

- Claims Management

Designing Strategy



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Journal

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From the Publisher



Claims settlement is the most important function for an insurer, from the perspective of the policyholder. When a policyholder enters into a contract with an insurer, it is with the hope that eventually he would not be constrained to face any problem when the need for payment of a claim arises upon the happening of the insured event. Accordingly, it is not surprising that he gets disillusioned when an application for a claim gets rejected for reasons which he feels are not justifiable. While apparently it looks to be an unlikely scenario – considering that the rights and responsibilities of the two sides have clearly been enunciated in the contract – a partial or a total rejection of a claim is not an event that one seldom gets to see, especially in the emerging markets.

First and foremost, the possibility of the policyholder not actually knowing what is covered (and what is not) cannot be totally ruled out. It should be understood that an insurance contract works on reciprocal obligations that have to be fulfilled by both parties. Further, the exclusions, however fundamental they look to insurers, should clearly be explained to the policyholder at the time of entering into the contract itself. In some sections of the society, there is a general feeling that once an insurance contract is in

force, a claim cannot be repudiated, either partially or totally.

Insurers should take all steps to ensure that the incidence of claim repudiation is reduced to the barest minimum. To enable this to happen, they should adopt measures to explain to the parties upfront, the exact coverage and exclusions. If a claim has still to be repudiated, they should explain the circumstances under which the claim has to be rejected, either wholly or partially, to the policyholder with empathy so that a confrontation is avoided. Further, they should put in place systems that ensure the consummation of contracts after the nuances are explained to the prospect. Dealing firmly with attempted frauds and not allowing any dilution in the terms of the contract is another way of working towards achieving healthy claims ratios.

'Claims Management in Insurance' is the focus of this issue of the Journal. In a domain that is significantly marked by the presence of two parties of unequal strength, it is essential to work towards protecting the rights of the weaker party. 'Policyholder Protection' will be the focus of the next issue of the Journal.

A handwritten signature in black ink, appearing to read 'J. Hari Narayan', written over a horizontal dashed line.

J. Hari Narayan

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Re-aligning Priorities

-Towards Healthier Claims Ratios



In a domain where underwriting profits are seldom accomplished, there is serious need for introspection by the insurers on various strategies – especially their claims management philosophy. Continued dependence on investment income to offset the operating losses is not a worthwhile practice in the long run, particularly at a time when the global financial scenario is so volatile. As a measure to ameliorate the trend, encouraging the corporate entities in adopting loss minimization methods would go a long way in helping them and at the same time curtailing the claim costs to a great extent. Insurers should have in place suitable incentives, including discounts in premium, for parties that consciously undertake all possible measures to check insured losses.

Further, proper pricing of the risks undertaken based on actuarial assessment as also earlier experience, should be the ultimate objective of the insurer. Indiscriminate cutting of costs in order to grab business is bound to affect the insurers' bottom-line eventually. As has always been emphasized, the exercise should begin at the time of underwriting the risk itself. On their part, the insured should provide all information in the true spirit of assessment of the risk so that the premium charged is commensurate with the extent of the risk. Realizing the fact that failure to do so would lead to the detriment of the industry, should occupy their top priority. Also, adopting the right discipline in the filing of claims will contribute greatly to the health of the industry. In personal lines of non-life insurance, claimants should not get carried away by the lure of 'additional services' that service providers may offer; so that they contribute to containment of claim costs.

Insurers should constantly look at modernizing their claims settlement practices in order that the entire mechanism works efficiently. Instances of inordinate delay as also unjustified rejection of claims should be reduced to the barest minimum so that the reputation of the insurer does not suffer a blow. A constant supervision of the outstanding claims along with reasons therefor should be a conscious philosophy. Overall, there should be a perceptible sensitivity in dealing with a claim – however meritorious or otherwise.

'Claims Management' is the focus of this issue of the Journal. The first article in the series is by Mr. Alpesh Patel in which he discusses the merits of having in place a comprehensive claims management strategy and the processes involved in working towards implementing the strategy. Mr. Harpal Karicut takes up the case of dealing with life insurance claims. He emphasizes that customer education can go a long way in solving most problems associated with claims settlement; and mentions that global best practices should be adapted for improvement in efficiency. Two classes of insurance that pose the most serious problems in claims settlement are Motor and Health. Mr. B.G. Patki takes up the case of claims related controversies in Motor Own Damage and highlights the areas that need to be specially looked at. There is a certain enigma associated with Health insurance in that while the growth recorded is phenomenal, there is no end to the controversies associated with claims. Dr. George E Thomas takes a critical look at some of the issues.

In the 'Thinking Cap' section, Mr. Rajagopalan Krishnamurthy comments on the growth of the Bancassurance channel in the Indian insurance industry, based on a study conducted. Finally, we have the third and the final instalment of the Research Paper on government insurance schemes by Mr. N. Srinivasa Rao. In addition to the monthly statistics, this month's issue also contains the year-end segment-wise performance of life and non-life insurers.

Policyholder protection is what every stakeholder professes; but to what extent it is being achieved is an area that needs to be visited often. 'Policyholder Protection' will be the focus of the next issue of the **Journal**.

U. Jawaharlal

Report Card:LIFE

statistics - life insurance

First Year Premium of Life Insurers for the Period Ended April, 2010

Sl No.	Insurer	Premium w/w (Rs. in Crores)		No. of Policies / Schemes		No. of lives covered under Group Schemes	
		April, 10	Upto April, 10	April, 10	Upto April, 10	April, 10	Upto April, 10
1	Bajaj Allianz	26.65	26.65	5341	5341	6001	6001
	Individual Single Premium	117.90	117.90	106379	106379	1646877	1646877
	Group Single Premium	4.80	4.80	1	1	2820	76108
2	ING Vysya	0.01	0.01	2	2	106	43
	Individual Non-Single Premium	28.94	28.94	14409	14409	106	106
	Group Single Premium	0.54	0.54	0	0	43	43
3	Reliance Life	8.19	8.19	2159	2159	555	555
	Individual Single Premium	110.81	110.81	91249	91249	92281	92281
	Group Single Premium	1.77	1.77	24	24	0	0
4	SBI Life	11.72	11.72	17	17	41226	41226
	Individual Single Premium	19.35	19.35	2442	2442	3922	3922
	Group Single Premium	87.38	87.38	22622	22622	261	261
5	Tata AIG	4.06	4.06	1	1	20119	20119
	Individual Single Premium	2.29	2.29	321	321	3828	3828
	Group Single Premium	61.46	61.46	42480	42480	13183	13183
6	HDFC Standard	2.06	2.06	0	0	22320	22320
	Individual Single Premium	1.16	1.16	7	7	21434	21434
	Group Single Premium	3.85	3.85	1988	1988	95207	95207
7	ICICI Prudential	117.07	117.07	29559	29559	117032	117032
	Individual Single Premium	1.38	1.38	21	21	81	81
	Group Single Premium	41.04	41.04	6	6	45322	45322
8	Birla Sunlife	1.11	1.11	54	54	179336	179336
	Individual Single Premium	266.42	266.42	99199	99199	29	29
	Group Single Premium	10.25	10.25	88	88	101518	101518
9	Aviva	25.90	25.90	130	130	16877	16877
	Individual Single Premium	1.92	1.92	21765	21765	18777	18777
	Group Single Premium	70.74	70.74	125867	125867	101518	101518
10	Kotak Mahindra Old Mutual	0.22	0.22	22	22	365749	365749
	Individual Single Premium	12.57	12.57	0	0	201213	201213
	Group Single Premium	1.10	1.10	62	62	111	111
11	Max New York	5.28	5.28	437	437	1547	1547
	Individual Single Premium	32.14	32.14	10300	10300	80852	80852
	Group Single Premium	3.93	3.93	0	0	4	4
12	Met Life	8.21	8.21	50	50	912	912
	Individual Single Premium	1.30	1.30	321	321	44048	44048
	Group Single Premium	19.70	19.70	8506	8506	0	0

13	Sahara Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.71 2.06 0.00 0.00	0.71 2.06 0.00 0.00	0.95 2.17 0.00 1.64	175 2231 0 0	175 2231 0 0	281 2277 0 0	0 0 0 0	0 0 0 0	209570 0 0 0
14	Shriram Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	13.19 12.65 1.80 0.00	13.19 12.65 1.80 0.00	1.63 13.96 0.00 0.00	1488 4772 0 0	1488 4772 0 0	246 7874 0 0	7427 0 0 0	7427 0 0 0	1420 0 0 0
15	Bharti Axa Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.56 20.09 1.48 0.00	0.56 20.09 1.48 0.00	0.22 16.57 1.49 0.00	378 7851 0 0	378 7851 0 0	24 8145 1 0	1017 0 0 0	1017 0 0 0	1420 0 0 0
16	Future Generali Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.16 13.11 0.03 2.06	0.16 13.11 0.03 2.06	0.27 7.22 0.00 3.51	24 10567 0 7	24 10567 0 7	46 6524 0 8	604 498181 0 0	604 498181 0 0	24633 0 0 0
17	IDBI Fortis Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	3.84 12.42 0.00 0.03	3.84 12.42 0.00 0.03	4.66 9.94 0.00 0.00	836 3724 0 5	836 3724 0 5	745 3088 0 2	7434 0 0 0	7434 0 0 0	2503 0 0 0
18	Canara HSBC OBC Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.68 53.18 1.02 0.00	0.68 53.18 1.02 0.00	0.40 45.49 0.00 0.00	31 6385 0 0	31 6385 0 0	28 4906 0 0	574 0 0 0	574 0 0 0	0 0 0 0
19	Aegon Religare Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.38 6.29 0.05 0.00	0.38 6.29 0.05 0.00	0.06 1.89 0.00 0.00	23 1649 0 0	23 1649 0 0	9 792 0 0	110 0 0 0	110 0 0 0	0 0 0 0
20	DLF Pramerica Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.27 5.47 0.00 0.00	0.27 5.47 0.00 0.00	0.00 1.03 0.00 0.00	44 2305 0 0	44 2305 0 0	0 786 0 0	0 0 0 0	0 0 0 0	0 0 0 0
21	Star Union Dai-ichi @ Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	5.40 4.64 2.38 0.51	5.40 4.64 2.38 0.51	1.40 2.70 0.00 0.00	346 1339 0 1	346 1339 0 1	249 1166 0 0	572 5536 0 0	572 5536 0 0	0 0 0 0
22	IndiaFirst# Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	6.49 28.98 0.00 0.00	6.49 28.98 0.00 0.00	6.55 28.98 0.00 0.00	655 8957 0 0	655 8957 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
23	LC Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium Private Total Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium Grand Total Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	1610.67 1446.02 1037.00 80.00 1726.06 2660.04 1075.85 284.38	1610.67 1446.02 1037.00 80.00 1726.06 2660.04 1075.85 284.38	426.90 756.59 929.62 0.00 499.67 1635.76 1015.08 451.07	268824 1449607 832 0 307828 2126519 973 541	268824 1449607 832 0 307828 2126519 973 541	122646 1271573 787 0 142336 1899174 886 421	864579 54125 864579 54125	864579 54125	952179 0

Note: 1. Cumulative premium / No. of policies upto the month is net of cancellations which may occur during the free look period.

2. Compiled on the basis of data submitted by the Insurance companies

3. @ Started operations in February, 2009

4. #Started operations in November, 2009



FIRST YEAR PREMIUM OF LIFE INSURERS FOR THE QUARTER ENDED MARCH, 2010

INDIVIDUAL SINGLE PREMIUM (INCLUDING RURAL & SOCIAL)

(Rs. in Crores)

SI No	Particulars	Premium		Policies		Sum Assured	
		March, 2009	March, 2010	March, 2009	March, 2010	March, 2009	March, 2010
1	Non linked*						
	Life						
	with profit	11376.27	2590.74	1910796	160611	63780.56	2463.18
	without profit	115.15	70.56	370537	852184	3950.64	7532.15
2	General Annuity						
	with profit	2.00	2.42	128	189	0.00	0.00
	without profit	208.14	925.41	7883	24516	1.68	1.75
3	Pension						
	with profit	20.94	35.49	5868	4503	8.00	8.23
	without profit	0.00	0.34	0	0	0.00	0.00
4	Health						
	with profit	0.00	0.00	0	0	0.00	0.00
	without profit	0.00	2.20	0	5135	0.00	85.96
A.	Sub total	11722.51	3627.15	2295212	1047138	67740.87	10091.27
1	Linked*						
	Life						
	with profit	134.60	0.00	21848	0	346.60	0.00
	without profit	3792.63	7863.01	814356	1315336	7568.93	13427.86
2	General Annuity						
	with profit	0.00	0.00	0	0	0.00	0.00
	without profit	0.00	0.00	0	0	0.00	0.00
3	Pension						
	with profit	0.00	0.00	0	0	0.00	0.00
	without profit	9077.44	18182.06	2818870	4386701	63.45	80.16
4	Health						
	with profit	0.00	0.00	0	0	0.00	0.00
	without profit	0.00	0.00	0	0	0.00	0.00
B.	Sub total	13004.66	26045.08	3655074	5702037	7978.97	13508.02
C.	Total (A+B)	24727.17	29672.23	5950286	6749175	75719.84	23599.29
1	Riders:						
	Non linked						
	Health #	0.01	0.01	0	0	0.10	0.00
	Accident # #	0.01	0.03	1	3	0.69	2.34
	Term	0.00	0.00	0	0	0.01	0.07
	Others	6.20	5.03	0	0	0.00	15.35
D.	Sub total	6.23	5.07	2	3	0.79	17.75
	Linked						
	Health#	0.02	0.00	2	2	0.97	1.51
	Accident # #	0.37	0.20	222	142	299.30	185.85
	Term	0.00	0.00	0	0	0.02	46.64
	Others	0.00	0.00	0	1	0.00	0.35
E.	Sub total	0.39	0.21	224	145	300.30	234.35
F.	Total (D+E)	6.62	5.28	226	148	301.09	252.10
G.	**Grand Total (C+F)	24733.78	29677.51	5950286	6749175	76020.93	23851.39

* Excluding rider figures.

** for policies Grand Total is C.

All riders related to critical illness benefit, hospitalisation benefit and medical treatment.

Disability related riders.

The premium is actual amount received and not annualised premium.

FIRST YEAR PREMIUM OF LIFE INSURERS FOR THE QUARTER ENDED MARCH, 2010

INDIVIDUAL NON - SINGLE PREMIUM (INCLUDING RURAL & SOCIAL)

(Rs. in Crores)

SI No	Particulars	Premium		Policies		Sum Assured	
		March, 2009	March, 2010	March, 2009	March, 2010	March, 2009	March, 2010
A.	1 Non linked* Life with profit 14655.56 210.54 833.94 20351.60	1.17	301	0	30618486	0.00	395733.50
2	General Annuity with profit 0.63 210.54 833.94 20351.60	1.17	301	0	30618486	0.00	395733.50
3	Pension with profit 82.02 59.29 153.63 87.34	0.00	0	49533	1094.04	985.76	2.20
4	Health with profit 0.00 170.42 92.18 21519.87	0.00	0	653972	272206	0.00	465183.87
1	Linked* Life with profit 170.20 21835.79 -0.28 22327.72	-0.28	0	90536	10474517	1502.80	200501.83
2	General Annuity with profit 0.00 0.00 0.00 0.00	0.00	0	0	0	0.00	0.00
3	Pension with profit 0.02 7284.09 0.01 7929.66	0.01	0	2226619	2001736	0.01	2261.36
4	Health with profit 0.00 168.33 240.69 30497.80	0.00	0	144166	181574	0.00	3807.28
B.	Sub total 29458.43 168.33 240.69 30497.80	0.00	0	14080746	12657827	219282.86	206570.47
C.	Total (A+B) 44636.88 29458.43 168.33 240.69 30497.80	-0.28	0	44948059	46446601	603642.87	671754.34
D.	1 Non linked Health # 6.98 1.40 1.62 4.30	3.55	190	2309	3525	2222.26	1047.88
2	Accident # # 6.98 1.40 1.62 4.30	6.67	2309	3525	7230.76	377.85	7326.40
3	Term 1.40 1.62 4.30	1.62	54	96	7230.76	377.85	7326.40
4	Others 2.63 0.80 0.79 1.37	4.43	625	2945	1965.43	1732.57	1732.57
1	Linked Health # 5.91 27.39 15.59 4.43	4.43	625	2945	1965.43	1732.57	1732.57
2	Accident # # 27.39 15.59 4.43	15.59	2945	3006	11638.31	19122.57	19122.57
3	Term 0.80 0.79 1.37	0.79	124	134	682.62	213.52	2058.03
4	Others 2.63 0.80 0.79 1.37	4.43	625	2945	1965.43	1732.57	1732.57
E.	Sub total 36.73 2.63 0.80 0.79 1.37	22.17	3714	3691	14499.88	24370.40	24044.83
F.	Total (D+E) 51.28 36.73 2.63 0.80 0.79 1.37	38.32	6289	7535	24370.40	24370.40	34440.52
G.	**Grand Total (C+F) 44688.16 51.28 36.73 2.63 0.80 0.79 1.37	52055.99	44948059	46446601	628013.27	706194.86	706194.86

* Excluding rider figures.

** for policies Grand Total is C.

All riders related to critical illness benefit, hospitalisation benefit and medical treatment.
Disability related riders.
The premium is actual amount received and not annualised premium.



FIRST YEAR PREMIUM OF LIFE INSURERS FOR THE QUARTER ENDED MARCH, 2010

GROUP SINGLE PREMIUM (INCLUDING RURAL & SOCIAL)

(Rs. in Crores)

SI No	Particulars	Premium		No. of Schemes		Lives Covered		Sum Assured	
		Mar 2009	Mar 2010	Mar 2009	Mar 2010	Mar 2009	Mar 2010	Mar 2009	Mar 2010
1	Non linked* Life								
a)	Group Gratuity Schemes with profit	0.00	2.25	0	2	0	882	0.00	0.09
	without profit	4382.71	8810.63	2439	2850	1626586	1826918	7684.48	7410.46
b)	Group Savings Linked Schemes with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	10.82	14.63	827	728	192222	205663	1082.15	1549.57
c)	EDLI with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	6.85	9.13	882	941	1387689	1920258	4890.05	5730.03
d)	Others with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	1786.47	3230.37	17095	19721	30176422	33609516	126940.93	155578.22
2	General Annuity								
	with profit	858.52	0.00	7	0	751	0	0.00	0.00
	without profit	3278.38	4752.03	98	91	8586	9443	0.00	0.11
3	Pension								
	with profit	0.00	5.16	0	2	0	36	0.00	0.00
	without profit	3054.62	4617.08	518	242	562159	5110788	0.00	0.0
4	Health								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.00	0.00	0	0	0	0	0.00	0.00
A.	Sub total	13378.37	21441.27	21866	24577	33954415	42683504	140597.62	170268.47
1	Linked* Life								
a)	Group Gratuity Schemes with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	324.56	39.93	86	8	286673	11366	221.58	27.18
b)	Group Savings Linked Schemes with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.00	2.27	0	6	0	7618	0.00	45.84
c)	EDLI with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.00	0.00	0	0	0	0	0.00	0.00
d)	Others with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	4.67	0.00	6	0	1891	0	0.19	0.00
2	General Annuity								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.00	4.53	0	1	0	7	0.00	0.00
3	Pension								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	30.56	0.00	18	0	7421	0	0.00	0.00
4	Health								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.00	0.00	0	0	0	0	0.00	0.00
B.	Sub total	359.79	46.73	110	15	295985	18991	221.77	73.03
C.	Total (A+B)	13738.15	21488.00	21976	24592	34250400	42702495	140819.39	170341.50
	Riders:								
	Non linked								
1	Health #	0.19	0.38	15	19	11697	6923	390.88	374.65
2	Accident # #	0.28	0.13	24	72	5362	2425	723.74	281.19
3	Term	0.00	0.00	0	0	0	0	0.00	0.00
4	Others	0.00	0.00	0	0	0	0	0.00	0.00
D.	Sub total	0.46	0.51	39	91	17059	9348	1114.62	655.83
	Linked								
1	Health#	0.00	0.00	0	0	0	0	0.00	0.00
2	Accident # #	0.00	0.00	0	0	0	0	0.00	0.00
3	Term	0.00	0.00	0	0	0	0	0.00	0.00
4	Others	0.00	0.00	0	0	0	0	0.00	0.00
E.	Sub total	0.00	0.00	0	0	0	0	0.00	0.00
F.	Total (D+E)	0.46	0.51	39	91	17059	9348	1114.62	655.83
G.	**Grand Total (C+F)	13738.61	21488.51	21976	24592	34250400	42702495	141934.01	170997.33

* Excluding rider figures..

** for no. of schemes & lives covered Grand Total is C.

All riders related to critical illness benefit, hospitalisation benefit and medical treatment.

Disability related riders.

The premium is actual amount received and not annualised premium.

FIRST YEAR PREMIUM OF LIFE INSURERS FOR THE QUARTER ENDED MARCH, 2010

GROUP NEW BUSINESS-NON-SINGLE PREMIUM (INCLUDING RURAL & SOCIAL) (Rs. in Crores)

SI No	Particulars	Premium		No. of Schemes		Lives Covered		Sum Assured	
		Mar 2009	Mar 2010	Mar 2009	Mar 2010	Mar 2009	Mar 2010	Mar 2009	Mar 2010
1	Non linked* Life								
a)	Group Gratuity Schemes with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	738.94	981.87	201	260	484752	389907	1624.23	1364.53
b)	Group Savings Linked Schemes with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	185.72	274.32	21	80	2174490	2480706	4591.56	5425.11
c)	EDLI with profit	0.39	0.61	106	164	77069	102116	997.58	1169.12
	without profit	4.57	4.47	229	269	420009	483857	3791.41	5369.16
d)	Others with profit	5.20	0.00	170	0	158576	0	8403.65	0.00
	without profit	1170.00	1543.37	1625	2267	15154575	33020681	99133.77	156133.25
2	General Annuity								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.00	0.00	0	0	0	0	0.00	0.00
3	Pension								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	6.33	19.47	3	2	587	184	0.00	0.00
4	Health								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.00	0.05	1	0	25318	9942	0.00	55.86
A.	Sub total	2111.13	2824.16	2356	3042	18495376	36487393	118542.20	169517.03
1	Linked* Life								
a)	Group Gratuity Schemes with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	1005.44	2208.82	456	553	836348	1359519	4058.94	5176.38
b)	Group Savings Linked Schemes with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	20.00	173.97	73	305	27630	70621	347.66	1092.39
c)	EDLI with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.00	0.00	0	0	0	0	0.00	0.00
d)	Others with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	23.13	88.19	15	21	3645	18982	2.27	11.13
2	General Annuity								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	8.79	121.97	9	9	397	1571	8.79	121.97
3	Pension								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	772.76	645.31	147	137	48524	52704	0.00	0.00
4	Health								
	with profit	0.00	0.00	0	0	0	0	0.00	0.00
	without profit	0.44	0.00	0	0	0	0	0.00	0.00
B.	Sub total	1830.56	3238.25	700	1025	916544	1503397	4417.66	6401.86
C.	Total (A+B)	3941.69	6062.41	3056	4067	19411920	37990790	122959.86	175918.89
1	Riders: Non linked								
1	Health #	3.09	3.60	46	54	51893	57043	2622.33	4145.89
2	Accident # #	2.25	2.32	93	100	96354	35976	4526.31	2685.23
3	Term	0.02	0.01	1	1	39	144	11.65	15.06
4	Others	0.02	0.00	9	6	7314	73	1036.07	136.41
D.	Sub total	5.37	5.94	149	161	155600	93236	8196.37	6982.59
1	Linked								
1	Health#	0.00	0.00	0	0	0	0	0.00	0.00
2	Accident # #	0.00	0.00	12	38	410	251	7.03	4.14
3	Term	0.00	0.00	0	0	0	0	0.00	0.00
4	Others	0.00	0.00	0	0	0	0	0.00	0.00
E.	Sub total	0.00	0.00	12	38	410	251	7.03	4.14
F.	Total (D+E)	5.37	5.95	161	199	156010	93487	8203.39	6986.74
G.	**Grand Total (C+F)	3947.07	6068.36	3056	4067	19411920	37990790	131163.25	182905.63

* Excluding rider figures.

** for no. of schemes & lives covered Grand Total is C.

All riders related to critical illness benefit, hospitalisation benefit and medical treatment.

Disability related riders.

The premium is actual amount received and not annualised premium.

\$ Reflects revised data submitted by ICICI Prudential Life Insurance Company Ltd.

CIRCULAR

May 10, 2010

IRDA/F&I/CIR/F&A/076/05/2010

To,

The CMDs/ CEOs ofAll Non-Life Insurance Companies/
Reinsurance Company

Dear Sir,

Reporting of Maintenance of Solvency Margin Ratio

Authority vide circular No. 46/IRDA/F&A/Nov.-07 dated 22.11.2007 has made it mandatory for to file quarterly report of solvency margin. The said circular mandates filing of Table II – Available solvency margin and solvency ratio as mentioned in IRDA (Assets, Liabilities and Solvency margin of Insurers) Regulations, 2000.

All the insurers are hereby directed to submit all the Forms of solvency margin as prescribed under IRDA (Assets, Liabilities and Solvency margin of Insurers) Regulations, 2000 w.e.f. FY 2010-11. Date of submission of quarterly solvency reporting will be the same as prescribed for the Public Disclosure.

Further, it is clarified that for the purpose of calculation of RSM 1 premium of the last 12 months on rolling basis will be taken into account and for purpose of calculation of RSM 2 claims will continue to be taken as clarified under circular 045/IRDA/F&A/Mar-06 dated 31.03.2006.

Half yearly solvency statements must be signed by the Auditor, Appointed Actuary and the CFO of the company.

Kindly acknowledge the receipt.

Sd/-

(R. K. Nair)

Member (F&I)

CIRCULAR

May 18, 2010

IRDA/CAS/CIR/EXD/083/05/2010

Re: Exposure Draft on Standardization of Terms & Conditions of Unit Linked Insurance Products and measures for Policyholders' Protection Regulations

Unit Linked Insurance business forms a significant part of the life insurance business. During the year 2009-10, the share of unit linked insurance business has increased from 50.95% to 54.80%. Further the unit linked business has grown at rate of 35.33% during the year 2009-10 whereas the growth rate for the life insurance business is 25.83%. In terms of the volume of the first year premium, it has increased from Rs.44332.40crores to Rs.59,996.46crores during the year 2009-10.

Authority has carried out a study of the practices relating to unit linked insurance followed by the life insurers and observed that majority of the insurers are following international best practices in vogue in international market. It has been further observed by the Authority that the practices being followed especially for revival, lapsation and surrender of linked policies vary widely from insurer to insurer.

In order to give better understanding of the terms & conditions of the linked products to the policyholders and to provide them an opportunity to make a more informed decision, it is felt that there should be uniformity in the approach on various key parameters of the unit linked products. Therefore, Authority proposes to notify regulations on Standardization of Terms & Conditions of Unit Linked Insurance Products and measures for Policyholders' Protection.

The basic features of the draft regulations are as under

- It provides for standardization of the approach to be followed on lapsation, revival and surrender of the linked policies so that the

interest of a policyholder is protected on one side and at the same time, insurers are allowed to recover their cost in a more transparent and informed way.

- It provides the ceiling on surrender charges instead of leaving it to the discretion of the insurers. These charges have been worked out based upon the study of existing linked products.

An exposure draft of proposed Regulation on Standardization of Terms & Conditions of Unit Linked Insurance Products and measures for Policyholders' Protection is placed on the website of the Authority to seek the comments of Insurers, Insurance Intermediaries, Policyholders and other stakeholders so as to reach the Authority on or before 27th May, 2010. The comments of the all the stake holders will be placed before the Insurance Advisory Committee and the Board of the Authority for their consideration.

The comments on the said exposure draft may be forwarded to Mr. R K Sharma, Deputy Director or to email id rksharma@irda.gov.in

Sd/-

A Giridhar

Executive Director (Administration)

CIRCULAR

May 18, 2010

IRDA/ADMN/CIR/GEN/084/05/2010

Re: Exposure Draft on Insurance Regulatory and Development Authority (ACQUISITION OF DATABASE FOR DISTRIBUTION OF INSURANCE PRODUCTS) REGULATIONS, 2010.

The institution of referral providers is widespread in the insurance sector across regimes and has a crucial role in distribution of insurance products. Referral providers facilitate the expansion of insurers among segments that otherwise may not be readily accessible to them through their own channels of distribution. While in certain cases the referral activity is limited to provision of data of their clients, in many cases it includes introduction of clients, provision of office space for the employees of insurer, display of publicity material etc. Since the activities of a referral provider stop short of selling, they normally do not require a regulatory license.

Referrals are much sought after in the insurance industry since they not only are in possession of data of a large number of clients but also are generally in know of the personal details with regard to their financial status, which is of crucial importance to the insurers. Moreover, some of these entities enjoy a great amount of goodwill among the clients which gets transferred to the insurer through their introduction, thereby enhancing the likelihood of a successful sale. Referrals, thus, play a key role in a speedier expansion of the sector and in reaching out to large chunks of population that may not otherwise be accessible through the conventional distribution channels of insurers.

A. The existing guidelines on referrals:

The Authority had issued a circular no. IRDA.Cir/004/2003, dated 14.2.2003, wherein the framework for referral arrangements of life insurers with banking entities was laid out. The circular broadly deals with the following points:

1. They deal only with Life Insurance. A revised circular on general insurers was to follow later as per the circular, but is yet to be issued.
2. The circular confines itself to referral arrangement with banks and does not refer to such arrangements with non-banking entities.
3. An insurer shall not enter into an arrangement with any bank which has been licensed to act as an agent or as an intermediary.
4. A bank shall be allowed to enter into such arrangements with only one life insurer and one general insurer.

B. Existing Practices:

1. It was noticed during the market conduct inspection of some of the life insurers that they are also entering into referral arrangements with a variety of non-banking referral entities. Many insurers had in fact entered into referral arrangements with individuals.
2. So far as referral fee is concerned, it is observed that several different practices are being followed by the insurers which are resulting in high cost of acquisition thereby pushing up the premiums for the policyholders
 - In certain cases it was seen that though the fee paid is within limits it is being staggered over a few years rather than being paid in lumpsum after the sale. Insurers claim that they are linking the payment of fee in subsequent years to the receipt of renewal premiums. This is questionable in view of the limited role envisaged for the referrals.
 - In view of a lack of guidelines on the fee limits in case of non-banking entities and individuals, the insurers at the moment enjoy an unfettered freedom.
 - In their over enthusiasm to rope in banks as referrals, some insurers are seen to pay upfront fees/advance amounting to crores of rupees.
3. It has been noticed on some occasions that the parties have included extraneous clauses in their agreements. In the absence of standardization each of the agreements is at present being scrutinized to check for any unacceptable clauses.

C. The need for fresh guidelines on referrals:

1. Referrals are seen to increase the already spiralling costs of insurers. Therefore in the interest of prevention of further escalation of costs it is important to streamline the fee structures allowable to these entities.
2. The present circular deals only with banking referrals, leaving the whole area of arrangements with non-banking entities including individuals unregulated and unchecked.
3. Clause 10 (1) (vi) (ii) of advertisement regulations allows a third party group or association to furnish the data of its members to an insurer and be compensated for the same on the basis of sales made out of the references. However, no limits or ceilings have been prescribed by the regulations in connection with these payments. This clause has been put to misuse by some insurers in making excessive payments towards references obtained by them.
4. There is therefore a need to scrap the above provision in the IRDA (Insurance Advertisements and Disclosure) Regulations, 2000.
5. There is a need to clearly spell out, in the new regulations, the categories of entities that may be permitted to take up referral activity to ensure that this activity is carried out in a streamlined manner.

