

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

Name of the Insurance Company: United India Insurance Company Limited

Information as at 31/03/2025

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

a.1 **TPA NAME** PARAMOUNT HEALTH SERVICES & INSURANCE TPA PVT. LTD.
Validity of agreement From 01-04-2024 To 31-03-2027

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

Description	Retail	Group	Govt.
No. of Policies serviced	85271	304	1
No. of Lives Covered	195923	422319	20454362

c. Geographical Area in which services are rendered by the TPA (As per Annexure A)**d. Data of number of claims processed:**

Description	No.	Percentage
i Outstanding number of claims at the beginning of the year:	78979	NA
ii Number of claims received during the year	166445	NA
iii Number of claims paid during the year: (Number & Percentage)	215375	87.76%
iv Number of Claims repudiated during the year: (Number & Percentage)	13603	5.54%
v Number of claims outstanding at the end of the year:	16446	NA

e. Turn Around Time *

TAT for cashless claims (In respect of number of claims):

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	92.13%	68.87%	94.76%	50.13%
2 Within 1-2 hours	5.87%	27.47%	3.88%	40.79%
3 Within 2-6 hours	1.20%	3.49%	0.92%	9.02%
4 Within 6-12 hours	0.07%	0.03%	0.03%	0.04%
5 Within 12-24 hours	0.45%	0.10%	0.25%	0.02%
6 >24 hours	0.29%	0.04%	0.15%	0.00%
Total	100.00%	100.00%	100.00%	100.00%

*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. TAT 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	30246	95.35%	75238	96.16%	119011	100.00%	224495	98.04%
Between 1-3 months	1221	3.85%	2370	3.03%	0	0.00%	3591	1.57%
Between 3-6 months	199	0.63%	465	0.59%	0	0.00%	664	0.29%
More than 6 months	57	0.18%	170	0.22%	0	0.00%	227	0.10%
Total	31723	100.00%	78244	100.00%	119011	100.00%	228978	100.00%

*Percentage to be calculated on total of the respective column

g. Data of grievances received against the TPA:

Description	NO.
1 Grievance outstanding as on 01/04/2024	0
2 Grievances received during 2024-25	76
3 Grievances resolved during 2024-25	76
4 Grievance outstanding as on 31/03/2025	0

Place: Chennai
Date: 12-08-2025

Signature of the CMD
United India Insurance Co., Ltd

TPA PUBLIC DISCLOSURE 2024-2025**Annexure A****TPA Name : Paramount Health Services & Insurance TPA Pvt. Ltd.****Geographical Area in which services are rendered by the TPA**

Sr.no.	Statename	District Name
1	Assam	GUWAHATI R.O.
2	Bihar	PATNA R.O.
3	Delhi	DELHI
4	Delhi	DELHI R.O. I
5	Delhi	DELHI R.O. II
6	Gujarat	AHMEDABAD R.O.
7	Gujarat	VADODARA R.O.
8	Karnataka	BANGALORE
9	Karnataka	BANGALORE R.O.
10	Kerala	KOCHI R.O.
11	Kerala	KOZHIKODE
12	Madhya Pradesh	BHOPAL R.O.
13	Maharashtra	MUMBAI
14	Maharashtra	MUMBAI R.O. I
15	Maharashtra	MUMBAI R.O. II
16	Maharashtra	NAGPUR R.O.
17	Maharashtra	PUNE R.O.
18	Orissa	BHUBANESWAR R.O.
19	Pondicherry	PONDICHERRY RO
20	Punjab	CHANDIGARH R.O.
21	Punjab	LUDHIANA R.O.
22	Rajasthan	JAIPUR R.O.
23	Rajasthan	JODHPUR R.O.
24	Tamil Nadu	CHENNAI
25	Tamil Nadu	CHENNAI R.O. I
26	Tamil Nadu	COIMBATORE 1
27	Tamil Nadu	MADURAI R.O.
28	Telangana	HYDERABAD
29	Uttar Pradesh	LUCKNOW R.O.
30	West Bengal	KOLKATA R.O.
31	West Bengal	LCB KOLKATA