

**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** Vidal Health 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	104647	1327	3
No. of Lives Covered	254465	1550614	14240117

**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:	74879	NA
ii Number of claims received during the year	578770	NA
iii Number of claims paid during the year: (Number & Percentage)	590948	90.41%
iv Number of Claims repudiated during the year: (Number & Percentage)	21863	3.34%
v Number of claims outstanding at the end of the year:	40838	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	79.18%	67.38%	91.43%	85.35%
2 Within 1-2 hours	11.34%	19.39%	4.88%	9.00%
3 Within 2-6 hours	9.09%	12.92%	3.54%	5.49%
4 Within 6-12 hours	0.39%	0.31%	0.15%	0.16%
5 Within 12-24 hours	0.00%	0.00%	0.00%	0.00%
6 >24 hours	0.00%	0.00%	0.00%	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	45761	96.17%	112632	93.90%	445096	99.96%	603489	98.48%
Between 1-3 months	1268	2.66%	5436	4.53%	177	0.04%	6881	1.12%
Between 3-6 months	317	0.67%	1172	0.98%	3	0.00%	1492	0.24%
More than 6 months	237	0.50%	712	0.59%	0	0.00%	949	0.15%
Total	47583	100.00%	119952	100.00%	445276	100.00%	612811	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	1
2 Grievances received during 2024-25	749
3 Grievances resolved during 2024-25	750
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 : Vidal Health Insurance TPA Pvt Ltd

Geographical Area in which services are rendered by the TPA

Sr.no.	Statename	District Name
1	Gujarat	Ahmedabad
2	Karnataka	Bangalore
3	Chandigarh	Chandigarh
4	Tamil Nadu	Chennai
5	Tamil Nadu	Coimbatore
6	Delhi	Delhi
7	Telangana	Hyderabad
8	Madhya Pradesh	Indore
9	Rajasthan	Jaipur
10	Kerala	Kochi
11	West Bengal	Kolkata
12	Maharashtra	Mumbai
13	Maharashtra	Pune
14	Andhra Pradesh	Visakhapatnam
15	Tamilnadu	Chengalpet
16	Tamilnadu	Chennai
17	Tamilnadu	Dharmapuri
18	Tamilnadu	Dindigul
19	Tamilnadu	Kancheepuram
20	Tamilnadu	Namakkal
21	Tamilnadu	Thanjavur
22	Tamilnadu	Tiruchirapalli
23	Tamilnadu	Tiruvallur
24	Tamilnadu	Tiruvannamalai
25	Tamilnadu	Virudhunagar

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