

FORM NO. NL-48

**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED
(ANNUAL DISCLOSURE)**

Name of the Insurance Company :-HDFC ERGO General Insurance Co.Ltd.

Information as at :- 31/03/2022

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

Name of the TPA - MEDI ASSIST INSURANCE TPA PVT. LTD.

Validity of agreement with the TPA: from 26/07/2019 to 25/07/2022

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

Description	Individual	Group	Government
Number of policies serviced	-	62	-
Number of lives serviced	-	563,330	-

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
Haryana	Gurgaon
Karnataka	Balagere
Karnataka	Bengaluru
Maharashtra	Mumbai
Tamil Nadu	Chennai
Tamil Nadu	Coimbatore

D. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	2,612
ii.	Number of claims received during the year	79,034
iii.	Number of claims paid during the year	78417(96%)
iv.	Number of claims repudiated during the year	1043(1%)
v.	Number of claims outstanding at the end of the year	2,186

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%	99%	98%
2	Within 1-2 hours	0%	0%	1%	1%
3	Within 2-6 hours	0%	0%	0%	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%	100%	100%

** 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	-	0%	77,992	98%	-	0%	77,992	98%
Between 1-3 months	-	0%	1,352	2%	-	0%	1,352	2%
Between 3 to 6 months	-	0%	99	0%	-	0%	99	0%
More than 6 months	-	0%	17	0%	-	0%	17	0%
Total	-	0%	79,460	100%	-	0%	79,460	100%

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

FORM NO. NL-48

**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED
(ANNUAL DISCLOSURE)**

Name of the Insurance Company :-HDFC ERGO General Insurance Co.Ltd.

Information as at :- 31/03/2022

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

Name of the TPA - Raksha Health Insurance TPA Pvt Ltd

Validity of agreement with the TPA: from 01/01/2021 to 31/12/2022

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

Description	Individual	Group	Government
Number of policies serviced	-	7	-
Number of lives serviced	-	2,298	-

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

D. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	-
ii.	Number of claims received during the year	117
iii.	Number of claims paid during the year	96(82%)
iv.	Number of claims repudiated during the year	16(14%)
v.	Number of claims outstanding at the end of the year	5

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%	70%	58%
2	Within 1-2 hours	0%	0%	11%	25%
3	Within 2-6 hours	0%	0%	19%	17%
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%	100%	100%

** 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 (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	-	0%	111	99%	-	0%	111	99%
Between 1-3 months	-	0%	1	1%	-	0%	1	1%
Between 3 to 6 months	-	0%	-	0%	-	0%	-	0%
More than 6 months	-	0%	-	0%	-	0%	-	0%
Total	-	0%	112	100%	-	0%	112	100%

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

FORM NO. NL-48

**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED
(ANNUAL DISCLOSURE)**

Name of the Insurance Company :-HDFC ERGO General Insurance Co.Ltd.

Information as at :- 31/03/2022

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

Name of the TPA - Vipul Health Insurance TPA Pvt. Ltd

Validity of agreement with the TPA: from 01/04/2020 to 31/03/2023

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	-	25	-

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

D. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	1
ii.	Number of claims received during the year	8
iii.	Number of claims paid during the year	9(100%)
iv.	Number of claims repudiated during the year	0(0%)
v.	Number of claims outstanding at the end of the year	-

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%	100%	0%
2	Within 1-2 hours	0%	0%	0%	0%
3	Within 2-6 hours	0%	0%	0%	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%	100%	0%

** 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 (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	-	0%	2	22%	-	-	2	22%
Between 1-3 months	-	0%	2	22%	-	-	2	22%
Between 3 to 6 months	-	0%	5	56%	-	-	5	56%
More than 6 months	-	0%	-	0%	-	-	-	0%
Total	-	0%	9	100%	-	-	9	100%

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

FORM NO. NL-48

**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED
(ANNUAL DISCLOSURE)**

Name of the Insurance Company :-HDFC ERGO General Insurance Co.Ltd.

