

Total Claims Experience Report

	Claims	Value (Rs.)	% Claims	% Value
Cashless Settled	3	221,153.00	12.0 %	34.87 %
Cashless Approved	1	68,007.00	4.0 %	10.72 %
Reimbursement Settled	16	344,881.00	64.0 %	54.37 %
Reimbursement Approved	1	241.00	4.0 %	0.04 %
Denials	0	0.00	0.0 %	0.0 %
Closed	4	0.00	16.0 %	0.0 %
Domiciliary claims	0	0.00	0.0 %	0.0 %
Total	25	634,282.00		
Cashless in Process*	0	0.00		
Reimbursement in Process*	4	132,832.00		
Grand Total (Rs.)	29	767,114.00		
First Time Premium (Rs.)^				1,325,000.00
Endo Premium (Rs.)^				290,373.00
Deletion Premium (Rs.)^				9,890.00
Total Premium (Rs.)^				1,605,483.00
Claims Ratio (%)				47.78 %
Claims Ratio (%) - On Earned Premium#				56.44 %
Value of Denied claims (Rs.):				0.00
Value of Closed claims (Rs.):				58,203.00
* Depicts the claimed amount for claims in process. The settlement amount will be less than the above figures and will result in respective decrease in the claims ratio.				
** The value is for preauthorisation issued and awaiting for final documentation. Depicts the approved PA amount for PA issued. The settlement amount will be less than or equal to the above figures and could result in respective decrease in the claims ratio.				
# Does not apply to policies with Instalment Premium				
^ Premium details as received from insurer & updated in our data as on date				

Morbidity Ratio

Descriptions	Values
No. of lives Insured	595
No. of Claims	25
No. of Claims made per 100 Lives Insured	4.2 %
No. of lives Inception	417
Addition	178
Deletion	22
CurrentLives	573

Ailments Profile

ICD Group	No. of Claims	Value (Rs.)	% of Claims	% of Value
NEONATAL DISORDERS	4.0	148,065.00	19.05 %	23.34 %
INFECTIOUS DISEASES (BACTERIAL / VIRAL / Others)	6.0	141,223.00	28.57 %	22.27 %
GYNECOLOGICAL DISORDERS	2.0	113,369.00	9.52 %	17.87 %
DISORDERS OF THE GASTROINTESTINAL SYSTEM	2.0	75,852.00	9.52 %	11.96 %
CAESAREAN SECTION	2.0	53,381.00	9.52 %	8.42 %
NEUROLOGICAL & CEREBROVASCULAR DISORDERS	1.0	36,823.00	4.76 %	5.81 %
INJURIES / FRACTURES / DISLOCATIONS	1.0	30,857.00	4.76 %	4.86 %
DISORDERS OF THE GENITOURINARY SYSTEM	1.0	15,277.00	4.76 %	2.41 %
DISORDERS OF THE RESPIRATORY SYSTEM	1.0	9,987.00	4.76 %	1.57 %
MATERNITY RELATED DISORDERS	1.0	9,448.00	4.76 %	1.49 %
All Other Ailment Groups	0.0	0.00	0.0 %	0.0 %
Total	21.0	634,282.00		

Based on Settled/Approved Cashless/Reimbursement Claims Only

Distribution Across Age

Age Band	No. of Claims	Value (Rs.)	% Claims	% Value
0-5	6	203,711.00	28.0 %	32.0 %
6-35	8	172,986.00	38.0 %	27.0 %
36-40	2	40,000.00	9.0 %	6.0 %
41-45	5	217,585.00	23.0 %	34.0 %
Total	21	634,282.00		

Based on Settled/Approved Cashless/Reimbursement Claims Only

Distribution Across Category of Beneficiaries Report

Beneficiary	No. of Claims	Value (Rs.)	% Claims	% Value
Self	6.0	199,021.00	28.57 %	31.38 %
Spouse	6.0	182,394.00	28.57 %	28.76 %
Child	9.0	252,867.00	42.86 %	39.87 %
Total	21.0	634,282.00		

Based on Settled/Approved Cashless/Reimbursement Claims Only

Distribution Across Amount Bands Report

Amount Band	No. of Claims	Value (Rs.)	% Claims	% Value
Rs. 10,000/- And less	7	31,231.00	33.0 %	4.0 %
Rs. 10,001/- to Rs. 25,000/-	6	111,081.00	28.0 %	17.0 %
Rs. 25,001/- to Rs. 50,000/-	3	98,232.00	14.0 %	15.0 %

Rs. 50,001/- to Rs. 1,00,000/-	4	282,238.00	19.0 %	44.0 %
Rs. 1,00,001/- to Rs. 1,50,000/-	1	111,500.00	4.0 %	17.0 %
Total	21	634,282.00		

Based on Settled/Approved Cashless/Reimbursement Claims Only

Utilization Report for Employee

No. of Claims in current policy	No. of Employees	Value (Rs.)	% Claims	% Value
1	2	140,837.00	50.0 %	70.76 %
2	2	58,184.00	50.0 %	29.24 %
Total	4	199,021.00		

