0%	20%	8%
4	Within 6-12 hours	0%	0%	0%	0%
5	Within 12-24 hours	0%	0%	2%	8%
6	>24 hours	0%	0%	4%	0%
Total		0%	0%	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



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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	
	Number of Claims	Percentage	Number of Claims	Percentage	Number of Claims	Percentage	No of claims	Percentage
within 1 months	0	0.00%	219	95.63%	0	0	219	95.63%
Between 1 – 3 Months	0	0.00%	9	3.93%	0	0	9	3.93%
Between 3 to 6 Months	0	0.00%	1	0.44%	0	0	1	0.44%
More than 6 months	0	0.00%	0	0.00%	0	0	0	0.00%
Total	0	0.00%	229	100.00%	0	0	229	100.00%

*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	Grievance outstanding at the beginning of year	0
2	Grievances received during the year	3
3	Grievances resolved during the year	3
4	Grievances outstanding at the end of the year	0






Place:

Signature of CEO / Whole Time Director

Date:

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