Information as at :- 31/03/2022

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

Name of the TPA - Vidal Health TPA

Validity of agreement with the TPA: from 26/07/2019 to 25/07/2022

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

Description	Individual	Group	Government
Number of policies serviced	-	-	-
Number of lives serviced	-	150	-

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

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	3
iii.	Number of claims paid during the year	3(20%)
iv.	Number of claims repudiated during the year	12(80%)
v.	Number of claims outstanding at the end of the year	0

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%	0%	0%
2	Within 1-2 hours	0%	0%	0%	0%
3	Within 2-6 hours	0%	0%	0%	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%	0%	0%

** 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	-	0%	15	100%	-	-	15	100%
Between 1-3 months	-	0%	-	0%	-	-	-	0%
Between 3 to 6 months	-	0%	-	0%	-	-	-	0%
More than 6 months	-	0%	-	0%	-	-	-	0%
Total	-	0%	15	100%	-	-	15	100%

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

FORM NO. NL-48

**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED
(ANNUAL DISCLOSURE)**

Name of the Insurance Company :-HDFC ERGO General Insurance Co.Ltd.

Information as at :- 31/03/2022

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

Name of the TPA - Paramount Health Services and Insurance TPA Pvt. Ltd.

Validity of agreement with the TPA: from 01/04/2021 to 31/03/2024

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

Description	Individual	Group	Government
Number of policies serviced	-	37	-
Number of lives serviced	-	174,596	-

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	Mumbai
Maharashtra	Nagpur
Maharashtra	Pune
New Delhi	Delhi

D. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	11
ii.	Number of claims received during the year	2,900
iii.	Number of claims paid during the year	2139 (73%)
iv.	Number of claims repudiated during the year	76 (3%)
v.	Number of claims outstanding at the end of the year	696

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%	93%	87%
2	Within 1-2 hours	0%	0%	6%	12%
3	Within 2-6 hours	0%	0%	1%	1%
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%	100%	100%

** 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 (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	-	0%	2,165	98%	-	0%	2,165	98%
Between 1-3 months	-	0%	49	2%	-	0%	49	2%
Between 3 to 6 months	-	0%	1	0%	-	0%	1	0%
More than 6 months	-	0%	-	0%	-	0%	-	0%
Total	-	0%	2,215	100%	-	0%	2,215	100%

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

FORM NO. NL-48

**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED
(ANNUAL DISCLOSURE)**

Name of the Insurance Company :-HDFC ERGO General Insurance Co.Ltd.

Information as at :- 31/03/2022

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

Name of the TPA - Medvantage Insurance TPA Pvt. Ltd. (Formerly known as UnitedHealthcare Parekh Insurance TPA Private Limited)

Validity of agreement with the TPA: from 05/12/2018 to 04/12/2021

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

Description	Individual	Group	Government
Number of policies serviced	-	8	-
Number of lives serviced	-	20,459	-

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	Mumbai

D. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	80
ii.	Number of claims received during the year	3,412
iii.	Number of claims paid during the year	2975 (85%)
iv.	Number of claims repudiated during the year	426 (12%)
v.	Number of claims outstanding at the end of the year	91

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%	59%	56%
2	Within 1-2 hours	0%	0%	27%	29%
3	Within 2-6 hours	0%	0%	13%	14%
4	Within 6-12 hours	0%	0%	1%	1%
5	Within 12-24 hours	0%	0%	0%	0%
6	>24 hours	0%	0%	0%	0%
	Total	0%	0%	100%	100%

** 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 (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	-	0%	3,189	94%	-	0%	3,189	94%
Between 1-3 months	-	0%	206	6%	-	0%	206	6%
Between 3 to 6 months	-	0%	6	0%	-	0%	6	0%
More than 6 months	-	0%	-	0%	-	0%	-	0%
Total	-	0%	3,401	100%	-	0%	3,401	100%

G. Data of grievances received against the TPA:

S. No.	Description	Number of Grievances
1	Grievances outstanding at the beginning of year	0
2	Grievances received during the year	15
3	Grievances resolved during the year	15
4	Grievances outstanding at the end of the year	0

Refer Health TPA Regulations , as amended from time to time

FORM NO. NL-48

DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED (ANNUAL DISCLOSURE)

Name of the Insurance Company :-HDFC ERGO General Insurance Co.Ltd.