Based on Settled/Approved Cashless/Reimbursement Claims Only

Utilization Report for Dependents

No. of Claims in current policy	No. of Employees	Value (Rs.)	% Claims	% Value
1	7.0	137,618.00	63.64 %	31.62 %
2	4.0	297,643.00	36.36 %	68.38 %
Total	11.0	435,261.00		

Based on Settled/Approved Cashless/Reimbursement Claims Only

Provider Profile Report

Hospital Name	No. of Claims	Value (Rs.)	% Claims	% Value
Lilavati Hospital And Research Centre	5.0	178,617.00	23.81 %	28.16 %
Zen Multispeciality Hospital	2.0	113,369.00	9.52 %	17.87 %
Bethany Hospital	1.0	72,830.00	4.76 %	11.48 %
Vijay Vallabh	1.0	68,007.00	4.76 %	10.72 %
Rockland Hospital	1.0	36,823.00	4.76 %	5.81 %
Lifeline Medicare Hospital	2.0	36,209.00	9.52 %	5.71 %
Prakash Hospital	1.0	30,857.00	4.76 %	4.86 %
Surgicare	1.0	22,829.00	4.76 %	3.6 %
J L Rohatgi Hospital	1.0	18,823.00	4.76 %	2.97 %
Lions Hospital	2.0	18,184.00	9.52 %	2.87 %
Others	4.0	37,734.00	19.05 %	5.95 %
Total	21.0	634,282.00		

Based on Settled/Approved Cashless/Reimbursement Claims Only

Add-Del Endorsement Details

Endo No	Endo Date	Endo WEF	Remarks	Addition Premium [^]	Deletion Premium [^]
12030034170484000018	01-Mar-2018	21-Feb-2018	Cwiss copy	0	4,535.00
12030034180482000060	06-Sep-2018	16-Aug-2018	1 baby added and name correction	0.00	0



Insurer: **The New India Assurance Co. Ltd**
 Policy Holder: **Bobcards Limited**
 Policy No: 1203003417040000022
 Policy period: 11-Jan-2018 To 10-Jan-2019

Claims Analysis Report

Report date: 15-Nov-2018

*This Report Generated By rakesh yeshwant
 On Thu Nov 15 10:58:57 IST 2018*

12030034180483000048	07-Aug-2018	03-Aug-2018		56,475.00	0
12030034180484000005	12-Apr-2018	09-Apr-2018	cwiss copy	0	3,927.00
12030034180482000050	12-Jul-2018	10-Jul-2018	Gender Correction	0.00	0
12030034180482000054	13-Aug-2018	01-Aug-2018	Gender corr as per mail rashmita-Sent: 13 August 2018 04:27 PM	0.00	0
12030034180482000091	15-Oct-2018	20-Sep-2018	INSURED THE NAME OF MS. INDU RANI THE SPOUSE OF Mr. SATENDER KUMAR (EMP NO. 662) IS CHANGED AND TO BE READ AS Ms. INDU KUMAR.	0.00	0
12030034180483000049	16-Aug-2018	13-Aug-2018	Addition	29,225.00	0
12030034180483000005	18-Apr-2018	13-Apr-2018	Additions cwiss	13,567.00	0
12030034180483000052	18-Aug-2018	14-Aug-2018	Addition as per cwiss	3,137.00	0
12030034180482000051	18-Jul-2018	10-Jul-2018	Additions cwiss	0.00	0
12030034180483000020	19-Jun-2018	18-Jun-2018	IT IS HEREBY DECLARED AND AGREED THAT AT THE REQUEST OF INSURED THE GIVEN EMPLOYEE AND DEPENDENT ARE ADDED UNDER THE WITHIN MENTIONED POLICY W.E.F. 16/06/2018 ,AND NOT 18/06/2018 AS MENTIONED IN ENDORSEMENT NO. 12030034180483000019	49.00	0
12030034180483000019	19-Jun-2018	18-Jun-2018	cwiss copy	34,808.00	0
12030034180483000022	22-Jun-2018	18-Jun-2018	EMP NO.817 HAS BEEN INCREASED TO 3,00,000	4,855.00	0
12030034170483000084	22-Mar-2018	09-Mar-2018	Inactivated 9	0	0.00
12030034170483000084	22-Mar-2018	09-Mar-2018	Additions	53,339.00	0
12030034180483000061	25-Sep-2018	19-Sep-2018	Addition As Per CWISS	26,626.00	0
12030034180484000016	26-Oct-2018	15-Oct-2018	3 Lives Deleted	0	1,428.00
12030034180482000028	28-Jun-2018	25-Jun-2018	Correction	0.00	0
12030034180483000024	29-Jun-2018	25-Jun-2018	Additions cwiss	39,904.00	0
12030034180482000015	29-May-2018	25-May-2018	addition as per cwiss	0.00	0
12030034180483000062	29-Sep-2018	19-Sep-2018	2 employee sum insured increased	8,287.00	0
12030034180482000053	30-Jul-2018	23-Jul-2018	Gender Correction - 5030620184	0.00	0
12030034180483000071	30-Oct-2018	26-Oct-2018	26 Lives Added & 3 Lives Deleted	20,101.00	0
Grand Total				290,373.00	9,890.00

^ Premium details as received from insurer & updated in our data as on date