D. Recommendations of the Govardhan Committee:

- a. The expenses of management including referral fee should be capped by section 40B of the Insurance Act, 1938.
- b. Referral fee should be paid only on successful conversion, with a linkage to sale by the company's sales person and such fees and other costs incurred on the entity should not exceed the ceilings on commissions as provided under Sec 40A of the Insurance Act.
- c. Trail fee, including other expenses, subject to the overall cap of section 40A, can be paid for the referral arrangements.

E. In the above context and recommendations of the Expert Committee, it is felt that the referral business in the insurance sector shall be regulated under a framework which will ensure that the interests of the policyholders are protected.

A draft regulation is hereby published for eliciting opinion of the consumer organizations, policyholders, general public, insurance companies and various other stakeholders in the insurance sector. The draft along with the recommendations received from various stakeholders will be placed before the Insurance Advisory Committee

and the Board of the Authority for their consideration. Hence it is requested that the comments on the said exposure draft may be forwarded to Mrs. Babita Rayudu, OSD (Legal) or to email id babitar@irda.gov.in on or before 27.05.2010.

Sd/-
A Giridhar
Executive Director

CANCELLATION OF BROKER LICENSE

May 14, 2010

IRDA/DB332/06

Re: CANCELLATION OF BROKER LICENSE NO 327.

WHEREAS, M/S. VICTORY INSURANCE BROKERS PVT. LTD (hereinafter referred to as the 'Broker') having its Registered Office at Shree Ram Mills Premises, 3rd Floor, Ganpatro Kadam Marg, Worli, Mumbai-400 013 have been granted license by the Authority to act as a Direct Insurance Broker, vide License No. 327 on 12-04-2006 pursuant to the provisions of the IRDA (Insurance Brokers) Regulations, 2002. (Hereinafter referred to as the `Regulations`) The said license has already expired on 11.04.09.

WHEREAS, the Broker vide letter dated 24.03.2010 conveyed that they would like to surrender their Direct Broker License and requested to cancel the license.

WHEREAS, the Broker vide its letter dated 09.04.2010 has submitted the requirements including the original license No.327 for cancellation.

WHEREAS, the Broker has given an undertaking to service the existing clients whose policies are in force for a period of six months as required under Regulation 40 of the said Regulations, within

whichh it shall make suitable arrangements with another licensed broker to service the contracts already concluded.

NOW THEREFORE, pursuant to the request made by the Broker for surrender of Broker License, the Authority hereby cancels the Direct Broker License No. 327 granted to M/S. Victory Insurance Brokers Pvt. Ltd.

The Broker is advised to remit the annual fee payable for the year 2009-10 after finalization of accounts for 2009-10 and as prescribed under Schedule II of Regulations and as amended vide IRDA (Insurance Brokers) (Amendment) Regulations, 2007.

Sd/-
(Prabodh Chander)
Executive Director

CIRCULAR

May 17, 2010

IRDA/CAGTS/CIR/LCE/082/05/2010

To

All the CEOs of Insurance Companies.

As you are aware, the New Agency Portal has come into operation from on 5th January, 2010. In connection with the operation of the said Portal, the following clarifications/ instructions are issued by this Authority for compliance.

1. Insurer must ensure that the CIE of the Corporate Agent is issued a Certificate entitling him to solicit business on behalf of the Corporate Agent.

2. A person holding an individual insurance agent license who wishes to operate under a Corporate Agent as -

- (1) Corporate Insurance Executive (OR)
- (2) Specified Person

shall surrender the individual license and apply afresh with requisite fee. However, such a person need not go through a further process of training and pass the examination within the period of license granted to him.

3. Any person who holds a Certificate under a corporate agent but wishes to operate as an Individual agent shall surrender his certificate and shall apply for individual Agent license with requisite fee. However, such a person need not go through a further process of training and pass the examination within the period of license granted to the Corporate Agent.

4. In cases where circumstances exist due to which the licence could not be renewed on time. Maximum grace period of one year from the date of expiry is permitted for renewing the license. In case the license of a person is not renewed unrenowned even after expiry of grace period, the candidate has to undergo training and pass the examination afresh for getting the agent licence.

5. In case the candidate who appeared for pre recruitment examination for agents and is declared unsuccessful, he/she is permitted to apply for transfer of URN to new insurer, if interested.

6. Any agent who is aged 75 years or above seeking renewal of agent licence should produce a Life certificate from a Gazetted Officer to the DP.

All the Insurers are requested to take note of the above and take necessary action for compliance accordingly.

Sd/-
(A. Giridhar)
Executive Director

CIRCULAR

May 13, 2010

IRDA/F&I/CIR/AML/ 80 /05/2010

To

The Chairman/CEOs of all the Insurers

Sub: The Prevention of Money Laundering (Maintenance of Records of the Nature and Value of Transactions, the Procedure and Manner of Maintaining and Time for Furnishing Information and Verification and Maintenance of Records of the Identity of the Clients of the Banking Companies, Financial Institutions and Intermediaries) Amendment Rules, 2010 (the Rules)

The PMLA Rules, 2005 have been amended in 2010 vide Government of India, Gazette Notification GSR 76 (E) dated 12th February 2010.

2. In accordance with the amended Rule 3 of the PMLA Rules 2005, insurance companies are directed to maintain records of all transactions as prescribed in the applicable Legislations/ Regulations/Rules viz., the

Companies Act, Insurance Act, etc., including those prescribed at Rule 3(1) of the PMLA Rules, as applicable.

3. It may be noted that in view of the amendments as stated above, the record retention obligations as specified under Rule 6 of the PMLA Rules shall be complied with as under:

i. The records referred to in Rule 3 (1) Clauses (A) to (D) shall be maintained for a period of ten years from the date of cessation of the transactions between the customer and the insurance company.

ii. Records pertaining to all other transactions, (for which insurance companies are obliged to maintain records under other applicable Legislations/Regulations/Rules) insurance companies are directed to retain records as provided in the said Legislation/ Regulations/ Rules but not less than a period of ten years from the date of end of the business relationship with the customer.

4. Insurance companies are advised to strictly follow the amended provisions of the PMLA Rules and ensure compliance.

5. The circular comes to effect immediately.

Sd/-
(R. K. Nair)
Member (F&I)

CIRCULAR

May 13, 2010

IRDA/ACTL/CIR/MISC/081/05/2010

To,

CEOs of all Non-Life Insurance Companies

Sub: Financial Condition Report for Non-Life Insurance Companies.

Enclosed is the format (.doc / .pdf)of the Financial Condition Report for Non-life Insurance Companies. This report is to be submitted annually starting from March 2010. For the year ending March 2010, this report shall be submitted on or before September 30, 2010.

Appointed Actuaries have to prepare this report on the basis of data provided and discussions he / she might have with other officials in the company.

If any clarification is required, an email can be sent to 'janita@irda.gov.in 'or' mbvn.murthy@irda.gov.in '.

On the basis of the experience gathered, this format will be reviewed by end January 2011, if required.

Sd/-
(R. Kannan)
Member (Actuary)

CANCELLATION OF BROKER LICENSE

May 14, 2010

IRDA/DB 276/04

Re: CANCELLATION OF BROKER LICENSE NO 304.

IL & FS INVESTSMART INSURANCE BROKERS LTD (hereinafter referred to as the Broker`) having its Registered Office at Dhana Singh Processor Premises, 2nd Floor, J.B Nagar, Andheri-Kurla Road, Andheri (E), Mumbai- 400 059 have been granted license by the Authority to act as a Direct Insurance Broker, vide License No. 304 on 7-6-2005, pursuant to the provisions of the IRDA (Insurance Brokers) Regulations, 2002. The license expired on 06.06.2008 was extended for a period of 1 year i.e., upto 06.06.2009.

WHEREAS, the Broker vide letter dated 29th October, 2009 conveyed the plans to surrender their Direct Broker License and vide

its letter dated 13th April, 2010 submitted the requirements and the original license No.304 for cancellation.

WHEREAS, Regulation 40 of the IRDA (Insurance Brokers) Regulations, 2002, require the Broking Company shall continue to service the contracts already concluded through him for a period of six months within which suitable arrangements shall be made by him for having the contracts attended to by another licensed insurance broker and in compliance thereof M/S. IL & FS Investsmart Insurance Brokers Ltd has confirmed having made arrangements with another licensed broker to service the contracts already concluded.

NOW THEREFORE, pursuant to the request made by the Broker for surrender of Broker License, the Authority hereby cancels the Direct Broker License No. 304 granted to M/S. IL & FS Investsmart Insurance Brokers Ltd.

Sd/-
(Prabodh Chander)
Executive Director

'In a domain that does not boast of high standards of insurance awareness, one way of ensuring policyholder protection is to be increasingly open and transparent as regards the terms of the contract' opines **U. Jawaharlal**.

Targeting Total Transparency

- Policyholder Protection

A contract, in general, envisages that the parties involved fulfill their role in order that it ends up in a mutually acceptable manner. When the parties are more or less equal as regards their footing; and especially in such of those contracts that operate under the dictum *caveat emptor* i.e. let the buyer beware; not many issues arise in the accomplishment of such a scenario. However, when the contract is between two parties of unequal strength, it is essential that the nuances are completely explained to the weaker party so that at least a semblance of equality is brought about.

Insurance business is essentially comprised of contracts of *uberrima fidei* or utmost good faith. Further, emerging markets world over are marked by low awareness levels in the domain of insurance which adds to the problems of confrontation. As such, it is essential that insurers take all possible steps to ensure that at every stage, the applicant or the policyholder is given to understand clearly what is at stake. Basically, the proposal form and prospectus have to be simple and lucid; and at the same time comprehensive enough to enable the applicant to understand his rights and obligations. The intermediary is believed to play the role of primary underwriter; and hence, he should take all necessary steps to put the prospect in the proper know of things.

The strongly worded declaration at the end of a proposal form should be specifically brought to the notice of the signatory so that he carefully re-considers the questionnaire before he endorses it. The argument that a proponent has signed the proposal form without going through it at the behest of the intermediary should be quickly consigned to history. The policy wording should be devoid of

excessive jargon, unless it is absolutely essential; so that in the case of need for interpretation, it does not lead to any ambiguities. Such of those clauses which narrate the limitations or exclusions in the contract should be doubly explicit; and special attention of the policyholders should be drawn to such clauses in order that they are aware of their rights and privileges. This practice is bound to result in greatly reducing the number of legally challenged decisions.

In personal products and especially in life insurance contracts, efforts should be made upfront to ensure that the age is admitted properly with a valid proof so that confrontation at the time of claim settlement is avoided. The importance of nomination should also be explained to the proponent so that the process of claim settlement is made easier. In essence, insurers should act in such a manner as to evidently demonstrate their eagerness in protecting the policyholder's interests.

'Policyholder Protection' will be the focus of the next issue of the **Journal**. Being a subject that is ever topical, let us look forward to different lines of argument from a cross-section of stakeholders.



Policyholder Protection

in the next issue...



Alpesh Patel says that a proper and quick processing of a genuine claim goes a long way in building the reputation of the insurer while an indiscriminate repudiation is bound to affect its goodwill.

Core Value Proposition of Insurance

- Claims Settlement

When the moment of truth arrives ...

The insured pays (in terms of premium) to the insurance company for years and expects benefits only when he/she faces the unfortunate event of a claim incident. Claim benefit thus becomes the core value proposition that an insurance company offers to the insured. Not only is the promise to service a (genuine) claim, a legal contract between the insured and the insurer; it is also a social and moral responsibility of the insurer. An insurer's reputation too is at stake while dealing with claims and its processing.

Insurer's imperative therefore depends on how it processes the claim in a prompt manner and minimizes repudiation of genuine claims. Industry and its players have rightly been monitoring some of the key parameters like claim repudiation ratio, claims ratio, claims process TATs and claims related complaints as indicators of health of the claim function.

However, ensuring claim function effectiveness is not a one-sided responsibility. There are often challenges from the customer side too (e.g. frauds, incomplete understanding of insurance converge, unreasonable claims) which make the claims experience a not so pleasant one. It is therefore fair to say that to improve the core value proposition of insurance business – the claim experience, both – the insurer and insured, need to contribute across the entire value chain of the process (please see Figure – 1). The benefits from such efforts are high and mutual (for the insurer and the insured).

The Objective of Insurance and Claims

The objective of insurance is to cover the impact of loss (e.g. equipment damage in a factory) from any unfortunate event (e.g. fire).



For the insured, the minimization of loss is through claiming the amount due to loss from the insurer. For the insurer, the larger interest is in reducing the extent of loss itself (to avoid large claims) and reduce its own claim exposure through reinsuring its insurance portfolio. Reduction in claim instances and claim amounts benefits the insured as well as insurer since the premium for covering such risks gets reduced. Insurers and insured thus work towards deploying practices, processes and technologies which reduce the risks and minimize the occurrence of loss events. The insurers offer premium discounts to insured if risk minimization measures are put in place and if there have been no history of claim in past.

Product Design and Claims

Insurance is invariably sold rather than bought (of course specific lines like motor enjoy greater awareness hence greater pull). Therefore, it is often tempting to design products which generate higher demand by

- offering low premium rates
- focusing on indirect / exaggerated benefits of insurance products
- de-focusing key exclusions and non-coverage areas

The result is launch of products which may not match the actual and adequate coverage of risks. Also, if the premiums are not matched with extent of risks covered, the insurers are under increasing pressure to reject claims. Often in a rush to innovate products rapidly, the insurers end up designing products which common people find difficult to keep pace with and find too complicated to understand. The need from insurer therefore is to design simple, understandable products, price them on actual risks being covered and standardize insurance industry specific terms. Doing so, while lodging a claim, one does not find any mismatch in his / her expectation and what is actually covered and the faith in core value proposition of insurance is not lost.

For the insured too, it is important to understand all the details of the product and the comparable products in the market and carefully choose the riders that suit their need. The insured also needs to be honest and transparent in filing his claims, infact his part of being a honest party begins from the very filing of correct and complete details in the insurance proposal form. Insurers anyway do establish multiple touch-points through which they verify the information provided by claim applicants.

Considering the fact that insurance as a product is more legal and contractual in nature, it is important that insurance selling process is transparent and educative for the customers.

Product Sales and Claims

Even if the products are well designed, every customer may not read entire insurance contract for lack of knowledge or time or both. When a half understood product is bought, the effects are often visible during claims process when the claim is repudiated as there is a mismatch in understanding of the benefits. Considering the fact that insurance as a product is more legal and contractual in nature, it is important that insurance selling process is transparent and educative for the customers. This is where the role of channel partners becomes crucial during the sales process. The channel partners need to be sensitized to the implications of mis-selling and encouraged to focus on adding value to customers' buying process rather than just chasing commissions. Towards this, there have been attempts to inject good practices like sales illustrations and welcome calling to customers but

there are still numerous instances of misunderstandings of benefits and surprises at the time of claim processing.

Claim Processing

This being the core process for proving the value proposition of insurance, it becomes vital that the process is handled with most care and efficiency. Some of the key areas of focus include

- Efficiency of claims processing
- Loss minimization
- Supply chain management
- Fraud prevention

Efficiency of claims processing

An efficient claim process gives the insured the 'wow' factor and reinstates the utility of covering risks through insurance. Especially in the time of distress, e.g. emergency hospitalization, accident or fire in a factory (resulting in business interruption), when the insured immediately needs a financial support on urgent basis, insurer needs to provide that prompt financial and emotional (through trained support personnel) support.

Higher efficiency also results in reduced cost of claims processing for the insurer which in turn enables the insurer to offer better premium rates and results in further benefit for the insured.

The need to intimate a claim could occur anytime, anywhere. Providing multiple channels (sms, helpline, online) for claim intimation thus becomes important for the insurer. Once the claim intimation is received, it is important that the claimant is kept informed about the status of the claim processing through multiple channels (e.g. sms, helpline, online). The processing requirements (necessary steps like filing FIR, supporting documents) should also be shared with the claimant on immediate basis using technologies (call center, sms messages and web-site) to ease the process of collation. The claim process should be technology enabled (e.g. Claims software, Rules engines, decision tools) to maximize filtering of straight-through processing cases based on business rules. For processing other claims there should be workflow enabled systems to ease the logical movement of claim cases across the decision hierarchy with processing data at each stage



Deploying loss minimization measures however calls for quick response time and efficient supply chain on the part of the insurer.

Supply Chain Management

Claims processing is a complex process which requires process integration, dependencies on and information exchange with multiple entities (garages, hospitals, legal counsel, health professionals, independent adjusters, contractors) depending on the type of insurance. The overall claim turnaround time and the claimant experience are dependent not just on the insurer but also on the entire supply chain. This calls for an efficient supply chain which is dependent on parameters like the following:

- Extent of clarity on insurer's claim policy (coverage, limits) among the entities (garages, hospitals)
- Level of technology adoption, data and process integration among the entities
- Efficiency of the entities (e.g. TAT on billing, reporting, survey report submission TAT) which are a part of the supply chain.

Deploying loss minimization measures however calls for quick response time and efficient supply chain on the part of the insurer.

tagged with the claim case. Integrated claim and policy administration systems are critical as they enable easy online access of policy history to the claim officer to validate / confirm policy validity, coverage and other key policy endorsements which might have a bearing in the claim decision. Other than the core transaction processing systems, there are other technologies / systems like GPS maps, RFID and remote data capture capability tools, which tremendously enhance the claim processing efficiency. IT systems could also be effectively deployed to ensure that all the adequate data fields related to claim event, approved amount, disbursement, etc are captured which later enable analysis and provide inputs for actuarial analysis and product design.

Other than technology, deployment of robust processes, training of service staff and channel also play a very important role in deploying an efficient claim process. For example, at the claim intimation stage itself, if the call center agent is trained to ask the right questions to the claimant, the process of policy linking, validation and subsequent claims processing becomes easier and need for reverting to the claimant multiple times can be avoided. The same agent (or any channel) can in fact provide important first hand information (e.g. nearby cashless garage in case of motor claim intimation) to the caller and improve the claim experience. Insurers also deploy special facilities (e.g. running claims handling vans in disaster ridden areas) to enable improved claim processing and settlement.

In summary, people, process and technology deployed in well planned and innovative manner to service claims can improve the claim efficiency and enhance claimant ease.

Minimising loss

As mentioned earlier, the fundamental objective of insurance is minimization of loss – both for the insurer and the insured. In case of a claim, it is therefore important that the extent of damage is minimized. The insurer can play a significant role in minimizing the loss once the claim event is reported by the claimant (e.g. by guiding on or facilitating damage prevention measures at the site of claim event). Regaining normalcy (e.g. returning to normal production in a plant) is equally important to reduce the claim on Business Interruption.

Many of the insurers have managed to achieve some of above for specific claim processes and product lines. But the need is to consider the supply chain efficiency improvement as an ongoing initiative and make continuous incremental (or fundamental) improvements in its functioning. For example, the Committee formed in 2009 to evaluate the performance of the TPAs, conducted interactions across the country and received feedback from all stakeholders, doctor/hospitals, TPAs, insurers etc; and emphasized on the creation of a common health insurance industry body, suggested grievance redressal matrix and proposed adoption of standard terminology in respect of claims.

The motor claims tribunal too has taken initiatives to improve the speed of settling the TP motor claims which often takes years to get settled resulting in inconvenience to the insured and increase operational overheads for insurers.

The other important area of supply chain improvement is the decision on outsourcing versus in-house operations. Recently, many insurers have re-looked at their sourcing strategies for the health claim processing and survey process. Insurers realize that claim processing offers core value proposition to the customers and hence can't be dumped on a third party. The insurers have woken up to outsourcing risks (e.g. frauds, service level non-compliance and quality of interactions with insured) and are taking steps to mitigate these risks. Some insurers have in-sourced (for all or some important cases) processes like health claim processing and conducting surveys through panel of doctors and skilled surveyors.

Fraud prevention

Fraud is one of the biggest threats to the value proposition of insurance and cause of conflict between the insurers, channels, supply chain entities and the insured. Fraud occurs when one of the entities (e.g. insured, physician) tries to gain undue benefit from the insurance contract by either fudging or hiding facts (e.g. presenting incorrect age, false reasons for loss). Instances of insured colluding with the distribution channel staff or supply chain entities (e.g.

A reduction in fraud levels not only results in decrease in false claim payments, but also offers other indirect advantages.

hospitals / doctors, repair stations) to get fraudulent claims cleared are not uncommon. As a remedy the insurers should deploy robust warning and alarm systems (as a part of claims process) to recognize the possible fraudulent cases early on. Insurers also need to maintain analysis of suspect agents, agent groups, locations, types of loss and beneficiaries involved during claims to predict and prevent frauds. Here again, technologies have been deployed to improve the ability to reduce frauds (e.g. RFID based cattle tracking, advanced analytical and decision making tools for fraud detection during claims

processing). For the insured too it is vital that they do not allow suppliers, contractors and professionals to charge them unreasonable fees when offering services / products which are claimable through insurance contracts. Insurers are increasingly seeking contracts that mandate that the insured take part payment of the claim amount on their own account. At an industry level, reinsurers too are increasingly seeking proportional treaties from insurers to ensure that the business acquired by insurers is well evaluated for risks; and when a claim is approved by the insurer, it is adequately investigated.

A reduction in fraud levels not only results in decrease in false claim payments, but also offers other indirect advantages. It reduces the need for high level of scrutiny and results in faster processing of genuine claims, thus also reducing the claims processing costs.

Conclusion

Claim settlement is the core value proposition to the insured, and an efficient, fraud controlled claim process is in the interest of the insured as well as the insurer. While efficient claim function is vital, other functions like product design and sales process too have an important role to play in improving claims experience. Integration with other entities in the supply chain and their performance too plays an important role – further enhanced by deployment of leading and innovative technologies.

Insurers' ability to deliver when the moment of truth arrives is what ultimately matters in securing the core proposition of insurance and in turn improving insurance penetration.

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Harpal Karicut writes that for an insurance customer, the most important event during his relationship with the life insurer is settlement of claim. He further adds that the grieving process is difficult enough, and when complicated with financial issues, it can be traumatic.

Managing Expectations

- A 'Customer First' Approach

extending the benefits to the affected promptly and with sensitivity - A 'customer first' approach goes a long way in strengthening the bond between the insurer and the insured.

Further, in today's competitive market, customer centricity and service delivery at claims stage will demarcate the excellent from an average. And innovation is the key to begin with. As an initiative to drive excellence in customer service, some insurers have recently launched the initiative 'Immediate Payouts on Death Claim,' so that the deceased's family receives the fund value immediately on registration of death claim under unit-linked policies, before a final decision on the claim, which inevitably takes some time. There is a

In today's competitive market, customer centricity and service delivery at claims stage will demarcate the excellent from an average.

very positive feedback from the policyholders on the initiative who have reiterated on several occasions that they feel comforted and reassured by the fact that financial support will reach their families quickly in time of need. From a customer first perspective, it is urged that the life insurance industry will adopt it as a standard practice.

Managing perceptions and ground realities is extremely important in life insurance. Most claim service issues boil down to mismanaged expectations and/or a poor follow up. Managing our customers' expectations translates to continuous communication with them. Repudiation of a claim is an extreme step but at the same time a usual scenario wherein the life insurance companies are faced with the challenge of handling customer expectations. Thus apart from setting up an efficient claims process and continuous innovation, there are several other factors that need to be taken into account for successful claims management. Some of these are:

One of the key reasons that families purchase life insurance is to provide financial protection in the event of premature death of the life insurer's 'Promise to Pay' and its customer service delivery will be most tested. The grieving process is difficult enough, when complicated with financial issues, can be traumatic. Thus, for an insurance customer, the most important event during his relationship with the life insurer is the settlement of claim.

'Claims' is a yardstick to measure a life insurance company's performance. Losing someone close is one of the toughest things that a person has to deal with. If the family has insufficient means to cover the costs of a funeral or expenses left behind by the life assured, it creates a tremendous financial burden - the regular monthly bills along with mortgage payments, insurance, loans etc must still be paid even though the earning member of the family is gone. All this can quickly deplete the savings. Moreover, there are several unexpected expenses that arise immediately after death and at such crucial times, one needs liquid assets that are available quickly.

Insurance being a long term contract, the event of claim may arise after several years during which period the life assured or the policyholder has regularly paid the premium and fulfilled his role in keeping the contract alive. An eventuality is the time for a life insurer to fulfil the promise made to a policyholder. The claims unit of a life insurance company thus plays a crucial role in

Company Philosophy

Any business institution being run by a prudent and ambitious group of professionals always has certain guiding principles, philosophy or values at its bedrock. This is more so in insurance as the business is based on mutual trust between an insurer and the insured and requires all its operations/functions to run on strong values and philosophies. As the reputation and trustworthiness of a life insurance company is put to test at the claims stage, more focus and effort is necessary in laying down the foundations of the claims department, with simplicity being central to all processes. Life insurance companies should always seek to ensure that the brand and their reputation is not endangered in any way and that their claims philosophy and motto is symbolized by the expression – 'FAIR, QUICK & CARING'.

As claims is the most sensitive area in life insurance business, care must be taken to ensure that the claims delivery mechanism is guarded by only skilled, experienced and well qualified staff. This will ensure that all payments, repudiations and all disputes over quantum and liability are handled with precision, sensitivity and of course speed. Further, empathy with the claimant is a must and should not be lost even if a claim is not valid.

Customer Education

It is extremely important for a life insurer to help the proposer not only understand the concept of life insurance but the importance of the

As the reputation and trustworthiness of a life insurance company is put to test at the claims stage, more focus and effort is necessary in laying down the foundations of the claims department, with simplicity being central to all processes.

proposal form, the various fields which help provide information that is of extreme importance and forms the basis of the legal contract of insurance between the proposer and the company, the life insurance contract itself and implications of its terms and conditions, the principal of utmost good faith, duty of disclosure and terms like warranty, concealment, representations, misrepresentation etc. It is for the insurer to guide the proposer to fill the relevant information with utmost care and that failure to provide accurate and complete information may result in repudiation of a claim

Product Designing

There is a lot of competitiveness in the market currently and the companies are designing products which are very complex for the customers to comprehend and can result in unnecessary hassles, delays and dissatisfaction at the claims stage. The products should be kept simple and easy to understand, addressing the needs of the customers.

Claim Forms

Development of standard claim forms across the industry with the consensus of all the players will be useful in the long run, especially in case of multiple policies.

Adoption of Best Practices from International Market

There is a strong need to adopt best practices from the international market especially to control frauds. The fraud bureaus are equipped with integrated database and predictive technologies which are important to forecast frauds. This would result in faster claim settlement of genuine claims.

Conclusion

The business of insurers is to settle claims, fairly and quickly. Adoption of a customer first approach in management of claims and innovation through customer centric initiatives ensures a positive reputation and helps the business grow. The life insurer must ensure transparency, make the policyholder aware of all aspects of the coverage and terms and conditions of the contract. Regular communication is vital – this can be aided by the use of technology and ensuring multiple touch-points between the insurer and the customers. Concerted efforts by the life insurance industry are required to develop adequate risk selection practices and checking frauds which will ultimately lead to the growth of the market..

The author is Chief Executive Officer, Canara HSBC Oriental Bank of Commerce Life Insurance Company Limited.



B.G. Patil emphasizes that Motor insurance *per se* is not a loss-making one for the insurers; and adds that a proper claims management philosophy can lead to better results.

Arresting Own Damage

- Managing Motor Claims

view of the tremendous spurt in automobile manufacturing in India, motor premium grows at a very high rate. As per reliable estimates, India is producing at more than ten million automobiles per year. This production rate is also increasing quite fast. Industry experts, therefore, rightly predict that 'Motor' premium will constitute 52% of the industry's total premium within next 2/3 years. It is worth mentioning here that 'Liability to Third Party' cover is compulsory by law and hence every vehicle owner has to buy the same. Over the years OD cover, though voluntary, has become a market compulsion due to various reasons. Availability of OD cover is one of the reasons

A company's financial health heavily depends on skillful and efficient claims management methodology adopted by the organization.

of prosperity of the automobile industry as well as the various constituents including the repairers. This is all the more a reason why the insurers have to be highly proficient in their management of this portfolio.

Motor Insurance' as a product has two distinct features e.g. Own Damage (OD) and Liability to Third Party (TP). Claims in both these products arise out of one policy document, though management of both OD and TP is entirely different, culturally.

Despite the fact that India has taken the first step to enter the free market, the basic OD product is still regulated and uniform for the industry. Similarly, TP product is also a regulated product. However, TP product is regulated by the law which is The M.V. Act of 1988.

Insurance, whether Life or Non-life, is a commercial activity. While the products marketed by insurance companies are produced so that they cater to the needs of the various customers to a certain extent; they are created, marketed and sold essentially for earning profits. Therefore, underwriting and claims management become two core activities of an insurer.

Although both these activities are of utmost importance, claims management has a distinct edge over the other. Claims management is considered 'the better half' of product management. It is here that the company's finances have an outlet. Claims outgo is the major part of an insurer's expenses, besides management expenses and reserves; and hence, the management of claims has to be essentially of such a high standard that it must produce excellence. A company's financial health heavily depends on skillful and efficient claims management methodology adopted by the organization. Besides, the claim settlement pattern of the company also establishes its culture; and the market constituents judge the character of the company by the standard and the culture of the claims settlement.

Motor insurance, as a class, is the biggest among the non-life industry classes and occupies almost half the volume of the entire industry. Last year i.e. 2008/09, with Rs. 13458 cr. of premium income, it constituted 44% of the total industry premium. The subject matter of insurance in this class is a motor vehicle. In

OD Claims Management

The total OD premium of 08/09 stood at Rs.8384 cr. app. Even claims reporting is quite brisk. Hence the OD claims dept. is the busiest dept. of any company. It is often said that there is never a dull moment in the OD claims dept.

However, it is very unfortunate that the end results in this most important and voluminous portfolio are far from satisfactory. There is a tremendous amount of excess outgo due to various reasons, including inflated claims/leakages. In the opinion of 'motor specialists this is happening due to a combination of reasons such as: a) Companies pay or rather are made to pay more than their actual liability arising as per the policy contract; and b) lack of scientific, methodical managing system and/or its lack of enforcement in monitoring, controlling and managing the assessment of company's liability.

The objective is decidedly to produce expected profits and not lose due to inflated claims/leakages and excess outgo. It is said: 'Pursuing of any objective is full of risks and achieving the objective requires managing those risks effectively'. Hence the need for scientific risk management process in managing OD claims. This is the crux of the OD Claims Management.

Specialists have already identified the reasons for excess outgo vis-à-vis losses in Own Damage portfolio. In order, therefore, to discuss this issue of OD claims management, it is essential to know the basics

OD claims management primarily means to arrive at a logical conclusion whether the claimant's version of his belief that he has the right to get what has been demanded, is true.

such as 'What exactly is meant by a claim?' The answer is simple. Claim means 'To demand or ask for something because you believe it is your legal right to own or have it'. This meaning is the starting point. Claims management which in fact is the product management, essentially depends on the thorough product knowledge such as the risks acquired as well as the probable loss/damage motor vehicle is likely to sustain and/or actually sustains, in the reported loss. Therefore, OD claims management primarily means to arrive at a logical conclusion whether the claimant's version of his belief that he has the right to get what has been demanded, is true. Does he have the right to get indemnified from the underwriter and if so for how much? In the gamut of OD management, therefore, the performance of Motor Surveyors [outsourced and/or in-house] is most crucial to the end results and is of utmost importance.

