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Extending a Friendly Hand

- Customer Service in Insurance

बीमा विनियामक और विकास प्राधिकरण

आई आर डी ए



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From the Publisher



Management theories abundantly emphasize the fact that once a customer has been brought into a corporate entity's fold, it is much simpler to ensure that he is retained within the books rather than always looking to bring more and more clients afresh. Apart from the complexities of the process, roping in a new client is bound to be more expensive. The adage cannot be truer in any other line of activity than it is in insurance business where the costs of acquisition are disproportionately higher, in addition to the intricacies associated with convincing a prospect.

If there is general consensus on the issue and the statement assumes the proportion of a universal fact, it is intriguing as to why it is so difficult to maintain high levels of business persistency. More often than not, it is the resultant of a large chunk of the clientele dropping out on account of actual or perceived consumer disservice. On several occasions, the heartburn leads to a customer grievance that could eventually result in the consumer seeking legal redressal. The high incidence of customer grievances in the domain of insurance bears silent testimony to the fact that the levels of customer service are not very high and need to be improved.

Managements would do better to identify areas of regular customer discontent and attempt to specifically plug the loopholes in order to arrest the growing trends. An on-going exercise to train both the administrative and the field staff should be on the top of their agenda so that their eagerness to improve customer loyalty is demonstrated explicitly. The observance of customer service meets at regular intervals is a good example of the management's desire to elicit the shortfall in service delivery. However, it should be ensured that they do not end merely in a mundane management exercise but turn out to be genuine platforms for improved service delivery.

Policyholders Services in Insurance is the focus of this issue of the Journal. The scope of services in insurance is very vast; and considering the fact, it is proposed to focus on this very vital aspect of insurance business once again in the next issue.

J. Hari Narayan

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- Management Mantra

One of the most remarkable developments occurring in the domain of financial services in more recent times is the emphasis on customer service. While on one hand, corporate entities have been demonstrating their eagerness on showing how 'customer-oriented' they are; the customers realization of their rights and asserting them has also been a conspicuous feature, on the other. Indeed, this augurs well for the players as they are ever prepared and in a position to defend themselves against possible allegations of disservice. As a natural consequence, one would look for rapid improvement in the levels of efficient customer service. However, recent press reports present a near dismal picture of continuing mis-selling which the report says is rampant in the industry.

To a great extent, the understanding levels of the average customer could play a major role in such an imbalance between the desirable and the reality. On this count alone, it becomes a major responsibility for the players to ensure that all the formalities associated with marketing or selling the product have been properly followed; and that the prospect has been enabled to understand the implications of the contract. Policyholders' servicing begins at the very beginning; and insurers should adopt measures to ensure that the negative trends reported in this area of

operation are reversed. For an industry that is required to make steady progress for the overall growth of the economy, it is essential that such defamatory comments are obliterated altogether.

In insurance business, the need for a regular interaction with the policyholder may not be existent in the normal course, unlike in other financial services - like banking for example, where there may be need for the banker to face the customer even on a daily basis. This factor may put additional onus on the insurers in the sense that whenever a service is required to be rendered, it is done with alacrity and speed. There may even be occasion for the players to be proactive in identifying the impending needs and alert the policyholder accordingly. In any case, there has to be a consistent performance in serving the policyholders; and manifestly, at that.

'Policyholders' Services in Insurance' is the focus of this issue of the Journal. There are innumerable types of services that come up during the contractual period of a policy; and in order that these services are rendered efficiently, it is essential to have in place a robust IT environment to keep pace with time. We open the debate with an article by Mr. Yogesh Nagulpelli and Mr. Subrahmanya Srinivas Gunturi in which they give a vivid account of the workflow solutions that come in handy for

an efficient delivery of policy administration services. In the next article, Dr. G. Gopalakrishna throws light on the importance of rendering efficient policyholder services in order to maintain high persistency levels which are necessary for keeping the confidence levels of the policyholders high and at the same time ensure regular income flow for the distribution personnel. Quite often, it is the deficiency of service that leads to a major heartburn for the policyholder; eventually leading to complaints and grievances. The next two articles by Dr. Ashish Barua and Mr. John Holden emphasize on this aspect of the insurance business; and the authors also talk about how to keep the customer satisfied in order to obviate such a scenario. In the last article of the issue, Mr. N.M. Behera takes up the case of the different reasons for discontent among policyholders; and writes that rendering the service in its true spirit is what separates the chaff from grain.

Considering the huge debate on the vast domain of policyholder services, the **Journal** will focus on 'Policyholder Services' once again next month. Let us look forward to one more episode of an interesting collection.

U. Jawaharlal

Report Card: LIFE

First Year Premium of Life Insurers for the Period ended December, 2011

Sl No.	Insurer	Premium u/w (₹ in Crores)		No. of Policies / Schemes		No. of lives covered under Group Schemes	
		December, 11	Upto December, 11	December, 11	Upto December, 11	December, 11	Upto December, 11
1	Bajaj Allianz	81.71	311.24	40566	66169	73610	18908
	Individual Single Premium	96.42	755.99	75493	640483	991097	176784
	Group Single Premium	21.09	183.96	7	83	46	7294957
2	ING Vysya	0.98	14.41	124	1599	1272	36
	Individual Single Premium	66.20	393.48	22587	161910	177228	0
	Group Single Premium	0.24	1.65	0	0	0	0
3	Reliance Life	24.69	200.19	3012	25352	51691	508352
	Individual Single Premium	107.82	708.19	105896	698109	1368890	196918
	Group Single Premium	1.12	25.14	6	145	157	755048
4	SBI Life	120.81	931.90	9018	72623	92144	15639
	Individual Single Premium	250.74	1158.63	84365	491927	518990	4021
	Group Single Premium	195.39	1548.29	17	115	89	196918
5	Tata AIG	8.50	100.70	617	7617	17074	6876
	Individual Single Premium	48.49	432.72	21577	199275	400578	90782
	Group Single Premium	7.62	49.19	0	5	9	13227
6	HDFC Standard	5.49	91.75	4	66	56	2357
	Individual Single Premium	14.08	154.38	1302	20216	168543	96161
	Group Single Premium	249.15	1666.05	59440	397408	428723	337904
7	ICICI Prudential	7.088	170.98	23	247	136	152854
	Individual Single Premium	8.14	170.98	0	9	39	70
	Group Single Premium	18.39	197.10	947	12211	57933	736396
8	Birla Sunlife	323.37	1812.00	86297	785938	881378	1423487
	Individual Single Premium	4.261	402.11	15	131	113	495406
	Group Single Premium	101.06	702.99	12	33	31	205392
9	Aviva	4.31	60.12	83	1291	27310	31126
	Individual Single Premium	97.68	770.14	80458	589855	794024	74
	Group Single Premium	0.36	4.49	0	1	2	176761
10	Kotak Mahindra Old Mutual	164.17	458.84	44	235	175	693183
	Individual Single Premium	2.52	26.51	633	5393	2790	671
	Group Single Premium	40.28	283.01	14441	100216	131907	693183
11	Max New York	0.07	0.65	0	0	3	209
	Individual Single Premium	45.78	155.98	10	78	108	-117668
	Group Single Premium	28.72	189.47	1910	11012	3342	2320
12	Met Life	38.87	251.73	17018	109614	182999	890710
	Individual Single Premium	11.87	87.23	4	38	4	1036547
	Group Single Premium	9.60	111.92	39	467	497	359582
13	Met Life	26.09	169.34	81	634	1275	40949
	Individual Single Premium	165.43	1008.56	69083	405662	612282	2189935
	Group Single Premium	10.84	73.78	0	14	27	890710
14	Met Life	3.59	36.40	63	678	563	1036547
	Individual Single Premium	55.62	159.71	6942	15228	14931	11548
	Group Single Premium	55.21	266.93	13921	98904	109678	1021471
15	Met Life	0.49	6.08	0	2	5	646
	Individual Single Premium	110.39	211.05	12	349	219	11548
	Group Single Premium	0.49	6.08	0	2	5	1603673

statistics life insurance

13	Sahara Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	12.87 25.35 0.00 0.00	26.49 31.67 0.00 0.01	349 6921 0 0	2814 36228 0 0	5950 37117 0 1	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
14	Shriram Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	13.03 88.85 51.80 6.65	224.04 122.88 51.64 3.63	1762 10213 0 7	16335 73490 0 26	25825 58054 0 7	23517 93404 0 0	215479 378118 0 0	216448 385913 0 0	0 0 0 0
15	Bharti Axa Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.87 117.01 19.88 0.00	3.54 243.95 14.09 0.00	3 7445 0 0	137 69151 1 0	2816 109167 3 0	949 0 0 0	6987 0 0 0	7744 0 0 0	0 0 0 0
16	Future Generali Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	24.42 165.77 0.22 18.83	14.32 245.25 0.10 21.24	633 13503 0 7	3650 100143 1 98	1704 234056 1 69	2773 0 0 0	53 78547 0 0	2241 2018154 0 0	0 0 0 0
17	IDBI Federal Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	70.87 117.28 0.00 11.92	113.34 183.20 0.00 4.89	679 6992 0 0	4957 45833 0 16	12593 63919 0 11	10548 0 0 0	284744 0 0 0	509871 0 0 0	0 0 0 0
18	Canara HSBC OBC Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.08 308.97 2.99 165.16	5.36 494.24 13.16 55.01	0 2927 0 5	1 44899 1 16	254 80695 3 3	70 7673 0 0	906 78653 0 0	7624 42879 0 0	0 0 0 0
19	Aegon Religare Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	12.16 118.07 0.40 0.00	4.50 142.08 0.42 0.00	59 6750 0 0	784 47322 0 0	454 50525 1 0	48 0 0 0	767 0 0 0	959 0 0 0	0 0 0 0
20	DLF Pramerica Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	8.82 58.57 0.00 0.00	0.80 51.10 0.00 0.00	105 9616 0 0	1024 43929 0 0	110 24216 0 0	0 0 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	249.00 162.62 41.05 144.32	198.01 143.46 33.65 13.62	3417 12545 1 5	16973 82037 1 33	13038 47502 2 44	3568 44651 0 0	19045 212100 0 0	19825 157987 0 0	0 0 0 0
22	IndiaFirst Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	181.95 77.68 22.05 137.16	142.45 186.31 8.20 18.77	1408 6019 1 7	14254 38498 3 42	10753 66728 7 11	8094 733729 0 0	23984 972387 0 0	5104 580618 0 0	0 0 0 0
23	Edelweiss Tokio Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.09 3.07 0.08 0.00	0.00 5.36 0.00 0.00	0 661 0 0	2 1968 1 0	300276 5262799 74 3061	620580 2216503 0 0	4543748 15177966 0 0	5006156 35094674 0 0	0 0 0 0
24	LIC Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium Grand Total	8032.26 17142.19 19094.15 7784.84	22061.04 15795.92 14780.53 9081.03	137642 3226943 1634 466	1255884 20404281 14004 3985	3638431 19074065 15899 547	4302169 1540728 0 0	17768866 6301571 0 0	27020588 790328 0 0	0 0 0 0
	Private Total Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	3206.23 10750.65 2906.70 3036.52	4414.72 16245.14 1988.03 2332.43	73650 733868 74 320	300276 5262799 74 3061	585412 7367743 608 3124	620580 2216503 0 0	4543748 15177966 0 0	5006156 35094674 0 0	0 0 0 0
	Grand Total Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	11238.48 27892.84 2200.85 10821.36	26475.77 32041.06 16768.36 11413.46	211292 3960811 1708 786	1556140 25667080 14773 7046	4223843 26441808 16507 3671	4922749 3757231 0 0	22312614 21479537 0 0	32026744 35885002 0 0	0 0 0 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

Penalty

Ref:IRDA/LIFE/ORD/MISC/014/01/2012

Date: 09.01.2012

Personal hearing in the matter of M/s MetLife India Insurance Company Ltd.

Final Order in the matter of M/s MetLife India Insurance Company Ltd.

INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY 3rd Floor, Parishram Bhavan, Basheerbagh, Hyderabad.

In Chair: Sri J Hari Narayan, Chairman, IRDA

A personal hearing was given to M/s MetLife India Insurance Co Ltd (hereafter referred to as Insurer) on August 23, 2011 with regard to the Show Cause notice dt 1st June 2011 issued based on the complaint lodged by Mr Suresh Chukkapalli.

Mr Rajesh Relan, CEO and his team were present. On behalf of IRDA, Mr Kunnel Prem CSO(Life), Mrs Yegnapiya Bharat-JD(CAD), Mr V Jayanth Kumar-JD(Life), Mr DVS Ramesh-DD(Life) and Mr TV Rao DD(CAD) were present.

The findings on the explanations offered by the Insurer to the issues raised in the said Show Cause Notice are as follows:

Issue:

A complaint lodged by Mr Suresh Chukkapalli was received by IRDA regarding non receipt of Policy even after a lapse of 11 months, which was forwarded to the Insurer to resolve the matter. The complainant stated that he applied for a policy of life insurance with the Insurer on 30th March 2007 by paying premium for which no response is

received. From the submissions of the Insurer it is noticed that it postponed the risk for a period of one year, but communicated the same to the applicant vide their letter dt 2nd June 2007 along with refund of proposal deposit, after a gap of 28 days from the date of taking underwriting decision to postpone the proposal and about 62 days from date of proposal. On complainant not accepting the refund, the Insurer submits that it has again refunded the deposit on 10th March 2008, this time along with interest. It has come to the notice of the Authority that the Insurer again approached the complainant and canvassed for 2 proposals of life insurance on 22nd March 2010 and 31st March 2010. From the submissions of the Insurer it is observed that these proposals were declined on 14th May 2010 and the

proposal deposit amounts were refunded on 27th May 2010 after a gap of 13 days from the date of underwriting decision and about 60 days from the date of proposals.

In response to the above referred Show Cause Notice, the Insurer submitted that the decision to postpone the 1st proposal was communicated to the complainant in person and on complainant requesting for a review of its decision, the matter was referred to the Reinsurer, hence, no formal communication was issued to the complainant. Regarding the other two proposals, the Insurer submits that these cases were also referred to the Reinsurer for a review. The Insurer further submits

that the refund cheques issued to the complainant were returned unaccepted and adds that it has done its best to accommodate the interests of the customer.

On the request of the Insurer, the Chairman, IRDA granted a personal hearing on 23rd August 2011.

The Life Insurer during the course of personal hearing submitted that the time taken to refund the proposal deposit was due to review of the underwriting decision on the request of the complainant and also to explore all the available avenues to offer any alternate insurance products. The Insurer also submitted that during the interregnum its officials made attempts to personally meet and apprise the complainant about the status of the proposals and background to postponing the life insurance coverage. The Insurer submits that it has effective systems and procedures in place for refunding the proposal deposits in time on declining/postponing the lives to be insured. For the period April 2011 to August 2011 the Insurer submits that in respect of 98% of declined cases, the proposal deposits were refunded within 3 days.

In order to protect the interests of the customers including the timely commencement of insurance coverage, IRDA has mandated vide Regulation 4(6) of IRDA (Protection of Policyholders Interests) Regulations, 2002 that all

proposals shall be processed by the Insurers with speed and efficiency and all the decisions thereof shall be communicated in writing within a reasonable period not exceeding 15 days from the date of receipt of proposals by the Insurer.

On examining the documents on record and submissions made by the Insurer in the complaint under reference, it is observed that the Insurer did not pay sufficient attention in promptly communicating the underwriting decision in writing as well as in refunding the proposal deposits collected from the complainant within the prescribed

timelines. Grounds cited by the Insurer for the delay in refunding the proposal deposits and communicating in writing the underwriting decision which was already taken, are not considered valid. The delays that have taken place are in violation of Regulation 4(6) of IRDA (Protection of Policyholders Interests) Regulations, 2002.

Decision:

Having regard to the facts of the case, the IRDA is satisfied that there has been negligence on the part of the insurer and consequently imposes a penalty of Rs. 2 (Two) lakhs under Section 102(b) of the Insurance Act, 1938.

The penalty amount of Rs 2 lakhs (Rupees Two Lakhs only) shall be paid within a period of 15 days from the date of receipt of this Order through a crossed demand draft drawn in favour of Insurance Regulatory and Development Authority and payable at Hyderabad which may be sent to Shri Kunnal Prem, C S O (Life) at the Insurance Regulatory and Development Authority, 3rd Floor, Parisrama Bhavan, Basheer Bagh, Hyderabad 500 004.

Sd/-
(J. Hari Narayan)
Chairman

Penalty

Ref:IRDA/Life/Ord/Misc/016 /01/2012

Date:11.01.2012

Personal hearing in the matter of M/s Future Generali Life Insurance Company

Order in the matter of M/s Future Generali Life Insurance Company Limited

Personal Hearing on October 10, 2011 at 03.00 PM

At the office of Insurance Regulatory & Development Authority, 3rd Floor, Parishram Bhavan, Basheer Bagh, Hyderabad

Chaired by Sri J Hari Narayan, Chairman, IRDA

An onsite inspection was conducted at the Hyderabad Branch Office of the captioned Insurer to investigate business by an unlicensed entity - M/s. Insurance For You (Future), hereinafter mentioned as the

Unlicensed Entity. The inspection was conducted from 07/04/2011 to 08/04/2011 at the above branch office. The findings were conveyed to the Insurer vide letter dated 12.5.2011 and response of the Insurer was received vide their letter dated 24.5.2011.