Information as at :- 31/03/2022

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

Name of the TPA - Family Health Plan Insurance TPA Ltd

Validity of agreement with the TPA: from 24/11/2020 to 23/11/2023

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

Description	Individual	Group	Government
Number of policies serviced	-	79	-
Number of lives serviced	-	156,942	-

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
Andhra Pradesh	VISAKHAPATNAM
Andhra Pradesh	VIZIANAGARAM
Chandigarh	CHANDIGARH
Delhi	EAST
Delhi	NEW DELHI
Delhi	SOUTH
Delhi	SOUTH WEST
Gujarat	AHMADABAD
Haryana	GURGAON
Karnataka	BANGALORE
Kerala	ERNAKULAM
Maharashtra	MUMBAI
Maharashtra	PUNE
Maharashtra	THANE
Punjab	SAS NAGAR (MOHALI)
Rajasthan	ALWAR
Rajasthan	BHILWARA
Rajasthan	JAIPUR
Tamil Nadu	CHENNAI
Tamil Nadu	COIMBATORE
Tamil Nadu	KANCHEEPURAM
Tamil Nadu	KRISHNAGIRI
Telangana	HYDERABAD
Uttar Pradesh	GAUTAM BUDDHA NAGAR
Uttar Pradesh	LUCKNOW
UTTARAKHAND	HARDWAR
West Bengal	KOLKATA
West Bengal	NORTH TWENTY FOUR PARGANAS
West Bengal	PURAB MEDINIPUR

D. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	2,541
ii.	Number of claims received during the year	17,355
iii.	Number of claims paid during the year	15758 (79%)
iv.	Number of claims repudiated during the year	3367 (17%)
v.	Number of claims outstanding at the end of the year	771

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%	67%	60%
2	Within 1-2 hours	0%	0%	22%	27%
3	Within 2-6 hours	0%	0%	9%	11%
4	Within 6-12 hours	0%	0%	1%	1%
5	Within 12-24 hours	0%	0%	1%	1%
6	>24 hours	0%	0%	0%	0%
	Total	0%	0%	100%	100%

** 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 (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	1,354	95%	16,640	94%	-	0%	17,994	94%
Between 1-3 months	57	4%	885	5%	-	0%	942	5%
Between 3 to 6 months	12	1%	110	1%	-	0%	122	1%
More than 6 months	-	0%	67	0%	-	0%	67	0%
Total	1,423	100%	17,702	100%	-	0%	19,125	100%

G. Data of grievances received against the TPA:

S. No.	Description	Number of Grievances
1	Grievances outstanding at the beginning of year	2
2	Grievances received during the year	9
3	Grievances resolved during the year	11
4	Grievances outstanding at the end of the year	0

Refer Health TPA Regulations , as amended from time to time

FORM NO. NL-48

**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED
(ANNUAL DISCLOSURE)**

Name of the Insurance Company :-HDFC ERGO General Insurance Co.Ltd.

Information as at :- 31/03/2022

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

Name of the TPA -NIL

Validity of agreement with the TPA: NIL

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

Description	Individual	Group	Government
Number of policies serviced	2,138,565	5,079	-
Number of lives serviced	4,877,217	2,993,290	-

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
ANDAMAN & NICOBAR IS.	
ANDHRA PRADESH	
ARUNACHAL PRADESH	
ASSAM	
BIHAR	
CHANDIGARH	
CHHATTISGARH	
Dadra & Nagra Haveli	
DAMAN & DIU	
DELHI	
GOA	
GUJARAT	
HARYANA	
HIMACHAL PRADESH	
JAMMU & KASHMIR	
JHARKHAND	
KARNATAKA	
KERALA	
LAKSHADWEEP	
MADHYA PRADESH	
MAHARASHTRA	
MANIPUR	
MEGHALAYA	
MIZORAM	
NAGALAND	
ORISSA	
PUDUCHERRY	
PUNJAB	
RAJASTHAN	
SIKKIM	
TAMIL NADU	
TELANGANA	
TRIPURA	
UTTAR PRADESH	
UTTARAKHAND	
WEST BENGAL	

D. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	41,537
ii.	Number of claims received during the year	628,597
iii.	Number of claims paid during the year (specify % also in brackets)	562998 (84%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	88081 (13%)
v.	Number of claims outstanding at the end of the year	19,055

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	68%	65%	75%	73%
2	Within 1-2 hours	27%	29%	21%	23%
3	Within 2-6 hours	5%	5%	4%	4%
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	100%	100%	100%	100%

** 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 (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	431,612	81%	99,615	83%	-	0%	531,227	82%
Between 1-3 months	94,107	18%	19,012	16%	-	0%	113,119	17%
Between 3 to 6 months	3,947	1%	1,061	1%	-	0%	5,008	1%
More than 6 months	1,339	0%	386	0%	-	0%	1,725	0%
Total	531,005	100%	120,074	100%	-	0%	651,079	100%

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	2,016
3	Grievances resolved during the year	2,016
4	Grievances outstanding at the end of the year	-

Refer Health TPA Regulations , as amended from time to time