It is to be understood that the surveyors whether independent professionals or in-house, are appointed for survey not for assessing the loss suffered by the insured due to loss or damage to the insured vehicle but for assessing the insurance company's liability, if any, arising out of loss or damage to the insured vehicle in view of the policy contract which includes a) Perils covered b) Exclusions and c) Terms and Conditions. There has to be an absolute accuracy in the assessment of the company's liability. It is, therefore, a basic necessity that the claims department has to have a structured scientific methodology to ensure the accuracy of the assessment of the company's liability in every OD claim.

Hence there exists a fundamental necessity that not only the OD claims management personnel have to know the policy contract thoroughly well but even the Surveyors have to be extremely well versed in this regard. Unfortunately, it is observed that the scenario in this respect is far from this fundamental requirement.

Claims settling office has two basic decisions to make: a/ whether the claim is tenable and b/ the exact quantum of liability. It is here that the surveyor's performance becomes crucial and most important. Hence the managerial acumen essentially warrants a very tight control and supervision over the survey and the surveyors' performance at every stage of survey process. There should be no compromise in this aspect.

Besides a thorough understanding of the Motor OD product, surveyors also have to be highly experienced automobile persons well versed in the automobile accident technology. This expertise is acquired only from their shop floor exposure in the field of automobile repairs and maintenance acquired by them before entering the surveyors' profession. While forming the panel of surveyors this aspect needs to be ensured. There are a few highly proficient surveyors in the Indian market. However, as a part of the Resources Development programme, it is advisable to create highly efficient band of Motor Surveyors from the young generation from time to time. Such type of structured selection will facilitate the achievement of objectives as well as stricter control over the assessment of liability by enforcing the managerial methodology at



And last but certainly not the least, is the important exclusion 'consequential loss' of Section 1 of the policy. Whenever the loss/damage to the vehicle part falls under this exclusion, the insurer has absolutely no liability to indemnify the insured. It is very much essential as a part of OD claims management, to ensure that liability gets accurately assessed by the loss-assessing personnel especially in view of this exclusion.

As already stated before, assessment of liability is the nucleus of claims management. The well established process of three most vital tools viz. a) Spot survey b) Final survey and c) Re-inspection survey when systematically conducted and controlled will ensure the

Meticulous governance will ensure accuracy in the claims outgo which in turn will help in achieving healthy underwriting results.

accuracy of assessment of the liability. Any dilution especially in the process of spot survey and re-inspection survey will lead to unhealthy results. After all, both these inspections are established for a very specific and important purpose.

Secondary automobile market in India is now different from what it was till eighties. Accuracy of data in this regard built up and updated from time to time will ensure the prudent mode of settlement [viz. total loss and net of salvage].

As OD and TP together make the motor portfolio, each of them is expected to provide cushion to the other. In the current times this is highly essential. Hence OD management has to produce excellence so that the overall performance of Motor improves.

Conclusion:

To conclude, let it be understood that Motor is a good portfolio. It all depends on the standard of the company's claims management.

We have just entered the first stage of free market era. In the initial period of this stage, fierce price war is expected. However, only those companies where the claims management is of the highest order can afford to be aggressive in pricing. If not, the aggression will be suicidal. Similarly, contrary to the popular belief, TP portfolio, even given the constraint of the regulated pricing, can also be managed much more effectively.

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every stage of survey/assessment. Meticulous governance will ensure accuracy in the claims outgo which in turn will help in achieving healthy underwriting results. High level of governance is the only answer.

OD management methodology based on automobile accident technology has already been structured by the specialists, the practice of which has produced very good results in the past. There is, however, a strong need to create highly trained claims personnel. Knowledge acquiring process can never be overstressed. Trained man-power in any field becomes a force to reckon with. While the claims officials must possess the basic, fundamental knowledge of anatomy of the automobile, for better control, specialization in the department becomes a must. Even the generalist claims personnel essentially need to be trained in the product knowledge, the perils covered and their meaning perceived - exclusions to the contract thoroughly mastered and terms/conditions properly understood.

Some Examples

Out of ten perils which are covered in Sect. 1 (OD Sect.) for indemnity to the insured, "Accidental External Means", the sixth peril is the most dominating. The word external is the controlling factor. The assessing as well as the claims managing personnel has to be vigilant in ensuring that only such vehicle parts sustaining damage due to this specially worded peril are included as a part of liability. It has been the observation that whenever this aspect is neglected or taken casually, companies do get saddled with excess claims payment.

Similarly, there is another peril 'flood' which for the last 5/6 years has become a matter of great concern. Our policy contract does not define the meaning of the word flood. Hence the perception of the cover has to be the word's simple dictionary meaning. Besides, if the vehicle does become subject to the perceived meaning of flood, what damage, if at all, the flood water will cause to the vehicle assemblies' internal parts is a highly technical subject. Motor professionals observe that there is a tremendous scope of excess outgo in this aspect, if not meticulously controlled and vigilantly managed by the concerned personnel. This is a highly technical subject.

Dr. George E Thomas observes that if a minuscule percentage of the health policyholders is responsible for the huge claims ratios, there must be something wrong with the way the claims are being managed which calls for a closer scrutiny.

A Health Check

- Claims Handling System

“The moment of truth in an insurance contract lies at the time of claim settlement”, IRDA reminds the industry that it regulates, in its Annual Report of 2008-09. This moment of truth, which could emerge at the end of several years, it points out, is bound to leave heartburn for the policyholder if the claim is repudiated. Insurers also recognize that interacting with the policy holder at the point of sale and at the point of claim are two different aspects and have developed different specializations over the years for the purpose.

When a policyholder presents himself before the insurer in a claimant's garb, he is always the weaker of the two parties.

Dealing with the doubly weak

‘Sensitivity’ is the watchword for insurers when it comes to dealing with insurance claims in general. In dealing with health claims; the word changes to ‘utmost sensitivity’. When a policyholder presents himself before the insurer in a claimant’s garb, he is always the weaker of the two parties. Having complied with his part of the insurance contract by paying the premium, he waits with worry how the big insurance company will fulfill its promise. A health-policyholder is doubly weak, first due to the trauma of the sickness, whether to oneself or to a family member; and secondly as a claimant waiting for the money to come in as claim settlement.

The health-policyholder expects his insurer to act as a proverbial friend-in-need when sickness, one of man’s most elementary fears hits

him or his family. Weakened already by the disaster, he may not like to fight a legal battle with the insurer. As a claimant, he may be easily offended by any act of discourteousness, insensitivity or injustice from the insurer. An insured would expect all the service that an insurer can possibly provide (or even some that he cannot).

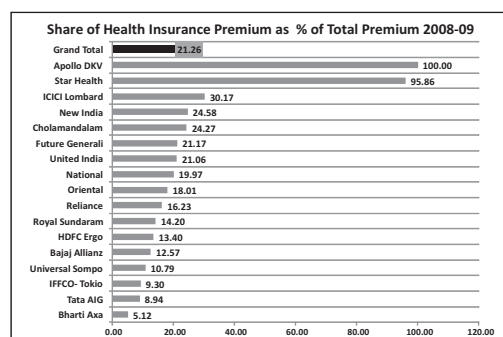
Having a claim settlement plan

While a claim is something unexpected for an insured, the health insurer all along knows that claims are coming from one insured or another. He needs to look into the claim within the framework of the contract, satisfy himself that the claim is payable, the amounts paid are as per the contract stipulations and there are no moral or morale hazards involved. He needs to act with promptness and sensitivity to retain the customers’ goodwill. The insurer knows only too well that while each single claim cannot be big enough to really hurt him, a prompt settlement would be the shortest way to an insured’s heart and an act of insensitivity would close the doors to his heart, home and business forever. Worse still, the negative publicity that would ensue through word of mouth can negate the effect of crores of rupees spent by the insurer on advertisements and other goodwill raising activities. On the other side of the coin, if the insurer pays more than what he is obliged to, he compromises on his company’s financial interests and sends a negative feedback to the market that he is careless or that he can be fooled. In essence, a

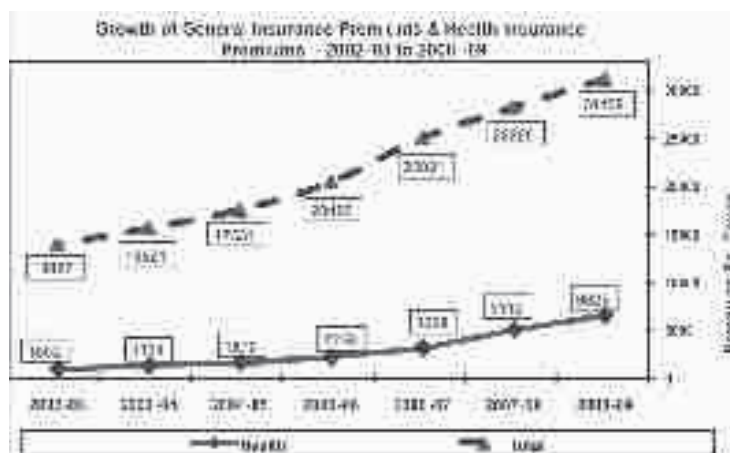
health insurer should have a robust and sensitive claims settlement system, tempered with empathy, polished with professionalism and practiced with sound business sense.

Understanding the market scenario

Health insurance in the country is yet to understand itself. At one end of the spectrum, there are insurers who feel that companies are being bled to morbidity due to health insurance claims. While some carry on with a minimal share of health premium, some of the stabilized players have shown an increased appetite for health business. Trends show that most insurers prefer a 15% to 25% health portfolio. At the other end of the spectrum, one finds a group of specialized insurers who have put all their eggs in the health insurance basket and are apparently confident that the portfolio will give them good returns. During 2008-09,



when the industry's total premium was Rs.31,159 crores, the health insurance premium was Rs.6,625 crores contributing to 21.26% of the overall business. It is interesting that during the period 2002-03 to 2008-09, health insurance grew from Rs.1002 crores to Rs.6625 crores in terms of premium (561%) while the industry's total premium grew from Rs.13927 crores to Rs.31159 crores (124%). At a macro level, one finds that the average premium rate during 2006-07 was 1.92%, during 2007-08 it was 1.35% and during 2008-09 it was 1.47%. One finds that the premium per insured person has been generally consistent over the last 6 years averaging at Rs.1218 per insured while the claim amounts also are consistent over the same period with an average claim size of Rs.1119. As per IRDA published data, one finds that during 2008-09 20,81,297 claims were lodged in respect of 3,27,10,604 insured people, grouped in



45,75,725 policies. This indicates that in a group of 1000 insured people, only 64 claims are lodged. Though 6.4% appears a healthy figure from a frequency point of view, when we consider that the health claims ratio hovers around 100% over the last few years, one is startled that these 6.4% of claimants take away 100% of the money that the insurers laboriously garner throughout the year. This indicates that the industry has to look more closely at the health insurance claims management system.

Assessing the regulatory perspective

The health insurance claims management system works mainly through Third Party Administrators (TPA) in India. There are a few cases of insurers breaking away from the TPA system and forming their own in-house claims management departments. A web search on TPAs would yield more results from studies done at IIM Ahmedabad than by insurance companies themselves. Studies conducted by Ramesh Bhat, Sunil Maheshwari, Somen Saha (IIMA) point out that there are no mechanisms in place to appraise the performance of the TPAs. Presently TPA appraisals are based more on their financial performance and remunerations are fixed percentages of premium. There is a need to link incentives of TPAs with their performance and consumer satisfaction. They feel that "eventually, the industry needs to gear up to link accreditation for TPAs based on tie-up with insurance companies and quality of TPA services."

Health Third Party Administrators being an integral part of health insurance, one needs to look closely at it. It would be difficult to ignore the largely debated negatives of the system. However, without going by the public praise or condemnation that has accrued to this insurance intermediary, the insurance industry would do well to design objective and scientific yardsticks to evaluate TPAs.

Indian Regulations envisage TPAs as companies licensed by IRDA to be engaged by insurers for providing health services, with prescribed levels of capital, having at least one medical doctor as director. Insurers can engage multiple TPAs, and TPAs can serve multiple insurers. TPAs have to maintain "confidentiality of information" and abide by a Code of Conduct.

TPAs being essentially an American concept, it would not be out of place to look at the Administrative Code (for Licensing and Examination of TPAs) created by the Texan Regulator. The Code, in a most direct language, prohibits TPAs from engaging in the following activities: (1) misrepresenting the terms, advantages, or nature of its service contract; (2) making false or incomplete comparisons with the service contracts of other TPAs or persons in order to induce a plan, insurer or person to enter into, continue or discontinue any service contract with the TPA; (3) accepting or rejecting risk other than in compliance with the terms of the written agreement structured under the requirements of the Insurance Code, (4) publishing or circulating any advertising or informational material, certificates, booklets, or brochures pertaining to business underwritten by a plan, insurer, or plan sponsor without the advance written approval of such plan, insurer or plan sponsor; or (5) designing, constructing or implementing barriers under the written agreement that would unreasonably restrict the right of a plan participant to avail himself of individual life, health or accident policies or annuities through an agent selected by the plan participant. One has to understand that the Texan market environment would have made it imperative for the regulator to build all those provisions relating to prohibited transactions in the administrative code for licensing of TPAs.

Insurers have to assess and constantly monitor the job that they have out-sourced to TPAs. The assessment of the delegated function has to be based on objective and tangible parameters that have to be decided by insurers.

Assessing the TPA system per se

Insurers should not forget the pre-TPA scenario when they were laggards in settling health insurance claims. As per published studies conducted by Bhat and Rajagopal of IIM Ahmedabad, relevant for the years 1997-1999, the time taken for claim settlement was anywhere between 7 days to 429 days from the date of discharge. In all the fifteen groups that the field studies had focused upon, the average claim settlement time of the insurance industry was around 128 days and the reasons attributable for such delays were various. On a disease focused study, the average claim settlement time was 99 days for ophthalmology cases and 182 days for endocrine diseases!!

There is no official study to conclusively prove that the TPA system had made a sea change to that situation. An analysis of sample data (1

lakh claims records) published a few months back by IRDA indicates some improvement made by the TPAs during the early months after a claim. The settlement of claims that age over longer periods, possibly relating to complicated cases or incomplete documentation, is yet to improve.

Insurers have to assess and constantly monitor the job that they have out-sourced to TPAs. The assessment of the delegated function has to be based on objective and tangible parameters that have to be decided by insurers.

Assessing TPAs vis-à-vis deliverables: IRDA's regulations could well be a starting point, as TPAs are bound to insurers by a contract. Some of the parameters used by IIMA could be used for creating a regular assessment system. IRDA's Code of Conduct speaks about bringing in professionalism, employees disclosing their identity to customers, disclosing details of the services rendered, informing insurers of any adverse report or inconsistencies or any material facts that are relevant to the insurance company's business, obtaining requisite documents pertaining to the examination of an insurance claim, advising policyholders/claimants/beneficiaries in complying with the requirements for settlement of claims and being courteous in their dealings. The Code restrains TPAs from acting in a manner that may influence policyholders of one insurer to shift to another, trading on information and records of its business, advertising its business/ services without approval of insurers, inducing policyholders to suppress information and from demanding/ receiving a share of the indemnity from claimants. The Code stipulates that TPAs maintain confidentiality of the data collected by it in the course of their business. The Indian market thus expects the TPAs to deliver services as per the regulations and contract conditions.

- **Key deliverables to policyholders**
Cashless hospitalization, timely claims services and prompt response to their numerous queries.
- **Key deliverables to hospitals**
Reimbursement on time, with minimum procedural hassles.

- **Key deliverables to insurers**

Cost-efficiency, by way of reduced administrative costs and fast claim processing, better understanding of healthcare procedure and provider systems, standardization of healthcare costs, standardization of billing formats and ensuring that there is no under-reporting of information. [These would provide insurers with dependable homogenized data for scientific/ actuarial pricing of insurance products.]

- **Key deliverables to market/ industry/ regulator**

Developing management systems for cost control, **developing** protocols to minimize unnecessary treatments/ investigations, **standardizing** medical costs/ diagnostic procedures/ medical record-keeping/ medical accounting, gathering medical information for insurers' needs like better pricing of products/ product innovation/ research and development etc. to facilitate better research, **providing** cashless hospitalization, **popularizing** health insurance by improving the quality of hospital service to insured etc.

Assessing by performance

Against this pack of deliverables, insurers should assess TPA performance by asking the right questions to the right people. Growing consumerism has increased the demands on the system. Insured want on-line help, preferential treatment at hospitals, hassle-free claim settlement, pre-authorization of large claims and the comfort of cashless hospitalization. The evaluation system should assess the TPA against certain performance indicators like:

- **The impact of TPAs on the insured**

Improvements in insured's awareness, decision making, confidence levels and comfort level.

- **The impact of TPAs on the health sector**

General functioning, standardization of healthcare deliverables, uniformity of pricing/ billing formats, improvements in systems and procedures,

dependability in systems of information gathering.

- **The impact on the society**

Insurance as an industry develops if the insured are happy. The regulator and the industry are interested in the development of the market and more and more people getting the benefits of insurance.

Conducting a survey/Drawing a questionnaire:

An indicative set of basic questions drawn on the lines of the IIMA studies could provide us with a pattern to start with. Questions would get added in line with the wish-list of growing consumerism on one side and insurer-specific requirements on the other. Questions have to be designed to draw out unbiased responses and without losing focus on the particular aspect that is being assessed.

Growing consumerism has increased the demands on the system.

Questions to policyholders:

Were you informed about the diseases covered/ not covered?

Were you informed about cashless services?

Were you provided with a list of empanelled hospitals?

Were you informed whether treatment in other than empanelled hospitals is payable?

Were you informed whether hospitalization outside the city is permissible?

Were you informed about hospitalization procedures?

Questions to claimants:

During the hospitalization period, did the TPA ever visit?

Did the TPA arrange for specialist consultation?

Did the TPA ask about treatment protocols?

Did the TPA audit/ scrutinize the bills?

Did the TPA enquire about test/ room rates?

Did the TPA enquire about length of stay?

Did the TPA's intervention improve your hospitalization experience?

Did the TPA have any service agreement that reduced your cost of treatment?

Did the TPA's intervention give you any benefit from the hospital?

Did the TPA insist that the hospital should follow any standard procedures?

Did the TPA try to influence diagnostic process?

Did the TPA try to interfere in treatment decisions?

Did the TPA influence in prescribing new drugs?

Did the TPA influence in getting you better diagnostic services/ better technology?

Questions to hospitals:

What effect does the TPA network have on your business?

Have your number of admissions gone up?

Has your rate of occupancy go up?

Has your cost per bed per day increased?

Has your overall hospital expense gone up?

Has your staff expenditure gone up?

Is maintaining relationship with the TPA difficult? Why?

Did TPAs delay claim settlement?

What is the agreed time for claim settlement?

What is the time taken for claim settlement?

Taking decisive action based on findings

The Indian health insurance claims management system, of which TPAs are the main players today, should contribute in the creation of a market environment of better care, lower claims, lower claims handling costs, lower premiums, higher insurance penetration and higher profits. The claims management system, to consider itself successful, should be able to (a) improve the insurers' image, (b) reduce insurers' workload and costs, (c) provide all the data that they need, (d) provide better services to policyholders, (e) make hospital systems more transparent, (f) increase customer trust in the insurance system, (g) improve hospital – insured - customer relationship and (h) create market pressure on hospitals and other medical service providers.

An objective review, through a market survey on the above lines will give the insurers a clear and unbiased picture of the TPA system. After assessing the system, insurers should take responsibility and decide to enjoy the fruits of the system if they find it good; to improve it if they find it lacking; or to discontinue it if it is not worth having. Whichever way the assessment goes, insurers should take charge of the situation and take decisive action.

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The author is Chief Manager, Tariff Advisory Committee. Views expressed in this article are his own.



Rajagopalan Krishnamurthy reviews the key findings from the “India Bancassurance Benchmarking Survey 2010”, a new research study from Towers Watson.

Reaching New Frontiers

- Indian Bancassurance

Bancassurance distribution is now a well established phenomenon in the Indian market. In less than ten years, almost all banks, including private, public, foreign, co-operative and regional rural banks, have taken to distributing life and general insurance products; and they have emerged as strong supplementary channel to the tied agency. Sales by banks have grown faster than other distribution channels for private life insurers.

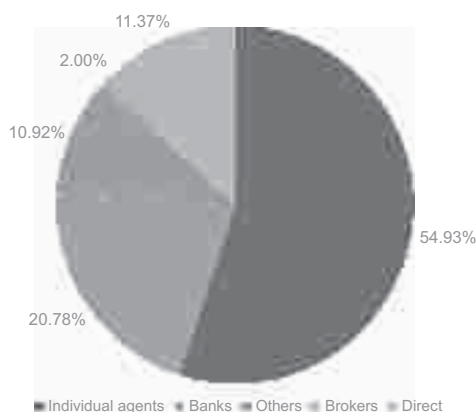
The Bancassurance Benchmarking Survey reflects the views of a cross section of insurers and bank intermediaries. A total of 21 life and general insurance companies had participated in the survey, along with 16 major banks and 8 non-banking finance companies ('NBFCs'). The findings reveal interesting insights on the motivations, sales practices, productivity, channel management and other aspects of bank distribution.

For the year ended March 2009, the total new life insurance premium generated by private life insurers through banks and NBFCs is estimated at about Rs10,000 crores (about US\$2.2 billion), accounting for a share of 29% of their total new business. The share of bancassurance premium for the top ten life insurance companies ranged from 14% to 58% of their total business.

Tenure and quality of partnerships

Half of the banks and NBFCs that participated in the survey have been into distribution of individual life insurance products for more than 4 years, and about a third of them had more than 6 years of bancassurance distribution experience.

Individual new business for private life insurers for year ending March 2009



The average tenure of distribution agreements between life insurers and private/foreign banks tends to be longer than that between insurers and public sector banks. Stability in partnerships is a key factor to benefit from lower distribution costs and reaping scale economies.

40% of life insurance companies responding to the survey have admitted having lost one or more existing distribution tie-ups during last year. This highlights the uncertain nature of partnerships with banks.

IRDA has recently stipulated a minimum tenure of three years for corporate agency agreements, with the right to either party to terminate the arrangement based on a few pre-determined criteria. More importantly, the bank terminating the relationship would need to put an alternative system in place to service the insured customers to the satisfaction of the regulator.

In mature markets, bank distribution agreements run for an average period of 5 years, with several successful tie-ups stretching for 10 years or longer.

In this regard, the survey reveals that a few banks are examining the scope to form independent distribution companies to take insurance distribution activity in a focused manner. Such companies can be wholly owned by the bank, or where minority stake can be held by life companies. Banks seem to feel that such dedicated distribution vehicles would bring in more professionalism, help offer wealth management advisory to the customers and help tide over some of the difficult staffing and HR issues commonly faced in banks.

Activity level at bank branches

Whilst having a bank partner with a large number of Points of Presence is a definite advantage, the challenge for an insurer lies in activating them to become active distribution points. The branch activation ratio (defined as branches selling at least one policy per month consistently during a period of twelve months) ranges from 20% to 75% for life insurers. A key focus of bancassurance implementation for companies has been how to achieve a higher activation ratio and sustain the same.

The study shows that the activation ratio at branches of bank partners is higher for life insurers than for general insurance companies. About 80% of the general insurance companies had responded that of the total bank branches they have access to, less than 500 branches are actively involved in selling general insurance products.

Since the bank sales staff are usually common for both life and general insurance product streams, the low earning potential from general insurance may seem less important in the eyes of the branch manager.

'Excessive' fee demand

About 50% of the life insurers had commented that “excessive demands from the banks for commission and other payouts” is one of the top three issues faced by them. As insurance companies seek to evaluate the profitability of their bancassurance channels in the context of regulatory pressures on cost management and capping of the insurer's fees and charges on linked product sales, this factor is likely to become more critical.

The other top issue is the difficulty in making insurance sales as part of the Key Performance Indicators of individual bank staff. This is especially relevant in state owned banks.

Sales Operations

A majority (62%) of life insurance companies polled use a combination of their own sales advisers at bank branches along with the bank employees as sales persons as the predominant bancassurance model. However, only 13% of them indicated that the sales staffs of their partner banks were more actively involved in selling insurance policies, generating between 76% and 100% of the premium sourced through such banks. Only 25% of the life companies responded that insurance sales are entirely made by the bank staff.

A key difficulty for the life insurance companies to scaling up bank sales is mentioned as the lack of requisite number of bank sales staff designated as Specified Persons ('SPs') at branches, and the branch

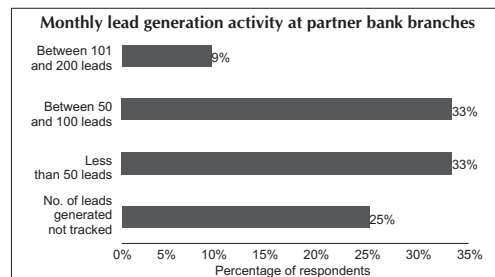
manager's ability to assign the SP on a full time basis for insurance distribution. 87% of the bank respondents indicated that their SPs are not fully dedicated to selling insurance and that they also carry out routine banking roles. The responses from banks reveal that SPs on an average spend less than 25% of their total time for insurance selling.

This has led to higher level of involvement by insurers at the bank branches. Half of the life insurer respondents indicated that on average, they dedicate one sales adviser per bank branch at metros and large cities. At smaller centres, a sales adviser covers 5 to 6 branches in the same or adjacent centres.

Lead generation and management

One out of every three life insurance companies reported to be generating, on average, less than 50 leads per month at each bank branch. At the same time, an equal number of companies had reported that their bank partners provided between 50-100 leads per month.

It is noteworthy that 25% of the insurers do not track the number of leads passed on by their bancassurance partners.



In respect of general insurance, a third of the respondents had reported a lead conversion rate in excess of 50%, indicating there is still considerable scope to improve the skills of salespeople in presenting value/risk trade off, leveraging customers away from known/existing providers and in effectively closing the sale.

On a general note, insurers often do not have a robust system to ensure that bank partners generate the right type of leads, in sufficient numbers and consistently. In the case of state banks, despite the bank branches having networked IT platforms, the banks are generally weak on business analytics. Insurers admit to not providing adequate support to

their bank partners in mining their customer databases to identify key prospective clients consistent with the privacy and data integrity rules of the bank partners.

About 67% of insurance companies surveyed admitted to not setting any lead generation targets for their bank partners. Two thirds of the respondents admitted to linking lead generation targets to the number of loan customers and the size of loan portfolio at the branch.

Persistency

About 20% of the life companies placed their 13-month persistency levels of bank sales as between 75-85%, while another 27% of participants pointed out that their rate was well below 75%.

Some respondents had acknowledged witnessing a drop in the persistency levels through the bancassurance channel during the past twelve months.

In respect of general insurance sales, only 25% of the respondents indicated an average renewal rate of more than 75% under personal lines, while another 50% indicated an average renewal rate between 51- 75%. This clearly shows significant scope for improvement to proactively manage the renewal process.

Training and development

Overwhelmingly, insurers bear the responsibility for training bank employees identified for the sales activity. Insurance companies mostly provide this service themselves, with 15% of the respondents indicating that they involve outsourced trainers and/or external agencies for this purpose.

A majority of life insurers stated that they have between 21-40 in-house trainers dedicated to bancassurance training.

A key part of training both by life and general insurers is on the renewal of policies and how effectively this can be achieved in the bancassurance environment. Most companies had commented that bank partners are typically reluctant to assume the responsibility for ensuring higher renewal rates and it is often left to the insurer's sales staff to follow up on existing customers for renewals.

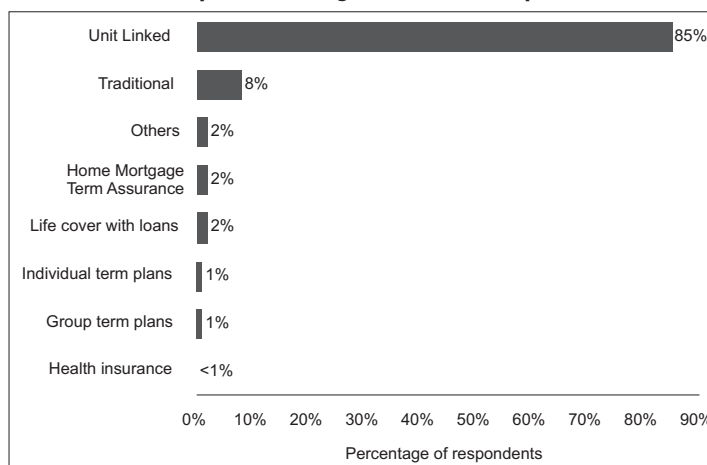
Several insurers seem to have begun initiatives to provide online training to bank staff by providing a link within the bank branches to the insurer's site containing the insurance curriculum. Some companies have also instituted specific programmes for bank training staff in the bank as part of 'Train the Trainer' programmes. Such accredited bank trainers are then utilised to further train the bank staff to qualify as Specified Sales Persons.

There are also some early initiatives to develop dedicated 'Bancassurance Academy' facilities to offer training to bank staff at various levels and across various curriculums.

Product mix of bank sales

The responses to the survey confirm the assessment that bank distribution in the case of life insurance is currently highly skewed in favour of unit-linked products (ULIP). ULIP sales account for more than 85% of premiums generated by banks. This is followed by sales of traditional products, especially at branches outside metro/urban centres.

Average percentage of premium from various product categories from bank partners



More than 50% of life companies reported selling between 7 and 9 products through the bank channel or other alternative distribution partners. In actual practice, bank sales are largely confined to just one or two products.

In respect of general insurance, the bank staff are involved mostly in the promotion and sale of simple products such as motor, personal accident, travel and home mortgage insurance, and policies to cover small business borrowers and trade advances clients.

About a quarter of the general insurance companies indicated the contribution from banks on motor insurance as between 75% and 100% of their overall bancassurance premiums.

It is noteworthy that half of the respondents indicated generating between 11-25% of their bancassurance premium from sale of health insurance products. The contribution from personal accident, permanent and temporary disability, travel and other specific health

insurance products such as cancer care, remains low.

There seems to be considerable scope for joint initiatives on product development to suit the bank customer base. Less than half the number of life insurers polled admitted that product development is rarely a joint exercise with their bank partners.

Customer management and service delivery

Service Level Agreements (SLAs) are important instruments to document the desired level of quality and support by the insurance partners. However, only 62% of the life insurance respondents said that they have formal SLAs signed with their bank partners.



Over 70% of the general insurance respondents mentioned that making 'contact calls for renewals' is at the top of their customer management activities. However, less than half of the respondents had a 'toll free' customer helpline dedicated to insured bank customers.

It is also noteworthy that less than 50% of respondents have established dedicated complaint monitoring systems or loyalty programmes for their bancassurance customer base.

Claim settlement and policy servicing are critical aspects of customer management and support yet this is an area where banks seem to feel less than adequately satisfied. In life insurance distribution, 57% of the bank respondents have rated the satisfaction level as 'medium to low' on policy servicing aspects, whilst in respect of general insurance, 36% of the bank participants have assigned 'medium to low' in satisfaction level, with 7% of them assigning 'low' rating.

The findings reveal that the claim settlement delays and issues are surfacing more frequently in general insurance and credit life insurance business.