After examining the response, a show-cause notice dated 25.7.2011 was issued to the Insurer. The Insurer while submitting its response vide letter dated 16.8.2011 requested for a personal hearing.

A personal hearing was given to M/s. Future Generali Life Insurance Company Limited (hereafter referred as the Insurer) on 10th October, 2011. Sri Deepak Sood, CEO of the Insurer along with Mr MadanJalan, Compliance Officer was present. On behalf of IRDA, Sri G. Prabhakara, Member (Life), Mr. V. Jayanth

Kumar, Joint Director (Life), Sri RajeshwarGangula, Assistant Director (Corporate Agent) and Sri Sudipta Bhattacharya, Deputy Director were present.

The show cause contained the following:

Issue 1 - The Insurer is not incorporating the agent's details on policy schedule violating the Authority's Circular No. IRDA/CAD/CIR/AGN/137/08/2010 dated 25/08/2010

Decision: While accepting the contention of the Insurer that the policies were being serviced directly by them, it is decided not to press charges against it. The Insurer is however advised to strictly abide by the orders under the above circular.

Issue 2 - The Insurer has allowed various

persons to log in business under a licensed individual agent's code, thereby making provision for payment of commission on business not effected through the individual agent in violation of Section 40(2A) of Insurance Act, 1938

Decision: Taking the Insurer's submission that no commission was paid into consideration, it is decided not to press charges. The Insurer is however advised to strictly abide by the referred provisions of the Act while accepting business from agents.

Issue 3 - It is noticed that unlicensed individuals have solicited business for an entity Insurance For You (Future) that has not been approved by the Authority as

Corporate Agent. This is in violation of Authority's Circular No. IRDA/CIR/010/2003 dated 27/03/2003.

Decision: The Insurer's contention that the business booked by the individual agent was inadvertently categorized under corporate agency is not acceptable. The Insurer has also not been able to explain to the satisfaction of the Authority, the reasons for signing of the Agents Confidential Report by persons other than the agent.

This is a substantive violation where the Insurer has permitted various unlicensed individuals to solicit and procure business through Insurance For You (Future) when the entity itself was not licensed. Taking

into account the seriousness of the violation, a penalty of Rupees Twenty Lakhs is imposed on the Insurer under section 102(b) of the Insurance Act, 1938.

The penalty of Rupees Twenty Lakhs shall be paid within a period of 15 days from the date of receipt of this order through a crossed demand draft drawn in favour of Insurance Regulatory and Development Authority and payable at Hyderabad which may be sent to ShriKunnil Prem, CSO(Life) at the office of Insurance Regulatory and Development Authority, 3rd Floor, Parishramabhavan, Basheer Bagh, Hyderabad 500004.

Sd/-
(J Hari Narayan)
Chairman

Clarification

Ref:IRDA/AGTS/CIR/GLD/017/01/2012

Date: 11.01.2012

STANDARD INSTRUCTIONS AND GUIDELINES APPLICABLE FOR APPROVAL/RENEWAL OF AGENTS TRAINING INSTITUTES

The Authority has issued STANDARD INSTRUCTIONS AND GUIDELINES APPLICABLE FOR APPROVAL/RENEWAL OF AGENTS TRAINING INSTITUTES vide Ref: IRDA/AGTS/CIR/GLD/269/12/2011 dated 7th December 2011.

Pursuant to representations received from different stakeholders, the Authority issues the following Clarifications:

A. As per clause 3 (b) of the guidelines only entities registered as Company under the Companies Act, 1956 and Societies and Trusts registered under Societies Registration Act shall be eligible to apply

for accreditation as ATIs. The following is added in the above clause:

Existing accredited entities other than the Companies/Societies/Trusts have to convert themselves into companies, societies or trusts within 6 months of issue of the above referred guidelines. Prior permission of the Authority is required for Amalgamations/Apportionments in the current entity of business.

B. As per clause 3 (d) of these guidelines, the ATIs shall register themselves with PF Commissioner and comply with the statutory provisions. It is now clarified that for ATIs having less than 20 employees where obtaining the PF membership is not mandatory, the ATIs have to submit proof of permanent employment.

C. Clause 6(A) (4) of the guidelines requires the Associates from Insurance Institute of India (III), Mumbai also to participate in a three day workshop either at NIA, III or IIRM. It has now been decided to exempt Associates from Insurance Institute of India from the above workshop.

D. The Annexure to the guidelines mention that the attendance is to be maintained through biometric system. It has been decided to grant an extension to all insurers/ATIs in this respect and accordingly the revised date for implementing attendance through the biometric system would be 1st April, 2012.

Sd/-
(Suresh Mathur)
Sr. Joint Director

The Chairman/CEOs of all the insurers

Ref:IRDA/F&I/CIR/AML/028/01/2012

Date:27.01.2012

AML/CFT guidelines

Attention is drawn to clause 3.1.1 (xiv) of the Master Circular 2010 on AML/CFT guidelines which reads as under:

Insurance companies are required to conduct detailed due diligence while taking insurance risk exposure to individuals/entities connected with countries identified by FATF as having deficiencies in their AML/CFT regime Insurance companies have been advised further that while using the FATF Public

Statements being circulated through the insurance councils, insurers should go beyond the FATF statements and consider publicly available information when identifying countries which do not or insufficiently apply the FATF Recommendations.

2. In continuation of the aforesaid stipulations, insurance companies are hereby directed to apply similar measures on countries considered as high risk from terrorist financing or money laundering

perspective based on prior experiences, transaction history or other factors (e.g., legal considerations, or allegations of official corruption).

3. The above requirement shall be implemented with immediate effect. Insurance companies are also advised to amend their AML/CFT policy suitably.

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

Warning

Ref:IRDA/Life/Ord/Misc/ 031 /02/2012

Date:01.02.2012

Personal hearing in the matter of M/s IDBI Federal Life Insurance Company Limited

Insurance Regulatory & Development Authority,3rd Floor, Parishram Bhavan, Basheer Bagh, Hyderabad

In chair Sri J Harinarayan, Chairman, IRDA

A personal hearing was granted to M/S IDBI Federal Life Insurance company (hereinafter referred to as the Insurer) on 19.4.2011 with regard to the Show Cause Notice issued by the authority on 1.11.2010 in the matter of delayed settlement of death claims on the life of Mr.Laxman Tomsoy. On behalf of the Authority Sri G. Prabhakara, Member (Life), Sri Kunnel Prem, CSO (Life), Smt. Yegna Priya Bharath, JD (CAD) and Sri V. Sai Kumar, OSD (Life) were present. IDBI Federal was represented by Sri. G. V. Nageswara Rao, MD & CEO and Sri. Sudhakar Shetty, Head, Compliance dept.

The Issue:

a. The two death claims on the life of

Mr.Laxman Tomsoy were not settled even after a period of 13 months.

b. The Insurer submitted that the claimant had become inaccessible to the Insurer having shifted to a remote naxal infested tribal hamlet in Jharkand after filing the claim. Their claim investigation agencies could access the claimant only after a year of lodgement of the claim.

The Authority pointed out that the deceased life insured was a employee of the Indian railways and had lived, worked and died while on duty in Lucknow. Death occurred accidentally while repairing a rail engine at Lucknow. Therefore, no suspicion of foul play could have been inferred. The employer being a government organisation, could have provided copies of all the necessary evidence and documentation pertaining to the death of the life assured. Besides which, the policies did not have any accidental death benefit rider. The Police inquest report, FIR, Panchnama and post-mortem reports called for by the Insurer

therefore were unnecessary to establish the death of the life assured. The Insurer could have settled the claims by asking the claimant to produce the policy bond or a sworn affidavit if the bond was missing.

The insurer had nothing much to say on the matter and agreed that it was at fault and promised to tighten its systems to avoid such lacunae in future.

Decision:

The Authority has considered the relevant documents and evidences available in these death claims. It has noted the fact that the Insurer has settled the death claims with interest for the delay. The Authority advises the insurer to strictly adhere to the time limits stipulated under Proviso 8 of the (Protection of Policy Holders Interests) Regulations 2002 in Investigation and settlement of all Death claims in future.

Sd/-
(J. Hari Narayan)
Chairman

Exposure Draft

Ref 70/IRDA/HLT/Coverage of HIV/2011-12

Date:02.02.2012

The Authority has received representations from various stakeholders including public and Government Authorities, to provide insurance cover to people living with HIV and to people in general including doctors and nurse etc who vulnerable to HIV/AIDS, in Health Insurance policies.

On examining the issues, the Authority in exercise of its powers vested under Sec 14(2) of the IRDA, 1999 hereby issue this Exposure Draft (as attached) to provide insurance cover for Persons living with HIV and people vulnerable to HIV/AIDS, under health insurance policies of both Life and Non-Life insurance companies.

The Authority proposes implementation of these orders to be effective from 1st October, 2012 and requests comments on the Exposure Draft within 30 days

To
All Life insurers and General insurers

Re: People Living with HIV/AIDS (PLHS)

- 1 All Life insurers and General insurers shall put-in place an underwriting policy on health insurance coverage for persons suffering from HIV
- 2 The policy shall indicate the eligibility criteria at the outset to consider the proposal for health insurance cover to PLHA in accordance with such underwriting policy. The Underwriting policies amongst others shall specifically address:

2.1 Persons who are not yet showing

AIDS symptoms but are in stage 1 or 2 of HIV infection;

- 2.2 Compliance with the treatment protocols of the medication and in according to a very strict timetable;
- 2.3 CD4 count in excess of 350;
- 2.4 CD4% greater then 23%;
- 2.5 To be p24 antigenemia negative
- 2.6 Other conditions if any

3 The health insurance cover for PLDA shall not be denied if the eligibility criteria as per the underwriting policy are satisfied.

4 The underwriting policy shall provide clear guidelines on PLHA:

- 4.1 all the possible risks that can be considered for underwriting and
- 4.2 all those risks which would be denied.

5 The underwriting policy shall also clearly indicate the specific loadings for PLHA, if any, with reference to the different stages of the disease, to provide the health insurance cover. The specific loadings, if any, shall be cover and above the actual premium of a product. These loadings shall be as filed and approved by the Authority under File and use procedure within a period of three months from the date of this circular.

6 The insurer shall also design suitable proposal form to capture necessary information to underwrite the

proposal in accordance with the underwriting policy.

7 With respect to persons who are HIV negative at outset, and subsequently found to be HIV positive, the insurers shall not reject/deny:

- 7.1 any claim, on such grounds;
- 7.2 renewal, however, suitable loading may be charged, which is filed and approved under the file and use procedure.

8 Products covering HIV/AIDS for persons who are HIV negative at inception may design products such as:

- 8.1 HIV/AIDS as a one of the critical illness;
- 8.2 Covering HIV/AIDS by providing a lump sum on becoming HIV positive, as a rider
- 8.3 Lump sum amount offered to be paid as annuity for life in the event of the insured becoming HIV positive during the term of the contract;
- 8.4 AIDS Deaths covered as an insured event under health insurance cover;
- 8.5 Covering HIV/AIDS under group schemes catering to various segments of population.

Sd/-
(J Hari Narayan)
Chairman

Order

Ref: IRDA/HLT/MISC/ORD/302/02/2012

Date:02.02.2012

Sub: Constitution of Health Insurance Forum

The health insurance segment of the insurance industry has been growing significantly. The IRDA has underpinned the growth of his market by registration of standalone health insurance companies, by nurturing the development of Third Party Administrators (TPAS) to enable a cashless system of claim settlement. It has also constituted Working Groups with major representatives such as FICCI and CII for suggesting measures to further improve the efficiency of the health insurance system in India. In the background of these developments, the IRDA is of the opinion that is necessary to create a Forum for an effective dialogue between service providers (hospitals), the insurance companies, Third party Administrators and the consumers in general, which body could perform a consultative role in order to enable the evolution of a regulatory structure which would better meet the needs of this growing sector taking into account the interests of all stakeholders.

2 The IRDA has approved the constitution of a Health Insurance Forum vide its Resolution No. 69:5 dated 13th September 2011. In furtherance of the above mentioned Resolution, the following order is issued under section 14(f) of the IDRA Act 1999.

3 The Forum shall be constituted as follows:

I. CEOs of three insurance companies carrying on health insurance business in India from amongst the general insurance companies;

II. CEO s of three life insurance companies offering health cover from amongst the life insurance companies;

III. One representative from standalone health insurance companies;

IV. One representative from ministry of Health & Family Welfare;

V. One representative from Directorate General (Law Welfare), Ministry of Labor & Employment dealing with RSBY;

VI. Chairman of NABH;

VII. Superintendents of two Government hospitals/or other representative as state or central government may decide, which have been providing services under Government sponsored schemes such as RSBY or other Schemes sponsored by State Governments;

VIII. CEO s/Representatives of 12 service providers from amongst those which have been providing health services to insurance policyholders selected in such a manner as to cover general hospitals, specialty hospitals and nursing homes having regard to the geography of India;

IX. CEO s of two Third Party Administrators;

X. The chairmen of the Advisory Groups, if any on Health Insurance of the CII and FICCI;

XI. One nominee of the IRDA representing consumers;

XII. ED/JD (Health) of IRDA;

4 The member (Non-Life), IRDA shall be the Chairman of the Forum and Ms. Nimisha Srivastava, Senior Assistant Director, IRDA shall be the Convener and Member Secretary of the Forum.

5 The functions of the Health Insurance Forum shall be:

i) to aid, advise and assist the IRDA in evolving regulations relating to health insurance business in India;

ii) to facilitate the creation and adoption of standard processes and definitions in the insurance industry and in health insurance administration and in health services where applicable;

iii) to aid, advise and assist the IRDA in collecting, maintaining and disseminating data required for the efficient conduct of health insurance business in India;

iv) to act as a consultative forum as between insurance companies and other stakeholders;

v) to aid, advise and assist the IRDA in developing regulations for rendering Health Insurance Forum more effective;

6 It is the intention of the IRDA to extend the membership of the Forum to cover, in an appropriate manner, all stakeholders relevant to the health insurance business and to enable this Forum to evolve into a self-regulatory organization. However, till such time as the architecture of the Forum is fully delineated, the IRDA shall nominate Members of the Forum in all categories mentioned in para 2 above, except those who are members by designation.

7 Till such time as the Forum evolves into a Self Regulated Organisation with its own financial resources, the IRDA will meet the following expenses of the Forum:

i) Travel and accommodation costs of Members of the Forum when attending meetings of the forum.

ii) The cost of arranging a meeting including lunch and refreshments

iii) Secretarial expenses, if any.

8 The Forum is expected to meet at least twice a year and more often if deemed necessary by the Members

9 The members nominated to the Forum shall be in office for a period of two years fro the date of their nomination.

Sd/-
(J Hari Narayan)
Chairman

Aiming High in Delivery

- Policyholders' Services

'Insurance industry in India needs to quickly reverse the trends of low business retention – by scaling up the efficiencies in service delivery, and catch up with global standards' emphasizes U. Jawaharlal.

For a player obsessed with top-line growth, the post-sales service takes the back seat. In such a scenario, the policyholders' services suffer greatly leading to customer disenchantment and a possible withdrawal from the contractual relationship. While the high lapsation ratios in the life insurance business may not be a direct and total outcome of such a phenomenon, whether a reasonably large share among such withdrawals owes its genesis to several elements of disservice or not, is one's guess. If the reputation of the players and a steady consistency in business is what is desired, there must be visible efforts to arrest such trends of insufficient service delivery.

It is often seen that corporates go overboard in advertising their service efficacies—some of them misplaced. Even though such a trend may not be found

normally in the insurance industry, players would do well to be plain-speaking and forthright in claiming their merits. Promising the moon and failing to deliver even the basic services is a perfect recipe for disaster. The aspect is particularly significant in the insurance industry as the average customer may not be highly financially literate; and might get carried away by the lure of the tall talk.

A courteous rendering of the service, however insignificant, is sure to garner the customer's appreciation. Even in case of a request having to be turned down, a well-meant explanation from the staff is bound to be responded to positively. When a delay is imminent, an indication to that effect with a reasonable justification would certainly be appreciated rather than dilly-dallying with lame excuses.

In a domain where it is possible that the consumer is not fully aware of his or her rights, a pro-active stance adopted by the players in conveying to the client the full suite of services due to him or her would go a long way in their service orientation. A mere absence of a complaint should not be taken as a reason for excellence. Several financial services regulators emphasize on this fact; and impose on the players the need to voluntarily offer their services in several areas of insufficient understanding by the customers.

'Policyholders' Services in Insurance' will again be the focus of the next issue of the **Journal**. Looking at the vast scope for policyholders' services and the new trends being observed in service delivery, we look forward to one more collection of interesting articles.

'Policyholders' Services in Insurance'
in the next issue...



Workflow Solutions

- Relevance to Policy Administration

Yogesh Nagulpelli and Subrahmanya Srinivas Gunturi observe that as the process of policy administration is critical to the success of completion of a life insurance contract, insurers should progressively look at acquiring/augmenting their IT systems from time to time.

Policy Administration Services (PAS) is one of the most critical phases of a life insurance policy life cycle, where the confidence of the policyholders can be made or marred based on the quality of the services rendered by the insurer. The Life Insurance Policy Administration has its own uniqueness in terms of the trend and types of the service requests that the insurer has to deal with. The policy contracts are generally long term contracts that spread across a few decades of contractual term. Adding to this long term nature of association with the customer, the product features also give rise to myriad service requests both in variety and number. To name a few, the requests could be for change of contact details, premium payment frequency (mode) changes, beneficiary changes, assignments, revivals or reinstatements, loans, loan repayments, non-forfeiture, benefit option changes, disbursement method option changes, owner changes – this list can go a mile further.

In view of the criticality of the policy administration services phase, the insurers must invariably need a profound IT solution by means of which they can easily receive, record, prioritize, assign each service request and track it to its logical closure to the utmost benefit of

both the insurer and the policyholder. One such rapidly emerging IT solution for effectively handling various service requests in the Policy Administration Services (PAS) business context is the 'Workflow' solution. In the next few lines, let us see how various emerging workflow solutions can help an Insurer in effective functioning of PAS.

The policy contracts are generally long term contracts that spread across a few decades of contractual term. Adding to this long term nature of association with the customer, the product features also give rise to myriad service requests – both in variety and number.

'Workflow' – What is it?

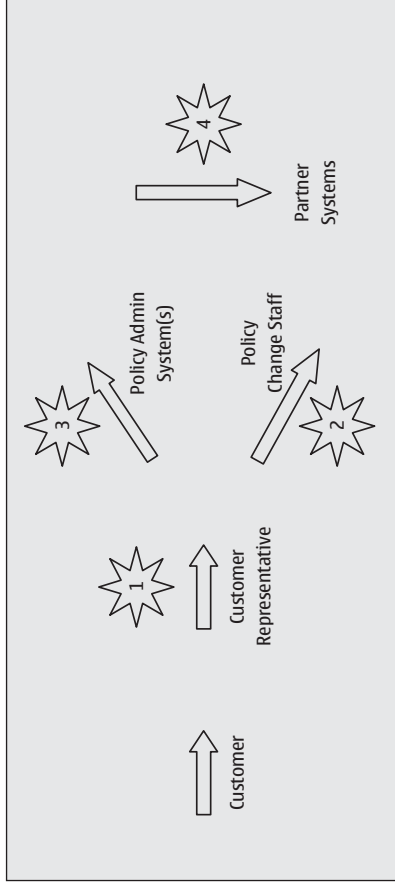
Workflow is one such solution which makes the lives of both the operating and managerial staff quite easier and effective by automating request handling workflows otherwise carried out manually. Workflow can be said to be a solution or a tool which can help the insurers effectively handle their myriad customer service requests with optimum utilization of the available resources. In the next few lines briefly describe the working of various workflow solutions.

Relevance to Life Insurance – Policy Administration Services (PAS)

Globally, the insurers have been increasingly embracing various workflow systems to address various business challenges, especially in their PAS operations. The following diagram depicts the various hands-off and points-of-failure that may occur during the provisioning of a customer service request:

Let us see how workflow solution can help us handle some of the specific real-life business challenges, namely:

- (I) Recording and Tracking of PAS Requests
- (ii) Work-load Balancing
- (iii) Prioritization or Sequencing



involve updating contact information, without much financial impact.

Workflow Solution: A workflow solution can help the insurer in prioritizing and sequencing various numerous service requests received at various front office counters by means of a set of predefined rules. This systematic and predefined approach can help the PAS staff to attend to the service requests in the order they are received, while at the same time can highlight the requests received from the preferred customers.

(iv) Meeting the Targets
 (v) Operational Visibility

Some of the workflow systems available in the marketplace offer different out-of-box mechanism to auto-distribute the work load, which can be customized to meet unique needs of the insurers.

1. Recording Service Requests: It is not unusual that a customer calls an insurer for a service that does not get addressed at all or gets attended to very late. It is possible, when a policyholder calls the PAS staff for a follow up on a service request, it is possible that the request cannot be found or traced in the insurer's records. Such situations not only frustrate the policyholders but also the staff and would finally result in loss of goodwill and revenue for the insurer.

4. Meeting the targets: The high level business goals and objectives are generally translated into Service Level Agreements (SLA) for each and every business promise committed to the customers by the insurer. Further, the SLAs serve as important touch-points for the management to gauge the effectiveness of business operations. As such, the insurers, the customers and, more often than not, the regulators would like to see how the SLAs are handled by the insurers on a periodic basis.

Workflow Solution: Workflow solutions facilitate and organize the inflow of service requests that come into the organization from various sources in a systematic and predefined manner. Essentially, these solutions keep track of each and every request that comes for a PAS.

Workflow Solution: Workflow systems can help identify the duration taken per completing a service request based on the request received and closed dates thus highlighting the operational bottlenecks.

The high level business goals and objectives are generally translated into Service Level Agreements (SLA) for each and every business promise committed to the customers by the insurer.

2. Workload Balancing: The famous Pareto's principle otherwise known as the 80-20 rule is very well applicable to the insurance sector as well. No surprise, if the 80% of the work is done by 20% of the resources or vice versa while the majority of the resources are not sufficiently assigned work. This situation arises as a result of inefficient work-load balancing.

Workflow Solution: Workflow systems help address this issue by automatic work distribution (AWD) among the available

Workflow Solution: Workflow systems keep track of data, as it flows through different phases of service request life cycle (receiving the request through its completion). Such data capture and its

5. Operational Visibility:

Management does not merely like to hear about the bottlenecks/weak areas of performance. It would love to hear about the areas of operational strength as well, to gear upon them further. So, it is important not only to know the number of unfulfilled tasks but also the number of tasks/service requests that are successfully completed within the SLAs.

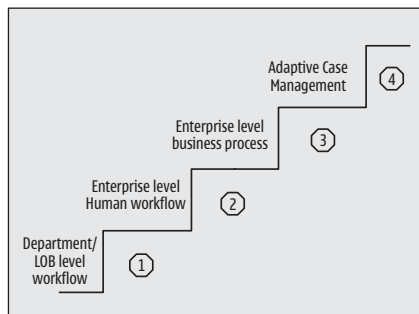
retrieval can be further useful to produce various operational reports that gives complete operational visibility to all the business stakeholders.

Workflow System Evolution

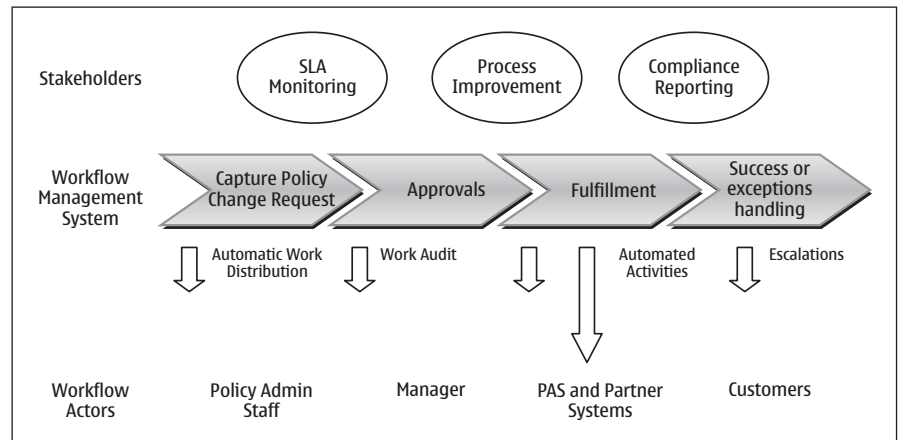
In fact, the workflow solutions are relatively new to the insurance industry, by themselves. But, still, with the fast coming up of newer and better solutions, the existing solutions are becoming very quickly out-of-date. Based on the capabilities and the extent of functional support they offer, the workflow solutions can be classified into four major categories as below:

1. Department/Functional Level Workflow Solutions
2. Enterprise Level (Human) Workflow Solutions
3. Enterprise Level Business Process Workflow Solutions
4. Adaptive Case Management Solutions

The Following diagram depicts the evolution of workflow systems:



1. Department/Functional Level Workflows Solutions: As the name suggests, these workflow mechanisms offer very limited functionality they operate within the confines of a department or function. Examples: Workflows used in New Business/Underwriting Departments. In a way, these are 'system specific workflows' as they operate within a given system, where the data does not cross the boundaries of a functional department/system. These are fast getting outdated, as we can hardly



find an insurer who nowadays operates on a single system.

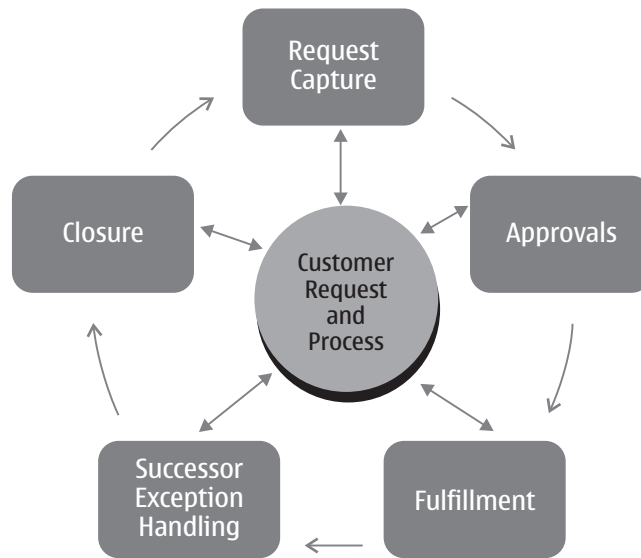
2. Enterprise Level (Human) Workflow Solutions: These engines address request handling requirements through a single workflow system, at the enterprise level across its several departments or functions. The catch here is though these are cross-functional, they still operate within a single robust system. That is why they can be called Human workflows (as they do not integrate with other systems). So, in a scenario where the insurer might like to use multiple systems these workflows are not much of help.

3. Business Process Workflow Solutions: To cater to the needs of the modern insurer who uses multiple systems across the functional departments, these workflows are not cross-functional but also cross-systems which can be interfaced with the other existing systems within an organization. In essence, these are highly compatible to operate in a multi-system environment. These are often termed as BPM (Business Process Management) systems, which enable straight through processing (STP) of certain scenarios in conjunction with other integration technologies, such as Enterprise Service Bus (ESB).

4. Adaptive Case Management (ACM) Solution: These are the next generation

workflow solutions. These are highly capable engines that can cater to several business process related, technical and architectural needs of an insurer. These are being developed by progressive IT solutioning vendors to address the needs of the insurers where processes can take different routes based on the data that is fed into the system, which is typically derived from customer request and subsequently other users of the system react to the situation. One good business example is how do you handle Date of Birth (DOB) or Gender corrections, after a policy is issued and settled to your Policy Administration System? This kind of changes require a strong handshake between policy administration and underwriting functions, due to the revision of age or gender and can give rise to complex situations where the revised age or gender can fall out of the allowed/eligible age limits for a given product. The users can choose various options based on their knowledge to achieve the business objective. Adaptive Case Management (ACM) solutions facilitate this kind of complex policy changes.

While traditional BPMs are sequential due to its focus on the process, ACM tends to be more dynamic due to its focus on data, as data (customer and process) changes sequence of activity can change.



Conclusion

The Policy Administration Systems which traditionally are looked at as transactional systems with a back-office focus are now being integrated with various types of workflow and other systems which help overcome the business challenges faced by the present day insurers. Insurers have been adopting workflow systems appropriate to their size and complexity of their business. As we can see, the traditional workflow systems lock the user down to a specific flow; giving them very less leeway to use their experience or knowledge. On the other hand, the advanced workflow solutions offer more flexibility and freedom to the business users. While many have already adopted system or functional specific workflows, a few biggies are moving towards the use of Business Process Management (BPM) solutions for straight through processing

The Policy Administration Systems which traditionally are looked at as transactional systems with a back-office focus are now being integrated with various types of workflow and other systems which help overcome the business challenges faced by the present day insurers.

of customer requests. Some of the progressive insurers are exploring the Adaptive Case Management solutions to effectively deal with the dynamic and complex nature of their business.

The authors, Yogesh Nagulpelli (Solution Architect) and Subrahmanya Srinivas Gunturi (Business Analyst) are working for Mastek Ltd, at Pune. The ideas expressed in this write up are their personal ones and do not represent their employer.

A Satisfied Policyholder

- Ambassador for Further Business

Dr. G. Gopalakrishna opines that the sales and distribution personnel have a very important role in rendering the policyholder services that will be instrumental for the long-term sustenance of business.

In developed countries where insurance penetration is high, the servicing to the policyholders begins with the closing of the sale and completion of the insurance contract. But unfortunately in our country, with a few exceptions, the servicing ends with the issue of the policy. In a large majority of cases the customer is left to get his grievances resolved only through direct correspondence with the insurance company's offices.

Many times, the right type of policy is not sold and the poor policyholder finds to his dismay that he has just bought a type of policy which does not suit his requirements. He gets disgusted and stops paying further premiums. The benefits of insurance and the benefits of the policy are not properly explained to the policyholder. In such cases, there is every possibility of a policy lapse.

The main aim of any life insurance company is to ensure that every insurable person is adequately insured. The success, therefore, depends on getting good quality business. Good quality business means good risks and ensuring adequate protection to the beneficiary in the event the contingency for which the policy was taken, occurs. If the lives insured are good risks, there is every likelihood that the

mortality experience will be better than expected and provided for in the premium calculations. The insurers will be able to earn more profit and the policyholders will also have a share in it, by way of bonus.

The sales personnel are the primary representatives of the life insurance industry to come in contact with the policyholders. They are the intermediaries between the policyholders and the insurance company. The policyholders

depend on them for everything (from the beginning of the contract till the disposal of the claim either by maturity or death). If policies remain on the books of the insurers, the renewal premium will go on increasing and provide the money for the successful working of the business. During the first year of the policy, heavy expenses are incurred. The mortality risk for the year is also to be provided for.

If survival benefit is provided for, it would also call for a share in the first year premium. Generally, the first premium is not sufficient for the purpose. Hence, the deficit has to be recovered from the subsequent premiums. If the policies are discontinued, it will be a heavy loss to the insurer. Apart from this, a lapsed policy would have a bad effect on the policyholders. Their faith in life insurance would be shaken and it would be difficult to bring them around to go for fresh insurance.

The agent's future earnings depend on the renewal premiums coming continuously. The renewal commission is a stable and dependable income. The advisors are sure of this income only if the policies run a normal life. The remarkable increase in the business will bring in its wake the issue of maintenance of efficient service.

The main aim of any life insurance company is to ensure that every insurable person is adequately insured. The success, therefore, depends on getting good quality business.

The following steps would go a long way in the matter of efficient policyholders' service.

(1) Admissions of age with necessary proofs, nominations and assignments should be attended by the agents and development officers/sales personnel. Personal reminders to pay premiums by agents should be made well in advance for a period of at least 2-3 years. On a casual survey, it is found that lapses are mainly due to reasons other than the paying capacity of the policyholders. Especially, the rural people require goading till the habits of paying premiums regularly develop.

(2) Complaints like non-receipt of policy bonds, premium reminders, premium receipts, issue of loans should be promptly attended to by the touring officials. Often it is observed in the village that more than one person of the same name is found. Even the father's name will be similar. Policies and premium receipts and notices to such persons can be misdelivered. Premiums are wrongly credited at the office. Hence, proper care has to be exercised by the sales personnel and agents to write out proposals with surnames.

(3) In rural areas, where there are no collection and remittance facilities, the sales personnel should be authorized to collect renewal premiums. In addition, top agents, or village elders or other policyholders may be authorized to collect renewal premiums by taking suitable cash security from them.

(4) Claim investigations and settlement of claims should be done promptly as this is the best medium to create confidence in the rural areas and to generate awareness about the benefits of insurance.

(5) The lapses have to be personally looked into by the sales personnel and the

On a casual survey, it is found that lapses are mainly due to reasons other than the paying capacity of the policyholders. Especially, the rural people require goading till the habits of paying premiums regularly develop.

reaction of the policyholders should be properly recorded and reviewed. This will help reduce lapses by modifying the approach on the contract.

(6) The sales personnel must be well-educated and self-disciplined. Such personnel must be empowered to revive the policy (limiting the sum assured) on their being satisfied that the person assured maintains good health. Similarly, they must be empowered to settle the claims (here also sum assured may be limited).