The experience in mature bancassurance markets shows that both banks and insurers regularly use customer satisfaction surveys to gain perspectives on quality control, sales process improvement and compliance audit. This may well be an area where insurers can learn a great deal about the day-to-day challenges within their bancassurance distribution channel.

Average productivity and persistency

Nearly 60% of respondents stated that the average productivity of their bancassurance sales advisers during the last financial year was between 6-10 policies per month. 17% of the respondents claimed that their sales advisers dedicated to the bancassurance channel sold in excess of 20 policies per month.

Sustaining the growth

Close to 60% of the life companies are of the view that the overall market share of the bancassurance distribution channel would grow to approximately 30% by the year 2012. About 15% of them are more bullish and predict bancassurance to generate between 40-50% of new business.

About a quarter of the companies also consider more focused involvement by senior management of banks as having the strongest impact in boosting bancassurance volumes.

The other factor that companies have ranked amongst the top three factors with strongest impact is the potential market demand in tier 2 and tier 3 towns

There is a clear view emerging that the 'low hanging fruits' in Indian insurance may have been plucked and that expanding bancassurance will require increasing levels of control and sophistication. Indian insurers and banks need to learn from the developed markets a number of lessons to sustain this momentous growth in bank distribution of insurance.

R.Krishnamurthy is Managing Director for Products, Distribution and Markets, Towers Watson India, involved in assisting clients on improving the insurance distribution practices in India.

N. Srinivasa Rao writes that despite all the schemes generated by successive governments, Health Insurance still remains largely inaccessible to the poor and needy.

▲ Study of Government Insurance Schemes

(Part – III)

21. Arogyashree in Andhra Pradesh:

The Government of Andhra Pradesh launched Aarogyasri Community Health Insurance Scheme for BPL families on a pilot basis in three districts in 2007. Based on the success of the scheme, it was extended to all the districts in a phased manner. The premium of Rs.330/- per annum per family is completely met by the State Government and the scheme is being implemented by the administrative government agency, Aarogyasri Health Care Trust.

The claims are administered through a TPA company namely, the Star Health which has been selected by competitive bidding. The scheme covered 22 lakh BPL families in the

three pilot districts of the State, initially and later on extended to all the 1.2 crore BPL families of the State. The sum insured per family is Rs.2 lakh. The scheme basically covers hospitalisation for surgeries and treatment of diseases pertaining to:

1. heart,
2. cancer,
3. neurosurgery,
4. renal,
5. burns and
6. poly-trauma cases not covered by Motor Vehicle Act.

The beneficiaries for treatment are identified through health camps. The policy is valid for a period of one year or up to the time when the overall claim ratio reaches 120% of the premium paid, whichever is earlier. Any kind of health insurance scheme, which does not involve the public medical facilities, would not succeed because in majority of states, these are the only facilities available in rural areas. The

Year 2007-08

S.no	Name Of The Scheme	No. of Lives Risk Covered	Premium Collected(Rs in Crs)	Claim Ratio%
1	Arogyasri Phase-I&II Health Insurance Scheme	247.91 Lakhs (68.93Lakhs Families)	114.28	125.48%

following tables give the progress of implementation of Arogyasree in Andhra Pradesh during the past 2 years.

Based on the experiences of the above mentioned two successful health insurance schemes run by the state governments - Yeshasvini in Karnataka and the Arogyasri in Andhra Pradesh - it is important to recognize the involvement of state governments in

designing a plan scheme by the Ministry of Health and Family Welfare with subsidy being passed on to the hospitals through the state governments. In such a situation, the state governments can invite bids on 'premium to be charged' at their level from all the insurance companies, both public and private. For availing of the subsidy from the central government, the minimum features of the scheme could be decided on priority and informed to the state governments. State governments may add some more features to the scheme and may also provide financial assistance to the

Year 2008-09

S.no	Name Of The Scheme	No. of Lives Risk Covered	Premium Collected(Rs in Crs)	Claim Ratio
1	Arogyasri I Health Insurance Scheme	80Lakhs (20 Lakhs Families)	-0.89	0
2	Arogyasri II Health Insurance Scheme	167.91Lakhs (48.23 Lakhs Families)	50.5	162.16%
3	Arogyasri I First Renewal	94.04 Lakhs (25.27 Lakhs Families)	26.53	126.84%
4	Arogyasri III Health Insurance Scheme	123.20Lakhs (34.87Lakhs Families)	81.95	96.38%
5	Arogyasri IV Health Insurance Scheme	132.91 Lakhs (36.44 Lakhs Families)	81.63	64.79%
6	Arogyasri V Health Insurance Scheme	137.34 Lakhs (39.80 Lakhs Families)	104.67	78.83%
7	Arogyasri II First Renewal Health Insurance Scheme	167.91 Lakhs (39.80 Lkhs Families)	51.6	48.26%
	TOTAL		395.99	89.35%

policyholders by contributing whole or part of the premium. In this scenario, the modalities of administering the scheme at different levels may be described in detail by the central government or may be left to the state governments.

At some point of time provisions like social health insurance, self-help group savings etc. could also be utilized as a community contribution towards district based risk pooling arrangements. Social health insurance where premium is linked to a percentage of the income can be an equitable way of building a corpus of financial resources as households pay according to their ability for the same set of health care services.

Communitization through ownership by Panchayati Raj institutions adequately prepared to undertake the management role is necessary for an efficient and effective health care system. The experience with Hospital Development Committees in Kerala and Rogi Kalyan Samitis in Madhya Pradesh has prompted the central government to mandatorily seek the establishment of such community organizations in health institutions. Innovative health financing would require active ownership of the public health system by Panchayati Raj institutions.

Claims Analysis

The claims ratio witnessed by the health segment of the insurance industry in India is quite alarming at more than 150 per cent. While this is so, a large number of grievances get reported on the grounds that the insurers reject genuine claims citing existence of 'pre-existing diseases' which are usually covered in the exclusion clause under the policy.

Another contributing factor to the high claims ratio in Health insurance is the pricing of group health policies for corporates. The

large chunk of capacity availability coupled with competition has resulted in reduction of price for these policies which in turn makes the claims ratio going up sharply. This throws up a need for a more scientific pricing of the products by the insurers linked to a properly developed database relating to health insurance.

The claims ratio in health insurance which is upwardly mobile will have to be addressed through concerted efforts of all concerned in the supply chain. It should be ensured that the billing, be it on 'cashless basis' or on 'reimbursement basis' will have to be consistent. A careful and detailed analysis of the claims paid will have to be undertaken by the insurers/TPAs/insurance brokers so as to identify the problem areas and initiate steps to address those concerns so that effective loss minimization is achieved. The remedy does not just lie in 'increased premiums' year-on-year linked to the claims ratio.

Insurance companies will have to facilitate exponential growth of the health insurance portfolio through well thought out product design, product pricing and product servicing. The designing of the products should be done innovatively and should result from proper segmentation of the markets. The scope of cover should widen so that there is no scope

for manipulations. The product should result in adequate cost-control – probably building in sub-limits may help.

Product pricing should be based on the stand-alone concept. The premium should be rationalized and the insurance companies should understand that sheer dropping of prices cannot serve as a marketing strategy.

A high level of servicing should be ensured so that all the entities involved – the customer, the insurer and the service provider – experience a win-win-win situation.

Health insurance in India will be successful only when the insurance companies adopt a long term view and resort to rational practices that are sound. The service providers are to be roped in as partners to the concept of 'Health Care to All'. Further, the attitude of the customers towards Health insurance should shift from that of 'apathy' to 'concern'. This would result in increased volumes for the insurer.

Health insurance market in India has all along been aligned to one of indemnity. But it is now time for the market looking beyond. Apart from indemnifying the insured, the market can now start focusing on Managed Healthcare. A pure indemnity regime will result in increase in costs since the service providers do have an

incentive to over-provide. The patient, on the other hand does not question the decisions of the service providers since he is anyhow being indemnified by the insurer. A transition from the present system of indemnity insurance to managed care has to take place.

Company wise Claims Analysis of Government Insurance Schemes

When we examine some of the insurance schemes of the States and the data on claims ratio is analyzed, it is clear that the claims ratio far exceeds the premium collected under several schemes spread over sectors like agriculture, animal husbandry, health and accident policies. For instance, under the scheme "Insurance of Farmers of Uttar Pradesh" the number of lives covered was Rs.1.12 crore during 2006-07; the premium collected was Rs.11.85 crore; and the claims ratio was 214%. Similarly, during 2008-09 under the "cattle insurance policy of the Government of India for Uttar Pradesh, the claims ratio stood at 154%. In contrast, in the state of Maharashtra where awareness is the maximum in the country, under the Farmers' Package Scheme named "Ganna Kamgar Vima Yojana – Maharashtra Government Scheme" against a premium collected of the order of Rs.55 lakh, claims ratio was only 62% in 2006-07. However, during the same year under another agriculture scheme for farmers in Maharashtra, the claims ratio was as high as 206% for Rs.3.8 lakh farmers against premium collected of Rs.2.77 crore.

Also, in the state of Kerala insurance scheme operated by Kerala Civil Supply Corporation for the BPL families, the claims ratio was as low as 13% during 2007-08. Further, under the scheme of insurance to beneficiaries of "Indira Kranti Patham", in the state of Andhra Pradesh during 2006-07, against a sum insured of Rs.25,000 per beneficiary and against a premium collection of Rs.12 lakh, the claims ratio recorded was 54%. Under the Karnataka Janashree Bima Yojana (Government of India) the claims ratio was 67% during 2007-08.

2008-09

Sl. No.	Scheme	No. of Lives Covered	Premium collected	Claims Paid	Claims Ratio (%)
1	Commissioner of Agri., Govt. of Maharashtra	2,500,000	22,472,000	3,500,000	40
2	Govt. of Mizoram (family consisting of Self+Spouse + Two dependent Children+ Two Dependent Parents)	1.5 lacs families	274,919,000	147,071,995	70
3	AP Home Guards	26,982	7,000,000	620,326	20
4	Director of Health and Family Welfare Services, Pondicherry	50,966	21,216,750	19,440,026	110
5	Commandos & General HomeGaurd	3,464	266,496	-	
6	Panjab Live Stock	-	1,230,393	843,000	86
7	Haryana Live Stock	-	8,074,111	752,000	14
8	Director General of Police - Uttarakhand-	20,416	1,780,676	630,000	35

Cholamandalam MS General Ins. Co. Ltd.:

In case of Rashtriya Swasthya Bima Yojana of Government of India being implemented in Gujarat by Cholamandalam MS Gen. Ins. Co. Ltd., the claims ratio for 2008-09 turned out to be 23.53% against Rs.15.47 lakh lives covered at a premium collection of Rs.19.43 crore. Similarly, the same company is executing RSBY in the state of Jharkhand and the claims ratio was as low as 0.75% against a premium collection of Rs.16.64 crore and Rs.15 lakh lives being covered during 2008-09.

However, the same company is also implementing a government scheme of insurance for students in Madhya Pradesh and during 2008-09 it had collected a premium of Rs.1.01 crore at the rate of Rs.1 per student and the incurred claims ration was 53.6%.

During the years 2006-07 to 2008-09, Reliance Insurance Co. has implemented

2007-08

Sr. No.	Name of the Scheme	No. of Lives/ Risks Covered	Premium collected	Claims Settled	Claims Ratio
1	Commissioner of Agri., Govt. of Maharashtra	2,500,000	22,472,000	19,000,000	125%
2	Commissioner of Education- Madhya Pradesh	8,875,097	7,898,836	7,794,500	81%
3	Director General of Police- Jharkhand -	25,000	21,916,162	49,320,785	225%
4	Rajiv Gandhi Pariwar Bima Yojna	17,160,000	178,500,000	206,400,000	156%
5	Commandos & General HomeGaurd	3,445	266,266	300,000	169%
6	Director General of Police - Uttarakhand-	17,901	1,115,228	4,200,000	414%

2006-07

Sr. No.	Name of the Scheme	No. of Lives Risks Covered	Premium collected	Claims Settled	Claims Ratio%
1	Commissioner of Agri., Govt. of Maharashtra	3,800,000	27,725,560	43,400,000	206%
2	Govt. of Madhya Pradesh – BPL	18,244,488	29,342,254	43,750,996	149%
3	Maharashtra Live Stock Development Board Cover - Death Only Add Cover - PTD	Cow-23048 Buffalo-0543	33,864,509	51,724,332	153%
4	Director General of Police- Jharkhand -	25,000	21,148,877	9,394,160	44%
5	Director General of Police - Uttarakhand-	18,793	971,128	2,310,000	303%

several state government insurance schemes under which the collection of premium, number of lives covered and incurred claims ratio is as follows:-

The above table indicates that the claims ratio is highest at 110% under the scheme “Director of Health & Family Services, Pondicherry” during the year 2008-09 whereas insurance scheme for Haryana Live Stock is the lowest at 14% and also noteworthy is the

insurance scheme for AP Home Guards the where the claims ratio is just 20%.

The following table reveals that under the scheme “Insurance of Farmers of Uttar Pradesh State” the claims ratio is highest at 214% during 2006-07 whereas in the year 2007-08 under the scheme “Insurance to BPL Families

Year		Scheme	Sum Insured	Premium Collected	Claims Ratio
2005-06	1	Insurance to BPL families Kerala Civil Supply Corpn. JPA & Rasta Appatti Kavach	100000	32000000	80%
	2	Insurance to beneficiaries of Indira Kranti Pratham, DRDA, Andhra Pradesh	25000	625000	20%
	3	Devi Rakshak Policy BPL Families of Haryana	100000	60000000	131%
2006-07	1	Insurance of Farmers of Uttar Pradesh State	100000	118500000	214%
	2	Livestock Insurance for Punjab Development Dairy Board, Animal Husbandry, Fisheries	20000	26400000	85%
	3	Insurance to Beneficiaries of Indira Kranti Pratham, DRDA, Andhra Pradesh	25000	1200000	54%
2007-08	1	Karnataka Janashree Bima Yojana		537000	67%
	2	Ganna Kamgar Vima Yojana Maharashtra Co.op.Sugar Mills		3518000	77%
	3	Insurance to BPL families Kerala Civil Supply Corpn.	25000	5500000	13%
2008-09	1	Cattle Insurance Policy under National Insurance Scheme for Govt.of Uttar Pradesh	20000	8882000	154%
	2	Ganna Kamgar Vima Yojana - Maharashtra Govt. Scheme		5504000	62%

managed by Kerala Civil Supplies Corporation” the claims ratio is lowest at 13%. However, during 2008-09 under the schemes “Cattle Insurance Policy under National Insurance Scheme for Govt. of Uttar Pradesh” and “Ganna Kamgar Vima Yojana - Maharashtra Govt. Scheme” the claims ratios are 154% and 62% respectively.

A brief picture of the claims ratios of the various Government schemes being implemented by the New India Assurance Co. Ltd. and HDFC Ergo for the last few years is as under:-

Further, ICICI Lombard is targeting about 15 percent of its revenue from government-sponsored insurance schemes for the poor in 2009-10, as nearly 10 percent of their company’s revenue of Rs3,748 crore (calculated as gross written premiums) were realised from this segment. While the four public sector insurance companies continue to be the front-runners in the distribution of

government-subsidised insurance schemes, private companies are slowly catching up. Though this segment may not offer hefty margins, it is not difficult to breakeven provided the actuarial pricing of the policies is done correctly, as per the industry’s estimate.

ICICI Lombard acts as the nodal agency for distribution of the Weaver’s Health Insurance Scheme and the Artisan’s Health Insurance Scheme under private-public partnership with the Union Textile Ministry. In 2008-09, the company covered 19 lakh and 8 lakh families under the two schemes respectively. The total sum insured under the two schemes were Rs 2.8 crore and Rs 1.2 crore respectively. The major states covered were Assam, Uttar Pradesh, West Bengal, Tamil Nadu and Andhra Pradesh. The company also extends the centre’s Rashtriya Swasthya Bima Yojna (RSBY) in select districts of Haryana, Rajasthan, Uttar Pradesh and Maharashtra. The claims ratio in the RSBY scheme ranges between 50 and 80 percent for the company, while for other government schemes it ranges between 90 and 100 percent.

The author is Chief Accounts Officer, IRDA. The views expressed in the article are personal.

प्रकाशक का संदेश



एक बीमाधारक के नजरिये से दावे का निपटारा एक बीमाकर्ता के लिए एक महत्वपूर्ण कार्य है। अब एक बीमाधारक किसी बीमाकर्ता के साथ एक प्रतिबंध करता है, तब वह बीमाकर्ता से यह आशा करता है कि उसे किसी भी प्रकार की बीमा कवच में सभाहित घटना के समय उसके दावे के भुगतान के लिए किसी प्रकार की समस्या का सामना नहीं करना पड़ेगा। इसी प्रकार से यह कोई आश्चर्य की बात नहीं है कि जब उसके दावे के भुगतान के प्रार्थना पत्र को रद्द कर दिया जाता है तो बीमित व्यक्ति भ्रम-निवृत्त हो जाता है। जबकी स्पष्ट रूप से यह एक अविश्वसनीय परिदृश्य है - यह ध्यान में रखते हुए कि दोनों पक्षों के अधिकार व उत्तरदायित्व इस संविदा में साफ-साफ लिखे होते हैं दावे की आंशिक या पूर्णतः अस्वीकृति एक ऐसी घटना नहीं है जो बहुत कम देखने को मिलती है, विशेषतः आने वाले बाजार में।

सबसे पहले एवं मुख्यतः, इस बात से पूर्णतः इनकार नहीं किया जा सकता कि बीमाधारक असलियत में यह जानता हो कि पॉलिसी में क्या सम्मिलित है (तथा क्या नहीं)। यह हमें समझा लेना चाहिए कि बीमा संविदा दोनों पक्षों पर समान रूप से लागू होता है जिसे दोनों को पूरी निष्ठा से पालन करना चाहिए।

आगे, अपवर्जन, यद्यपि मूलरूप से बीमाकर्ता प्रधान करते हैं जोकि बीमाधारक को संविदा बनाते हुए स्पष्ट रूप से बताए जाने चाहिए। समाज के कुछ हिस्सों में ऐसी धारणा है कि अगर एक बार बीमा संविदा अस्तित्व में आ गई, तो दावे का निपटारा नहीं हो सकता, चाहे आंशिक या पूर्ण।

बीमाकर्ता को प्रत्येक कोण से यह सुनिश्चित करना चाहिए कि दावे के निपटारे का यथा संभव कम क समय में निदान किया जाए। इस कार्य को संभव करने के लिए, उन्हें बीमाधारक को संविदा से संबंधित सभी कवच व अपवर्जनों के बारे में अवगत करवा देना चाहिए। अगर अभी भी किसी दावे

का निपटारा होना बाकी है तो बीमाधारक को दावे के अस्वीकृत होने से संबंधित सभी परिस्थितियों से सहानुभूति पूर्वक अवगत करवाना चाहिए, चाहे वो आंशिक हो या पूर्ण, ताकी किसी भी प्रकार का विवाद खड़ा न हो। इसके अतिरिक्त, उन्हें एक ऐसी प्रणाली बनानी चाहिए जिसके अंतर्गत भावी व्यक्ति को संविदा से जुड़ी प्रत्येक बारीकियों से अवगत कराना चाहिए ताकी वह संविदा अवधी समाप्त होने तक उसे चालू रख सके। किसी भी प्रकार के कपट के धैर्य से निपटाने व उसे संविदा की विषय वस्तु में सम्मिलित न होने देने से भी हम एक स्वस्थ्य दावा अनुपात को प्राप्त कर सकते हैं।

‘बीमा में दावा प्रबंधन’ इस अंक का मुख्य विषय है। एक ऐसी प्रणाली जिसमें दो असमान शक्ति वाले पक्ष शामिल होते हैं, कमजोर वाले पक्ष के हितों की रक्षा करना अत्यंत आवश्यक है। “बीमाधारक की सुरक्षा” हमारे अगले अंक का केन्द्र बिन्दु होगा।

जे. हरि नारायण
अध्यक्ष



इन बदलावों को हमारा समर्थन (वित्तीय स्थिरता एवं सुचारू जोखिम) वित्तीय सेवाओं के नियंत्रक ढाँचे में सुधार करने के सिद्धांतों में विकास, ग्राहकों को सुरक्षा प्रदान करने की हमारी वचनबद्धता को दर्शाता है।

सुश्री जेन एल क्लाइन

एन ए आई सी, अध्यक्ष एवं पश्चिमी वर्जीनिया, बीमा कमिशनर

संस्थागत संचालन का तात्पर्य केवल नियमों का पालन करने या जरूरतों को पूरा करने से ही नहीं है, बोर्ड के निदेशकों व उच्चतर प्रबंधन को नियमों की महत्वता, भावना एवं उनके उद्देश्यों को अपनाना चाहिए।

श्री गोह चोक टोंग

उच्चतर मंत्री, सिंगापुर सरकार

प्रस्तावित जीवन बीमाकर्ताओं की नई पूँजी की आवश्यकताएँ प्रस्तुत व्यवस्था से आसान एवं अधिक जोखिम - संवेदनशील हैं, तथा सभी साझेदारों के समझने के लिए आसान है तथा दोनों अस्तित्व व प्रस्तुति के साथ काम करते हैं।

श्री जोन ट्रोब्रिज

कार्यकारी सदस्य, ऑस्ट्रेलियन प्रुडेन्शियल रेगुलेशन अथॉरिटी

जनता के मन ने विनियामक से माँग की है कि (होना है) वह अपने आप को वित्तीय बाज़ार में होने वाली बड़ी कठिनाईयों को पहचाने व उससे सुरक्षा प्रदान करने के योग्य बनाए। इसका मतलब है कि हमें पूरे वित्तीय क्षेत्र जिसके लिए हम उत्तरदायी हैं, में अपनी योग्यता को बढ़ाना चाहिए।

श्री केन हौग

निदेशक, इश्योरेन्स सैक्टर, एफ एस ऐ, यू के

हमें यह देख के खुशी होती है कि बर्मुडा क्रमतः उच्च श्रेणी के व्यापार को आकर्षित कर रहा है तथा सु-विनियामित वातावरण में अनुभवी व्यापार को प्रोत्साहित कर रहा है।

श्री जर्मी कौक्स

सी ई ओ, बर्मुडा मोनेट्री अथॉरिटी

जनसंख्या के (भारतीय) एक बड़े हिस्से की आर्थिक हालत बहुत पददलित है, सक्षम बीमा के आने से आने वाले वर्षों में उनके स्तर में संभवतः वृद्धि होगी।

श्री जे. हरि नारायण

अध्यक्ष, बीमा विनियामक और विकास प्राधिकरण (भारत)



दृष्टि कोण

डॉ. सुबोध कुमार एवं हरीश चन्द्र रतूडी कहते हैं कि वितरण माध्यमों में प्राथमिकता की दृष्टि से अभिकर्ता ही ग्राहकों का सर्वोच्च अधिमान रहे।

जीवन बीमा में ग्राहक सम्बन्ध प्रबन्धन

...(पिछले अंक से आगे)

तालिका - 07

बीमा सेवा गुणवत्ता स्तर : भारतीय जीवन बीमा निगम

(अ) संतुष्ट हैं	950
(ब) कम संतुष्ट हैं	31
(स) असंतुष्ट हैं	08
(द) बहुत अधिक संतुष्ट हैं	04
(य) तटस्थ हैं	07
योग :	1000

बीमा सेवा गुणवत्ता स्तर : निजी कम्पनियाँ

निजी जीवन बीमा कम्पनियों के ग्राहकों के मध्य और भारतीय जीवन बीमा निगम के ग्राहकों में सेवा गुणवत्ता विषयक संतोष स्तर में महत्वपूर्ण उल्लेखनीय अंतर नहीं पाया गया। निगम के ग्राहकों में संतुष्ट श्रेणी में 95 प्रतिशत ग्राहक हैं, जबकि निजी बीमादाताओं के ग्राहकों में इस श्रेणी में 95.6 प्रतिशत प्रतिनिधित्व हैं। सार्वजनिक और निजी, दोनों क्षेत्रों में असंतुष्ट ग्राहकों की संख्या समान है। कम संतुष्ट श्रेणी में निगम के 3.1 प्रतिशत ग्राहक हैं, जबकि निजी कम्पनियों में 2.6 प्रतिशत ग्राहक कम संतुष्ट हैं। अत्यधिक संतुष्ट वर्ग में निगम के 0.4 प्रतिशत बीमादार हैं, जबकि निजी बीमादाताओं के 1 प्रतिशत ग्राहक अत्यधिक संतुष्ट हैं। इस प्रकार, निजी क्षेत्र में ग्राहक संतोष स्तर की स्थिति किंचित बेहतर मानी जा सकती है। निजी बीमा कम्पनियों के ग्राहकों में तटस्थता वर्ग में कोई आवृत्ति नहीं है। इस दृष्टि से ये ग्राहक अपेक्षाकृत अधिक जागरूक और सजग उपभोक्ता हैं।

तालिका - 08

बीमा सेवा गुणवत्ता स्तर : निजी कम्पनियाँ

(अ) संतुष्ट हैं	478
(ब) कम संतुष्ट हैं	13
(स) असंतुष्ट हैं	04
(द) बहुत अधिक संतुष्ट हैं	05
(य) तटस्थ हैं	-
योग :	500

बीमादार की अपेक्षा से अधिक सहयोग : ग्राहक आह्लाद

ग्राहक अवधारणा के विकास के सम्बन्ध में उल्लेख किया जाता है कि इसमें क्रमिक परिवर्तन इस प्रकार घटित हुए हैं - ग्राहक सेवा - ग्राहक संतुष्टि - ग्राहक प्रसन्नता - ग्राहक आह्लाद - ग्राहक सम्बन्ध प्रबन्धन - ग्राहक आधार की रक्षा - पारदर्शिता एवं ग्राहक हित रक्षा। बीमा ग्राहकों से उनके ऐसे अनुभवों के बारे में पूछा गया, जिनमें उन्हें अपनी बीमा अभिकर्ता अथवा बीमा कम्पनी की ओर से अपेक्षा से अधिक सहयोग मिला। ऐसे कुल 15 उदाहरण सम्पूर्ण सर्वेक्षण में उपलब्ध हुए हैं, जिनमें बीमादारों को अपने बीमा अभिकर्ता का उल्लेखनीय सहयोग मिला। विविध ग्राहकों को निम्नलिखित अवसरों पर अपेक्षा से अधिक सहयोग मिला और वे आह्लादित हुए -

<ul style="list-style-type: none"> • पाँच देशों से स्थापित प्रतियोगी से स्पर्धा • 3000 निष्ठा और विश्वास अर्जन के लिए वांछित समय • स्पीमिन नेटवर्क • केवल विनियोगपरक पॉलिसियों का विपणन • छोटे शहर, सुदूर और ग्रामीण क्षेत्र में विस्तार नहीं • पुरानी पीढ़ी का निजी कम्पनियों पर अविश्वास 	<ul style="list-style-type: none"> • लाभ की स्थिति में पहुँचने में विलम्ब • सहयोगी वितरण माध्यम की असफलता • भारतीय जीवन बीमा निगम की आक्रमक विपणन रणनीति • केवल अल्पकालिक उत्पादों का विपणन • श्रेय बाजार की अनिश्चितता • यूरोप उत्पाद में ऊँची कालातीत दर
न्यूनेताएँ	चुनौतियाँ

<ul style="list-style-type: none"> • श्रेष्ठतर सेवा गुणवत्ता स्तर के लिए प्रयत्नशील • विपणन कौशल सम्पन्न कर्मिक • टेक्नालॉजी सम्पन्नता • अधिक पढ़े-लिखे बीमा एजेंट 	<ul style="list-style-type: none"> • बाजार में प्रतिस्पर्धाजनित अवसरों की उपलब्धता • सफ्टवेयर आधारित उत्कृष्टतम ग्राहक सम्बन्ध प्रबन्ध • नई पीढ़ी और बड़े शहरों में व्यापक स्वीकार्यता • नई निचे कम्पनियों के प्रति सहज आकर्षण
अधिमान	अवसर

निजी कम्पनियाँ : स्वार्ट विदेशीकरण

<ul style="list-style-type: none"> • टेक्नालॉजी स्पर्धा में विलम्ब • आक्रमक विपणन रणनीति का अभाव • सुदूर और ग्रामीण क्षेत्र असेवित • छोटे शहरों में शाखा कचालिय नहीं 	<ul style="list-style-type: none"> • सेवागुणवत्ता स्पर्धा • बीमा परामर्श में एजेंटों का स्वाध केन्द्रित रहना • एजेंटों का न्यून शैक्षिक स्तर • अभिकर्ताओं में व्यवसायिक कौशल का अभाव
न्यूनेताएँ	चुनौतियाँ

<ul style="list-style-type: none"> • देशकों तक भारतीय जीवन बीमा • निगम देश में जीवन बीमा का पर्वीय रहा है • पाँच देशों से अर्जित ग्राहक निष्ठा निगम की धरोहर है • वैश्विक मन्दी के बाद निगम के कारोबार में और वृद्धि • प्रत्येक जिला मुख्यालय में शाखा कचालिय • प्रत्येक गाँव से अभिकर्ता एवं ग्रामीण जनसंख्या तक पहुँच 	<ul style="list-style-type: none"> • देशव्यापी विस्तृत शाखा नेटवर्क का लाभ • देशकों से सेवित ग्राहक आधार उपलब्ध • बाजार में विश्वसनीयता का स्तम्भ • सेटलाइट ऑफिस की परम्परा • आनन्दान प्रीमियम भुगतान
अधिमान	अवसर

भारतीय जीवन बीमा निगम : स्वार्ट विदेशीकरण

<ul style="list-style-type: none"> • उत्तरजीवी हित लाभ बैंक घर लाकर देना • पॉलिसी का सम्पूर्ण मूल्य भुगतान • मृत्यु दावा दाखिल करना और भुगतान • पॉलिसी का स्थानान्तरण • पॉलिसी पर ऋण 	<ul style="list-style-type: none"> • ग्राहक आह्लाद के सश्री मामले भारतीय जीवन बीमा निगम के ग्राहक संवर्ग से हैं। • अतएव, यह अमिशन को जा सकती है कि उपर्युक्त अवसरों पर ग्राहकों को थोड़ी • अतिरिक्त सहायता करके ग्राहक निष्ठा अर्जित की जा सकती है। • जीवन बीमा कम्पनी की ओर से मिले विशेष सहयोग के तीन प्रकार हैं, जो कि मृत्यु • दावा, पॉलिसी स्थानान्तरण और पॉलिसी पर ऋण से सम्बन्धित हैं। विशेष रूप से,
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मृत्यु दावों में ग्राहक को भावानात्मक सहयोग की भी अपेक्षा होती है। इसी प्रकार, ऋण लेते समय भी प्रायः ग्राहकों को अपनी निजी समस्या के समाधान की जल्दी होती है।

‘ग्राहक सम्बन्ध प्रबन्धन’ एक सतत् प्रक्रिया है। कभी यह नहीं कहा जा सकता कि इस क्षेत्र में पूर्णता प्राप्त कर ली गई है और अब आगे कुछ करने की आवश्यकता नहीं है। ग्राहक सम्बन्ध स्थिति की सामयिक समीक्षा सदैव करते रहना होता है। वर्तमान में

भारतीय अर्थव्यवस्था में उदारीकरण के परिणामस्वरूप उच्च मध्यम वर्ग के ग्राहकों की संख्या में तेजी से वृद्धि हुई है।

ग्राहक बहुत सजग है। ग्राहक बीमा कम्पनी से बहुत अधिक अपेक्षाएँ रखता है अब लम्बी लाईन में लगकर इन्तजार करना उसे बिल्कुल सहन नहीं। वह अपने समय के प्रति अधिक संवेदनशील हुआ है। स्टाफ कार्यकुशल हो यह चिन्ता केवल बीमा कम्पनी की नहीं बल्कि ग्राहक भी चाहता है कि बीमा कर्मचारी सक्षम और दक्ष हों। जिससे कि उसे त्वरित और त्रुटिहीन सेवा मिलती रहे। ग्राहक चाहता है कि उससे उसकी भाषा में बात की जाये। वह यहाँ तक आशा करता है कि उसे उसके मानसिक स्तर और स्टेटस के मुताबिक व्यवहार मिले। भारतीय अर्थव्यवस्था में उदारीकरण के परिणामस्वरूप उच्च मध्यम वर्ग के ग्राहकों की संख्या में तेजी से वृद्धि हुई है। इस वर्ग के व्यक्ति ही बीमा की विभिन्न नई योजनाओं के ग्राहक हैं। ग्राहक अपने अधिकारों के प्रति बहुत सावधान है। अतः बीमा कम्पनी को सम्पूर्ण नीति-नियोजन में ग्राहक मनोविज्ञान का ध्यान रखना जरूरी हो गया है। इस दृष्टि से बाजार शोध बहुत उपयोगी रहता है।

संदर्भ

बसवनाथप्पा सी एवं लक्ष्मण, राजनलकर 2009, पॉलिसी होल्डर्स परसेप्शन टूवर्ड्स लाइफ इंश्योरेंस प्रोडक्ट्स, सदरन इकोनोमिस्ट फरवरी 15, 2009 बंगलूरू 13-15

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डॉ. सुबोध कुमार, रीडर, वाणिज्य विभाग, हे.न.ब.ग. केन्द्रीय विश्वविद्यालय, हरीश चन्द्र रतूडी, शोध छात्र, हे.न.ब.ग. केन्द्रीय विश्वविद्यालय.