Agents – Their Responsibilities

An agent, individual or corporate, is the main component of the distribution channel for the life insurance business. He would be required to solicit and procure new life insurance business, in a manner that is consistent with the interests of the policyholders and of the insurance company. For this purpose, it is necessary that he would have to do the following.

- Contact prospects for life insurance, study their needs and persuade them to buy.
- Complete all related formalities, including filling up proposal forms, collecting premium, arranging medical examination, collecting proofs (of age or income), reports and other information required by the underwriter.

After having sold a new insurance policy, the agent has to ensure that the policy continues, without a lapse, till it becomes a claim. The conservation of the policy is in the interests of all the three persons concerned, the insurer, the policyholder and the agent. For this purpose, it is necessary that the agent has to

- Keep in touch with the policyholder to make sure that renewal premiums are paid in time.
- Ensure that nominations are made or changed according to changing circumstances.
- Assist in settlement of the claim, by helping the claimants to complete the necessary formalities and requirements.

In order that he may perform all these tasks well, the agent has to be familiar with

- The benefits under the various plans of insurance offered by his insurer.
- The office procedures for various matters including the forms and documents.

Prerequisites for a Successful Agent

The insurance agent, though appointed by the company, is an agent of the prospect as well. He is looked upon as a knowledgeable person, who can be trusted to give the right advice. To be able

to match these expectations, the modern agent must be familiar with the benefits and advantages of other financial instruments suitable for savings and investments and also the tax laws, particularly on taxation matters relevant to these instruments. The variety of instruments available for an individual is very vast and it is difficult for any one to master the details of all of them. The agent who admits un informedness and promises to come back after checking out the details is respected, trusted more and sought after, than the one who gives answers on the basis of guesswork or hearsay. Such an agent can be spoken of well, as a person who knows, who can be trusted to look after the customer's interests, who does not mislead, who is nice to deal with, and so on. It is such reputations that help one to collect more and more references from satisfied policyholders and thus expand one's circle of contacts.

After-Sales Service – The Agent's Role

The first service which contribute to the policyholder's appreciation of his insurance are those which are performed at the time his proposal is steered to completion viz.,

- (1) Selling the right policy, i.e., the policy that correctly answer the individual's needs and circumstances.
- (2) Selling the policy right i.e., explaining the benefits in such a way that the policyholder would consider it necessary to maintain the policy.
- (3) Inculcating the habit of saving i.e., ensuring that the policyholder saves regularly from his income so that he has the amount necessary to pay the premium readily available in cash when the premium falls due.

The agent's responsibilities to the policyholder are not over with the closing of the sale. It is essential that the sale is

The agent who admits un informedness and promises to come back after checking out the details is respected, trusted more and sought after, than the one who gives answers on the basis of guesswork or hearsay.

followed up with good after-sales service and regular contact with the policyholder.

Life insurance salesmen, unlike other salesmen, receive renewal commission on their past business; renewal commission is not a gift for service already rendered. Old policies need to be serviced from year to year, and renewal commission is paid for continued service the life insurance salesmen is expected to render to the policyholder.

The most important service that the agents are expected to render immediately after the issue of a policy is in respect of admission of age, if age has not been admitted; and the appointment of a nominee or assignee. The agent can render after-sales service in other matters as well, namely, alterations in the policy contract, arranging for policy loans, conservation of policies, revival of lapsed policies, additional insurance and finally, the settlement of claims.

Crucial Role of Agent in Effective Policyholders' Servicing

A stable agency force can be very useful in this direction. Agents must, as a part of the service to policyholders, be in continuous touch with them to ensure that premiums on their policies are paid as and when they fall due. More often than not, the policy lapses with consequent loss involved to the policyholders is due to not paying the premium in time, in spite of the notices issued to them by the company. Once a premium remains unpaid, it so happens that a subsequent premium also falls due before the policyholder awakes to the fact that premiums under the policy are in arrears.

In such a situation, a good many policyholders find it difficult to pay all the arrears of premiums in time so that the lapse of the policy becomes inevitable. Agents should, therefore, see that all premiums on policies are paid as and when they fall due. This helps the agents in building up their renewal commission, which, in turn, depends on the continuation of policies. This in turn will help to provide efficient service to the policyholders and thus, create a class of satisfied policyholders.

It is a well-known fact that satisfied policyholders are the best clientele for insurance and is the chief source of further business. They give repeat business by taking further policies and their experience and goodwill motivates more persons to take insurance. Thus, business is conserved and the foundation for more new business is also laid simultaneously.

The remedy is to club the agents' commission with the first and second year premiums. One of the best methods will be to spread the commission to the agents for two years in succession at a flat rate of 20%. This will create a larger financial stake for the agents and prompt them to serve the policyholders at least for the first two years by which time, on the one hand, the policies would have

become paid up so that there is no total loss to the policyholder and on the other, the policyholder would have got used to the regular payments to a greater extent.

Development Officers/Team Leaders

The development officers or the sales personnel will have to realize that it is in their as well as the agents' interest to see that the business continues on the books and they should train the agents accordingly. Unless the field staff is asked to play a better and effective role in this area, there is very little hope in making any substantial improvement in our servicing methods.

The sales personnel should also be made responsible for the collection of renewal premia under policies pertaining to their area, in addition to the other services related to age admission, nomination, assignment etc. Their service rules should be framed in such a way that lapsed policies should adversely affect their performance appraisal, especially for the second year.

Naturally, the rules can provide for taking into consideration lapses in the first one or two years only. Once a policy has run for a couple of years, an ordinary policyholder will feel that he has some stake in the policy and would like to continue it, unless some outside influence is there. Moreover, a person who has paid his/her premium for the first year is more or less adapted to such periodic payments and will rarely forfeit his money.

Office Staff

The office staff also should not lag behind. The servicing of policies should be improved so that policyholders are not driven to despair to stop paying premiums. Prompt clearance of deposits and issue of premium receipts is quite essential for this purpose. Requests for transfer of records due to change of address should be properly attended to.

The policyholder should be made to feel that his/her policy is a valuable and reliable asset and that, in case of need, he/she will surely get a loan promptly under the policy. A confidence should be created that the claims would be settled promptly. This is possible only when policyholders receive prompt attention to their requests. In addition, the office should see that the following are done regularly:

- (1) Issue of premium notices
- (2) Issue of Default notices
- (3) Notice of options available to the assured on the lapsing of a policy (notice under Section 50)
- (4) Supply of lapse lists to sales personnel
- (5) In respect of those lapsed policies which have neither acquired paid-up value nor a surrender value, intimation should be sent to the policyholder after

about one year from the due date of the unpaid premium to revive the policy under the new revival scheme.

Branches

The branches also play a very important role in the matter of policyholders' servicing. The branch managers should bestow equal importance, if not more, for policyholders' servicing aspect as with new business procurement and empower the personnel on the job of renewal servicing. They should also assist in some measure in educating the policyholder through the sales personnel and agency force under his command as to how they can help the office in the policyholders' servicing. Their incentives should be linked to the extent of conservation of business and renewal servicing.

There should not be any slackness at any level in the discharge of duties and carrying out the process discussed above. This will ensure policyholders' satisfaction which will ultimately bring more and more business for the company. This in essence is the meaning of the adage 'A satisfied policyholder is the greatest asset to the company'. Thus, for the successful running of life insurance business, the combined efforts of all, viz., agent, sales personnel, office staff and policyholder are necessary and this will further the interests of each one of them.

The sales personnel should also be made responsible for the collection of renewal premia under policies pertaining to their area, in addition to the other services related to age admission, nomination, assignment etc.

The author is a retired Senior Officer, L.I.C. of India.

Customer Dissonance in Service

- Complaints in Insurance

Dr. Ashish Barua asserts that it is deficiency in service that eventually leads to customer complaints; and further says that unattended complaints exacerbate the issue leading to serious problems for players.

What is A Complaint?

A complaint is defined as: Any expression of dissatisfaction by a customer or potential customer about service delivery by the company or its agents, and/or about company or industry policy. Every time you voice dissatisfaction about any aspect of our business, our staff will take your comments seriously. We believe that by responding positively and pro actively to your complaints and comments we will not only retain our existing customers, but attract new ones. We appreciate that customer feedback is vital in helping us deliver continuous improvement across our business.

The customer complaints handling procedure is designed to make sure your complaint is dealt with efficiently, fairly and effectively. The insurance company must ensure that the procedures are:

- Easy - to find and well publicised;
- Simple - to understand and use;
- Efficient - setting out when you can expect a response from us;
- Fair - ensuring each complaint is investigated fully and fairly;

- Respectful - respecting your desire for confidentiality;
- Effective - addressing all the points you raise and providing an effective response and appropriate redress;
- Monitored - regularly monitored and

audited to ensure it is effective and to allow improvements to be made;

- Reported - providing information to management so services can be improved; and
- Consistent with the standards set out in

Why you Need to Listen to Insurance Customer Complaints

There are many reasons why you should listen to, and respond to your customers complaints; the following are some of the most important:

Development

The most important reason why you should listen to complaints is very simple. If someone is complaining, the chances are, there is a problem in your products or service that is causing it. Listening to complaints allows you to find out what the problems are with your business, and solve them. Customers satisfied may cost money; you may need to give refunds or replacements, but you will normally regain much more than this over time by retaining the customer.

Fixing a problem once will help you keep

The most important reason why you should listen to complaints is very simple. If someone is complaining, the chances are, there is a problem in your products or service that is causing it.

the customer who made the complaint, but fixing it permanently will help keep all customers satisfied, and maybe even help to bring in some new customers.

Loyalty

It has been shown in several pieces of research that customers who complain, and have a problem solved are generally much more loyal than those who are simply happy with the business. If you can fix a complaint quickly, it shows not only that your business respects the customer and wishes to provide a good service; but also that you can be relied upon, even when things go wrong. It can provide a customer with a sense of security in your business, making them much less likely to go to your competitors.

Lost Customers

There is a basic choice with dissatisfied customers; let them complain, and try to solve their problems; or watch them go to your competitors. Although there are few proven figures, most experts believe that you are up to ten times more likely to keep a complaining customer (whose problem you try to solve) than you are dealing with one who says nothing.

You should also remember that it costs up to five times as much to win a new customer than to keep an old one, even if keeping a dissatisfied customer costs you now, in the long run, it will almost certainly save you money. If a customer complains, it gives you a chance to make them satisfied with your business again, and for this reason, you should encourage dissatisfied customers to complain.

Employees

If a complaint is the result of a mistake by

If you can fix a complaint quickly, it shows not only that your business respects the customer and wishes to provide a good service; but also that you can be relied upon, even when things go wrong.

an employee, it will help you to know where problems lie. Minor problems can be fixed by reminding employees of certain information or processes, major problems can be looked at over a period of time, with the aim of long term improvements. In repeated cases of employee fault, you should consider giving verbal warnings.

Front line employees can often bear the complaints caused by other employee's mistakes, but attempting to solve all problems revealed by complaints will help to keep your customers happy. Matters can also be helped if you give employees enough training and empowerment to deal with complaints and problems quickly.

How to Handle Customer Complaints

No matter how hard you try, things are bound to go wrong once in a while. Food gets burned, orders get forgotten in the middle of a dinner rush, or new servers

simply forget all their training. No matter the reason for the complaint, the important thing is to try and please the customer and send them home knowing that, yes there was a problem, but it is not typical of your establishment. Let them know that you, the owner, value their comments and their business. How you handle customer complaints will determine if the customer comes back to your restaurant. Here are some tips to help you field your next complaint and send your customer home with a smile.

Listen- Listen to what the customer has to say. Even if you can't solve the problem, you still need to listen. For example, perhaps a customer is displeased because there is waiting line. Well, there isn't much you can do about it, except let them vent.

Body Language- The way you stand and look at a customer can speak more than words. Maintain eye contact and don't cross your arms over your chest, if you are feeling defensive. Avoid the urge to roll your eyes, if you are feeling exasperated. Instead, nod and smile, no matter how irritated you may feel. This shows you value their opinion and their business.

Apologize- Remember that customer who was so upset over the long waiting line? Offer an apology. I understand that you are not happy about the wait, sir, but we are working as fast as we can to get you a table. We really appreciate your patience and willingness to wait. Perhaps you would like to have a drink until your table is ready. You demonstrate that you completely understand their frustration and are working diligently on a solution.

Freebies- If a customer has problem that

could have been prevented, then the best route to take is to apologize and an offer them some sort of compensation. Like in insurance , delay in claims settlement, Lack of proper response from insurance insurance man after selling the policy., and many other such issues may come as a complaint in insurance.

Occasionally you will have a truly angry customer (perhaps justified, perhaps not) who declares I'm never coming back! Well, if that is the case there probably isn't any freebies you can offer to change their mind. Calmly assure the customer you understand their frustration, and offer an apology (again) and let them know if they change their mind you would love to see them again. By sending them off on a courteous note, there is a very good chance, once their anger has cooled, they will try your services again.

Important Rules for Handling Customer Grievances

The focus of all modern management thinking and strategic business practice has to be the customer. Keep your customers happy and your sales will continue to soar - neglect them or take them for granted and your bottom line will suffer accordingly. To respond to a customer who has several legitimate complaints you must keep these seven rules firmly in mind.

Rule One:

Listen with understanding and sympathy. This diffuses anger and demonstrates your concern. Tell the customer something such as "I am sorry you have been inconvenienced. Tell me what happened so that I can help you . It is vital

to show a sincere interest and willingness to help. The customer's first impression of you is all important in gaining co-operation.

Rule Two:

No matter what or who caused the problem, never, ever blame or make excuses. Instead, take full responsibility and the initiative to do whatever you can to solve the problem as quickly as possible.

Rule Three:

Paraphrase and record what the customer tells you. Whenever you hear an important point say "let me make sure I understand; you were promised delivery on the 10th and you did not receive the product until the 1st of the following month. Is that correct?"



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Rule Four:

Find out what the customer wants. Do they want a refund, credit, discount or replacement? The customer is complaining because he/she has a problem and wants it solved as quickly as possible. Find out what their problem is so you can work towards it and not towards a solution they do not want.

Rule Five:

Propose a solution and gain the customer's support. When the customer tells you what he or she wants the solution is usually obvious. State your solution in a positive manner. "I will be happy to give you a full credit for it or other merchandise. Is that acceptable for you? If it is acceptable, act promptly.

Rule Six:

If the customer does not like your solution, ask what they would consider a fair alternative. Never let a customer lose face. If you cannot meet their request, say so, but never say they are wrong, and never get into an argument with a customer. It is vital to be considerate of the customer's feelings and to be courteous. Sometimes the customer knows full well that there is nothing you can do. All the customer really wants is someone to hear and respect his or her point of view, and you can always give them that.

Rule Seven:

Follow up within a few days to ensure that the customer is completely satisfied. This last tip should ensure that the relationship is strengthened and you may well gain additional business. Do remember that, a customer's loyalty is only as strong as the success of their last contact with you.

The Key to Handling Customer Complaints

How you handle customer complaints may have more to do with establishing your sterling reputation for excellent insurance satisfaction than all the designer frames you can find and all the technology you can install. Can you live with 150 people in your community talking negatively about your business? I don't think so. In this hyper-competitive industry, we cannot let even one slip out the door with less than a stellar experience. As Disney would say, Our strongest competition is our own reputation.

Deliver Unforgettable Customer Service

Insurance companies must recruit many dynamic positive and go getters as sales people, for whom one interaction with the customer remains in their mind most pleasant and unforgettable. This kind of service is only possible, when HR people in our insurance companies are themselves highly cautious, dynamic and loyal to their company to which they belong.

Empower Your Employees

Accept that you do have daily and recurring customer challenges and create a protocol for handling them immediately. Follow it even if the insurance customer is 30 minutes late for a confirmed appointment. No one leaves disgruntled. Empower and train your employees with a system so that everyone is capable of addressing and resolving a complaint as soon as it arises or even before. You want every team member to look for opportunities to be a hero. The best way to regain lost customers is to never lose them in the first place. Psychologically,

It is very important for every insurance company to understand, what customers expect from other insurance companies for the similar product sold by them.

employees must be trained so that they can face any kind of unpleasant situation with easy tact and emerge winner at the end. Industry needs employees who are winners, means who think winning only.

Role-playing is the best training to prepare for worst-case scenarios and frequently cited objections. Role-playing also corrects the false impression that most people believe they have great customer service skills and are able to handle almost any situation. It is better to practice among your staff members than on your customers.

Of course, it is unpleasant at times to do what seems uncomfortable and let the customer get away with something, but hopefully those times are few. Happy insurance customers are an investment in the future of your business, and that is something you just can't buy.

Finding Out Customers Expectations

Finding out what customers expect is

essential to providing service quality. The following description presents some useful methods to find out what customers really expect from our services.