श्री के.एल. नाइक का कहना है कि बीमाकर्तार्यों व पुनः बीमाकर्तार्यों को ज्वालामुखीय निसरण से होने वाले जोखिम को कवच प्रदान करने के उपायों को कार्यान्वयन में लाने व उनके कवच प्रदान करने के भार को सहन करने के रास्ते ढूँढने की जरूरत है।

प्राकृतिक आपदा जोखिम

- ज्वालामुखी निसरण

तो हवाई परिवहन बिलकुल ठप्प हो गया। केवल दक्षिणी यूरोप पर इसका कम असर देखा गया।

यह सब हमें बीमा व पुनर्बीमा के बारे में पुनः गंभीरतापूर्वक सोचने को मजबूर करता है। विमानन बीमा इस तथ्य को सुरक्षित नहीं करता।

यूरोप के परिवहन संगठन के कमिशनर को कहना है के यूरोपीय यात्रियों को रिफंडासमेंट, खाना, आवास आदि का अधिकार रखते हैं तथा उन्हें उनके अंतिम गणतन्त्रों तक पहुँचाने की व्यवस्था की जानी चाहिए।

इस घटना को 'विश्विय परिविस्थिति' कहने से फसे हुए यात्रियों को कोई अतिरिक्त वित्तीय मुअवजा नहीं मिलेगा क्योंकि यह हवाई कम्पनी की गलती नहीं है मगर यह एक सुरक्षात्मक कार्यावाही है।

1. मानवीय इतिहास में अब तक का सबसे बड़ा ज्वालामुखी निसरण शायद 250

मिलियन साल पहले हुआ होगा जिसके फलस्वरूप साइबेरिया के जाल बने, एक पहलू की उत्पत्ति हुई जोकि अब रूस है। यह निसरण लगभग एक मिलियन साल पहले हुए हैं। इनसे इतना तावा निकला जो कि पूरे ऑस्ट्रेलिया को ढक सकता है। इस घटना से धरती पर बड़े रूप में विनाश हुआ, जिसके कारण 96% समुद्री जल जीव तथा 70% धरती के जानवरों का नामा निसान मिट गया।

इतिहास में सबसे बड़ा ज्वालामुखीय निसरण इण्डोनेशिया में सुम्बावा टापू पर माउंट टम्बोरा का है। 10 अक्टूबर 1815 को इसका निसरण होने क्षमाके के साथ हुआ कि इसकी आवाज 2600 कि.मी. दूर बसे सुभागा तक सुनाई दी।

निसरण के निशान तब मिले जब एक पहलू पर राख जमाने लगी और जमीन पर गडगडाहट होने लगी। कई तरह के छोटे-मोटे निस्फोट होने लगे जो कई दिन तक चले। हजारों लोगों ने इस निसरण को देखा। 10 अप्रैल 1815 को शाम 7 बजे तीन आग के गगनचुम्बी बादल देखे गये जिन्होंने पहले को रूचिबत आग में बदल दिया। लगभग 100 क्यूबिक कि.मी. पायरोक्लास्टिक टैक्यानोस्टिक निकले, जिनकी तीव्रता ज्वालामुखी के फटने के आंकड़े पर 7 आंकी गई। टापू पर सारी वनस्पति तथा है हो गई और लगभग 10,000 लोग इस पायरोक्लास्टिक बहाव के कारण मारे गये।

तक बाधा हुई।
 हवाई सेवाओं में दोनों तरफ से लगभग एक हफ्ते लहन, बैरिस क्रैकफट और लगभग सभी शहरों की मुख्य शहरों के आकाश में फैल गया जिससे कि पूरे मध्य पश्चिमी व उत्तरी यूरोप के मुख्य देशों व तेज हवाओं की वजह से वे ज्वालामुखी का धुआँ माउंट एवरेस्ट से 2 कि.मी. ऊपर था।

इन ज्वालामुखी निसरण के कारण आकाश में लगभग 10 किलोमीटर तक धुआँ फैल गया जोकि प्रभावित प्रभाव।
 बीमा बजार को भारी वित्तीय हानियों से होने वाले निसरणों, तथा इसके द्वारा होने वाले अर्थात्पूर्व भौगोलिक बीमा व पुनः बीमा में जोखिम कवच जैसे तकनीकी इंसाने भूकंपित तथ्यों में अत्याधिक रूची उत्पन्न की है; प्रसारित हुआ था।

14 अप्रैल, 2010 को आइसलैंडिक ज्वालामुखी, 'Eyjafjallajökull' निसरण हुआ; तथा एक हफ्ते से भी आकाश ज्वालामुखी से निकले काले धुँप व राख से काला पड़ गया - ज्वालामुखी से निकला धुँआ तेज हवाओं की वजह से पूरे आकाश में फैल गया। यह एक अर्थात्पूर्व घटना थी जिसके कारण प्रतिदिन लगभग 17000 हवाई उड़ानें रद्द करनी पड़ी जिससे कि प्रति दिन 200 मिलियन अमरीकी डॉलर का नुकसान हुआ तथा यात्री पूरे यूरोप में फूसे रहे और दुनिया भर के हवाई अड्डे भी यूरोप के रास्ते से कटे रहे। सन् 1823 में यही ज्वालामुखी 13 महीने तक प्रसारित हुआ था।

इससे निकले लावे व राख और धुँए ने कई महीनों तक धरती पर सूर्य की किरणों को आने से रोके रखा। इसके कारण 1816 को “बिना गर्मी का साल” भी कहा जाता है जिसके कारण भौगोलिक रूप से वनस्पति का नाश हुआ और लगभग 3 लाख लोग भुखभरी से प्रभावित हुए या जम गये। मगर दूसरी तरफ कुछ चमत्कार ऐसे भी हुए जैसे कि इससे अभूतपूर्व दृश्य देखा गया जिनमें सबसे लुभावने सूर्यास्त शामिल हैं।

3. मई 1991 में फिलिपीन्स में लुजोन आइलैण्ड पर मॉउण्ट पिनाटुबो का ज्वालामुखीय निसरण 500 साल बाद फिर से सक्रिय हो गया। इसकी तीव्रता भी लगभग 6 आँकी गई। लगभग 66000 लोगों को अपने घर छोड़ने पड़े और 1000 लोग मारे गये।

भगवान के जोखिम भरे खेल-ज्वालामुखी निसरण तथा तकनीकी मुद्दे:

जैसा कि ज्वालामुखी निसरण के भूकम्पीय तथा गैर-जीवन बीमा व पुनः बीमा में विशिष्ट घटना की परिभाषा की धारा के साथ तथा सुनिश्चित मूल्यांकन के साथ सभाहित किए जाने चाहिए। यद्यपि जैसे कि चली आ रही 72 घंटे की ज्वालामुखी निसरण की धारा को बदल के ज्वालामुखी निसरण की एक घटना को जोकि कई हफ्तों व महीनों तक चल सकती है कर देना चाहिए।

14 अप्रैल 2010, बुधवार को आइसलैण्ड का Eyifjallajokull ज्वालामुखी निसरित हुआ था और 20 अप्रैल को फिर से नए निसरण हुए इसका प्रभाव अभूतपूर्व था। इस प्रकार की तथ्यों की “घटना के घंटों” की परिभाषा क्या है?

ज्वालामुखी के निसरण के घनत्व और तीव्रता को मापना लगभग नामुमकिन है। क्योंकि अक्सर कई देशों में धरती के उत्तरी व दक्षिणी गोलार्ध भूगर्भीय बदलावों के कारण फिर से सक्रिय हो जाते हैं।

साधारणतः 72 घंटे ज्वालामुखी निसरण की एक घटना के लिए काफी बाद तक चलता रहा। इस प्रकार के निसरणों का घनत्व व तीव्रता कैसे नापा जाय? क्या इनका अनुमान लगाया जा सकता है?

सम्पत्ति, इंजीनियरिंग तथा जिम्मेदारी श्रेणियाँ इस जोखिम का कवच प्रदान करती हैं। फिर विमानन का क्यों नहीं? ज्वालामुखी की राख व धुँए के बादलों में हवाई जहाज के उड़ने से क्या खतरे हैं?

जब जापान में यह ज्वालामुखीय निसरण होते हैं तब बीमित हानियों में क्या-क्या अनुमान लगाए जा सकते हैं। भविष्य में इस प्रकार की घटनाओं को कवच प्रदान करने के लिए विमानन में बीमा व पुनः बीमा के लिए किस प्रकार के कदम उठाये जाने चाहिए?

- पुनः बीमा की मैगज़ीन के 10 मार्च, 2010 के अंक में एक रोचक लेख छपा था जिसमें ज्वालामुखी के निसरण के अनुसंधान व समीक्षा के बारे में बीमा उद्योग के नजरिये से लेख छपा था। यह आइसलैण्ड के ज्वालामुखीय निसरण के होने से एक महीने पहले की बात है।

- ज्वालामुखीय निसरण का घनत्व व तीव्रता ज्वालामुखी के विस्फोटन तालिका से नापी जाती है। हाल ही में 14 अप्रैल, 2010 को हुआ ज्वालामुखी निसरण की तीव्रता ज्वालामुखी विस्फोटन तालिका पर तीन आँकी गई। मगर उससे विमान परिवहन व पश्चिमी, उत्तरी व मध्य यूरोप में भारी हानी हुई।

- लोयड्स ने विशिष्ट रूप से एक घटना की परिभाषा को “किसी एक घटना” के रूप में क्रमागत 672 घंटे या 28 दिन या लगभग पूरा एक महीने को ज्वालामुखीय निसरण की अवधि बताया है। वर्तमान में प्रयोग हो रही घंटे की धारा को ज्वालामुखीय निसरण के लिए 672 घंटे से बदले जाने की आवश्यकता है (यह क्रमागत 72 घंटों की धारा भी) जैसा कि पुनः बीमा के शब्दों में है, जोकि अनुचित है।

- ज्वालामुखी के निसरण के घनत्व और तीव्रता को मापना लगभग नामुमकिन है। क्योंकि अक्सर कई देशों में धरती के उत्तरी व दक्षिणी गोलार्ध भूगर्भीय बदलावों के कारण फिर से सक्रिय हो जाते हैं। भूकम्प व हरिकेनों के हानी नमूने तय्यार किए गए हैं, मगर ज्वालामुखी निसरण के नहीं।

- आइसलैण्ड यूनिवर्सिटी के ज्वालामुखी अध्ययनकर्ता श्री फ्रैक्स्टीन सिगमॉण्डसन के अनुसार भूमण्डलीय तापन से बर्फ पिघलती है तथा इससे मैग्नेटिक तंत्र प्रभावित होता है। आइसलैण्ड की बर्फ आयु के अंत को इसी प्रकार की प्राचीनकाल में हुई ज्वालामुखीय गतिविधियों से जोड़ा जाता है।

- अंटार्कटिका, अलास्का एवं दक्षिणी अमरीका में भौगोलिक जलवायु बदलाव से भी ज्वालामुखीय निसरण या भूकम्प के आने का अन्देश लगाया जा सकता है।

ज्वालामुखी की राख के बादलों से स्वास्थ्य जोखिम

डब्लु एच ओ के विशेषज्ञ श्री डैनियल एस्टीन के अनुसार जब अति सक्षम राख के कण किसी गाँव, कस्बे या शहर पर जमते हैं तो उनसे कई प्रकार के खतरनाक स्वास्थ्य

लेखक जे.बी. बोडा, रीइयोरिन्स ब्रोकर्स लि. के सी ई ओ हैं।

लेखक श्री जितल काल्डर का प्रसिद्ध पुस्तक “टेरेस्ट्रलिस अर्थ” का चर्चा पर उदाहरण सटीक रहेगा। पृथ्वी गुरु पर, मनुष्य जैसे हमेशा सक्रिय रहता है उसी प्रकार मातृभूमि भी अपने आप में हमेशा सक्रिय रहती है। माथ्युसियन के सर्वोत्कृष्ट जनसंख्या पृथ्वी पर जीवन का नियम इस समस्या का समाधान नहीं है। हमें इसका और तरह के जीवन की तरह; हमेशा प्रकृति के दबावों के विकसित होने के लिए भी हमारे खिलफ चली जाएगी। अंततः, जैसा आप बोओगे वैसा जाएगी।

विमानन बीमा की भविष्य में माँग

विमानन बीमा उद्योग का एक अक्षुण्ण उद्योग बनना चाहिए तथा एक यशस्वित प्रोत्साहन वसूलन चाहिए तथा उसकी सीमाएँ घटना की हेतु के अन्वेषण होनी चाहिए। प्रोत्साहन वसूलन का भी अपना कवच बढ़ा कर विशेषरूप से किसी घटना की परिभाषा में 672 घंटे की अवधि किसी विशेष धारा के अंतर्गत सभी अन्वेषितिक व गैर-अन्वेषितिक घटनाओं को किसी एक घटना की सीमा के लिए लागू करनी चाहिए। भविष्य को अन्वेषित किया जाना चाहिए न कि अन्वेषित।

विमानन बीमा विमानों के ज्वालामुखी से निकली राख के बादलों के कारण विमानों के रद्द होने के जोखिम को कवच प्रदान नहीं करता।

यूरोप का हवाई क्षेत्र पूर्ण तरह से ज्वालामुखी की राख, छुएँ व बादलों से भर गया था। 1982 तथा 1989 में तीन 747 बोइंग विमान ज्वालामुखी की राख के बादलों में उड़ रहे थे और उनके चारों इंजन बंद हो गए; तथा विमान की नीचे के स्तर पर किसी तरह उड़िया गया मगर उससे विमानकबंध थी अपघर्षण के कारण बड़े पैमाने पर नुकसान हुआ जिसकी मरम्मत निशेधात्मक थी।

ज्वालामुखी की राख में कुछ रसायन होते हैं जो जब विमान के इंजन में चले जाते हैं तो बड़े पैमाने पर उसका नुकसान कर देते हैं तथा काँच के कण जोकि गरम राख व धूप के साथ विमान की लिडिंकियों पर चिपक कर एक काली मोटी परत बना देते हैं जिसके कारण पावटल बाहर नहीं देख पाते। यही कारण है कि ज्वालामुखी के निसर्ग से निकली राख-धूप-बादलों के समय सभी विमान उतार लिए जाते हैं और सभी उड़ानें रद्द कर दी जाती हैं।

ज्वालामुखी की राख के बादलों के कारण क्यो विमान नीचे उतार लिए जाते हैं और क्यो उड़ानें रद्द की जाती हैं?

भविष्य में कवच जरूर लगेगा। अब से विमान कम्पनियाँ अब इस जोखिम को स्टॉक बसूल करने के लिए नियुक्त किया। अतः कम्पनियों ने अपने वकीलों को कई मिलियन पाउंड एक हफ्ते तक चला, के फलस्वरूप कई विमान उड़ानें, 2010 ज्वालामुखीय निसर्ग जोकि लगभग 14 अप्रैल, 2010 के पत्र के अनुसार आइसलैंड के 22 को कवच प्रदान नहीं करता। “रीइयोरिन्स डे” के 22 के बादलों के कारण विमानों के रद्द होने के जोखिम विमानन बीमा विमानों के ज्वालामुखी से निकली राख

सटीक अन्वेषण नहीं लगाए जा सके है। मगर, आज तक ज्वालामुखीय निसर्गों के ज्वालामुखी के विस्फोटन से पहले ही खाली करवा प्रभाव में आने वाले गार्यों, कन्वो व शहरो को बचाने में सहायता मिलती है और वह समय रहते लगाया जा सकता है। इससे निसर्ग से लोगों को के रिसाव से इसका अन्वेषण कई हफ्तों पहले ही सामान्यतः ज्वालामुखी के निसर्ग से पहले ही शुरू

अत्याधिक खतरनाक होता है। है कि ज्वालामुखीय निसर्ग करीबी शहरो के लिए 1987 में सिटी ऑफ प्लोमाउथ जोकि मान्स्टेरि के

होती हुई। हो उठा। इससे 95 मिलियन अमरीकी डॉलर की कुल प्रसूतता के बाद अचानक ही ज्वालामुखी निसर्ग के माउटेसरेटि के सुफायर हिस्स में सदियों की नुकसान हो सकता है। वर्ष 1995 में कैरिबियन व्दीप पर होता है तो वहाँ 20 बिलियन अमरीकी डॉलर का निसर्ग विस्फोटिय तात्तिका में काफी अधिक पैमाने जगानी विशेषज्ञों के अनुसार, अगर ज्वालामुखीय

जोखिम भी बड़ जाता है। जाने की सलाह दी जाती है। अतैव, स्वास्थ्य बीमा एवं / या धुआँ होता है वहाँ पर मरु पर मरु के पहन के खतरा नहीं है। जिन स्थानों पर राख के कण, राख, बादल कणों से इंसान को किसी भी प्रकार की स्वास्थ्य हानि का कुछ विशेषज्ञों का मानना है कि ज्वालामुखी की राख के जोखिमों से पीडित लोगों को रद्द बड़ जाता है। यद्यपि, हमारे शरीर में प्रवेश करते हैं तो अस्वभा व खराब संबंधी जोखिम उत्पन्न हो जाते हैं और जब यह कण खराब धारा



GROSS PREMIUM UNDERWRITTEN BY NON-LIFE INSURERS WITHIN INDIA (SEGMENT WISE) :

Sl. No.	Insurer	Fire	Marine	Marine Cargo	Marine Hull	Engineering	Motor
1	Royal Sundaram Previous year	42.49 50.84	23.02 19.97	22.54 19.50	0.47 0.47	36.81 37.84	617.19 529.91
2	TATA-AIG \$ Previous year	156.75 163.78	113.84 111.82	113.84 111.82	0.00 0.00	38.86 35.62	236.36 249.77
3	Reliance Previous year	129.78 126.42	44.42 61.65	27.35 32.23	17.07 29.42	103.86 119.23	1,318.71 1,164.87
4	IFFCO Tokio Previous year	202.38 209.01	135.12 116.13	70.54 80.71	64.58 35.42	93.57 81.54	849.01 797.53
5	ICICI Lombard Previous year	270.06 289.50	146.57 223.85	81.59 87.76	64.98 136.08	152.83 185.37	1,379.16 1,321.30
6	Bajaj Allianz Previous year	261.40 267.43	74.76 88.44	68.41 73.87	6.35 14.56	100.47 126.48	1,445.77 1,500.97
7	HDFC ERGO Previous year	142.78 64.73	25.01 8.42	15.49 5.89	9.52 2.53	29.31 14.51	289.92 185.33
8	Cholamandalam Previous year	47.77 53.84	42.39 36.56	41.44 35.27	0.95 1.28	22.41 27.33	450.10 319.53
9	Future Generali Previous year	42.38 17.17	15.50 6.79	15.50 6.79	0.00 0.00	15.20 14.01	210.40 95.67
10	Universal Sampo Previous year	42.15 10.65	3.84 0.51	3.84 0.51	0.00 0.00	3.22 1.30	79.10 3.92
11	Shriram Previous year	1.74 0.22	0.01 0.00	0.01 0.00	0.00 0.00	1.47 0.63	410.51 112.72
12	Bharti Axa Previous year	27.29 2.25	5.44 0.61	5.44 0.61	0.00 0.00	13.18 5.57	179.97 17.39
13	Raheja QBE* Previous year	0.16 0.00	0.02 0.00	0.02 0.00	0.00 0.00	0.40 0.00	0.17 0.00
14	New India Previous year	914.80 773.33	477.79 446.10	192.76 175.17	285.04 270.92	297.75 247.74	2,067.42 2,000.29
15	National Previous year	429.16 397.08	239.91 201.16	141.98 136.70	97.93 64.46	185.59 164.03	2,168.76 2,137.10
16	United India @ Previous year \$	647.93 572.79	451.97 336.93	275.68 221.60	176.29 115.33	306.43 249.86	1,817.13 1,563.48
17	Oriental Previous year	575.03 436.51	390.45 332.53	183.42 167.24	207.03 165.29	281.80 262.99	1,610.19 1,490.53
	Grand Total Previous year	3,934.07 3,435.55	2,190.06 1,991.46	1,259.85 1,155.69	930.22 835.77	1,683.14 1,574.05	15,129.88 13,490.31
SPECIALISED INSTITUTIONS							
18	ECGC Previous year						
19	Star Health & Allied Insurance Previous year						
20	Apollo MUNICH Previous year						
21	Max BUPA # Previous year						

Commenced operations in March, 2010

\$ Figures revised by Insurer for March, 2009

@ There is variation between Segment-wise figures and Monthly Business figures for March, 2010

Compiled on the basis of data submitted by the Insurance companies

FOR THE PERIOD APRIL - MARCH, 2010 (PROVISIONAL & UNAUDITED)

(Rs. in Crores)

Motor OD	Motor TP	Health	Aviation	Liability	Personal Accident	All Others	Grand Total
478.50	138.70	116.11	0.00	16.21	26.62	28.63	907.08
419.10	110.81	114.39	0.00	9.33	28.05	15.46	805.79
203.66	32.70	83.39	0.00	141.21	104.10	17.34	891.84
217.37	32.40	78.95	0.00	116.05	118.02	13.48	887.49
905.71	413.00	238.75	40.61	18.64	43.63	41.26	1,979.65
828.87	336.00	310.83	11.01	25.74	53.44	41.68	1,914.87
501.67	347.34	164.22	41.91	43.98	20.60	88.75	1,639.56
473.39	324.14	140.99	16.15	34.18	24.87	95.12	1,515.52
957.22	421.94	911.81	57.32	104.91	79.69	192.72	3,295.06
874.66	446.64	1,031.70	52.20	80.23	112.52	123.18	3,419.84
1,052.08	393.69	295.39	28.62	73.81	52.73	182.75	2,515.70
1,061.14	439.83	332.02	25.13	70.11	65.76	164.17	2,640.49
201.00	88.93	268.74	18.28	69.18	72.90	12.29	928.42
124.17	61.16	56.01	1.83	33.38	7.66	2.16	374.03
312.82	137.28	149.51	0.00	12.11	29.42	31.15	784.85
246.32	73.20	165.89	0.00	12.94	29.49	39.86	685.44
150.86	59.55	69.32	0.00	8.93	13.15	11.82	386.72
71.07	24.60	41.25	0.00	4.83	9.56	5.56	194.85
61.66	17.44	17.40	0.00	0.77	9.83	33.04	189.36
3.92	0.00	3.24	0.00	0.08	0.72	9.60	30.03
202.13	208.38	0.00	0.00	0.16	1.63	0.39	415.91
58.01	54.70	0.00	0.00	0.10	0.03	0.06	113.76
137.33	42.64	35.20	0.00	3.19	23.64	2.74	290.65
14.00	3.38	1.51	0.00	0.53	0.43	0.21	28.50
0.15	0.02	0.00	0.00	1.00	0.18	0.02	1.94
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
1,171.19	896.23	1,541.90	55.32	119.51	101.03	437.92	6,013.44
1,088.43	911.86	1,355.67	78.20	104.68	97.12	405.70	5,508.83
1,361.54	807.22	1,021.71	36.92	57.05	95.36	386.46	4,620.92
1,341.13	795.97	854.02	57.79	50.91	71.86	345.94	4,279.90
963.74	853.39	1,256.14	30.02	91.43	109.17	527.11	5,237.32
758.77	804.72	900.72	32.22	88.68	137.05	396.04	4,277.77
868.39	741.80	1,063.51	92.08	99.85	101.12	504.73	4,718.75
803.34	687.19	713.45	90.07	82.86	147.30	404.33	3,960.57
9,529.64	5,600.23	7,233.10	401.08	861.94	884.78	2,499.12	34,817.17
8,383.71	5,106.60	6,100.65	364.60	714.65	903.86	2,062.54	30,637.68
						813.71	813.71
						744.67	744.67
		965.53			10.50	4.01	980.04
		488.84			16.47	4.56	509.86
		106.43			4.26	3.97	114.66
		44.35			2.46	2.14	48.95
		0.13			0.00	0.00	0.13
		0.00			0.00	0.00	0.00

Report Card: General

(Rs.in Crores)

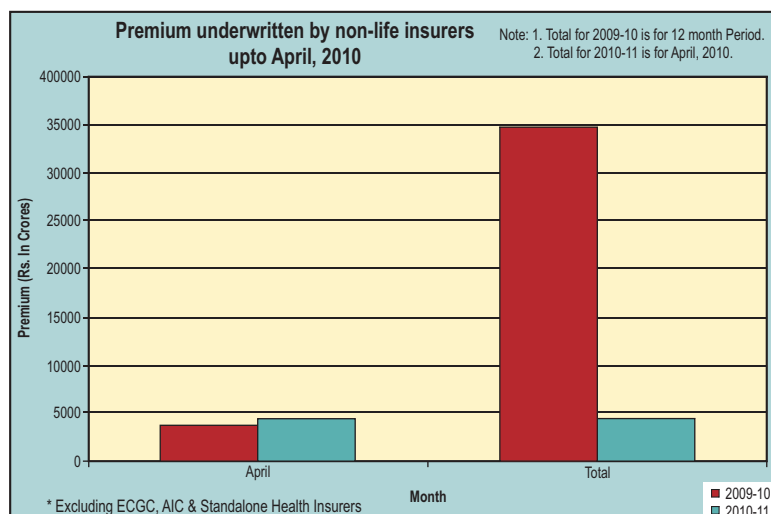
INSURER	APRIL		GROWTH OVER THE CORRESPONDING PREVIOUS YEAR
	2010-11	2009-10*	
Royal Sundaram	90.06	78.16	15.23
Tata-AIG	161.07	147.44	9.24
Reliance General	138.63	216.38	-35.93
IFFCO-Tokio	209.01	169.59	23.25
ICICI-Lombard	487.96	424.66	14.91
Bajaj Allianz	265.26	232.25	14.21
HDFC ERGO General	160.45	89.41	79.45
Cholamandalam	91.59	104.71	-12.53
Future Generali	70.26	33.79	107.95
Universal Sampo	28.01	18.63	50.29
Shriram General	42.53	27.17	56.55
Bharti AXA General	52.66	15.93	230.59
Raheja QBE	0.45	0.00	46860.24
SBI General#	0.22	0.00	
New India	885.50	757.03	16.97
National	536.26	438.77	22.22
United India	597.78	488.39	22.40
Oriental	574.58	491.16	16.98
PRIVATE TOTAL	1798.17	1558.13	15.41
PUBLIC TOTAL	2594.12	2175.35	19.25
GRAND TOTAL	4392.29	3733.48	17.65
SPECIALISED INSTITUTIONS:			
1. Credit Insurance			
ECGC	68.54	57.07	20.10
2. Health Insurance			
Star Health & Allied Insurance	204.04	141.19	44.52
Apollo MUNICH	18.51	5.14	259.95
Max BUPA @	0.33	0.00	
Health Total	222.87	146.33	52.31
3. Agriculture Insurance			
AIC	45.85	45.82	0.08

Note: Note: Compiled on the basis of data submitted by the Insurance companies

@ Commenced operations in March, 2010

Commenced operations in April, 2010

* Figures revised by insurance companies



Statistical Supplement

(Monthly - March, 2010)

Name of the Insurer: Bajaj Allianz General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	2894	26140.41	44873	384962	-7.70	-602.32	28266348.00	274180006.00
Previous year	2901.73	26742.73	47799	411053	388.51	-744.16	30740572.00	258389260.00
Marine Cargo	579	6841.00	15177	165468	160.99	-208.90	7009885.00	111504546.00
Previous year	418.47	7387.47	14735	171753	612.49	490.30	6445262.00	64675618.00
Marine Hull (Including Onshore & Offshore oil energy)	47.13	635.30	51	1323	-37.20	-913.64	116278.00	2932090.00
Previous year	84.32	1456.07	132	1749	-44.55	473.92	346865.00	5099804.00
Marine (Total)	626.58	7476.29	15228	166791	123.79	-1122.54	7126163.00	114436636.00
Previous year (Total)	502.79	8843.54	14867	173502	567.94	964.22	6792127.00	69775422.00
Aviation	50.62	2862.25	45	308	-35.71	-588.74	7748436.00	33614097.00
Previous year	86.33	2512.65	41	438	-109.36	1302.66	4529546.00	18826195.00
Engineering	1175.33	10046.77	1787	17084	54.99	-1100.62	16486318.00	123575340.00
Previous year	1120.34	12647.70	2947	20975	-145.27	-2261.71	17720184.00	110808296.00
Motor Own Damage	12199.26	105207.90	391917	3745705	3237.20	6449.13	926869.00	7906776.00
Previous year	8962.06	106114.45	324066	3842157	-2793.16	680.84	713401.00	7764770.00
Motor Third party	4107.36	39368.81	397654	3821604	917.45	-776.20		
Previous year	3189.91	43982.62	345076	3938951	-1612.78	2770.50		
Motor (Total)	16306.62	144576.71	397654	3821604	4154.65	5672.93	926869.00	7906776.00
Previous year (Total)	12151.97	150097.07	345076	3938951	-4405.94	3451.34	713401.00	7764770.00
Workmen's compensation / Employer's liability	175.70	1786.87	1773	18347	35.07	-496.43	23968.00	288418.00
Previous year	140.63	1753.25	1540	16901	-9.54	88.75	32037.00	317444.00
Public Liability	7.06	61.81	13	157	1.66	-593.55	15466.00	168831.00
Previous year	5.40	60.79	13	200	-2.78	-6.63	14017.00	241723.00
Product Liability	90.96	1117.98	40	532	-22.92	-652.87	63618.00	811948.00
Previous year	113.88	1379.58	34	612	-60.97	75.70	56198.00	938867.00
Other Liability Covers	246.93	4413.91	255	3400	96.54	-29.62	119894.00	2472712.00
Previous year	150.39	3817.79	247	2865	45.46	682.19	157746.00	1776324.00
Liability (Total)	520.65	7380.57	2081	22436	110.35	-1772.47	222946.00	3741909.00
Previous year (Total)	410.30	7011.41	1834	20578	-27.82	840.01	259998.00	3274358.00
Personal Accident	442.91	5273.20	9057	91930	-273.42	-2292.47	1719183.00	26203738.00
Previous year	716.32	6575.70	13512	511554	121.47	1824.04	21128106.00	243290447.00
Medical Insurance	2686.71	24401.48	80071	1159981	-305.17	-6986.84	3539249.00	39959285.00
Previous year	2991.87	27680.92	197158	1712857	1290.77	8803.40	3453772.00	49827987.00
Overseas Medical Insurance	348.31	5137.53	42930	428038	17.54	-509.50	99440.00	1695003.00
Previous year	330.77	5520.93	32606	469819	-57.34	-347.92	16257.00	387990.00
Health (Total)	3035.02	29539.01	123001	1588019	-287.63	-7496.34	3638689.00	41654288.00
Previous year (Total)	3322.64	33201.85	229764	2182676	1233.43	8455.48	3470029.00	50215977.00
Crop Insurance	0	0.00	0	0	0.00	-598.96	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Credit Guarantee	145.39	2321.90	14	274	-285.79	150.83	497100.00	7590447.00
Previous year	431.19	1724.13	43	232	242.27	749.35	1794392.00	4433815.00
All Other Miscellaneous	1830.01	15952.62	70518	591582	174.69	3449.58	12979618.00	108629830.00
Previous year	1655.32	14692.53	75138	1075139	51.81	-1977.64	2470755.00	167645299.00
Grand Total	27027.14	251569.72	664258	6684990	3728.22	-6301.10	79611670.00	#####
Previous year (Total)	23298.93	264049.30	731021	8335098	-2082.97	12603.57	89619110.00	#####