Using Complaints Strategically

Even though listening to complaints is rarely sufficient to understand customers' expectations, complaints can become part of a larger process of staying in touch with customers. In particular, they can provide important information about the failures or breakdowns in the service system. If compiled, analyzed, and fed back to employees who can correct the problems, complaints can become an inexpensive and continuous source of adjustment for the service process.

To truly understand customers' needs, companies can encourage and facilitate customers' feedback about problems. British Airways, for example, installed customer-complaint booths at Heathrow Airport where disgruntled passengers could air their grievances on videotape. Besides giving customers immediate relief from their annoyances, British Air found that the complaint videotapes gave vivid information to management about customers' problems and expectations.

Researching what customers want in similar industries

It is very important for every insurance company to understand, what customers expect from other insurance companies for the similar product sold by them. Hospital patients and customers of hotels, for example, expect many of the same features when using these two services. Besides expert medical care, patients in hospitals expect comfortable rooms, courteous staff, and food that tastes good

- the same features salient to hotel customers.

In these and other industries that share common customers' expectations, managers may find it helpful to seek knowledge from executives in these other service industries. Because hotels have used marketing, and market research longer than hospitals have, insights about hotel guests' expectations can be informative about patients' expectations.

Conducting key-client studies

When the firm sells to businesses or to intermediate customers, rather than to end customers, some clients are large and important enough to study individually and in depth. To General Electric Company's (GE) aerospace group, for example, key clients included the Army, Navy, Air Force, and several airframe and electronics companies. To fully understand these clients' needs, as well as the strengths and weaknesses of the aerospace group vis-à-vis its competitors, the GE group interviewed 600 customers at all management levels of these key clients. In a similar but more extensive effort, IBM Corporation created a customer council comprising of its top 50 clients. The company and the council meet regularly to determine where IBM will go in configuring and redesigning computer architecture.

These in-depth research studies can also be appropriate for end customers when key clients, who are larger or more important than others, can be identified. Law firms, for example, could focus on clients involved in major cases, banks could study their top depositors or

borrowers, and airlines could research key corporate clients.

Creating customer panels

Creating customer panels is very a strategic move. Its importance must be realized by the insurance company. This panel comprises loyal customers who are the ambassadors for the company and can prove an effective mouth piece for promoting the company's product.

Tracking satisfaction with individual transactions

A research trend gaining in popularity in service businesses involves transaction-based customer surveys. In this method, customers are surveyed immediately after a particular transaction about their satisfaction with the contact personnel with whom they interacted. Expert customer-service representatives handle billing problems, they mail customers surveys that measure employees' courtesy and competence, and the customers' overall satisfaction.

Creating customer panels is very a strategic move. Its importance must be realized by the insurance company.

This type of research is simple, fresh, and provides management with current information about interactions with customers. Further, the research allows management to associate service-quality performance with individual contact personnel so that high performance can be rewarded and low performance corrected. It also serves as an incentive for employees to provide better service because they understand how and when they are being evaluated.

Engaging in comprehensive customer-expectation studies

Metropolitan Life Insurance Company of New York markets personal insurance to policy holders, group health and life coverage to corporations, and pension plans to both groups. The company developed a comprehensive program of measuring the expectations of all its customers, including both external and internal (employee) customers.

Using company- wide employee surveys, focus group interviews, and SERVQUAL a 22-item generic questionnaire; an insurer regularly monitors the expectations and perceptions of their customers. The SERVQUAL, customized by adding questions covering specific aspects of service they wanted to track, formed the foundation for the comprehensive customer-expectation study.

Conclusion:

The old saying is, Everybody makes mistakes, but how you handle them makes for either happy customers or no business. How do you handle any conflicts with customers? Start by taking inventory of instances where things didn't

go well. Nobody likes poor service, which is why it's imperative that you take every possible step to avoid customer complaints. But when there are complaints, how can you make your customer complaint procedure work well? Start by avoiding these seven mistakes:

Mistake No. 1: Not having a customer complaint procedure. Whenever there is a complaint, don't put your company's reputation - and your chance of getting good referrals - in jeopardy by not having a written procedure which has been used to train your customer service people. Think of it as risk management. Make sure that everyone knows what you expect your customer service to do to resolve complaints, even with difficult customers. The process will make it less likely that customers will be totally unhappy. Sympathetically and competently explaining the process to even a difficult customer means that there will be a good chance of a successful resolution. The customer will know their responsibilities as well yours.

Mistake No. 2: Paring down the customer service department in the name of saving money. Having too few customer service agents means that many complaints may not get a fair hearing and may not be resolved. Unresolved customer complaints mean no referrals and worse, negative word of mouth! Customer service is your insurance policy to keep customers happy so they will give you referrals. Would you go without Liability insurance or Business Interruption insurance? Then why would

Establish a customer complaint procedure of checking back with the customer 30 or 60 days after a complaint, asking how the customer felt the service was provided, and if you can be of further assistance.

you forget to have customer happiness insurance?

Mistake No. 3: Losing touch with how your customer service functions. Take time to examine your company correspondence files and service department records. This will reveal the current customer attitude toward your organization. Complaints will probably highlight principal problem areas. In fact, if you analyze those records regularly, you may find that some of the complaints you're receiving are actually doing your firm a favour, pointing out areas that need improvement now.

Mistake No. 4: Neglecting your customer service people. If they know that you care about them and how they treat customers, they can become your biggest source of referrals. Consider what would happen if a customer service person successfully resolves a problem, asks a now-happy customer for a referral and

gets rewarded for each referral they get.

Mistake No. 5: Believing that out of sight is out of mind. Establish a customer complaint procedure of checking back with the customer 30 or 60 days after a complaint, asking how the customer felt the service was provided, and if you can be of further assistance. That's not just fixing the problem, that's making sure the relationship stays fixed.

Mistake No. 6: Taking short cuts. If you have a written procedure to deal with customer complaints, stick with it. Customers will get used to the fact that you have an organized approach and give them a fair chance to state their case. But whatever you do never quote 'policy' to customers - it only makes them madder!

Mistake No. 7: Letting complaints linger. You'd be surprised by how fast and courteous attention can defuse most of the complaints before they become major problems. All a customer who is complaining wants to know is that someone cares and that you will respond as close to instantly as possible. Even if you had a problem, speedy resolution means that your company spent a few minutes solving that customer's problems. But since you are quick, he or she will actually want to talk up your operation and your ability to stand behind your product or service.

The author is Faculty, School of Insurance, and Member - Insurance Research Board, National Law University, Jodhpur.

Bridging the Gap

- Grievance Management in Insurance Industry

John Holden writes that redressal of customer grievances is a reactive behavior that emanates as a consequence of a possible disservice. He further adds that the high incidence of customer grievances can be overcome to a great extent by a proactive demonstration of intended efficient service.

A customer is the most important visitor on our premises. He is not dependent on us - we are dependent on him. He is not an interruption in our work - he is the purpose of it. We are not doing him a favour by serving him - he is doing us a favour by giving us the opportunity to serve him.

- Mahatma Gandhi

The customer is the central theme that shapes products, processes and services in all industries including financial services. With knowledge and awareness levels increasing and information available at fingertips as a result of the burgeoning of electronic media, it is only natural that the customers have become increasingly discerning in their buying behaviour.

In a consumer driven market, the challenge for any business therefore is not only to acquire customers but to retain them with the company for the long term. This is particularly relevant in the life insurance industry where solicitation although is a one-time activity, the customer virtually buys the policy again when renewal is due. Therefore, keeping the customer satisfied with the services is far more critical for a life insurance business than many others. An effective

framework within the insurer's organisation where customers' concerns and grievances are treated with empathy and fairness is therefore critical in life insurance business.

Keeping the customer satisfied with the services is far more critical for a life insurance business than many others. An effective framework within the insurer's organisation where customers' concerns and grievances are treated with empathy and fairness is therefore critical in life insurance business.

What constitutes a grievance/complaint?

To understand and analyse complaints/grievances and modes of managing the same, it is first important to examine what constitutes a complaint/ grievance. A grievance/ complaint is defined in the Grievance Redressal Guidelines issued by IRDA as 'any communication that expresses dissatisfaction about an action or lack of action, about the standard of service/deficiency of service of an insurance company and/or any intermediary or asks for remedial action.' The guidelines distinguish the terms 'inquiry' and 'request' from 'grievance/complaint'.

The above definition, stated as a customer's 'expression of dissatisfaction', conveys the regulatory intent to cover an act or lack of action on part of the insurer which the customer perceives as having resulted in lack of or deficiency in service, within the purview of a grievance/complaint.

Go that extra mile

Redressal of customer grievances is a reactive behaviour. In the age of ever increasing expectations, life insurers need to go that extra mile to build a consumer-

centric culture visible to the customer from the time he first interacts with the insurer. The customer should be dealt with a belief that if they are reaching out to the insurance company with a complaint, something must have gone wrong.

Simplify customer and sales interface

Since a significant percentage of the complaints received by life insurers relate to sales, product features or policy limitations, the following steps could help address these issues:

- i. Use of need-based selling tools to understand the customer's financial needs and recommendation of products in accordance with identified needs
- ii. Making product related information available in simple language and avoiding technical jargon to ensure transparency
- iii. Explaining policy terms and conditions in simple language that can be easily understood by an average customer

Transparency will help improve the overall quality of the sale, reducing the potential for complaints especially with customers prompted to raise concerns at the earliest opportunity.

Policyholder servicing

There are several challenges affecting servicing like contact ability, a geographically dispersed customer base, a shortage of reliable third party service providers etc. Fundamentally, the growth of the industry has led to a gap between widespread customer footprint and availability of servicing avenues. This is more so for rural customers wherein inadequate reach, language challenges,

limited payment/ servicing options etc have combined to adversely impact customer engagement and persistency.

Life insurers can consider the following measures to ensure better customer service:

- i. Conduct periodic research to understand customers' needs and major reasons for customer dissatisfaction, so as to initiate corrective action
- ii. Establish robust internal processes and controls, devised keeping in mind the customer's expectations and needs
- iii. Ensure easily approachable and competent servicing capability to receive queries/ concerns from customers and address/answer the same over a multiple access channels like telephone and internet
- iv. Effectively use electronic channels to enable customers to self-service to

access information and address queries

Internal framework to handle grievances/complaints

For an effective grievance redressal mechanism, the insurers need to have robust processes to receive, register, resolve and dispose of complaints efficiently. For an insurer to work with the spirit of the regulatory guidelines and in the interest of its customers, creation of an independent and empowered grievance redressal framework comprising the following will be essential.

The ability of the customer handling team to examine the grievance and arrive at a decision solely on the merits of the complaint, independent of business, operational and commercial considerations forms the cornerstone of this framework. Such a customer handling team can effectively address customer expectations and help navigate the processes established to service the customers.

It is important to recognise that a complaint/grievance could pertain to any of the touch points the insurer has with its customers, either directly or through its agents. As long as the subject matter of the complaint is related to a policy of insurance sold by the insurer, it falls within the insurer's ambit.

Viewed from this perspective, effective grievance management involves handling grievances/ complaints with empathy and care, without trying to hide behind the technical or legal aspects of the contract. A fair consideration of the grievance, followed by objective decision making on the merits, conveyed to the customer through well reasoned communication can go a long way in

The customer should be dealt with a belief that if they are reaching out to the insurance company with a complaint, something must have gone wrong.

gaining customer confidence and satisfaction, irrespective of whether resolution is in favour of the customer or against him.

While a life insurance contract generally envisages a promise to pay the sum assured on occurrence of the trigger event, every step right from sourcing the policy to servicing the same through its term needs to be a reflection of this commitment. Effective grievance management instills confidence among customers on the insurer's commitment to honour its promise.

Fair resolution

Resolution of grievances does not mean finally settling the matter in favour of the complainant. It envisages a fair and transparent decision on the complaint after careful consideration of all relevant facts, circumstances, information and documentation. One of the cardinal principles in adjudication of disputes is that 'Justice must not only be done, it must be seen to be done' applies to grievance redressal in life insurance. It is not just enough that a fair and reasoned resolution is provided to the customer; it should also appear to be fair and well reasoned too. Therefore communication of the decision with the clarity of the supporting rationale, is important. Yet another good practice to follow is that the benefit of doubt in investigation, if any, should be passed on to the customer.

While a life insurance contract generally envisages a promise to pay the sum assured on occurrence of the trigger event, every step right from sourcing the policy to servicing the same through its term needs to be a reflection of this commitment.

Proactive measures

While managing customer grievances forms a key part of the grievance management process, what is more important is the ability of an organisation to derive 'lessons learnt' from a thorough analysis of those instances to prevent recurrence. Every complaint needs to be understood and taken as a message to improve experience of the customers.

Conclusion

The endeavour of the insurance industry

should not only be limited to 'handling' the customer grievance but to reduce customer complaints. This can be achieved by constantly taking proactive measures which will not only address the concerns of the customers who have complained but will also address the unsaid complaints. This can only be done if the companies step beyond the regulatory requirements and take each customer approach as a serious improvement opportunity. Dealing with a customer who has a problem as a mere statistic is not going to help in long run. Regulations establish standards and practicing them in the right spirit can build a fair and effective grievance mechanism in any company.

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

Always at Your Service

- Myth or Reality?

N M Behera asserts that service in its true sense is what the policyholder looks forward to; and gone are the days when tall talk would appease a naive customer.

The policyholder is the most important person on the insurer's premises. Each employee in the insurance company exists in the company for the simple purpose to serve the policyholder, in whatever role has been assigned to one. Being in insurance, the insurers often ask how good they are in the eyes of the policy-holders a question that never gets a definite answer. The responses can be 'very good', 'fantastic', 'superb', 'excellent' Ok etc. But whether such answers really satisfy them remains another big question. The provider may feel that he has delivered the best services. But the provider's feeling may not carry any meaning if the receiver does not get the same response as he anticipated. If the experience is on par, the services are said to be good. If it is more than the expected, the receiver feels more than satisfied. But it is found that the two often mismatch each other. And the worst happens when the service delivery is lesser than the perception. Reports say that most of the problems in service delivery emanate from policy related

issues than in claims related issues in the Indian insurance sector.

What it means:

Insurance service is neither a material to touch, nor an item to see, nor even something to store or to physically

compare with the rest of the alternatives. Then what is it? Service is just a feeling, a realization of mental satisfaction. Measuring services is not simple. It refers to quality, time, decency, behavior pattern, brand image, philosophy, mission, cleanliness, courtesy a plethora of human behavioral reactions. Different people have different likings and expectations. With the same service, two different persons may have different tastes, and different satisfaction levels forming different opinions. It can also be different to the same person in different times and even in different places. The whole thing of conflicts revolves around the human behavior, which is beyond anybody's imagination or mathematical calculation. It is especially more difficult in insurance services, which sell promises many times attached with 'if's and 'but's.

In an industry that is fast developing into a domain where the customer is better informed and is ready to take the route of litigation, mere rhetoric would not work any more, rather than efficient service delivery. Policyholder's satisfaction values

And the worst happens when the service delivery is lesser than the perception. Reports say that most of the problems in service delivery emanate from policy related issues than in claims related issues in the Indian insurance sector.

in terms of peace of mind (promise) purchased for a cost to the ultimate satisfaction of the buyer, is really tested when need arises. The policyholders now not only require services or satisfaction, but much beyond that which can be given through value evidence, customer delight and value additions.

Some definitions:

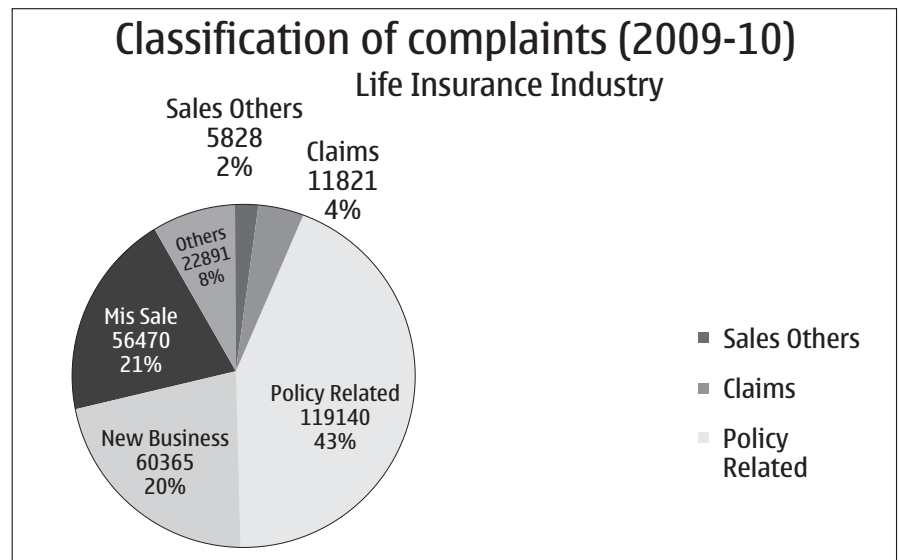
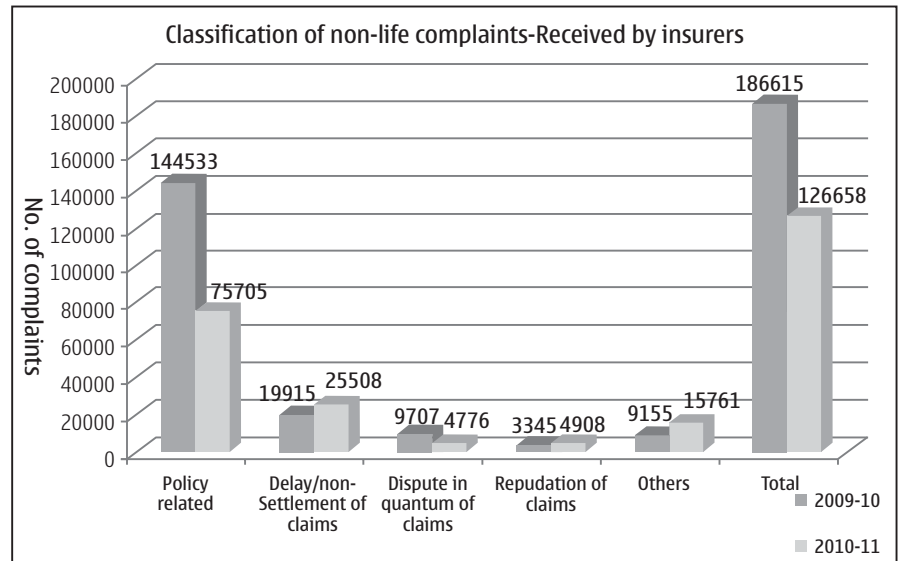
No amount of definition-mongering can provide a comprehensive meaning to service which is related to human feelings and behavior. It takes twenty years , says Warren Buffet, to build a reputation and five minutes to ruin it. If you think about that, you will do things differently Satisfaction of policyholders depends on successful service delivery by insurance companies. Success is the other name for winners. According to Shiv Khera, Winners do not do different things, they do things differently . Definitions, at a time when the insurers attempt to prove themselves to be the most preferred risk protectors, provide them and their internal customers opportunities to realize that:

- I. The policy-holder is the biggest asset and the centre of all business.
- ii. The policy-holder is instrumental in the payment of all their salaries, wages, livelihood and luxuries.
- iii. There will be no profit, no growth, and no job when the customers leave them and
- iv. The insurers have no choice but to provide the best services at all times.

Regulatory Vibrancy:

Recent years are found to be eventful for both insurers and the insured. There was a spate of regulatory changes. New regulations for unit-linked insurance plans, capping various charges and transforming the category became more attractive long- term products. The guidelines also reduced the chances of mis-selling, which was rampant earlier. Health insurance portability is now a reality. So, if you are unhappy with your

insurer's services, you have the option to switch to another without worrying about continuity of benefits that have accrued on the existing policy. Then there were new guidelines on pension products. Most of these measures are clearly in the interest of customers. There is more transparency in the industry now as compared to the situation a few years ago. Product costs have come down; Life and Health insurance have become more viable options. The cumbersome process



of buying a policy has been simplified and now requires less paperwork. All these intend to improve service quality and delivery mechanism.

Where we stand:

Quality has become the buzz-word in every domain. Insurer's service leads to policyholder's satisfaction; and satisfaction leads to insurer's success. Value addition is the key in an open market. A study on consumer behavior reveals that the policyholders do not mind paying a little more premium as long as they get quality service and trusted promises. It is estimated that hardly 9% of the total dissatisfied policyholders leave the insurance company for higher premium as compared to 69% leaving the insurers for poor service the rest being for various other reasons like unsuitability of product features etc.

One way of judging the service level can be seen from the point of view of number of complaints received and the nature of complaints registered. A small example of complaint figures of Life and Non-life insurance sectors in India can be produced in the following graph to understand some of the basic facts on service delivery.

It is general perception that most of the customers feel unhappy with the claims related matters like delay in settlement, dispute on amounts of settlement, repudiation of claims etc. It is also normally believed that people complain when they face any problem in their claim settlement issues. But the figures show a

number of complaints received on policy related issues are incomparably very much on the higher side than the number of complaints received on claims related issues both in life and non-life business. It can be a misconception to say that the people are dissatisfied mainly due to poor claims settlements.

The policy related dissatisfaction level is around 77% in non-life and around 43% in life in 2009-10. The figure in life segment can be still more, if policy related issues in new business is segregated and taken into account. In contrast, the claims related service dissatisfaction level in the same period is around 18% and 4% in non-life and life insurance sectors respectively. One may find some difficult policyholders disputing the service levels,

but it may not be proper to blame them because the policies are not certainly designed by them. It means the insurers need to seriously look back and do more home work before the policies are sold in the market. The policy document which contains promises should maintain highest standards of professionalism. If the promises at any time are found to be loosely connected, the entire value chain will break and no amount of marketing re-engineering can bring back the same goodwill of the policyholders thereafter. The trend of registering cases in consumer forum, Ombudsmen and courts is increasing day by day. A study of LARA (Dept of Licencing and Regulatory Affairs-Michigan Govt) says that 'for every customer complaint, there are 26 other customers who have remained silent'. Since not all policyholders register complaints or knock the doors of grievance redressal houses, the actual figures can be much more, and more alarming if one takes in to account all dissatisfied non-complaining policyholders also.

Weak promises will create confused service leading to policy-holders' dissatisfaction. A report considers that a policyholder on experiencing deficiencies in services, will tell 11 others about his bad taste, each of whom in turn happens to tell yet another 5, finally adding up to a large group in a cascading effect, spreading negative publicity in one go. Devastating effects can well be imagined if this continues to expand further. As per one US market study, a prospective

If the promises at any time are found to be loosely connected, the entire value chain will break and no amount of marketing re-engineering can bring back the same goodwill of the policyholders thereafter.

insurance buyer costs six times more, than retaining an existing customer. Another similar study claims that 5% increase in retention of policy-holders may save up to 18% cost. Any sensible insurer will definitely try to bring more and more policyholders at initial extra costs and focus to retain the mat comparatively lower costs, by maintaining and improving the policyholder service standards and delivering the best values for money.

Areas of concerns:

If the policy related matters are the most important concerns in the whole gamut of insurance business, one has to see how to minimize the dissatisfaction level and how to improve service quality. The insurers can be said to be the best service providers who have zero defective policies. The ABI's (UK) financial capability summary found evidence that consumers have low expectations of the insurance industry. 52% of respondents agreed with the statement 'I always assume insurance company will make it difficult to get a claim settled'. 49% agreed to the statement, 'You never know what you are covered for'. But the scenario in UK is different from the one in India. The dissatisfaction level in UK is more in claims related issues than in policy related issues. This is because the UK industry has matured and more refined as far as the policy contract issues are concerned. For policy related service improvements in India, the insurers without causing any further damage can think of the following few minimum concerns while not considering these to be the only guiding

criteria. The areas of improvements can be from building relationships to best policy designs.

Building Trust: The service satisfaction in an insurance contract can be built through demonstration of utmost trust and creating relationship of confidence. It is essential to strengthen trust so that the intentions of parties in the contract are clearly understood by each other. Insurance products need to stand on well researched outcomes and need based contents for the policy-holders who are the real brand ambassadors for the insurance companies. Building confidence is not easy. The insurers need to demonstrate the highest standard in all respects beginning from courtesy to moral character.

Insurance products need to stand on well researched outcomes and need based contents for the policy-holders who are the real brand ambassadors for the insurance companies. Building confidence is not easy.

Understand the need: A person responsible for bringing the customers to the business must ensure long term relationship. He is first required to understand what the prospect wants from him. Once the need is identified, it is the duty of the insurance representative, to present the best featured and most affordable insurance products, so that the prospect can choose the most suitable one. The insured will be happy if the needs are put into a tailor-made policy and sold to him.

Commitment: By building confidence one actually builds up reputation. True professionalism in insurance does not unilaterally withdraw the promises partially or wholly in the garb of official compulsions or other unforeseen constraints developed due to changes in environment. The rules are merely meant for internal customers' consumption until they are not detrimental to the mutual interest of each other. IRDA regulations on Protection of Policy-holders interest, commitment through Citizen Charter, Code of Conduct of intermediaries (agent, broker, TPA, surveyors, corporate agents etc), circulars and guidelines issued by the regulator are the driving sources for delivering effective services and ensuring strong commitments for protection of policyholders' interests. If one finds any provider failing in business, it is not because of lack of ability but because of lack of desire, dedication and commitment for providing value based services.

Awareness: Creating awareness through

advertisements, print materials and various other communication channels is important to keep the customers aware and updated of the existing and new changes from time to time, and those must be within the purview of advertisement guidelines set by IRDA. The judgement of policyholder on insurance services is made mainly on the basis of what is asserted or implied about the product. Projecting high values in big letters and rejecting all or some in small print is nothing but self destruction. Sales promotion through false promises and wrong information can be suicidal. Communication needs to be truthful, creating permanency.

Documents: A decade ago, it was believed and sometimes felt among the policyholders that not a single claim can be settled if the policy wordings are strictly followed. If the insurer still means that then he should understand himself that his products are the most complicated ones in the world by virtue of which he can make the policyholders stand at his mercy. In legal framework, the understanding could be proved to be true. But is it the way of doing the business? By saying this, the internal customers as custodians (destroyers?) of insurers might feel showing a mercy or save some penny for the employer, but this in itself is a discredit to them, because they are the architects of such hard core legal documents which could pave way for a number of interpretations. The insurers must have to have sound, user friendly documents consistent with each other.

Too many questions may discourage the customers, while too little queries may not suffice to assess the risk – the questionnaire needs to be moderate and contain risk-based queries only.

Underwriting: The underwriter is believed to be the best risk assessor. The basic idea of the underwriter is to understand the risk in a comprehensive way. But there are cases, where underwriters ask many questions not at all related to the risk. Large proposal forms with further sets of sub-questions inside confuse the poor prospect. It is often found that some prospects, under pressure for time, just sign on the dotted lines and leave everything to their luck. It may so happen that sometimes it will be difficult to know if the person who is granted cover is one and the same person who signed the proposal blindly. Therefore, it should be the insurer's prior responsibility to ensure designing a user friendly proposal having simplified questionnaire and also to ensure that questions are relevant and are understood and filled up by the prospects

themselves. Too many questions may discourage the customers, while too little queries may not suffice to assess the risk the questionnaire needs to be moderate and contain risk-based queries only.

Consistency: The prospectus, customer information sheet, policy wordings must mean the same thing individually and/or jointly. Insurers providing simple, unambiguous, readable, attractive and handy documents carry an upper edge in service delivery. Ambiguous contracts adversely affect relationships; create hardship for the policyholders and could lead to exit paths at renewals. The trend consequentially causes loss of the customer base, hamper image of the company and finally jeopardize sustainability. The clarity is always important for delivering good services. Wordings with no scope for dual interpretations will have lesser problems than those replete with ambivalence. Since all documents form to be parts of the contract, maximum care should have to be taken in designing each and every word in the documents, which will reflect the true picture of the insurers.

Simple procedures: Procedures at all levels must have to be simple. Policyholders get relief where the services are clearly and adequately defined. Transparency in procedures adds to service standards. Though a lot of changes have already taken place to make the contracts customer-friendly and to implement simplified procedures, there are a few out-dated styles still in operation in many yet other insurance products.

Sense of Care: No pretentious eloquence would lead to bountiful benefits for the clients. Beautiful words of May I help you will remain to be a mere signboard on the wall of insurers, if there is no corresponding support that goes with it. There needs to be somebody saying 'it is my privilege to serve you'. In the absence of a concerted effort, everybody's job finally becomes nobody's job. The sense of care is a vital tool in providing best possible services in hand. The insurers must shoulder greater degree of responsibility to assuage insured's expected or hurt feeling and attend to his needs promptly, efficiently, actively and courteously with readiness for providing extra care. One needs to remember that 'service is the gateway to growth'.

Culture: Insurance companies' corporate culture should be based on six 'Cs' - Communication, Cooperation, Cheerfulness, Credibility, Challenge and Continuity. The company must welcome the insured to address issues on the basis of these six Cs.

Conclusion:

Any amount of discussion on service related issues will not be sufficient to provide the desired meaning until it is delivered in action beyond expectations of the policyholders. Insurance services are vast in nature. To sum up, one need to understand that service is the gateway of success. It is easy to achieve success through and only through service than anything else. One has to walk the extra

mile and think out of the box. It is up to the insurers and their support networks whether to live up to (go beyond) the policy-holder's expectation by giving little more or to be part of run-of-the-mill by generating more number of dissatisfied policyholders.

The author is Deputy Director (Health), IRDA. The views expressed are personal.


14th Global Conference of Actuaries

The 14th Global Conference of Actuaries (GCA) is being held jointly by the Institute of Actuaries of India (IAI) and International Actuarial Association (IAA) between 19th and 21st February, 2012 at Mumbai. The focus of the conference would be Meeting the Challenges of Change .

This year's conference would cover a whole gamut of topics which would be discussed and debated by eminent global personalities from the world of insurance, education and consulting. The inaugural Keynote Address on 20th February would be delivered by Mr. J. Hari Narayan, Chairman, IRDA.

The conference would provide an effective platform for discussing the emerging global scenario and the role of the actuarial profession.

<p>Venue: Renaissance Mumbai Convention Centre, Mumbai.</p>	<p>Dates: 19th - 21st February, 2012.</p>
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प्रकाशक का संदेश



प्रबंधकीय सिद्धांत इस आशय को अतिशय प्रबलता से यह प्रतिपादित करते हैं कि, एक बार ग्राहक निगम में अपना अस्तित्व पाने पर, वह हमारे खाते में सुरक्षित रहे, यही सरल मार्ग है, न कि, हमेशा नये ग्राहकों की तलाश में रह उन्हें नये से जुड़ाने का प्रयत्न करते रहें। इसके अलावा इस प्रक्रिया में जटिलताओं के होते हुए नये ग्राहकों को बांधने का कार्य निश्चित ही व्ययपूर्ण होगा। लोकोक्ति यह कि अन्य किसी क्षेत्र की गतिविधि की अपेक्षा बीमा के क्षेत्र में संभावी ग्राहकों से युक्तायुक्त व्यवहार जैसी जटिलतासे सम्बन्ध है।

यदि इस विषय पर सर्वसम्मति हो, और इस कथनको व्यापक रूप से यथानुपात मान्यता मिले, तब यह कैसे अनुचित होगा कि इस व्यवहार को उंचे स्तर पर सदृढ रूप से कायम रखने का कार्य इस अध्यवसाय में कठिन है। प्रायः परिणाम स्वरूप ग्राहकवर्ग का बड़ा भाग उनके प्रतिकूल अनुभव अथवा आवष्यक सेवाओं के विमुखता के कारण इसे छोड़ चला जाता है।

ऐसे कई अवसर हो जब उसकी वेदना उसे ग्राहक शिकायत के द्वार कदम बढ़ाने की दिशा में ले जाते, व अंततः परिणाम में विधिवत निवारण ही संभवित हो। बीमा के क्षेत्र में ग्राहक के शिकायतों की अत्यधिक मात्रा में होना, व सेवा के स्तर योग्य न होने व उसमें सुधार लाने

की दिशामें प्रयत्न करने के उद्देश की मौन गवाही हो सकती है।

प्रबंधक उस क्षेत्र में जहाँ ग्राहक असंतुष्ट हो उनकी पहचान तथा विशेष रूप से उनके निवारण व बचावी रास्तों को हटाने से इस बढ़ती प्रवृत्ति पर रोक लग सके।

इस प्रक्रिया के अन्तर्गत प्रशासनिक तथा क्षेत्रीय कार्मिकों को विशेष रूप से प्रशिक्षित करने को कार्य सूचि में सर्वोपरि रखना चाहिए, जिससे ग्राहक में निष्ठा व सेवा की आकांक्षा सुस्पष्ट रूप से प्रदर्शित हो जाये। ग्राहक सेवा की बैठके समयान्तराल में नियमित रूपसे आयोजित कर प्रबंधक अपने उद्देश तथा सेवा में सुधार हेतु अच्छा उदाहरण प्रस्तुत करेंगे, तथापि यह एक केवल प्रयोगात्मक कार्यवाही न होकर सुधारित सेवा प्रदान हेतु सही मंच के रूप में आगे आये।

बीमाधारक की सेवाएँ इस जर्नल का केंद्रबिंदु है। बीमा के क्षेत्र में सेवा के अवसर होते हैं इसे ध्यान में रखते हुए अगला अंक भी इस विषय पर केद्रीत होगा।

जे. हरि नारायण

जे. हरि नारायण
अध्यक्ष

दृष्टि कोण



जोखिम बीमांकन कार्य अधिकांश मामलों / विषयों में आर्थिक व्यापार के घटना - चक्र तथा वित्तीय बाजारी जोखिम से संबंध नहीं रखता। मोटे तौर पर इस की मात्रा बीमा के देयता - दायित्व वित्तीय बाजार के घाटे से भी प्रभावित नहीं होता है।

श्री योषिहिरो कवाय

महासचिव (आय.ए.आय.एस.)