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
253.60	2385.40	12334	72736	0.00	0.00	0.00	0.00		
248.71	2466.49	10178	74005	0.00	0.00	0.00	0.00		
6.38	368.54	693	7011	0.00	0.00	0.00	0.00		
20.00	493.50	578	7408	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
6.38	368.54	693	7011	0.00	0.00	0	0	0	0
20.00	493.50	578	7408	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
177.21	1254.23	311	1781	0.00	0.00	0.00	0.00		
48.71	1828.70	24	1255	0.00	0.00	0.00	0.00		
117.06	1557.11	2900	51963	0.00	0.00	0.00	0.00		
178.21	6141.73	7426	125690	0.00	0.00	0.00	0.00		
1392.65	11982.66	54391	361567	0.00	0.00	0.00	0.00		
509.13	9901.01	8050	353346	0.00	0.00	0.00	0.00		
1509.71	13539.77	54391	361567	0.00	0.00	0	0	0	0
687.34	16042.74	8050	353346	0.00	0.00	0	0	0	0
33.28	280.57	285	3413	0.00	0.00	0.00	0.00		
25.58	311.24	239	2889	0.00	0.00	0.00	0.00		
0.57	4.30	6	19	0.00	0.00	0.00	0.00		
0.61	14.50	6	56	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
3.60	54.34	11	114	0.00	0.00	0.00	0.00		
0.00	11.24	0	73	0.00	0.00	0.00	0.00		
37.45	339.21	302	3546	0.00	0.00	0	0	0	0
26.19	336.98	245	3018	0.00	0.00	0	0	0	0
40.98	595.18	4087	26390	2.85	16.66	11400.00	73351.00		
11.50	611.89	1326	13692	0.00	32.46	0.00	163101.00		
128.11	697.05	3278	17310	0.00	0.00	0.00	0.00	106093.00	916901.00
50.60	527.11	1278	12742	0.00	0.00	0.00	0.00	105106.00	996758.00
0.00	0.00	0	0	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0	0	0.00	0.00	0.00	0.00	0.00	0.00
128.11	697.05	3278	17310	0.00	0.00	0	0	106093	916901
50.60	527.11	1278	12742	0.00	0.00	0	0	105106	996758
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
365.58	3804.43	18173	146109	0.00	0.00	0.00	0.00		
462.64	4431.44	24370	240362	0.00	0.00	0.00	0.00		
2519.02	22983.81	93569	636450	2.85	16.66	11400	73351	106093	916901
1555.69	26738.85	46049	705828	0.00	32.46	0	163101	105106	996758

Name of the Insurer: *Bharti Axa General Insurance Company Ltd*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	306.58	2729.13	776	14588	306.58	2422.55	499057.58	4895102.54
Previous year	75.00	225.29	613	1170	75.00	150.29	170937.79	614334.07
Marine Cargo	79.40	544.45	167	1651	79.40	465.05	370417.94	2148138.40
Previous year	22.28	61.27	49	256	22.28	38.99	66923.29	935681.09
Marine Hull (Including Onshore & Offshore oil energy)					0.00	0.00		
Previous year								
Marine (Total)	79.40	544.45	167	1651	79.40	465.05	370417.94	2148138.40
Previous year (Total)	22.28	61.27	49	256	22.28	38.99	66923.29	935681.09
Aviation					0.00	0.00		
Previous year					0.00	0.00		
Engineering	91.43	1317.55	161	2013	91.43	1226.13	259693.42	3992412.51
Previous year	61.50	557.03	75	494	61.50	495.53	327802.91	1415220.46
Motor Own Damage	2379.41	13733.16	37676	192573	2379.41	11353.75	224139.03	1010351.03
Previous year	440.03	1400.43	5812	17689	440.03	960.40	38394.15	114083.38
Motor Third party	750.74	4263.99	37676	220014	750.74	3513.25		
Previous year	116.80	338.48	5812	17689	116.80	221.69		
Motor (Total)	3130.14	17997.15	37676	220014	3130.14	14867.00	224139.03	1010351.03
Previous year (Total)	556.83	1738.91	5812	17689	556.83	1182.09	38394.15	114083.38
Workmen's compensation / Employer's liability	18	211	171	1703	18.18	192.55	2024	20005
Previous year	9	53	90	226	9.41	43.77	554	3963
Public Liability					0.00	0.00		
Previous year								
Product Liability					0.00	0.00		
Previous year								
Other Liability Covers	3	108	6	142	2.56	105.91	1431	35418
Previous year	0	0	2	4			2	3
Liability (Total)	20.74	319.20	177	1845	20.74	298.46	3454.77	55423.16
Previous year (Total)	9.43	53.20	92	230	9.41	43.77	555.62	3965.31
Personal Accident	769.52	2363.65	971	7948	769.52	1594.13	6305801.88	15417118.90
Previous year	10.23	42.52	676	2593	10.23	32.30	10457.86	61041.30
Medical Insurance	227.20	3519.50	1365	9771	227.20	3292.30	10596.07	42016.53
Previous year	35.12	150.72	239	280	35.12	35.12	1033.23	1241.06
Overseas Medical Insurance					0.00	0.00		
Previous year								
Health (Total)	227.20	3519.50	1365	9771	227.20	3292.30	10596.07	42016.53
Previous year (Total)	35.12	150.72	239	280	35.12	35.12	1033.23	1241.06
Crop Insurance					0.00	0.00		
Previous year								
Credit Guarantee					0.00	0.00		
Previous year								
All Other Miscellaneous	33.89	274.28	479	11167	33.89	240.40	52020.85	622124.24
Previous year	4.87	20.81	254	490	4.87	15.94	17348.08	135299.51
Grand Total	4658.91	29064.92	41772	268997	4658.91	24406.01	7725181.54	28182687.30
Previous year (Total)	775.25	2849.76	7810	23202	775.23	1994.02	633452.93	3280866.18

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
1.97	15.59	5	3165						
			1						
0.00	0.00	0	1	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
	0.13		2						
26.40	87.74	812	2999						
18.42	20.70	480	516						
8.18	27.56								
34.58	115.29	812	2999	0.00	0.00	0	0	0	0
18.42	20.70	480	516	0.00	0.00	0	0	0	0
	2		6						
0.00	2.01	0	6	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
2.02	287.63	19	200						
1.23	1192.39	4	44		586.25		1400000		
1.23	1192.39	4	44	0.00	586.25	0	1400000	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.42	10.53	7	2570						
40.22	1623.58	847	8987	0.00	586.25	0	1400000	0	0
18.42	20.70	480	516	0.00	0.00	0	0	0	0

Name of the Insurer: Cholamandalam Ms General Insurance Company Ltd

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	251.41	4,777.21	4,567	22,490	276.60	(607.23)	824,218	18,261,448
Previous year	(25.19)	5,384.44	1,309	19,872	(291.28)	(1,615.88)	940,083	20,135,207
Marine Cargo	323.42	4,143.79	892	12,112	195.94	616.48	1,217,354	18,141,646
Previous year	127.48	3,527.31	751	10,249	27.00	409.73	775,914	17,123,176
Marine Hull (Including Onshore & Offshore oil energy)	(0.13)	94.77	-	49	(4.91)	(33.56)	-	20,299
Previous year	4.78	128.33	-	-	4.78	(20.04)	1,686	27,262
Marine (Total)	323.29	4,238.56	892	12,161	191.03	582.92	1,217,354	18,161,945
Previous year (Total)	132.26	3,655.64	751	10,249	31.78	389.69	777,600	17,150,438
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	15.10	-	-
Engineering	164.62	2,240.55	397	4,540	(186.41)	(492.88)	371,294	6,347,320
Previous year	351.03	2,733.44	430	3,384	118.30	(241.21)	1,235,880	6,342,487
Motor Own Damage	2,774.70	31,282.05	50,535	542,572	922.63	6,649.87	174,613	1,948,485
Previous year	1,852.06	24,632.18	33,467	349,246	198.81	6,729.31	121,069	857,716
Motor Third party	1,217.67	13,728.09	-	-	667.26	6,407.76	-	-
Previous year	550.41	7,320.34	-	-	(5.42)	2,781.91	-	-
Motor (Total)	3,992.37	45,010.14	50,535	542,572	1,589.90	13,057.63	174,613	1,948,485
Previous year (Total)	2,402.47	31,952.51	33,467	349,246	193.39	9,511.21	130,967	1,334,101
Workmen's compensation / Employer's liability	24.20	437.06	-	857	(10.39)	(54.95)	2,129	67,010
Previous year	34.59	492.01	-	3,051	7.08	81.91	3,286	58,648
Public Liability	23.16	773.95	336	4,148	8.57	(28.30)	15,817	258,562
Previous year	14.59	802.25	684	2,138	(6.97)	(175.84)	9,958	234,996
Product Liability	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Other Liability Covers	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Liability (Total)	47.36	1,211.01	336	5,005	(1.83)	(83.25)	17,945	325,572
Previous year (Total)	49.19	1,294.27	684	5,189	0.10	(93.93)	13,244	293,644
Personal Accident	277.90	2,941.72	1,850	25,332	158.97	(7.08)	352,325	5,809,376
Previous year	118.92	2,948.80	1,709	13,151	15.78	1,693.33	58,750	17,065,916
Medical Insurance	819.19	14,951.22	2,701	29,530	24.70	(1,637.66)	48,113	1,013,020
Previous year	794.49	16,588.88	3,295	22,128	(471.05)	5,650.48	901,085	1,094,580
Overseas Medical Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Health (Total)	819.19	14,951.22	2,701	29,530	24.70	(1,637.66)	48,113	1,013,020
Previous year (Total)	794.49	16,588.88	3,295	22,128	(471.05)	5,650.48	901,085	1,094,580
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	224.44	3,115.06	699	160,608	(98.61)	(870.47)	593,845	4,952,330
Previous year	323.06	3,985.53	4,117	367,672	60.88	808.56	306,654	4,214,967
Grand Total	6,100.57	78,485.48	61,977	802,238	1,954.34	9,941.97	3,599,708	56,819,495
Previous year (Total)	4,146.22	68,543.51	45,762	790,891	(342.10)	16,117.35	4,364,264	67,631,341

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
-	0.27	-	2	193.32	1,639.81				
-	4.05	-	51	82.27	2,817.31	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	42.47	427.26				
-	-	-	-	25.94	497.14	-	-		
191.94	1,875.25	2,875	27,574	-	-	-	-		
164.72	1,428.53	2,467	23,256	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
191.94	1,875.25	2,875	27,574	-	-	-	-		
164.72	1,428.53	2,467	23,256	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
306.35	3,820.66	4	15	-	-	217,368	3,532,995		
276.00	3,092.94	1	12	880.00	880.00				
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
306.35	3,820.66	4	15	-	-	217,368	3,532,995	-	-
276.00	3,092.94	1	12	880.00	880.00	4,040,000	4,040,000	-	-
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	0.45	-	3	94.79	637.88				
-	0.06	-	4	30.86	682.56	-	-		
498.29	5,696.62	2,879	27,594	330.58	2,704.95	217,368	3,532,995	-	-
440.72	4,525.57	2,468	23,323	1,019.07	4,877.01	4,040,000	4,040,000	-	-

Name of the Insurer: Future General India Insurance Co. Ltd.

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	615.77	4238.19	820	6202	447.82	2521.55	1022053.84	4521861.78
Previous year	167.95	1716.64	826	5017	120.95	1379.78	316316.11	3312196.16
Marine Cargo	82.46	1550.39	4352	24293	15.30	871.83	434008.90	3353995.51
Previous year	67.17	678.57	2491	10721	62.38	606.09	207560.20	2722549.17
Marine Hull (Including Onshore & Offshore oil energy)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine (Total)	82.46	1550.39	4352	24293	15.30	871.83	434008.90	3353995.51
Previous year (Total)	67.17	678.57	2491	10721	62.38	606.09	207560.20	2722549.17
Aviation	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Engineering	126.14	1519.78	237	2078	-122.15	118.60	80366.62	653964.29
Previous year	248.30	1401.18	276	1904	240.65	1301.81	463533.67	1763548.05
Motor Own Damage	1993.21	15085.58	46686	411032	902.74	7978.64	189389.47	1085216.40
Previous year	1090.47	7106.94	39647	270198	998.03	6952.98	96404.49	550584.94
Motor Third party	788.43	5954.60	46686	411032	364.93	3494.68		
Previous year	423.50	2459.92	39647	270198	409.40	2436.50		
Motor (Total)	2781.63	21040.18	46686	411032	1267.67	11473.33	189389.47	1085216.40
Previous year (Total)	1513.97	9566.85	39647	270198	1407.43	9389.48	96404.49	550584.94
Workmen's compensation / Employer's liability	37.29	320.01	307	2424	23.32	202.90	3581.70	25287.57
Previous year	13.98	117.11	144	872	13	112	1571.39	13982.99
Public Liability	0.00	0.00	0	0	-0.66	-9.22	0.00	0.00
Previous year	0.66	9.22	29	188	-1	5	82.70	1108.67
Product Liability	49.80	573.46	70	706	28.04	216.38	7169.95	68201.58
Previous year	21.77	357.08	68	475	22	357	4321.16	84863.39
Other Liability Covers	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	-0.11	-0.76	0.00	0.00
Liability (Total)	87.09	893.47	377	3130	50.69	410.06	10751.65	93489.14
Previous year (Total)	36.40	483.41	241	1535	34.04	473.51	5975.26	99955.05
Personal Accident	78.20	1315.06	1908	15067	41.24	358.60	52592.85	1982214.68
Previous year	36.97	956.46	1446	10180	-6.30	613.62	35723.83	2553567.19
Medical Insurance	404.92	6335.23	954	7848	150.16	2209.87	7492.15	46378.85
Previous year	254.76	4125.36	1478	9854	254.76	4125.36	8874.96	309903.55
Overseas Medical Insurance	62.39	597.19	3574	36386	62.39	597.19	7987.65	50727.22
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Health (Total)	467.30	6932.41	4528	44234	212.55	2807.06	15479.80	97106.07
Previous year (Total)	254.76	4125.36	1478	9854	254.76	4125.36	8874.96	309903.55
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Credit Guarantee	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
All Other Miscellaneous	181.59	1182.41	13803	47915	67.12	626.20	177334.85	878675.17
Previous year	114.46	556.21	4272	17086	100.91	530.79	49294.01	638571.86
Grand Total	4420.19	38671.89	72711	553951	1980.22	19187.21	1981977.97	12666523.05
Previous year (Total)	2439.97	19484.68	50677	326495	2214.82	18420.43	1183682.53	11950875.96

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
73.00	167.65	214	419						
0.00	177.62	52	393						
28.00	95.51	1078	1704						
0.96	1.48	12	40						
28.00	95.51	1078	1704	0.00	0.00	0	0		
0.96	1.48	12	40	0.00	0.00	0	0		
36.00	68.59	44	130						
1.33	3.08	5	14						
634.00	1444.86	12859	29936						
0.00	268.78								
271.00	618.52	5511	12830						
68.59	70.82	3477	21368						
905.00	2063.38	12859	29936	0.00	0.00	0	0		
68.59	339.60	3477	21368	0.00	0.00	0	0		
0	0	14	14						
11.00	75.68	1078	1200						
11.00	75.68	1078	1200	0.00	0.00	0	0		
0.35	0.35	14	14	0.00	0.00	0	0		
				0.00	43.31	0	811726		
0.00	28.00	0	3829		0.37		8200		
-7.00	289.86	474	1215						
54.37	126.87	311	414						
-7.00	289.86	474	1215	0.00	0.00	0	0	0	289539
54.37	126.87	311	414	0.00	0.00	0	0	0	0
77.00	381.79	13215	41950						
12.68	27.00	1268	1579						
1123.00	3142.46	28962	76554	0.00	43.31	0	811726	0	289539
138.28	704.00	5139	27651	0.00	0.37	0	8200	0	0

Name of the Insurer: *HDFC ERGO General Insurance Company Ltd*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	5,580.49	14,278.38	1,869	10,421	2,868.12	7,805.14	1,693,091	21,633,598
Previous year	2,712.37	6,473.24	61	619	2,055.69	5,145.00	240,091	7,251,644
Marine Cargo	329.10	1,548.97	179	1,203	242.83	959.79	1,650,270	6,065,065
Previous year	86.27	589.18	(7)	378	55.78	260.37	303,096	1,602,552
Marine Hull (Including Onshore & Offshore oil energy)	(184.24)	952.33	65	246	(184.40)	699.39	69,754	445,710
Previous year	0.16	252.95	1	7	0.16	252.95	70	196,876
Marine (Total)	144.86	2,501.30	244	1,449	58.43	1,659.18	1,720,024	6,510,775
Previous year (Total)	86.43	842.13	(6)	385	55.94	513.32	303,166	1,799,428
Aviation	4.17	1,827.63	1	10	(73.18)	1,644.94	1,944	696,000
Previous year	77.34	182.69	1	3	77.34	182.69	-	45,868
Engineering	401.53	2,930.96	322	1,858	(18.00)	1,480.03	430,854	3,700,178
Previous year	419.52	1,450.93	44	303	237.35	645.88	211,192	1,729,536
Motor Own Damage	3,249.07	20,099.51	50,462	348,121	1,819.07	7,682.23	178,446	1,269,630
Previous year	1,430.00	12,417.29	37,155	251,528	136.86	88.65	88,632	676,578
Motor Third party	1,297.08	8,892.64	67,460	462,934	(2,009.52)	2,776.94		
Previous year	3,306.60	6,115.71	37,155	251,528	1,386.46	2,770.22		
Motor (Total)	4,546.15	28,992.16	67,460	462,934	(190.45)	10,459.16	178,446	1,269,630
Previous year (Total)	4,736.60	18,533.00	67,460	462,934	1,523.32	2,858.88	88,632	676,578
Workmen's compensation / Employer's liability	17.85	201.74	40	342	10.32	120.39	12,190	159,158
Previous year	7.54	81.35	19	147	3.46	40.23	5,979	61,508
Public Liability	18.54	92.66	8	117	22.37	21.95	4,470	66,325
Previous year	(3.83)	70.71	7	77	(6.84)	40.95	1,377	24,635
Product Liability	21.99	90.75	8	30	21.99	58.66	746	18,782
Previous year	-	32.09	-	11	(3.20)	23.85	-	11,147
Other Liability Covers	312.86	6,533.14	79	818	123.28	3,378.98	69,727	1,321,489
Previous year	189.57	3,154.16	39	626	61.23	1,249.29	46,722	832,699
Liability (Total)	371.24	6,918.29	135	1,307	177.96	3,579.98	87,134	1,565,755
Previous year (Total)	193.28	3,338.31	65	861	54.65	1,354.32	54,078	929,988
Personal Accident	1,600.06	7,289.50	62,390	388,571	1,408.68	6,523.81	(6,939,244)	1,363,089
Previous year	191.37	765.69	77	942	156.40	223.74	59,746	2,050,063
Medical Insurance	5,425.39	26,235.67	22,179	129,836	4,293.17	21,311.29	297,803	1,324,630
Previous year	1,132.22	4,924.39	369	1,339	1,090.93	2,752.12	1,916	152,201
Overseas Medical Insurance	52.64	638.43	343	4,409	6.21	(38.50)	1,514,525	12,676,649
Previous year	46.43	676.93	229	1,485	1.44	39.51	753,429	12,656,482
Health (Total)	5,478.03	26,874.10	22,522	134,245	4,299.38	21,272.78	1,812,328	14,001,280
Previous year (Total)	1,178.65	5,601.32	598	2,824	1,092.37	2,791.62	755,345	12,808,683
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	(7,544.37)	1,229.32	4,444	25,875	(5,508.71)	1,013.80	971,250	8,210,034
Previous year	(2,035.66)	215.52	2,113	5,894	(1,477.06)	(281.38)	401,442	3,067,760
Grand Total	10,582.16	92,841.65	159,387	1,026,670	3,022.25	55,438.82	(44,175)	58,950,337
Previous year (Total)	7,559.91	37,402.83	70,413	474,765	3,775.99	13,434.09	2,113,693	30,359,549

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
1,386.13	1,852.65	129	409	-	-	-	-	-	-
-	32.85	1	14	-	-	-	-	-	-
36.80	173.58	15	104	-	-	-	-	-	-
21.51	204.01	2	10	-	-	-	-	-	-
0.15	0.30	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
36.95	173.88	15	104	-	-	-	-	-	-
21.51	204.01	2	10	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
6.96	220.22	22	170	-	-	-	-	-	-
(13.32)	28.56	(1)	5	-	-	-	-	-	-
515.71	3,324.70	9,761	78,030	-	-	-	-	-	-
132.53	1,303.32	3,653	25,191	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
515.71	3,324.70	9,761	78,030	-	-	-	-	-	-
132.53	1,303.32	3,653	25,191	-	-	-	-	-	-
1.25	9.98	4	19	-	-	-	-	-	-
7.41	8.54	6	9	-	-	-	-	-	-
-	0.48	-	9	-	-	-	-	-	-
0.82	1.91	2	5	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	3.60	-	1	-	-	-	-	-	-
3.90	38.23	2	18	-	-	-	-	-	-
(8.36)	346.50	10	35	-	-	-	-	-	-
5.14	48.68	6	46	-	-	-	-	-	-
(0.12)	360.55	18	50	-	-	-	-	-	-
84.50	383.62	5,730	25,580	-	-	-	-	-	-
1.39	31.31	63	216	0	3	2,366	38,622	-	-
836.26	3,146.11	1,225	4,443	31.12	65.49	10,455.70	53,098	49,422	752,985
3.06	8.10	1	3	-	-	-	-	1,693	183,758
1.57	17.77	9	202	-	-	-	-	13,305	109,612
0.20	14.40	8	32	-	-	-	-	7,857	94,327
837.83	3,163.88	1,234	4,645	31.12	65.49	10,456	53,098	62,727	862,597
3.26	22.50	9	35	-	-	-	-	9,550	278,085
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
80.20	623.68	972	3,574	-	-	-	-	-	-
29.16	57.72	-	115	-	-	-	-	-	-
2,953.42	9,791.32	17,869	112,558	31	65	10,456	53,098	62,727	862,597
174.41	2,040.81	3,745	25,636	0	3	2,366	38,622	9,550	278,085

Name of the Insurer: ICICI Lombard General Insurance Company Ltd

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	1,575.82	27,006.18	1,837	25,155	1,085.63	(1,943.85)	461,935	40,380,275
Previous year	490.19	28,950.03	1,793	29,525	(28.30)	(14,874.62)	3,304,880	62,950,691
Marine Cargo	615.67	8,158.75	525	8,829	329.77	(617.63)	1,202,676	28,333,222
Previous year	285.90	8,776.38	677	9,265	(214.34)	2,049.18	1,064,593	26,590,527
Marine Hull (Including Onshore & Offshore oil energy)	31.60	6,497.85	15	584	(521.28)	(7,110.52)	4,254	4,016,137
Previous year	552.89	13,608.37	28	724	13.62	(2,119.79)	1,023,334	5,048,967
Marine (Total)	647.28	14656.59	540	9413	-191.51	-7728.15	1206929.25	32349358.59
Previous year (Total)	838.78	22384.74	705	9989	-200.73	-70.61	2087926.73	31639493.23
Aviation	107.50	5,732.13	9	169	94.97	512.04	448,151	22,603,919
Previous year	12.53	5,220.09	17	196	(236.42)	1,087.62	2,196,245	15,344,838
Engineering	607.82	15,282.74	475	6,582	376.74	(3,254.29)	358,593	8,913,242
Previous year	231.09	18,537.04	607	8,381	(797.30)	585.81	3,193,941	19,703,401
Motor Own Damage	10,186.90	95,722.04	318,358	3,234,346	2,938.58	8,263.46	1,132,070	11,535,204
Previous year	7,248.32	87,466.04	248,622	2,512,315	(178.81)	(3,181.60)	1,117,907	11,444,610
Motor Third party	3,898.87	42,193.62	335,783	3,473,766	(35.29)	(2,477.57)		
Previous year	3,934.17	44,663.74	260,754	2,868,737	436.79	7,334.29		
Motor (Total)	14085.77	137915.67	335783	3473766	2903.28	5785.89	1132069.83	11535203.52
Previous year (Total)	11182.49	132129.78	260754	2868737	257.98	4152.69	1117906.73	11444609.60
Workmen's compensation / Employer's liability	82.16	1,139.74	348	3,910	41.75	157.90	10,111	180,860
Previous year	40.40	981.84	255	3,790	(12.59)	(27.65)	2,093	121,615
Public Liability	0.00	49.73	-	111	(2.36)	(10.20)	-	100,309
Previous year	2.36	59.93	4	132	1.94	(6.77)	5,680	110,028
Product Liability	0.46	294.59	-	64	(8.87)	(67.01)	-	65,680
Previous year	9.33	361.59	4	78	2.99	(52.04)	4,650	102,089
Other Liability Covers	396.96	9,006.96	108	1,614	260.52	2,387.75	47,873	1,932,821
Previous year	136.44	6,619.21	158	1,802	14.01	231.51	61,290	1,657,773
Liability (Total)	479.58	10491.02	456	5699	291.05	2468.44	57984.33	2279670.16
Previous year (Total)	188.53	8022.58	421	5802	6.35	145.06	73712.86	1991504.48
Personal Accident	444.59	7,969.08	20,580	174,077	159.71	(3,282.79)	979,968	22,138,167
Previous year	284.87	11,251.87	15,489	142,093	(93.74)	433.62	575,986	128,734,778
Medical Insurance	8,154.76	85,676.13	26,670	304,916	6,139.49	(11,614.84)	927,064	4,750,797
Previous year	2,015.27	97,290.97	32,391	500,993	(2,398.16)	15,702.05	548,475	9,645,964
Overseas Medical Insurance	357.37	5,504.81	30,883	328,091	(36.01)	(374.23)	641,297	9,922,577
Previous year	393.39	5,879.04	28,429	307,708	(8.48)	(993.11)	72,351.99	14,259,635
Health (Total)	8512.13	91180.93	57553	633007	6103.48	-11989.07	1568360.99	14673374.44
Previous year (Total)	2408.66	103170.00	60820	808701	-2406.64	14708.94	620827.29	23905599.56
Crop Insurance	-	0.00	-	-	-	0.00	-	-
Previous year	0.00	0.00	-	-	0.00	0.00	-	-
Credit Guarantee	267.24	2,851.69	9	61	35.90	315.89	8,354	153,562
Previous year	231.34	2,535.79	5	76	(30.87)	823.89	2,454	178,284
All Other Miscellaneous	2,504.48	16,420.11	8,220	133,472	1,945.16	6,638.16	351,415	43,666,312
Previous year	559.32	9,781.96	5,566	83,548	(223.19)	522.27	471,007	75,118,846
Grand Total	29232.22	329506.15	425462	4461401	12804.42	-12477.73	6573760.72	#####
Previous year (Total)	16427.80	341983.88	346177	3957048	-3752.85	7514.66	9252398.14	#####

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
-	8.56	-	3	-	0.00	-	-		
3.61	15.67	1	1	0.00	0.00	-	-		
-	(0.18)	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
0.00	-0.18	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
2.00	42.66	12	305	-	0.00	-	-		
6.03	65.09	28	550	0.00	0.00	-	-		
1025.27	7,791.14	-	108,669	-	0.00	-	-		
273.64	9,433.43	16,821	16,821	0.00	0.00	-	-		
734.88	4,744.72	34,624	199,494	-	0.00	-	-		
631.04	7,412.13	5,910	349,675	0.00	0.00	-	-		
1760.15	12535.86	34624	199494	0.00	0.00	0	0	0	0
904.68	16845.56	16821	349675	0.00	0.00	0	0	0	0
0.00	0.00	-	-	-	0.00	-	-		
0.00	0.05	-	1	0.00	0.00	-	-		
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.05	0	1	0.00	0.00	0	0	0	0
0.00	965.32	-	8	116	115.72	66,092	66,092		
20.07	2,890.79	50	138	0.00	4.86	-	-		
4015.69	20,415.99	213	5,046	0.00	33.24	-	27,637	2,498,427	11,605,747
6.13	15,461.83	851	7,245	78.58	1,779.69	65,365	2,165,620	1,023,309	19,868,024
25.25	299.30	508	9,159	-	0.00	-	-	30,883	328,091
30.11	402.86	2,118	25,498	0.00	0.00	-	-	28,429	307,708
4040.95	20715.29	721	14205	0.00	33.24	0	27637	2529310	11933838
36.23	15864.69	2969	32743	78.58	1779.69	65365	2165620	1051738	20175732
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
7	432	85	1,023	-	-	-	-		
289	3,320	50	1,545	-	-	-	-		
5809.67	34699.72	35442	215038	115.72	148.96	66092	93729	2529310	11933838
1260.06	39001.73	19919	384653	78.58	1784.55	65365	2165620	1051738	20175732