हमारे सर्वेक्षण के अनुसार देखा गया है कि दो तीहाई से भी अधिक उपभोक्ता वर्ग बीमा के विभिन्न प्रकारों जिन की (केश व्हेल्यु) रोकड़ मूल्य हो इसकी जानकारी नहीं रखते, तथा आधे से भी अधिक जनता (उपभोक्ता) वर्ग, जीवन बीमा निवेश का विकल्पभी होने सम्बन्धी कल्पना नहीं करते।

श्री एडम हेम

एन.ए.आय.सी. उपाध्यक्ष तथा नार्थ डकोटा बीमा आयुक्त

शासन सदृढ हो, सशक्त नियंत्रित ढांचा तथा ऐसे चौखट में निगमित शासन का प्रादुर्भाव 1998 के एशिय वित्तीय संकट के उपरान्त ही हुआ, जिससे वित्तीय तथा निगमित क्षेत्र को समुत्थान प्रदान किया गया।

श्री रवि मेनन

प्रबंध निदेशक, सिंगापुर वित्तीय प्राधिकार

ऐसे व्यवसाय जिसमें ग्राहकनीति योजना हो, और ग्राहक के साथ बरताव नीति सुस्पष्ट हो, तथा यह भी सुनिश्चित करे कि उनका व्यवहार मिलनसार हो कर अधिक फलदायी होने तत्पर हो। ग्राहक को विद्यमान खतरे की सुधवुध - पहचान से अवगत कराने योग्य हो।

सुश्री नौसिका डेल्फास

बीमागाध्यक्ष काँड कट सुपरविजन, एफ.एम.ए.युके.

किसी व्यवसाय के अंतर्गत असफलताओं के विभिन्न प्रकारों से संभावित हानि ही नहीं, अच्छे प्रतिष्ठित नियंत्रित व्यवसाय क्षेत्र पर विश्वास भी हटता जाता है, जिससे सार्थक प्रतिष्ठित नियंत्रण की हानि जिसकी आपूर्ति की कार्यवाही व्ययनियंत्रण एवं दंड भार से की जा सकती है।

श्री पीटर ओक्स

निदेशक प्रवर्तन, सेंट्रल बैंक आफ आयरलैंड

बीमा व्यवहार के दीर्घकालीन प्रक्रिया से भावी दिनों में बीमा हानि का उलटाव रातो रात हो ऐसी अपेक्षा नहीं की जाती है। कम्पनी को चाहिए कि दक्षता से दावा प्रबंधन का कार्य सुचारु रूप से करते हुए यथा संभव निम्नतम हानि हो इस पर दृष्टि दे।

श्री जे हरि नारायण

अध्यक्ष, आय आर डी ए (भारत)



बीमा दावों के निपटान में देरी क्यों?

जगेन्द्र कुमार का कहना है बीमा के क्षेत्र में दावा निपटान का कार्य एक महत्वपूर्ण प्रक्रिया ही नहीं बीमा धारक के जीवन में परिपक्व दावे के रूप में उसके निवेश का फल तथा उसके न होते, उसके नामीनी / या हिताधिकारी के लिए एक अनमोल व महत्वपूर्ण सेवा है।

बीमा एक ऐसी संविदा है जिसमें बीमा कम्पनी प्रिमियम के एवज में सिर्फ एक वायदा बेचती है, अगर बीमा अवधि में बीमित जोखिमों से बीमित सम्पत्ति को बीमा राशि तक की हानि होती है तो बीमाकर्ता कम्पनी इस की पूर्ति करेगी। यह संविदा एक वैधानिक अनुबन्ध है जो बीमित पक्षकारों तथा बीमाकर्तओं के बीच उस अवधि तक वैध है। उस का पालन न होने पर न्यायालय में चुनौती दी जा सकती है तथा कानूनन रूप से करार का पालना कराया जा सकता है। यही नहीं बीमा अनुबन्ध की अनुपालना ओम्बडसमैन उपभोक्ता न्यायालयों तथा बीमा विनियामक एवं विकास प्राधिकरण के द्वारा भी कराई जा सकती है। इन सभी उपबंधों के बावजूद बीमाधारकों में दावों के नकारने, अनावश्यक कटौती करने तथा अतर्क संगत कारणों से विलम्ब करने को लेकर सदैव शिकायत रही है। स्वास्थ्य बीमा के क्षेत्र में पालिसीधारकों में सर्वाधिक रोष व्याप्त है। सार्वजनिक श्रेत्र

की एकाधिकार प्रवृत्ति के कारण पहले दावों के निपटान में विलम्ब हुआ करता था किन्तु सन 2000 से निजी कम्पनियों के बाजार में प्रवेश करने के बावजूद समस्या का समाधान नहीं हुआ है। स्थिति के विलकुल विपरीत शिकायतों की संख्या में लगातार वृद्धि हुई है तथा यह आमधारणा बनी है कि कम से कम सार्वजनिक उपक्रमों में दावा मिलने का गारन्टी तो है निजी कम्पनियाँ किस कारण

बीमा दावों के निपटान में समय सीमा की कोई पालना नहीं होती क्यों कि आम बीमाधारक इस बात से अनभिज्ञ है।

से दावा खारिज कर रही है, यह भी स्पष्ट नहीं करती हैं। बीमा दावों के निपटान में समय सीमा की कोई पालना नहीं होती क्यों कि आम बीमाधारक इस बात से अनभिज्ञ है। कि बीमा रेग्यूलैटर ने इस प्रकार का कोई पालिसी धारकों के हित संरक्षण के लिए कोई रेग्यूलेशन बनाया है, जिसमें निर्धारित समय में सर्वे कराने, सर्वे रिपोर्ट मंगाने तथा दावे निपटाने की समय सीमा है, अन्यथा बीमा कर्ता को ब्याज सहित भुगतान करना होता है। यही नहीं बीमा कम्पनियाँ भी यह नहीं चाहती कि इसकी जानकारी उपभोक्ता को हो।

दावा भुगतान से स्पष्ट इन्कार

बीमा कम्पनियाँ लोगों को पालिसी बेचते समय तमाम वायदे करती है, पर जब बात क्लेम के भुगतान की आती है तो बीमित व्यक्ति के सम्मुख समस्याएँ खड़ी होती है। खास तौर से स्वास्थ्य बीमा के क्षेत्र में बीमा कम्पनियों द्वारा दावा भुगतान करने से स्पष्ट इन्कार कर दिया जाता है। ऐसे

ही एक मामले में हाल ही में दिल्ली उपभोक्ता आयोग ने फैसला दिया है कि पालिसी लेने से पहले के रंगों को छिपाने को आधार बनाकर कोई बीमा कम्पनी मेडीक्लेम इन्कार नहीं सकती है, बशर्ते बीमित व्यक्ति ने पालिसी खरीदने से पहले शल्य चिकित्सा न करवाई हो या अस्पताल में भर्ती न रहा हो। आयोग ने कहा “जब तक कोई व्यक्ति स्वास्थ्य बीमा खरीदने के समय या इससे एक दो साल पहले अस्पताल में भर्ती न रहा हो, या शल्य चिकित्सा न करवाई हो, तब तक यह नहीं माना जा सकता कि उसने कोई नियमित समस्या छिपाई हैं। खासकर आधुनिक युग में जब लोग तनाव भरी जिन्दगी जी रहे है”। चूंकि मेडीक्लेम पालिसी देने से पहले ही बीमा कम्पनी यह तय करती है कि बीमा कराने से पहले व्यक्ति स्वस्थ है या नहीं इसलिये बाद में इस तरह की किसी भूल चूक का दावा करते हुये लाभ नहीं उठा सकती। आयोग ने बीमा कम्पनी की अपील को खारिज करते हुये कहा कि “लगता है बीमा कम्पनियाँ अपने दायित्वों का सही निर्वहण नहीं कर रही हैं, क्योंकि आधी आबादी इस तरह की समस्याओं से जूझ रही है और इस तरह कुछ समय बाद या तो उनका व्यवसाय ठप हो जायेगा या कम हो जायेगा। आयोग ने बीमा कम्पनी की इस दलील को खारिज कर दिया कि पालिसी धारक ने पालिसी खरीदने से पहले बीमारी छिपाई थी। आयोग ने स्पष्ट

इसालिये खारिज कर दिये जाते है कि बीमा पालिसी खरीदने वाले को प्रस्ताव पत्र के ब्यौरे की जानकारी ही नहीं होती।

आदि प्रमुख है। दुर्भाग्य से बड़ी संख्या में क्लेम इसालिये खारिज कर दिये जाते है कि बीमा पालिसी खरीदने वाले को प्रस्ताव पत्र के ब्यौरे की जानकारी ही नहीं होती। अधिकांश प्रस्ताव पत्र एजेन्ट द्वारा ही भर दिये जाते है, यहां तक कि नोमिनी भी। जिसका बड़ा खामियाना पालिसीधारक को भुगताना पड़ता है। दूसरा सर्वाधिक महत्वपूर्ण कारण है पालिसी धारक द्वारा आवश्यक दस्तावेज प्रस्तुत नहीं करना। इस स्थिती मे बीमा कम्पनी के पास दो ही विकल्प रह जाते एक आवश्यक दस्तावेज उपलब्ध न होने का कारण बतानादूसरा दावा खारिज कर दे या दावा लब्धित रहने पर “नो क्लेम” करके बन्द कर दे। इस स्थिती मे भी दोष पालिसीधारक के माथें मढ़ दिया जाता है, जो कि स्वाभाविक भी है। किन्तू तीसरा महत्वपूर्ण कारण बीमा कम्पनियों की कार्यकुशलता पर प्रश्नचिह्न लगा देती है जहां सारी औपचारिकताएँ पूरी करने के बावजूद बीमा कम्पनी किसी भी पालिसी क्लेम की परिभाषा अपने हित में कर एक उचित एवं वैधानिक क्लेम को खारिज कर पालिसी धारक को उसके कानूनी हक से वंचित कर देती है। सभी पीडित पक्षकार न तो न्यायालय का दरवाजा खटखटा पाते है न ओम्बडसमैन या उपभोक्ता मंच जैसी व्यवस्थाओं से वाकिफ होते है अतः दावों से वंचित रह जाते हैं और बीमा कम्पनियों का विश्वास खो देते हैं। दावो के खारिज होने में

किया कि लोग किसी बीमारी का मेडीकल शब्द तभी जान पाते है जब वे किसी अस्पताल में जाते है और उस का उपचार चल रहा हो या शल्य चिकित्सा हुई हो। अगर किसी व्यक्ति को दस - बीस साल पहले, दिल का दौरा पडा हो और अब वह सामान्य जीवन जी रहा है तो उसे उसका ब्यौरा देने की जरूरत नहीं।

क्यों होते है दावे खारिज?

सबसे पहले क्लेम खारिज होने के सामान्य कारणों में से एक प्रस्ताव पत्र में गलत जानकारी देना है। प्रस्ताव पत्र स्वयं भरना चाहिये तथा तथ्यों की सही जानकारी देनी चाहिये जिनमें आय, उम्र, पिछली बीमारी, किसी बीमा कम्पनी द्वारा बीमा प्रस्ताव मंजूरी न देना, आधिक्य लगान, तथा प्रस्तावित सम्पत्ति या जीवन के लिये एक से अधिक बीमा पालिसीयाँ लेना

मध्यस्थों तथा ब्रोकर कर्मचारियों का रोल को भी नकारा नहीं सकता।

सतर्कता की आवश्यकता:

जीवन बीमा गैर जीवन बीमा - दोनों क्षेत्रों में दावों के निपटान में देरी भी होती है और अनावश्यक कारणों से दावे खारिज भी किये जाते हैं। दोनों ही स्थितियों में पालिसीधारकों को सतर्कता बरतने की आवश्यकता है। और यह प्रयास पालिसी लेते समय से ही प्रारम्भ हो जायेगा कहीं कहीं प्रीइन्सपैक्शन, मेडिकल रिपोर्ट, पिछली बीमा पालिसी तथा नो क्लेम का पुष्टीकरण इस दिशा में महत्वपूर्ण आधार बन जाता है जो पालिसीधारक के हितों की रक्षा करता है। एक प्रस्तावक को प्रस्ताव पत्र भरने सभी मध्यस्थ - जिनमें एजेन्ट, ब्रोकर या कर्मचारी चुनने, सही पालिसी उत्पाद लेने तथा सही बीमा कम्पनी का चुनाव करना अति आवश्यक है, जो पालिसी लेने से पहले की प्रक्रिया है। उसके उपरान्त सही जोखिम या अतिरिक्त जोखिमों का चयन, बीमा राशि, नोमिनी, मूल्य या कीमत निर्धारण, तथा समय समय पर बीमा राशि का निर्धारण कराना शामिल है। सामान्य बीमा पालिसीयों में जहाँ डिक्लेरेशन क्लाज हो वहाँ मासिक डिक्लेरेशन देना भी आवश्यक है। इसके अतिरिक्त बीमित सम्पत्ति, वाहन या व्यक्ति से सम्बंधित बीमा अवधि में हुए किसी भी परिवर्तन की सूचना बीमा कम्पनी को निर्धारित अवधि में या तुरन्त

इस प्रक्रिया में सर्वाधिक महत्वपूर्ण है, हानि, नुकसान या मृत्यु की तुरन्त सूचना, जिससे बीमा कम्पनी पालिसी का निरीक्षण कर तुरन्त सामयिक कार्यवाही प्रारम्भ कर दे तथा दावा प्रक्रिया में विलम्ब न हो।

दे देनी चाहिये। तदुपरान्त आता है दावे की प्रक्रिया की अनुपालना। इस प्रक्रिया में सर्वाधिक महत्वपूर्ण है, हानि, नुकसान या मृत्यु की तुरन्त सूचना, जिससे बीमा कम्पनी पालिसी का निरीक्षण कर तुरन्त सामयिक कार्यवाही प्रारम्भ कर दे तथा दावा प्रक्रिया में विलम्ब न हो। जहाँ सर्वे होना है वहाँ सर्वेयर को पूर्ण सहयोग देना पालिसीधारक की नैतिक जिम्मेदारी है तथा मूल दस्तावेजों को दिखाना, चैक कराना व आवश्यक कागजात प्रस्तुत करना आवश्यक है जो दावे की प्रक्रिया को सरल, सुगम तथा सामयिक बना देते हैं।

दावों की कार्यप्रणाली:

दावों का यथोचित निपटान करने के लिये

बीमा संविदाओं से सम्बंधित कानून, सिद्धांत तथा व्यवहार की गहन जानकारी आवश्यक है। विशेष तथा मानक पालिसीयों तथा उनके अन्तर्गत आने वाले विभिन्न विस्तारणों व संशोधनों पर लागू होने वाली शर्तों और निबंधनों की विस्तृत जानकारी अत्यावश्यक है। किसी भी बीमा कम्पनी में दावा निपटान एक महत्वपूर्ण गतिविधि मानी जाती है। वास्तव में दावा निपटान को बीमा कम्पनी द्वारा ग्राहकों को दी जाने वाली प्राथमिक सेवा कहा जाना चाहिये। दावों का तुरन्त एवं न्यायोचित निपटान बीमाधारी जनता को दी जाने वाली अच्छी सेवा का प्रमाण है। साथ ही यह भी आवश्यक है कि दावा निपटान सम्बन्धी बातचीत पूरे धैर्य, व्यवहार कुशलता तथा सौजन्यपूर्वक ढंग से की जाये। बीमा की विभिन्न श्रेणियों के अन्तर्गत आने वाले दावों के मामले में अपनाई जाने वाली कार्यप्रणाली आम तौर पर एक जैसी रहती है और मोटे तौर पर यह प्राथमिक, अन्वेषण, क्षति निर्धारण तथा निपटान की त्रिआयामी व्यवस्था से गुजरती है। प्रत्येक श्रेणी के बीमा के लिये प्रयुक्त दावा प्रपत्रों में रही गयी जानकारी अलग अलग होती है। बड़े और पेचीदा दोषों की जाँच का कार्य स्वतन्त्र सर्वेक्षक द्वारा किया जाता है। आवश्यकता के अनुसार दूसरे सर्वेक्षक की रिपोर्ट भी ली जा सकती है। देश से बाहर देय दावों का निर्धारण दावा निपटानकर्ता एजेन्टों द्वारा किया जाता है। पालिसी पर इनका नाम निर्विष्ट किया जाता है। बीमाकर्ता द्वारा