Name of the Insurer: *Iffco Tokio General Insurance Co Ltd*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	1939.02	20238.11	8012	84936	875.85	1939.02	7188753.73	103989717.44
Previous year	2219.75	20900.61	8262	87979	898.62	2219.75	11742306.51	138658682.02
Marine Cargo	563.59	7054.19	1169	11743	-31.93	563.59	4089822.09	51190380.85
Previous year	482.28	8071.03	1138	13853	33.01	482.28	3499785.34	58569321.70
Marine Hull (Including Onshore & Offshore oil energy)	1424.40	6458.15	41	421	1319.76	1424.40	9243026.86	41907351.95
Previous year	153.93	3541.60	50	444	103.98	153.93	998876.16	22981697.73
Marine (Total)	1987.99	13512.34	1210	12164	1287.83	1987.99	13332848.95	93097732.81
Previous year (Total)	636.21	11612.63	1188	14297	136.99	636.21	4498661.51	81551019.42
Aviation	376.54	4191.29	57	419	137.05	376.54	2489312.69	27708719.66
Previous year	276.52	1615.15	36	341	4.30	276.52	1828047.94	10689674.97
Engineering	780.86	9357.11	695	6283	219.19	780.86	48855.00	756959.72
Previous year	731.54	8154.34	539	6145	98.29	731.54	60400.31	757976.31
Motor Own Damage	5604.66	50166.86	301616	3165831	986.62	5604.66	228098.94	2041530.07
Previous year	4383.55	47339.25	257349	2721094	704.74	4383.55	178385.88	1926441.55
Motor Third party	14370.45	34734.28	2204	55403	12221.47	14370.45		
Previous year	13353.33	32414.11	257349	2721094	11585.10	13353.33		
Motor (Total)	19975.11	84901.13	301616	3165831	13208.09	19975.11	228098.94	2041530.07
Previous year (Total)	17736.88	79753.36	257349	2721094	12289.85	17736.88	178385.88	1926441.55
Workmen's compensation / Employer's liability	80.69	945.34	116	7721	5.25	80.69	5030.61	58937.15
Previous year	76.32	995.13	736	7821	-5.43	76.32	4758.38	62041.39
Public Liability	31.39	474.89	45	595	0.23	31.39	149363.41	2258315.67
Previous year	32.74	469.23	44	594	13.49	32.74	155669.52	2231330.94
Product Liability	9.69	87.44	14	108	1.28	9.69	5253.00	54120.19
Previous year	31.67	148.17	56.76	191.45	29.38	31.67	17169.00	80324.06
Other Liability Covers	37.06	2890.79	53	1674	-36.00	37.06	35845.35	2796045.29
Previous year	58.21	1805.74	104.31	1494.39	21.70	58.21	56298.41	1746556.19
Liability (Total)	158.83	4398.46	228	10098	-29.23	158.83	195492.38	5167418.30
Previous year (Total)	198.94	3418.27	942	10101	59.14	198.94	233895.31	4120252.58
Personal Accident	250.77	2060.41	4328	32241	112.06	250.77	537643.68	4417465.25
Previous year	186.36	2486.51	4396	34483	119.07	186.36	399553.81	5330999.22
Medical Insurance	4062.15	16189.07	3291	46522	3656.31	4062.15	171408.41	683121.77
Previous year	2928.93	13775.15	5139	46028	2328.91	2928.93	123590.48	581262.71
Overseas Medical Insurance	16.16	232.53	1848	23081	1.52	16.16	2961.20	42609.34
Previous year	20.59	323.73	2272	31414	-1.59	20.59	3773.24	59320.48
Health (Total)	4078.31	16421.60	5139	69603	3657.82	4078.31	174369.61	725731.11
Previous year (Total)	2949.52	14098.88	7411	77442	2327.31	2949.52	127363.72	640583.19
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	722.50	8875.30	19094	149295	-10.04	722.50	536412.21	6589371.02
Previous year	845.73	9512.44	27472	152379	229.81	845.73	627902.85	7060066.64
Grand Total	30269.93	163955.77	340379	3530870	19458.62	30269.93	24731787.19	#####
Previous year (Total)	25781.45	151552.18	307595	3104261	16163.37	25781.45	19696517.84	#####

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
19.22	338.55	23	10986						
55.88	240.48	1346	9697						
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
806.27	16729.81	22806	554843	36.48	593.43	188231	1461798		
952.13	10088.10	51872	428754	7.28	53.37	145909	1067552		
825.49	17068.36	22829	565829	36.48	593.43	188231	1461798	0	0
1008.01	10328.58	53218	438451	7.28	53.37	145909	1067552	0	0

Name of the Insurer: National Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	518.80	42916.02	53127	545379	330.47	3207.62		
Previous year	4188.33	39708.40	48319	519772	688.23	1577.40		
Marine Cargo	1710.91	14197.95	8637	192286	591.57	527.63		
Previous year	1119.34	13670.32	6691	190101	50.34	990.32		
Marine Hull (Including Onshore & Offshore oil energy)	517.46	9793.17	238	4334	184.23	3347.18		
Previous year	333.23	6445.99	175	5295	-39.5	1627.99		
Marine (Total)	2228.37	23991.12	8875	196620	775.80	3874.81		0.00
Previous year (Total)	1452.57	20116.31	6866	195396	10.84	2618.31		0.00
Aviation	59.80	3691.69	9	118	-48.84	-2087.53		
Previous year	108.64	5779.22	11	154	-111.01	613.22		
Engineering	3199.88	18558.78	7689	85991	1019.80	2155.43		
Previous year	2180.08	16403.35	5123	77478	82.99	1905.35		
Motor Own Damage	14100.36	136154.44	253418	3279092	2349.11	2041.00		
Previous year	11751.25	134113.44	216048	3181174	-1519.96	-1500.56		
Motor Third party	8030.27	80721.92	142567	1489216	766.27	1125.35		
Previous year	7264.00	79596.57	116219	1394037	-257.25	579.57		
Motor (Total)	22130.63	216876.36	253418	3279092	3115.38	3166.35		0.00
Previous year (Total)	19015.25	213710.01	216048	3181174	-1777.21	-920.99		0.00
Workmen's compensation / Employer's liability	218.69	3770.38	738	40376	-57.41	616.51		
Previous year	276.10	3153.87	816	34201	-324.66	232.87		
Public Liability	76.34	733.83	913	8708	9.11	146.24		
Previous year	67.23	587.59	842	7809	14.38	76.59		
Product Liability	31.49	422.84	29	480	4.58	107.60		
Previous year	26.91	315.24	22	340	5.02	33.24		
Other Liability Covers	109.41	777.49	1128	19316	-142.67	-257.29		
Previous year	252.08	1034.78	1430	19169	38.70	143.78		
Liability (Total)	435.93	5704.54	2808	68880	-186.39	613.06		0.00
Previous year (Total)	622.32	5091.48	3110	61519	-266.56	486.48		0.00
Personal Accident	1488.16	9535.99	69412	482340	938.49	2350.27		
Previous year	549.67	7185.72	38412	415818	-432.90	367.72		
Medical Insurance	11834.99	101794.83	83942	1141026	2920.07	16743.62		
Previous year	8914.92	85051.21	61276	918901	365.17	16433.21		
Overseas Medical Insurance	10.88	376.53	156	9379	2.37	25.96		
Previous year	8.51	350.57	138	9654	-0.85	-67.43		
Health (Total)	11845.87	102171.36	84098	1150405	2922.44	16769.58		0.00
Previous year (Total)	8923.43	85401.78	61414	928555	364.32	16365.78		0.00
Crop Insurance	0.00		0		0.00	0.00		
Previous year	0.00		0					
Credit Guarantee	0.00		0		0.00	0.00		
Previous year	0.00		0					
All Other Miscellaneous	5766.56	38646.14	212437	1991299	1606.88	4052.41		
Previous year	4159.68	34593.73	153794	1823699	5708.31	3944.78		
Grand Total	51674.00	462092.00	834440	9289340	10474.03	34102.00	0.00	0.00
Previous year (Total)	41199.97	427990.00	649316	8597602	4267.01	26958.05	0.00	0.00

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
416.28	2307.66	6018	57124	473.18	1748.44				
391.05	2196.36	5843	56696	491.28	1778.78				
26.11	268.49	175	6861	11.28	150.47				
28.61	277.22	198	5844	19.42	193.50				
0.00	0.00	0	0	0.00	0.00				
0.00	0.00	0	0	0.00	0.00				
26.11	268.49	175	6861	11.28	150.47			0.00	0.00
28.61	277.22	198	5844	19.42	193.50			0.00	0.00
0.00	0.00	0	0	0.00	0.00				
0.00	0.00	0	0	0.00	0.00				
25.46	419.43	169	4867	68.42	295.49				
23.94	412.94	151	4792	85.46	329.96				
1242.60	10598.06	52147	536444	1156.00	5377.26				
1084.07	9831.86	34915	466225	1094.33	4858.28				
1036.55	6898.76	42039	367520	1006.41	4048.97				
984.10	6457.96	32063	319894	946.71	3762.97				
2279.15	17496.82	52147	536444	2162.41	9426.23			0.00	0.00
2068.17	16289.82	34915	466225	2041.04	8621.25			0.00	0.00
9.64	184.15	126	2383	3.69	74.72	21	576		
13.21	165.91	141	2217	4.39	85.01	24	635		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	2.91	0	34	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
4.33	29.93	95	507	0.00	0.00	0	0		
5.39	29.77	121	448	7.81	27.23	0	0		
13.97	214.08	221	2890	3.69	74.72	21	576	0	0
18.60	198.59	262	2699	12.20	112.24	24	635	0	0
85.49	503.13	10264	73486	156.39	987.97	32317	619300		
42.63	349.56	7883	45336	130.66	789.57	21486	498644		
369.60	2192.37	8124	98865	869.46	6982.81	196341	1600472		
352.43	1795.69	7538	78954	645.37	5710.30	177439	1270745		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
369.60	2192.37	8124	98865	869.46	6982.81	196341	1600472	0	0
352.43	1795.69	7538	78954	645.37	5710.30	177439	1270745	0	0
0.00		0		0.00		0			
0.00		0		0.00		0			
0.00		0		0.00		0			
0.00		0		0.00		0			
3819.47	9418.97	31846	383280	756.29	4748.49	211637	718762		
3716.44	8644.45	28419	325103	559.84	4185.73	268026	686132		
7035.53	32820.95	151003	1531337	4501.12	24414.62	440316	2939110	0	0
6641.87	30164.63	117272	1305543	3985.27	21721.33	466975	2456156	0	0

Name of the Insurer: Raheja QBE General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	6.69	15.87	8	45	6.69	15.87	4110.65	18222.42
Previous year	0.00	0.00	0.00	0	0.00	0.00	0.00	0.00
Marine Cargo	0.06	1.53	1	36	0.06	1.53	126.55	2535.82
Previous year	0.00	0.00	0.00	0	0.00	0.00	0.00	0.00
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.06	1.53	1	36	0.06	1.53	126.55	2535.82
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering	23.93	39.55	12	13	23.93	39.55	17551.43	17553.68
Previous year								
Motor Own Damage	0.89	14.92	8	148	0.89	14.92	138.53	2274.53
Previous year								
Motor Third party	0.07	2.50	0	37	0.07	2.50	0.00	
Previous year								
Motor (Total)	0.95	17.42	8	148	0.95	17.42	138.53	2274.53
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability	1.42	3.03	9	13	1.42	3.03	0	0
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Public Liability	0.00	1.54	0	2	0.00	1.54	0	1000
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Product Liability								
Previous year								
Other Liability Covers	7.01	95.44	2	21	7.01	95.44	2850	39640
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Liability (Total)	8.43	100.00	11	36	8.43	100.00	2850.00	40639.86
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident	9.67	18.33	32	45	9.67	18.33	29953.06	39059.06
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Medical Insurance								
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	1.08	1.62	3	19	1.08	1.62	350.75	44037.51
Previous year			0	0	0.00	0.00	0.00	0.00
Grand Total	50.81	194.33	75	342	50.81	194.33	55080.98	164322.89
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0	0	0	0	0	0	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
11.02	11.02	15	15	5.17	5.17	575504	575504		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
11.02	11.02	15	15	5.17	5.17	575504	575504		
0.00	0.00	0	0	0.00	0.00	0	0		

Name of the Insurer: *Reliance General Insurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	484.18	12978.06	4611	39121	-39.60	335.81	-473237.63	27538207.90
Previous year	523.78	12642.26	2368	32848	154.47	-138.63	967596.22	19767408.54
Marine Cargo	158.61	2734.69	2757	23245	-69.96	-488.62	388069.72	12420877.04
Previous year	228.57	3223.31	1701	23331	99.00	59.20	331586.20	8102004.47
Marine Hull (Including Onshore & Offshore oil energy)	-64.39	1707.00	0	119	-115.29	-1234.87	0.00	950718.73
Previous year	50.90	2941.87	10	163	30.59	1865.08	22092.92	556955.48
Marine (Total)	94.22	4441.69	2757	23364	-185.25	-1723.49	388069.72	13371595.77
Previous year (Total)	279.47	6165.18	1711	23494	129.59	1924.28	353679.12	8658959.94
Aviation	6.97	4060.53	2	121	-11.09	2959.79	-950.00	4914951.95
Previous year	18.07	1100.74	2	84	22.52	358.45	2964.96	339838.98
Engineering	2193.83	10386.28	434	5394	1050.96	-1536.32	18572.70	7460591.03
Previous year	1142.88	11922.60	422	6226	77.15	1568.94	806506.81	11887054.84
Motor Own Damage	5347.72	90570.81	146504	2050465	-1230.21	7684.05	346761.41	5584707.42
Previous year	6577.92	82886.76	138956	1742107	134.70	-8736.64	407605.28	4635061.34
Motor Third party	2509.66	41300.18	151262	2156841	-276.64	7699.83		
Previous year	2786.30	33600.35	147430	1815128	243.96	-1513.18		
Motor (Total)	7857.38	131871.00	151262	2156841	-1506.85	15383.89	346761.41	5584707.42
Previous year (Total)	9364.22	116487.11	147430	1815128	378.66	-10249.83	407605.28	4635061.34
Workmen's compensation / Employer's liability	39.62	680.95	267	4103	-22.42	-144.13	3776.80	76329.62
Previous year	62.04	825.08	318	4476	-3.14	-33.77	6056.16	98437.73
Public Liability	6.31	242.14	36	454	-0.02	-65.97	4052.56	25149716.63
Previous year	6.33	308.11	30	486	0.58	16.16	2322.00	267425.80
Product Liability	0.00	71.10	0	70	0.00	-40.01	0.00	9375.00
Previous year	0.00	111.11	0	16	-2.52	86.22	0.00	43656.00
Other Liability Covers	19.65	870.10	419	1305	-105.84	-459.94	6402.59	290346.85
Previous year	125.49	1330.04	14	287	121.46	1095.50	13175.20	130304.75
Liability (Total)	65.59	1864.29	722	5932	-128.28	-710.05	14231.96	25525768.10
Previous year (Total)	193.87	2574.33	362	5265	116.37	1164.11	21553.36	539824.28
Personal Accident	102.55	4362.85	3692	54635	0.45	-981.40	245360.46	12150043.74
Previous year	102.10	5344.25	-7656	29225	-1060.95	76.45	559796.63	16956105.16
Medical Insurance	1960.08	20646.68	36650	450422	-97.49	-7462.12	391590.11	2302132.77
Previous year	2057.57	28108.80	41185	403533	602.31	3177.38	95156.73	1888657.20
Overseas Medical Insurance	219.04	3228.12	47858	522582	49.94	254.07	1276041.53	14120588.67
Previous year	169.09	2974.05	35665	362581	8.56	343.51	366388.15	6300022.37
Health (Total)	2179.12	23874.80	84508	973004	-47.55	-7208.05	1667631.64	16422721.44
Previous year (Total)	2226.66	31082.85	76850	766114	610.87	3520.89	461544.89	8188679.57
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Credit Guarantee	0	0.00	0	0	0.00	0.00	0	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
All Other Miscellaneous	283.50	4125.66	8495	78161	310.93	-42.38	258065.52	5432012.03
Previous year	-27.43	4168.03	2371	34594	-273.15	-1379.04	-200878.70	8163201.28
Grand Total	13267.34	197965.15	256483	3336573	-556.28	6477.80	2464505.77	#####
Previous year (Total)	13823.63	191487.35	223860	2712978	155.53	-3154.38	3380368.58	#####

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
15.61	725.81	197	1568	0.00	0.00	0.00	0.00		
0.88	539.33	10	1252	0.00	0.00	0.00	0.00		
-0.05	24.75	7	134	0.00	0.00	0.00	0.00		
0.00	8.57	0	55	0.00	0.00	0.00	0.00		
0.22	1.04	0	2	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.17	25.79	7	136	0.00	0.00	0	0	0	0
0.00	8.57	0	55	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	3.16	0	1	0.00	0.00	0.00	0.00		
4.49	135.10	23	229	0.00	0.00	0.00	0.00		
6.28	856.21	17	282	0.00	0.00	0.00	0.00		
571.10	9736.26	13586	187390	0.00	0.00	0.00	0.00		
325.34	6277.06	6090	127910	0.00	0.00	0.00	0.00		
301.95	3781.42	585	8507	0.00	0.00	0.00	0.00		
145.30	2872.94	177	7311	0.00	0.00	0.00	0.00		
873.05	13517.68	13586	187390	0.00	0.00	0	0	0	0
470.64	9150.00	6090	127910	0.00	0.00	0	0	0	0
0.55	15.87	8	136	0.00	0.00	0.00	0.00		
0.00	12.08	0	48	0.00	0.00	0.00	0.00		
0.00	2.97	0	3	0.00	0.00	0.00	0.00		
0.00	0.81	0	2	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.30	4.51	20	44	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.84	23.35	28	183	0.00	0.00	0	0	0	0
0.00	12.89	0	50	0.00	0.00	0	0	0	0
1.42	114.58	574	2937	2.67	943.05	14443.00	5598693.92		
25.38	1256.71	62	2299	25.27	1011.72	254988.00	39394332.00		
1338.81	3537.94	580	9339	0.00	0.00	0.00	0.00		
5.02	1910.25	220	9599	0.00	0.00	0.00	0.00		
14.28	127.23	4460	30061	0.00	0.00	0.00	0.00		
0.00	17.28	0	3434	0.00	0.00	0.00	0.00		
1353.09	3665.18	5040	39400	0.00	0.00	0	0	0	0
5.02	1927.53	220	13033	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0	0.00	0	0	0	0.00	0	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
12.29	116.31	555	5316	8.77	110.06	1941.00	38041.00		
27.89	208.08	87	5099	20.46	91.81	3936.00	12487.00		
2260.97	18323.78	20010	237159	11.44	1053.11	16384	5636735	0	0
536.09	13962.48	6486	149981	45.73	1103.53	258924	39406819	0	0

Name of the Insurer: Royal Sundaram Alliance Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	274.33	4249.00	4593	35741	475.59	-834.88	693865.28	6709586.30
Previous year	-201.26	5083.88	-13114	24247	-535.92	-1822.69	803609.85	7042413.05
Marine Cargo	385.61	2254.42	16521	48395	230.31	304.52	960000.38	5336730.11
Previous year	155.29	1949.90	2091	34359	-147.35	38.53	686225.37	5240852.18
Marine Hull (Including Onshore & Offshore oil energy)	-5.16	47.34	5	5	-5.74	0.38	11063.51	11063.51
Previous year	0.57	46.96	0	5	-5.72	-0.27	0.00	11261.25
Marine (Total)	380.44	2301.76	16526	48400	224.58	304.90	971063.89	5347793.62
Previous year (Total)	155.87	1996.86	2091	34364	-153.08	38.26	686225.37	5252113.43
Aviation								
Previous year								
Engineering	438.76	3681.00	227	2012	58.21	-103.10	140376.00	1193141.16
Previous year	380.55	3784.10	244	2271	-42.39	-373.52	206685.20	1647963.45
Motor Own Damage	5483.13	47849.83	75679	723496	793.68	5940.27	292479.43	2554443.81
Previous year	4689.45	41909.55	68552	598981	1263.12	8885.57	311473.55	2184366.95
Motor Third party	1542.50	13869.62	559	8847	155.61	2788.49		
Previous year	1386.89	11081.13	682	5571	579.34	3149.58		
Motor (Total)	7025.63	61719.45	75679	723496	949.30	8728.76	292479.43	2554443.81
Previous year (Total)	6076.34	52990.68	68552	598981	1842.46	12035.15	311473.55	2184366.95
Workmen's compensation / Employer's liability	0.00	202.23	57	606	-9.89	-139.52	-981.84	24314.76
Previous year	9.89	341.74	81	552	-8.67	150.68	2349.92	61496.66
Public Liability	56.45	1202.51	38	424	19.93	754.00	17229.91	267191.40
Previous year	36.52	448.51	15	371	23.36	195.41	12330.73	139254.50
Product Liability	3.69	216.45	4	64	-5.08	73.73	-5790.76	54312.05
Previous year	8.77	142.73	2	47	1.69	-54.57	3117.52	54664.02
Other Liability Covers								
Previous year								
Liability (Total)	60.14	1621.19	99	1094	4.95	688.21	10457.30	345818.22
Previous year (Total)	55.18	932.98	98	970	16.39	291.52	17798.18	255415.18
Personal Accident	13.09	2662.00	6045	80113	-214.18	-142.80	299777.43	3158016.50
Previous year	227.27	2804.80	7346	141928	-107.40	-359.91	279316.96	3070428.17
Medical Insurance	99.43	11611.00	21782	255136	-856.28	171.55	216885.84	2026059.52
Previous year	955.70	11439.45	21128	241317	8.07	554.75	97544.75	1819032.78
Overseas Medical Insurance								
Previous year								
Health (Total)	99.43	11611.00	21782	255136	-856.28	171.55	216885.84	2026059.52
Previous year (Total)	955.70	11439.45	21128	241317	8.07	554.75	97544.75	1819032.78
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	371.94	2862.83	42383	99499	252.66	1316.81	473331.63	10320758.86
Previous year	119.28	1546.02	3193	33075	-148.42	552.19	131295.06	4698056.34
Grand Total	8663.75	90708.23	167334	1245491	894.82	10129.45	3098236.79	31655617.98
Previous year (Total)	7768.93	80578.78	89538	1077153	879.71	10915.73	2533948.92	25969789.36

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
15.58	132.54	641	4429						
8.92	66.62	380	4758	0.00	0.00	0.00	0.00		
0.00	0.00	0	0						
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.37	4.48	3	15						
0.00	2.27	0	6	0.00	0.00	0.00	0.00		
255.90	4699.00	3165	62034						
256.89	4387.05	4118	59900	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
255.90	4699.00	3165	62034	0.00	0.00	0	0		
256.89	4387.05	4118	59900	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
36.75	232.62	27705	63156	1.35	13.90	3488.00	41269.00		
2.42	86.07	325	4015	1.08	9.30	3740.00	36205.00		
247.09	2049.65	6731	37513	288.48	289.69	319612.00	324562.00	48949.00	617015.00
85.84	1130.71	1434	14690	0.43	3.53	501.00	8573.00	58876.00	696800.00
247.09	2049.65	6731	37513	288.48	289.69	319612	324562	48949	617015
85.84	1130.71	1434	14690	0.43	3.53	501	8573	58876	696800
202.77	1144.31	3020	17809	0.00	0.00		0.00		
121.81	706.01	1917	13577	0.00	0.00	0.00	0.00		
758.47	8262.60	41265	184956	289.82	303.59	323100	365831	48949	617015
475.87	6378.72	8174	96946	1.51	12.83	4241	44778	58876	696800

non-life insurance

Name of the Insurer: *Shriram General Insurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	16.73	173.96	10	458	16.06	151.66	22584.77	226478.46
Previous year	0.67	22.30	7	165	0.67	22.30	196.15	16672.56
Marine Cargo	1.14	1.14	24	24	1.14	1.14	589.22	589.22
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine Hull (Including Onshore & Offshore oil energy)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine (Total)	1.14	1.14	24	24	1.14	1.14	589.22	589.22
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Engineering	16.97	147.13	26	151	14.42	84.13	6286.45	109069.30
Previous year	2.55	63.00	6	52	2.55	63.00	1771.88	21886.79
Motor Own Damage	2882.44	20212.86	81755	608543	2566.06	14411.64	236877.74	1642695.40
Previous year	316.38	5801.22	17835	183078	316.38	5801.22	35687.69	494578.93
Motor Third party	2838.30	20838.14	90741	648464	2527.15	15367.75		
Previous year	311.15	5470.39	18194	189812	311.15	5470.39		
Motor (Total)	5720.74	41051.00	90741	648464	5093.21	29779.39	236877.74	1642695.40
Previous year (Total)	627.53	11271.61	18194	189812	627.53	11271.61	35687.69	494578.93
Workmen's compensation / Employer's liability	0.55	14.47	11	53	0.40	5.30	17.67	139.19
Previous year	0.15	9.17	3	55	0.15	9.17	3.37	76.50
Public Liability	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Product Liability	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Other Liability Covers	0.20	1.45	1	32	0.19	0.83	60.00	555.00
Previous year	0.01	0.62	1	22	0.01	0.62	20.00	358.00
Liability (Total)	0.75	15.92	12	85	0.59	6.13	77.67	694.19
Previous year (Total)	0.16	9.79	4	77	0.16	9.79	23.37	434.50
Personal Accident	3.26	162.71	858	14543	0.63	160.08	2199.61	197111.23
Previous year	2.63	2.63	383	383	2.63	2.63	1132.00	1132.00
Medical Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Overseas Medical Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Health (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Credit Guarantee	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
All Other Miscellaneous	10.95	39.12	114	2010	6.90	32.66	12645.68	23257.76
Previous year	4.05	6.46	315	460	4.05	6.46	994.45	1737.30
Grand Total	5770.54	41590.98	91785	665735	5132.95	30215.19	281261.14	#####
Previous year (Total)	637.59	11375.79	18909	190949	637.59	11375.79	39805.54	536442.08

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
146.16	929.38	2449	24167	0.00	0.00	0	0		
11.15	85.53	762	3394	0.00	0.00	0	0		
112.26	748.63	2707	26722	0.00	44.91	0	45242		
10.08	79.51	778	3619	0.00	14.17	0	14291		
258.42	1678.01	2707	26722	0.00	44.91	0	45242		
21.23	165.04	778	3619	0.00	14.17	0	14291		
0.00	0.00	0	0	0.00	1.15	0	8		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	1.15	0	8		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.72	0.72	7984	7985		
0.00	0.00	0	0	0.47	0.47	2515	2515		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
258.42	1678.01	2707	26722	0.72	46.78	7984	53235	0	0
21.23	165.04	778	3619	0.47	14.64	2515	16806	0	0

Name of the Insurer: *Tata AIG General Insurance Co Ltd*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	851	15,675	11,580	176,225		-	6,750,357	241,319,166
Previous year	871	16,378	7,979	84,329	-	-	9,381,507	127,970,720
Marine Cargo	769	11,384	2,178	22,398		-	422,917	9,104,916
Previous year	694	11,182	1,109	16,062	-	-	381,320	4,131,813
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Marine (Total)	769	11,384	2,178	22,398	-	-	422,917	9,104,916
Previous year (Total)	694	11,182	1,109	16,062	-	-	381,320	4,131,813
Aviation	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	408	3,886	68	878		-	1,552,105	11,384,469
Previous year	210	3,562	51	487	-	-	469,235	6,500,717
Motor Own Damage	2,128	20,366	47,227	407,162		-	114,963	1,018,042
Previous year	3,007	21,737	64,077	439,703	-	-	82,274	854,476
Motor Third party	347	3,270	47,227	407,162		-	-	-
Previous year	268	3,240	64,077	439,703	-	-	-	-
Motor (Total)	2,475	23,636	47,227	407,162	-	-	114,963	1,018,042
Previous year (Total)	3,276	24,977	64,077	439,703	-	-	82,274	854,476
Workmen's compensation / Employer's liability	73	268	15	146		-	12,072	132,791
Previous year	24	593	198	2,485	-	-	4,868	226,197
Public Liability	256	2,828	49	452		-	176,947	1,452,703
Previous year	154	2,711	68	962	-	-	88,099	1,965,179
Product Liability	38	530	23	292		-	66,357	3,168,965
Previous year	27	470	30	555	-	-	3,657,111	12,105,284
Other Liability Covers	479	10,495	444	4,302		-	278,454	3,983,959
Previous year	610	7,830	350	2,223	-	-	139,326	1,947,670
Liability (Total)	847	14,121	531	5,192	-	-	533,830	8,738,418
Previous year (Total)	816	11,605	646	6,225	-	-	3,889,404	16,244,329
Personal Accident	1,164	10,410	6,166	77,844		-	588,878	5,252,430
Previous year	795	11,802	18,231	136,423	-	-	580,490	7,263,849
Medical Insurance	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Overseas Medical Insurance	1,010	8,339	25,729	293,905		-	3,284,047	36,862,922
Previous year	610	7,895	46,398	392,731	-	-	2,498,936	30,369,975
Health (Total)	1,010	8,339	25,729	293,905	-	-	3,284,047	36,862,922
Previous year (Total)	610	7,895	46,398	392,731	-	-	2,498,936	30,369,975
Crop Insurance	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	282	1,734	1,149	4,053		-	3,754	131,635
Previous year	160	1,348	3,440	18,113	-	-	46,959	399,430
Grand Total	7,807	89,184	94,628	987,657	-	-	13,250,850	#####
Previous year (Total)	7,430	88,749	141,931	1,094,073	-	-	17,330,124	#####

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
10	721	43	779		-		-		
(310)	369	908	932	-	-	-	-		
33	551	36	268		-		-		
189	273	257	264	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
33	551	36	268	-	-	-	-	-	-
189	273	257	264	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
0	31	-	20		-		-		
(63)	27	16	18	-	-	-	-		
184	2,602	48,637	76,186		-		-		
1,951	3,479	72,829	106,288	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
184	2,602	48,637	76,186	-	-	-	-	-	-
1,951	3,479	72,829	106,288	-	-	-	-	-	-
20	23	417	421		-		-		
19	126	226	1,114	-	-	-	-		
26	224	20	183		-		-		
155	228	125	127	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
45	247	437	604	-	-	-	-	-	-
174	354	351	1,241	-	-	-	-	-	-
291	425	2,447	5,209	-	13	-	108,331		
(66)	386	5,145	24,693	2	6	24,829	37,425		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
464	1,540	2,948	3,467		-		-		
413	532	18,454	23,235	-	-	-	-		
464	1,540	2,948	3,467	-	-	-	-	-	-
413	532	18,454	23,235	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
122	421	4,406	8,999		-		-		
70	453	8,759	19,633	-	-	-	-		
1,149	6,537	58,954	95,532	-	13	-	108,331	-	-
2,358	5,873	106,719	176,304	2	6	24,829	37,425	-	-

Name of the Insurer: *The New India Assurance Co. Ltd*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	5398.43	91479.76	118059	1006009	373.40	14147.08	126809484.05	505183237.71
Previous year	5025.03	77332.68	125390	981452			0.00	764790600.71
Marine Cargo	1448.21	19275.77	-7620	282911	224.20	1758.49	58903634.28	182556941.58
Previous year	1224.01	17517.28	46529	341002			0.00	100955667.46
Marine Hull (Including Onshore & Offshore oil energy)	5174.80	28503.68	1401	17103	1344.91	1411.23	1066519.41	29707933.62
Previous year	3829.89	27092.45	1537	13658			0.00	19316636.79
Marine (Total)	6623.01	47779.45	-6219	300014	1569.11	3169.72	59970153.69	212264875.20
Previous year (Total)	5053.90	44609.73	48066	354660	0.00	0.00	0.00	120272304.25
Aviation	864.33	5532.36	-67661	475	-1320.53	-2287.70	13187.16	2186091.43
Previous year	2184.86	7820.06	51	606			0.00	4691732.83
Engineering	2903.37	29774.68	9809	80542	550.16	5001.03	15087420.02	84404846.38
Previous year	2353.21	24773.65	9082	96664			0.00	67065571.46
Motor Own Damage	11961.76	117119.06	980988	5933782	2168.36	8275.78	-1119075738.04	171831977.20
Previous year	9793.40	108843.28	947278	5591290			0.00	29762066.45
Motor Third party	8829.83	89622.52	270578	3439770	-765.87	-1563.50		
Previous year	9595.70	91186.02	337080	2712957				
Motor (Total)	20791.59	206741.58	980988	5933782	1402.49	6712.28	-1119075738.04	171831977.20
Previous year (Total)	19389.10	200029.30	947278	5591290	0.00	0.00	0.00	29762066.45
Workmen's compensation / Employer's liability	312.51	3488	-6561	63721	315.38	641.54	32276.22	910491
Previous year	-2.87	2846	4727	58990			0.00	1218971
Public Liability	149.48	291	760	3870	-147.82	-185.97	28456.88	730070
Previous year	297.30	477	4316	6852			0.00	777856
Product Liability	93.49	320	7	105	7.92	-790.39	69828.25	520913
Previous year	85.57	1111	488	1268			0.00	580158
Other Liability Covers	426.24	7851	4312	55589	-15.25	1817.44	-1454422.99	3406727
Previous year	441.49	6034	-7613	47054			0.00	12565779
Liability (Total)	981.72	11950.79	-1482	123285	160.23	1482.62	-1323861.64	5568201.30
Previous year (Total)	821.49	10468.17	1918	114164	0.00	0.00	0.00	15142764.00
Personal Accident	1092.19	10102.57	51006	528223	166.79	390.64	13080561	46739848.39
Previous year	925.40	9711.93	71068	578865			0	63345680.54
Medical Insurance	15105.15	152807.18	167076	1401157	3037.95	18764.53	5336893431	7777142910.68
Previous year	12067.20	134042.65	104845	1524954			0	133770255.29
Overseas Medical Insurance	26.11	1383.09	4674	45111	-52.85	-141.60	-84668	1964312.51
Previous year	78.96	1524.69	6045	53387			0	767836.32
Health (Total)	15131.26	154190.27	171750	1446268	2985.10	18622.93	5336808762.90	7779107223.19
Previous year (Total)	12146.16	135567.34	110890	1578341	0.00	0.00	0.00	134538091.61
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0			0.00	0.00
Credit Guarantee	-0.49	-1.92	-8	14	-0.29	-21.24	-88799.50	28510.47
Previous year	-0.20	19.32	6890	6933			0.00	4013616.95
All Other Miscellaneous	4763.86	43794.03	258746	1514017	443.92	3242.94	47884667.48	395007653.67
Previous year	4319.94	40551.09	71574	1879243			0.00	337166294.20
Grand Total	58549.27	601343.57	1514988	10932629	6330.38	50460.30	4479165837.15	9202322464.94
Previous year (Total)	52218.89	550883.27	1392207	11182218				1540788723.00

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
509.40	5792.91	15559	93993	656.68	2947.57	0.00	0.00		
326.49	4366.18	6792	119813	544.48	2583.02	0.00	0.00		
186.15	681.31	1169	9486	182.41	687.43	0.00	0.00		
48.51	445.95	-277	7669	-93.02	272.37	0.00	0.00		
1.40	23.94	24	223	10.91	34.94	0.00	0.00		
3.05	9.49	95	3522	73.78	116.37	0.00	0.00		
187.55	705.25	1193	9709	193.32	722.37	0	0		
51.56	455.44	-182	11191	-19.24	388.74	0	0		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	1.21	1.21	0.00	0.00		
312.48	1447.60	291	5955	126.65	980.29	-197.00	0.00		
123.07	848.64	73	6173	94.32	779.43	0.00	0.00		
1197.50	9713.55	28494	358485	296.52	5057.90	1661.00	15655.00		
1706.16	11259.81	40058	445613	-2115.81	7703.29	-27313.00	25057.00		
699.56	5485.90	19831	182367	-1179.94	3763.46	-280984.00	28145.00		
832.55	7706.02	32954	382506	-316.45	3561.33	198229.00	475280.00		
1897.06	15199.45	28494	358485	-883.42	8821.36	-279323	43800		
2538.71	18965.83	40058	445613	-2432.26	11264.62	170916	500337		
42.03	389	106	4028	68.31	380	-1751.00	12525		
74.47	341	-273	3336	-45.35	199	15273.00	48849		
43.71	53	75	280	9.14	18	0.00	0		
16.53	23	132	178	13.07	22	0.00	0		
-0.40	23	-1	5	1.18	32	0.00	0		
-0.95	0	-1	0	1.17	1	0.00	0		
26.54	335	-5531	4420	53.93	178	4089.00	4682		
78.96	372	557	4359	69.69	275	20.00	111		
111.88	800.61	-5351	8733	132.56	608.49	2338	17207		
169.01	736.24	415	7873	38.58	497.58	15293	48960		
-2646.34	853.75	4176	35552	-361.46	378.21	47169	460373		
76.79	662.29	4662	33008	1234.80	1543.95	25054837	25610339		
498.63	2822.07	-346771	376721	327.32	3423.68	51837	3024489	992906	4801110
312.49	4032.74	9103	94322	500.76	3066.09	126187	634463	0	3446399
-2.14	30.08	800	1979	3.37	32.65	6708	22500	-24907	43241
5.51	29.59	-131	821	4.26	56.87	388	1703	0	18260
496.49	2852.15	-345971	378700	330.69	3456.33	58545	3046989	967999	4844351
318.00	4062.33	8972	95143	505.02	3122.96	126575	636166	0	3464659
0.00	0.00	0	0	0.00	0	0	0		
0.00	0.00	0	0	0.00	0	0	0		
0.00	0.00	0	0	0.00	0	0	0		
0.00	0.00	0	0	0.00	0	0	0		
1519.31	8325.85	-32636	409387	644.05	3368.74	150478	6323807		
1529.89	9335.14	110155	409425	478.52	2886.92	143538	5593687		
2387.83	35977.57	-334245	1300514	839.07	21283.36	-20990	9892176		
5133.52	39432.09	170945	1128239	445.43	23068.43	25511159	32389489		

Name of the Insurer: *The Oriental Insurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	7389.13	57503.00	61747	512547			9059710.45	57820306.92
Previous year	2554.10	43651.00	59167	442048			0.00	0.00
Marine Cargo	2159.71	18342.00	18214	172897			4263639.86	28382710.62
Previous year	1774.53	16724.00	22786	182588			0.00	0.00
Marine Hull (Including Onshore & Offshore oil energy)	4059.43	20703.00	399	4583			1934559.24	5352466.31
Previous year	2329.19	16529.00	428	7230			0.00	0.00
Marine (Total)	6219.14	39045.00	18613	177480	0.00	0.00	6198199.10	33735176.93
Previous year (Total)	4103.72	33253.00	23214	189818	0.00	0.00	0.00	0.00
Aviation	675.59	9208.00	45	423			133386.43	5416385.12
Previous year	-142.94	9007.00	1195	10210			0.00	0.00
Engineering	5181.39	28180.00	4597	41703			2347744.21	11084558.93
Previous year	5100.53	26299.00	3739	48575			0.00	0.00
Motor Own Damage	8885.24	86839.00	462794	4668526			5448.78	48263.47
Previous year	2311.67	80334.00	527651	3844982			0.00	0.00
Motor Third party	7447.44	74180.00	637529	6431962				
Previous year	10976.73	68719.00	266490	1915374				
Motor (Total)	16332.68	161019.00	637529	6431962	0.00	0.00	5448.78	48263.47
Previous year (Total)	13288.40	149053.00	527651	3844982	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability	512.62	5666.00	5083	58347			96.04	932.06
Previous year	726.03	5050.00	5766	53963			0.00	0.00
Public Liability	17.95	110.94	64	466			33713.27	932401.77
Previous year	177.84	1266.00	246	7688			0.00	0.00
Product Liability	42.97	512.96	12	140			0.00	81326.01
Previous year	30.00	1800.00	62	1922			0.00	0.00
Other Liability Covers	339.03	3694.85	2835	28625			525619.20	735361.33
Previous year	160.00	170.00	308	9611			0.00	0.00
Liability (Total)	912.57	9984.75	7994	87578	0.00	0.00	559428.51	1750021.17
Previous year (Total)	1093.87	8286.00	6382	73184	0.00	0.00	0.00	0.00
Personal Accident	814.00	10112.00	105737	1101729			82169.79	1798168.43
Previous year	6158.02	14730.00	59975	439687			0.00	0.00
Medical Insurance	13916.27	105560.98	92969	722757			9220.13	105970.92
Previous year	7730.06	69845.00	97094	647934			0.00	0.00
Overseas Medical Insurance	43.02	789.68	1072	22256			0.00	0.00
Previous year	270.00	1500.00	8136	93317			0.00	0.00
Health (Total)	13959.29	106350.66	94041	745013	0.00	0.00	9220.13	105970.92
Previous year (Total)	8000.06	71345.00	105230	741251	0.00	0.00	0.00	0.00
Crop Insurance	0.00	0.00	0	0			0.00	0.00
Previous year	0.00	0.00	0	0			0.00	0.00
Credit Guarantee	0.00	0.00	0	0			0.00	0.00
Previous year	0.00	0.00	0	0			0.00	0.00
All Other Miscellaneous	6522.34	50472.59	148917	1164827			51300.44	7662248.43
Previous year	-1483.74	40433.00	237098	1828244			0.00	0.00
Grand Total	58006.13	471875.00	1079220	10263262	0.00	0.00	#####	#####
Previous year (Total)	38672.02	396057.00	1023651	7617999	0.00	0.00	0.00	0.00

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
430.92	3019.47	9896	73113	2089.99	4659.57	0	0		
460.81	936.45	1073	22331	34.30	187.01	0	0		
61.51	607.85	725	6210	527.25	1073.59	0	0		
38.72	331.92	87	4560	3.43	21.10	0	0		
6.92	65.10	177	1514	332.74	390.92	0	0		
0.16	20.69	0	0	0.00	0.00	0	0		
68.43	672.95	902	7724	859.99	1464.51	0	0		
38.88	352.61	87	4560	3.43	21.10	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
213.69	1112.16	765	5069	963.06	1861.00	0	0		
85.79	861.18	332	6390	3.63	17.85	0	0		
1362.18	6555.83	71116	662405	2614.71	13934.60	0	0		
1058.65	5480.50	19391	474177	106.67	652.31	0	0		
1247.66	5527.03	100190	915444	2078.75	12486.16	408443	10212741		
2682.63	3529.49	11429	193454	94.15	370.67	0	52109409		
2609.84	12082.86	100190	915444	4693.46	26420.76	408443	10212741		
3741.28	9009.99	19391	474177	200.82	1022.98	0	52109409		
71.68	605.34	848	8517	120.59	654.20	15	94		
8.78	124.00	133	6839	15.28	216.33	42	16527		
1.61	4.81	10	23	2.49	8.58	0	0		
1.44	40.52	25	146	0.13	29.26	0	0		
0.00	9.81	0	7	9.81	19.62	0	0		
7.05	29.19	11	22	0.00	0.00	0	0		
23.96	138.16	259	1744	46.21	160.67	2546	151070		
0.12	11.55	10	151	0.13	5.04	0	0		
97.25	758.12	1117	10291	179.10	843.07	2561	151164		
17.39	205.26	179	7158	15.54	250.63	42	16527		
123.02	1114.82	24032	195530	281.52	1273.87	12145	1057738		
50.38	590.42	1984	26482	199.54	1593.51	963	8096095		
329.19	2320.36	6003	34998	2327.07	4318.67	801	272329		
110.54	961.36	20836	346351	320.58	2566.34	24988	655069		
1.96	16.98	20	377	11.65	26.68	15	2298		
0.00	0.00	0	0	0.00	0.00	3442	3442		
331.15	2337.34	6023	35375	2338.72	4345.35	816	274627	0	0
110.54	961.36	20836	346351	320.58	2566.34	28430	658511	0	0
0.00	9.29	0	0	0.00	0.00	0	0		
7.83	24.95	4916	10109	0.00	100.25	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
1092.39	13392.99	54825	319631	1467.17	13885.69	5265	4208134		
735.84	16186.36	28444	535315	450.80	4935.32	99625	5785071		
4966.69	34500.00	197750	1562177	12873.01	54753.82	429230	15904404	0	0
5248.74	29128.58	77242	1432873	1228.64	10694.99	129060	66665613	0	0

Name of the Insurer: *United India Insurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	7946.00	64793.00	238454	962488	1165.65	7513.65	12754414	76640325
Previous year	6780.35	57279.35	213822	921848	2290.54	4849.54	10883387	65429692
Marine Cargo	5629.00	27568.16	134264	405099	2347.47	5408.63	11951168	46006151
Previous year	3281.53	22159.53	109551	367384	539.26	2949.62	7180591	37936321
Marine Hull (Including Onshore & Offshore oil energy)	1476.00	17628.96	7189	19127	951.60	6095.56	527143	4548919
Previous year	524.40	11533.40	6335	16263	-208.81	659.83	169052	2587392
Marine (Total)	7105.00	45197.12	141453	424226	3299.07	11504.19	12478311	50555070
Previous year (Total)	3805.93	33692.93	115886	383648	330.45	3609.45	7349643	40523713
Aviation	2194.45	3001.82	952	1262	464.36	-220.43	329200	421741
Previous year	1730.09	3222.25	108	1182	1332.71	609.61	254500	405409
Engineering	6001.32	30643.00	18455	137971	3185.72	5657.40	2597974	10063573
Previous year	2815.60	24985.60	4218	105296	819.13	3317.13	1247386	7995557
Motor Own Damage	4706.15	96374.00	575273	5200449	9007.55	20497.40	667778	9657885
Previous year	-4301.40	75876.60	464290	4533622	513.74	5126.74	-535960	6393686
Motor Third party	13583.40	85339.00	868936	6801314	-5849.25	4867.35		0
Previous year	19432.65	80471.65	706597	6996581	-359.64	7731.36		0
Motor (Total)	18289.55	181713.00	868936	6801314	3158.30	25364.75	667778	9657885
Previous year (Total)	15131.25	156348.25	706597	6996581	154.10	12858.10	-535960	6393686
Workmen's compensation / Employer's liability	1004.03	5187.88	21886	77989	38.64	318.94	49373	49373
Previous year	965.39	4868.94	14891	75179	-239.75	515.37	0.00	0
Public Liability	231.48	912.26	2702	4922	27.70	-98.63	46296	137334
Previous year	203.78	1010.89	683	7829	70.99	125.59	37051	151034
Product Liability	44.45	468.37	273	2566	15.63	31.66	8846	67264
Previous year	28.82	436.71	216	2488	12.04	38.04	5982	63816
Other Liability Covers	474.81	2574.14	2280	28321	-258.21	22.92	144460	606727
Previous year	733.02	2551.22	4978	26540	582.46	770.64	218800	599724
Liability (Total)	1754.77	9142.65	27141	113798	-176.24	274.89	248974	860698
Previous year (Total)	1931.01	8867.76	20768	112036	425.74	1449.64	261832	814574
Personal Accident	2518.75	10916.88	237266	758555	-4958.99	-2788.48	5475543	24528399
Previous year	7477.74	13705.36	262188	651274	4696.32	3623.00	17804143	33550246
Medical Insurance	18235.14	118250.05	1894611	3129356	3203.09	34846.86	1679110	11466050
Previous year	15032.05	83403.19	1736428	2811523	-993.54	14459.57	1614613	9731074
Overseas Medical Insurance	-760.31	7363.95	11120	123982	-960.35	695.05	-49693	889243
Previous year	200.04	6668.90	10828	114819	2969.17	6118.06	13126	767235
Health (Total)	17474.83	125614.00	1905731	3253338	2242.74	35541.91	1629417	12355294
Previous year (Total)	15232.09	90072.09	1747256	2926342	1975.63	20577.63	1627739	10498309
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0	0
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0
Credit Guarantee	0.00	0.00	0	0	0.00	0.00	0	0
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0
All Other Miscellaneous	5449.45	52710.64	285559	1955002	13582.08	13106.80	5848027	12474563
Previous year	-8132.63	39603.84	498916	2079407	-2311.88	2927.64	0.00	6077248
Grand Total	68734.12	523732.12	4299220	19608403	21962.69	95954.69	42029639	197557548
Previous year (Total)	46771.43	427777.43	4034049	18711236	9712.74	53821.74	38892670	171688434

* Wherever applicable

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
88.26	5640.63	91447	234279	0.00	0.00	0	0		
76.74	4541.97	90997	222214	0.00	0.00	0	0		
210.81	1002.47	6672	28021	0.00	0.00	0	0		
27.28	919.48	9651	27084	0.00	0.00	0	0		
112.54	203.97	85	1514	0.00	0.00	0	0		
0.00	85.01	0	1274	0.00	0.00	0	0		
323.35	1206.44	6757	29535	0.00	0.00	0	0		
27.28	1004.49	9651	28357	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.05	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
263.51	1711.38	2806	24643	0.00	0.00	0	0		
148.98	1708.38	1023	18542	0.00	0.00	0	0		
256.53	23287.64	159548	923140	0.00	0.00	0	0		
-105.58	18661.37	126298	804306	0.00	0.00	0	0		
99.53	12611.61	189974	1174728	0.00	0.00	0	0		
-71.94	7968.79	207879	1253654	0.00	0.00	0	0		
356.06	35899.24	189974	1174728	0.00	0.00	0	0		
-177.52	26630.15	207879	1253654	0.00	0.00	0	0		
75.75	494.81	4934	14993	32.44	879.84	220	57496		
34.95	391.33	3359	13094	11.56	783.94	345	48895		
0.00	27.72	0	739	0.00	0.00	0	0		
0.00	14.60	0	375	0.00	0.00	0	0		
0.00	8.89	0	19	0.00	0.00	0	0		
0.00	0.80	0	15	0.00	0.00	0	0		
0.00	138.78	-4	1937	0.00	0.00	0	0		
0.00	-2.07	0	1508	0.00	0.00	0	0		
75.75	670.20	4930	17688	32.44	879.84	220	57496		
34.95	404.66	3359	14992	11.56	783.94	345	48895		
758.28	3300.73	58514	123873	152.02	4159.91	3199	972371		
61.97	2946.53	23129	80343	115.18	3615.31	2891	851639		
4553.01	9138.84	527677	621761	389.93	9121.20	-1347160	9891754	27359	8359070
22.89	3006.03	418837	503428	348.11	3784.26	218962	676636	25085	200932
17.46	273.44	306	4885	-0.89	0.00	-45	0	79	119303
5.20	196.93	204	3559	0.00	0.00	0	0	331	7155
4570.47	9412.28	527983	626646	389.04	9121.20	-1347205	9891754	27438	8478373
28.09	3202.96	419041	506987	348.11	3784.26	218962	676636	25416	208087
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
2997.67	18368.24	142198	1591180	2762.35	12104.82	2666	269309		
926.69	12898.03	141267	1328240	2525.36	10175.77	1366076	3481849		
9433.35	76209.15	1184157	4745713	3335.85	26265.82	-1341120	11190930		
1127.18	53337.18	1022644	4257635	3000.21	18359.27	1588274	5059019		

Name of the Insurer: *Universal Sampo*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	616.69	4215.48	12702	96453	112.99	3150.53	802848.96	4664616.90
Previous year	503.70	1064.95	11364	22483	503.70	1064.95	536890.54	1055892.40
Marine Cargo	18.54	384.06	176	1003	6.80	332.95	182199.29	2473871.69
Previous year	11.74	51.11	65	128	11.74	51.11	113639.32	232743.51
Marine Hull (Including Onshore & Offshore oil energy)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine (Total)	18.54	384.06	176	1003	6.80	332.95	182199.29	2473871.69
Previous year (Total)	11.74	51.11	65	128	11.74	51.11	113639.32	232743.51
Aviation	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Engineering	18.54	322.43	159	883	-41.10	192.51	38527.33	363578.82
Previous year	59.64	129.92	77	124	59.64	129.92	71479.85	86714.32
Motor Own Damage	1221.34	6166.38	62544	235016	1086.19	5773.92	-40505.73	509187.92
Previous year	135.15	392.46	2912	7696	135.15	392.46	16995.13	33561.68
Motor Third party	800.00	1743.61	0	0	800.00	1743.61		
Previous year	0.00	0.00	0	0	0.00	0.00		
Motor (Total)	2021.34	7909.99	62544	235016	1886.19	7517.53	-40505.73	509187.92
Previous year (Total)	135.15	392.46	2912	7696	135.15	392.46	16995.13	33561.68
Workmen's compensation / Employer's liability	20.93	54	35	316	15.91	47.62	-18389	11129
Previous year	5.02	6.67	11	20	5.02	6.67	243.22	513.64
Public Liability	0.00	6.01	0	7	0.00	4.33	0	5005
Previous year	0.00	1.68	0	2	0.00	1.68	0.00	560.10
Product Liability	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Other Liability Covers	-2	17	0	31	-2.39	16.71	0	5774
Previous year	0	0	0	0	0	0	0	0
Liability (Total)	18.54	77.01	35	354	13.52	68.66	-18389.37	21908.08
Previous year (Total)	5.02	8.35	11	22	5.02	8.35	243.22	1073.74
Personal Accident	18.49	982.95	422	2401	22.86	910.47	93253.25	10810879.64
Previous year	-4.37	72.48	260	548	-4.37	72.48	-13389.17	653598.32
Medical Insurance	125.65	1740.02	4384	36184	0.10	1415.82	8712.60	111863.52
Previous year	125.55	324.20	2460	4524	125.55	324.20	5245.27	17061.19
Overseas Medical Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Health (Total)	125.65	1740.02	4384	36184	0.10	1415.82	8712.60	111863.52
Previous year (Total)	125.55	324.20	2460	4524	125.55	324.20	5245.27	17061.19
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Credit Guarantee	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
All Other Miscellaneous	576.20	3303.98	22297	146629	343.98	2344.10	480408.33	1855063.12
Previous year	232.22	959.88	18240	49924	232.22	959.88	117083.87	449067.21
Grand Total	3413.99	18935.93	102719	518923	2345.34	15932.58	1547054.64	20810969.67
Previous year (Total)	1068.65	3003.35	35389	85449	1068.65	3003.35	848188.03	2529712.38

* Wherever applicable

(Premium in Rs Lakhs)

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
186.66	1320.96	6920.00	47907.00	0	0.00	0	0		
377.19	377.19	13618.00	13618.00	0	0.00	0	0		
186.66	1320.96	6920	47907	0.00	0.00	0	0	0	0
377.19	377.19	13618	13618	0.00	0.00	0	0	0	0

non-life insurance

Name of the Insurer: Agriculture Insurance Company of India Ltd.

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)								
Previous year (Total)								
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)								
Previous year (Total)								
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)								
Previous year (Total)								
Personal Accident								
Previous year								
Medical Insurance								
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)								
Previous year (Total)								
Crop Insurance	9676.21	151861.53						
Previous year	7149.32	81502.02						
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total	9676.21	151861.53						
Previous year (Total)	7149.32	81502.02						

* Wherever applicable

Name of the Insurer: Apollo Munich Health Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident	51.51	426.45	3477	20785	51.51	426.45	32513.75	1127577.93
Previous year	114.47	245.60	4053	10279	114.47	245.60	1985703.26	2214037.17
Medical Insurance	1350.26	10194.94	35818	1279443	1350.26	10194.94	96263.44	967892.84
Previous year	443.39	4235.52	6854	28150	443.39	4235.52	32651.50	333072.38
Overseas Medical Insurance	29.40	447.98	711	21758	29.40	447.98	101787.75	1804894.25
Previous year	34.91	199.82	1967	11420	34.91	199.82	134387.50	746833.50
Health (Total)	1379.66	10642.91	36529	1301201	1379.66	10642.91	198051.19	2772787.09
Previous year (Total)	478.30	4435.34	8821	39570	478.30	4435.34	167039.00	1079905.88
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	16.57	396.50	16422	392770	16.57	396.50	82110.00	1963386.00
Previous year	29.13	214.18	28943	216404	29.13	214.18	144720.00	1081920.00
Grand Total	1447.73	11465.87	56428	1714756	1447.73	11465.87	312674.94	5863751.02
Previous year (Total)	621.90	4895.12	41817	266253	621.90	4895.12	2297462.26	4375863.05

* Wherever applicable

Name of the Insurer: *Export Credit Guarantee Corporation of India Ltd*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident								
Previous year								
Medical Insurance								
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Crop Insurance								
Previous year								
Credit Guarantee	8200	81371	1477	13405	286	6904	358600	4039944
Previous year	7914	74467	1642	14003	17	7528	335253	3547986
All Other Miscellaneous								
Previous year								
Grand Total	8200.09	81371.40	1477	13405	285.85	6904.24	358599.69	4039944.32
Previous year (Total)	7914.24	74467.16	1642	14003	16.56	7528.35	335252.64	3547986.07

* Wherever applicable

(Premium in Rs Lakhs)

FOR AND UP TO THE MONTH OF MARCH, 2010

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		

Name of the Insurer: *Star Health and Allied Insurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)	0.00	0.00			0.00	0.00		0.00
Previous year (Total)	0.00	0.00	0		0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident	79.87	1050.12	14555	109430	31.96	-596.65	114321.70	933486.23
Previous year	47.91	1646.77	76078	128336	-22.59	20.55	64890.40	645468.20
Medical Insurance	5719.58	95767.53	72832	537049	4292.19	47271.69	140505.80	30067465.55
Previous year	1427.39	48495.84	13144	252645	1068.04	50005.09	12373270.36	36086272.89
Overseas Medical Insurance	85.99	785.01	2636	25337	58.41	397.33	212056.34	3815305.36
Previous year	27.58	387.68	-1029	11109	4.84	232.19	211839.69	1048052.05
Health (Total)	5805.57	96552.54	75468	562386	4350.60	47669.02	352562.14	33882770.91
Previous year (Total)	1454.97	48883.52	12115	263754	1072.88	50237.28	12585110.05	37134324.94
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	18.76	401.16	6637	142703	-15.51	-54.62	66370	1427030.00
Previous year	34.27	455.78	11998.00	163762.00	-108.78	-100.38	119980.00	1637620.00
Grand Total	5904.20	98003.82	#VALUE!	#VALUE!	4367.05	47017.75	#VALUE!	36243287.14
Previous year (Total)	1537.15	50986.07	100191	#VALUE!	941.51	50157.45	12769980.45	39417413.14

* Wherever applicable



“তিন সপ্তাহ আগে ক্রেইমের সব কাগজপত্র পাঠিয়ে দিয়েছি... ওরা টাকাটা তাড়াতাড়ি পাঠাবে তো?”

“নিশ্চয় পাঠাবে। কাগজপত্র সব ঠিকঠাক থাকলে ওদের 30 দিনের মধ্যে ক্রেইম মেটাতে হবে। সেটাই নিয়ম।”

ইন্সিওরেন্স রেগুলেটরি অ্যান্ড ডেভেলপমেন্ট অথরিটি (আইআরডিএ), ভারতে বিমা কোম্পানিগুলির তত্ত্বাবধানকারী সংস্থা, পলিসিধারকদের স্বার্থ রক্ষা করে। আইআরডিএ কর্তৃক নির্দিষ্ট নিয়মগুলির মধ্যে আছে :

- সংশ্লিষ্ট কাগজপত্র প্রাপ্তির 30 দিনের মধ্যে বিমা কোম্পানিকে ক্রেইমের অর্থপ্রদান করতে হবে, অথবা ন্যায্য কারণ দেখিয়ে প্রশ্ন তুলতে হবে।
- প্রোপোজাল গ্রহণের 30 দিনের মধ্যে বিমা কোম্পানিকে প্রোপোজাল ফর্মের একটি কপি সম্ভাব্য পলিসি ধারককে বিনামূল্যে দিতে হবে।
- বিমা কোম্পানিকে প্রোপোজাল প্রাপ্তির 15 দিনের মধ্যে তা প্রক্রিয়াকরণ ও জ্ঞাপন করতে হবে।
- প্রয়োজনীয় সমস্ত কাগজপত্র জমা করার পরেও যদি ক্রেইমের নিষ্পত্তি করতে দেরি হয়, বিমা কোম্পানির নির্দিষ্ট হারে সুদ দেওয়ার দায় থাকবে।
- জীবন বিমা'র পলিসিধারকের 15 দিনের “ফ্রি লুক পিরিয়ডের” অধিকার থাকবে, (পলিসি প্রাপ্তির তারিখ থেকে) পলিসি বাতিল করার জন্য।
- পলিসিধারকদের চিঠিপত্রের জবাব বিমা কোম্পানিকে প্রাপ্তির 10 দিনের মধ্যে দিতে হবে।



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events

14 – 16 June 2010 Venue: NIA, Pune	Cyber Liability By <i>National Insurance Academy</i>
28 June – 03 July 2010 Venue: NIA, Pune	Effective Claims Management By <i>National Insurance Academy</i>
05 – 07 July 2010 Venue: NIA, Pune	Insurance Management Programme for Industrial Customers By <i>National Insurance Academy</i>
08 – 10 July 2010 Venue: NIA, Pune	Market Intelligence (Life) By <i>National Insurance Academy</i>
13 – 15 July 2010 Venue: London	International Takaful Summit By <i>Takaful House PJSC, Dubai.</i>
22 – 23 July 2010 Venue: Ho Chi Minh City, Vietnam	4th Asian Conference on Microinsurance By <i>Asia Insurance Review, Singapore</i>
15 – 17 July 2010 Venue: NIA, Pune	Reinsurance Management By <i>National Insurance Academy</i>
19 – 21 July 2010 Venue: NIA, Pune	Rural & Micro-insurance By <i>National Insurance Academy</i>
30 July 2010 Venue: New Delhi	De-Bottlenecking the Health Insurance Growth By <i>FICCI</i>
02 – 07 Aug 2010 Venue: NIA, Pune	Risk-based Underwriting (Non-life) By <i>National Insurance Academy</i>



Our support of these amendments (financial stability and systemic risk) reflects our commitment to protecting consumers by strengthening proven principles to improve the financial services regulatory structure.

Ms. Jane L. Cline

NAIC President and West Virginia Insurance Commissioner

Corporate governance is not simply about complying with rules or reporting requirements. Boards of directors and senior management need to internalize the values, spirit and purpose behind the rules.

Mr. Goh Chok Tong

Senior Minister, Government of Singapore

The proposed new capital requirements for life insurers are simpler and more risk-sensitive than the current arrangements, as well as easier for all stakeholders to understand and work with in both substance and presentation.

Mr. John Trowbridge

Executive Member, Australian Prudential Regulation Authority

Public opinion has demanded a regulator (to be) able to identify and prevent major problems from occurring in the financial markets. That means increasing our capability across all the financial sectors we are responsible for.

Mr. Ken Hogg

Director, Insurance Sector, FSA, UK

We are pleased to see that Bermuda continues to attract high quality business, looking for experienced business support in a well-regulated environment.

Mr. Jeremy Cox

CEO, Bermuda Monetary Authority

With a vast chunk of the (Indian) population remaining economically downtrodden, the introduction of the micro insurance products will certainly grow in stature during the years to come.

Mr. J. Hari Narayan

Chairman, Insurance Regulatory & Development Authority (India)