बीमाधारक को भेजे जाने वाले दावे से सम्बन्धित सभी पत्र उसके अधिकारों पर “बिना प्रतिकूल प्रभाव डाले” जारी किये जाते हैं, जिससे यह स्पष्ट किया जाता है कि पालिसी के अन्तर्गत दायित्व निर्धारण प्रक्रिया के पूर्ण होने पर ही किया जायेगा।

दावा निर्धारण में पंच निर्णय:

सामान्यतया पालिसी शर्तों में “पंच निर्णय” भी एक महत्वपूर्ण शर्त होती है। पंच निर्णय और मुकदमेबाजी दोनों भिन्न चीजे हैं। पंच निर्णय किसी संविदा के अन्तर्गत उत्पन्न विवाद का निपटारा करने की पध्दति है और यह पंच निर्णय एवं समाधान, अधिनियम, 1996 के अनुरूप है। पालिसी के अन्तर्गत केवल दावा राशि सम्बन्धी विवादों को ही पंच निर्णय के लिये प्रस्तुत किया जाता है। बीमा पालिसी के अन्तर्गत किसी संविदा को प्रवृत्त करना या बीमा दावे की राशि का निपटारा करना न्यायालय द्वारा की जाने वाली कार्यवाही जैसा ही है, तथापि, मुकदमेबाजी में काफ़ी समय व धनराशि खर्च होती है। बीमा कर्ता के विरुद्ध किसी कानूनी न्यायालय में की जा सकने वाली कार्यवाही की पूर्ववर्ती शर्त यह है कि पहले पंच निर्णय प्राप्त कर लिया जाये। तथापि अधिनियम में विनिर्दिष्ट कुछेक आधारों जैसे कि पंच निर्णायक द्वारा किया गया कदाचार, किसी नये प्रमाण का पता चलना आदि को छोड़कर पंच निर्णय के विरुद्ध किसी न्यायालय में अपील नहीं की जा सकती। बीमाकर्ता एवं

पालिसीधारक दोनों पक्ष मिलकर एक पंच निर्णयकी नियुक्ति करते हैं या ऐसे पंच निर्णायक की नियुक्ति किये जाने पर यदि किसी पक्ष को आपत्ति हो तो मामला दो पंच निर्णायकों के लागत किया जाता है जिनमें से दोनों पक्ष एक एक नियुक्ती करते हैं। ये दोनों पंच निर्णायक मिलकर एक मध्यस्थ जिसे अम्पायर कहते हैं, कि नियुक्ती करते हैं। ऐसी बैठकों में अपनाई जाने वाली कार्य प्रणाली किसी न्यायालय की तरह ही होती है। यदि दोनों पंच निर्णायक लिये गये किसी निर्णय से सहमत न हों तो वह मामला मध्यस्थ के सम्मुख रखा जाता है जो अपना निर्णय देती है। लागत सम्बन्धी निर्णय पंच या मध्यस्थ के विवेकधिकार के अनुसार लिये जाते हैं।

दावा निपटान में देरी किसकी जवाबदेही?

कोई भी बीमा पालिसी दो चरणों में होकर गुजरती है। पहले चरण में बिक्री पूर्व सेवा शामिल है। जिसमें संभावित ग्राहक को बीमा के बारे में बतलाने व बीमा बिक्री का कार्य विचौलिये करते हैं। दूसरे चरण में बिक्री पश्चात सेवा है जिसमें पालिसी प्रपत्र एवं आवश्यक संशोधनों सहित बीमा दावों का निपटान भी शामिल है। बीमा कम्पनियों के लिये पालिसीधारक उनके ग्राहक हैं। जब एक बीमा कम्पनी पालिसी जारी करती है तो प्रति वर्ष उसके चलते रहने पर वह पालिसी कम्पनी के मुनाफे में अपना हिस्सा लाती है। इसके चलते पालिसी जितनी लम्बी चलेगी उतना ही मुनाफा कम्पनी को अधिक होगा। संतुष्ट पालिसीधारक इस सम्भावना को बढाते हैं कि वे कम्पनी को पुनः व्यवसाय देंगे। वे संतुष्ट होने पर और सम्भावित ग्राहकों से कम्पनी में वृद्धि होगी। यह सभी बढी हुई व्यापारिक गतिविधियाँ बीमा कम्पनी के मुनाफे को बढाती हैं। यह सब कुछ इस बात पर निर्भर करता है कि बीमा कम्पनी अपने पालिसीधारकों को कुशल सेवाएँ देने में कितनी कार्य कुशल है। इसकी असली परिक्षा दावा निपटान पर ही होती है। किसी पालिसीधारक द्वारा 4 वर्ष पालिसी जारी रखने तथा दावायुक्त नवीनीकरण कराते रहने पर अगर पांचवें वर्ष में दावा हो जाये और उसका निपटान न हो तो बीमा

दूसरे चरण में बिक्री पश्चात सेवा है जिसमें पालिसी प्रपत्र एवं आवश्यक संशोधनों सहित बीमा दावों का निपटान भी शामिल है।

कम्पनी की कार्य कुशलता पर प्रश्न चिन्ह लग जाता है। यद्यपि बीमा विनियामक विकास प्राधिकरण (पालिसीधारकों का हित संरक्षण) विनियम 2002 बड़ी ताकतवर बीमा कम्पनीयों के सामने छोटे, अलग थलग तथा रक्षा विहीन व्यक्तिगत पालिसीधारकों के हितों की रक्षा केलिये बना है। किन्तु इस विनियम की अनुपालना कितनी बीमा कम्पनीयाँ करती है और न करने पर तथा दावों के निपटान में देरी करने पर जवाबदेही किसकी है, यह अहम प्रश्न है।

बीमा कम्पनीयों पर जुर्माना :

हाल ही में निजी कम्पनी की एक शाख के प्रभारी एव उसके प्राधिकृत प्रतिनिधी द्वारा पहले तो शिकायतकर्ता की कार का बीमा करने के बाद उसके अचानक क्षतिगृस्त हो जाने पर मुआवजे की राशि देने में आना कानी करने का दोषी पाये जिला उपभोक्ता शिकायत निवारण फोरम ने 50 हजार का जुर्माना लगाया इसके अलावा कार की बीमा राशि 6.50 लाख रुपये भी देने के आदेश दिये। उधर दूसरी ओर जिला उपभोक्ता शिकायत निवारण फोरम ने किसी अन्य कंपनी को शिकायत कर्ता का वाहन उसके पास बीमाकृत होने के बावजूद उसके चोरी हो जाने पर मुआवजा देने से इंकार करने पर 30 हजार रुपये का जुर्माना लगाया वहीं बीमा की वाहन बीमाकृत राशि छ लाख रुपये भी देने के आदेश जारी कर दिये। बीमा रेग्युलेटर ने भी इस सम्बन्ध में बीमा

कम्पनीयों पर जुर्माने लगाए है। हाल ही में और एट कम्पनी ने बीमा रेग्युलेटर द्वारा दावा निर्धारण में देरी करने पर लगाये गये पांच लाख रु के जुर्मानेपर अपना स्पष्टीकरण दिया है कि कम्पनी की नीती समय पर दावा निपटाने की रही है किन्तु जहा अनुसंधान में अधिक समय लग रहा है वहां पैनल इन्ट्रैस्ट भी अदा किया गया है। बीमा रेग्युलेटर ने कम्पनी को अपनी दावा प्रक्रिया सुधारने की हिदायत दी थी। समय समय पर बीमा रेग्युलेटर उपभोक्ता अदालतें एवं ओम्बडसमैन बीमा कम्पनीयों को समय पर दावा निपटाने की सलाह देते रहे है तथा ऐसा न करने पर जुर्माना भी लगाते रहे है। इस व्यवस्था से दावा निपटाने की

समय समय पर बीमा
रेग्युलेटर उपभोक्ता
अदालतें एवं
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कम्पनीयों को समय पर
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करने पर जुर्माना भी
लगाते रहे है।

प्रक्रिया में सुधार भी आया है किन्तु समय समय पर देरी के मामले उजागर होते रहते है तथा पालिसीधारक उपभोक्ता न्यायालयों तथा ओम्बडसमैन व बीमा रेग्युलेटर का दरवाजा खटखटाते रहते है।

विदेशों में प्रचलित पध्दतियाँ:

इंगलैंड में बड़ी या जाटिल हानियों के लिये व्यावसायिक हानि - समायोजनकर्ताओं की नियुक्ति की जाती है। जिन्हे चार्टर्ड लॉस एडजस्टर्स कहा जाता है। वहाँ हानि के आकार और परिस्थितियों के आधार पर अलग अलग दृष्टिकोण अपनाया जाता है। इंगलैंड में जहाँ ब्रोकरों को पालिसी जारी करने का प्राधिकार दिया जाता है वही उन्हें विशिष्ट बीमा वर्गों और विशिष्ट सीमाओं तक दावा निपटान का अधिकार भी दिया जाता है। कुछ बीमाकर्ताओं के अपने अनुमोदित मरम्मत कर्ता होते है, जिन्हे नियमित रूप से दावा कार्य आबंटित किया जाता है। ये मरम्मत कर्ता अच्छी गुणवत्ता की मरम्मत सेवा प्रदान करते है। यूके बीमा बाजार का एक विशिष्ट लक्षण है मोटर इन्श्योरेन्स रिसर्च सेंटर - जिसे लोकप्रियता के आधार पर “थैचाम” के नाम से जाना जाता है। यह केन्द्र मोटर वाहन मरम्मत कार्य के सभी क्षेत्रों में अनुसंधान करता है। यह केन्द्र बीमा उद्योग द्वारा नियुक्त किये गये मोटर इंजीनियरों के लिये भी प्रशिक्षण की व्यवस्था करता है।

अमेरिका में हानियों का सर्वेक्षण समायोजक (एडजस्टर) द्वारा किया जाता है, जो बीमाकर्ता का कर्मचारी हो सकता है, जो बीमाकर्ता का कर्मचारी हो सकता है एडजस्टमेंट ब्यूरो का कर्मचारी हो सकता है अथवा स्वतन्त्र समायोजक हो सकता है जो संविदा के आधार पर अथवा एकल आधार पर कार्य कर सकता है। अमेरिकी बाजार का एक रोचक लक्षण है - पालिसीधारकों द्वारा अपने सम्पत्ति दावों की वसूली के लिये सार्वजनिक समायोजकों की सेवाएँ लेना ये समायोजक पालिसीधारकों का प्रतिनिधित्व करते हैं और हानि का प्रमाण तैयार करने, हानि या क्षति का विवरण तैयार करने और सम्बन्धित दस्तावेज तैयार करने एवं बीमा कर्ताओं के साथ बातचीत करने में पालिसीधारकों की सहायता करते हैं। जिन व्यापारियों के पास समय नहीं होता तथा बीमा दावा निपटान सम्बन्धी जानकारी नहीं होती वे यह सेवाएँ लेते हैं। इस के तौर पर उन्हें एक प्रतिशत अंक का भुगतान किया जाता है।

यह एक कड़वी सच्चाई है कि भारत में धाखाधड़ी के दावों का बाजार 95 हजार करोड़ को पार कर गया है। इसका प्रत्यक्ष प्रभाव बीमा कम्पनियों पर तथा अप्रत्यक्षप्रभाव बीमादरों में बढोतरी के माध्यम से पालिसीधारकों पर ही पड़ रहा है। तृतीय पक्ष दावों में दावा निर्धारण के लम्बी न्यायिक प्रक्रिया है जो कभी कभी मोटर दुर्घटना दावा प्राधिकरण से प्रारम्भ

बीमा कम्पनियाँ इस बात से अच्छी तरह वाकिफ हैं कि तुरन्त दावा निर्धारण उनका सर्वश्रेष्ठ विज्ञापन है।

होकर उच्च न्यायालय तथा सर्वोच्च न्यायालय तक पहुँच जाती है और दावाकर्ताओं की उम्र निकाल देती है। आजकल बीमा कम्पनियों का दावा विभाग 'केन्द्रीयकृत हब' का रूप लेता जा रहा है तथा सभी कम्पनियाँ दावा निर्धारण अपने प्रधान कार्यालय से करने लगी हैं जहाँ पत्राचार का आना जाना भी समय सीमा से परे हो जाता है। कुछ कम्पनियों ने "स्पाट सटल्मैन्ट" "बना विल दावा भुगतान" तथा "आनएकाउन्ट पेमेन्ट" जैसी व्यवस्थाएँ भी चलाकर व्यवस्था में सुधार किया है। किन्तु दावा निपटान में देरी का स्वरूप बढ़ता ही जा रहा है। अधिकांश दावों के निपटान में 6 माह से 9 वर्ष का समय लगता है। बीमा कम्पनियाँ इस बात से अच्छी तरह वाकिफ हैं कि तुरन्त दावा निर्धारण उनका सर्वश्रेष्ठ विज्ञापन है। किन्तु किसी न

किसी कारण प्रक्रिया में देरी होती जाती है। अब समय आ गया है कि बीमाकर्ता इस बात को अपना लें कि उनके यहाँ ग्राहक को:

1. सम्मान दिया जाता है।
 2. उसकी भावनाओं और विचारों की उपेक्षा नहीं होती।
 3. यह नहीं लगता कि उसके धन का दुरुपयोग हुआ है।
 4. यह महसूस होती है कि उसका ध्यान रखा गया है और जरूरत के वक्त पर उसकी सहायता की गई है।
- अब बीमा को सही अर्थों में सिद्धान्त अपनाने की नहीं अमल में लाने की आवश्यकता है।

जगेन्द्र कुमार कार्पोरेट हेड (ट्रेनिंग) श्रीराम जनरल इश्योरेन्स

Report Card: General

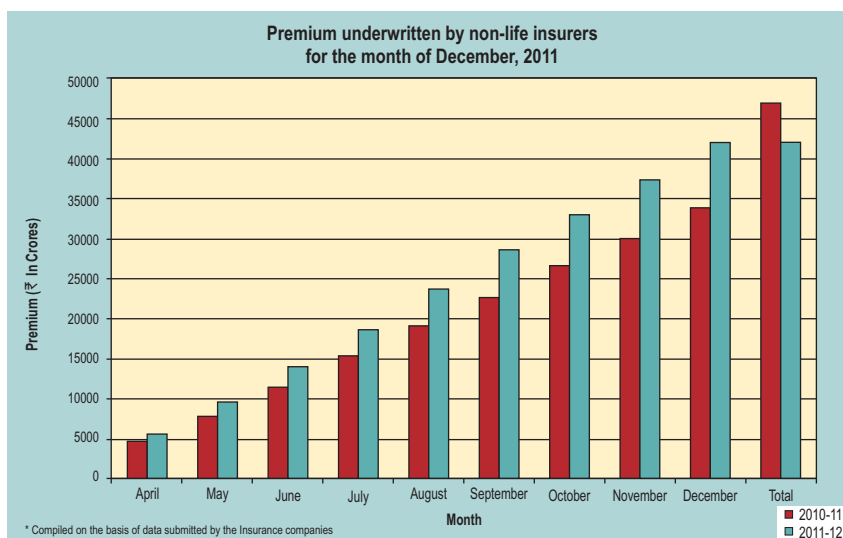
GROSS PREMIUM UNDERWRITTEN FOR AND UPTO THE MONTH OF DECEMBER, 2011

(₹ in Crores)

INSURER	DECEMBER		APRIL - DECEMBER		GROWTH OVER THE CORRESPONDING PREVIOUS YEAR
	2011-12	2010-11*	2011-12	2010-11*	
Royal Sundaram	116.34	90.87	1071.30	829.32	29.18
Tata-AIG	147.18	103.07	1265.58	896.52	41.17
Reliance General	147.63	143.06	1294.08	1218.11	6.24
IFFCO-Tokio	163.51	140.22	1455.74	1325.00	9.87
ICICI-lombard	417.83	309.23	3812.78	3123.68	22.06
Bajaj Allianz	262.48	227.31	2384.12	2094.42	13.83
HDFC ERGO General	157.36	106.17	1345.01	941.95	42.79
Cholamandalam	108.41	71.61	1010.91	718.32	40.73
Future Generali	73.70	52.98	674.84	441.35	52.90
Universal Sampo	38.59	24.14	290.59	212.37	36.83
Shriram General	117.19	70.79	859.34	524.02	63.99
Bharti AXA General	72.24	33.20	602.46	373.69	61.22
Raheja QBE	2.05	0.37	15.95	5.71	179.40
SBI General	18.37	2.58	151.94	14.39	956.03
L&T General	12.32	2.13	96.85	3.84	2424.21
Star Health & Allied Insurance	49.14	161.85	856.11	951.16	-9.99
Apollo MUNICH	28.72	15.89	262.09	140.25	86.88
Max BUPA	15.52	2.66	75.57	14.97	404.83
New India	740.68	635.93	6287.08	5310.71	18.39
National	672.34	549.12	5508.11	4351.23	26.59
United India	648.32	532.90	5808.37	4578.55	26.86
Oriental	471.66	447.28	4398.12	3893.34	12.97
ECCG	85.70	73.16	700.88	632.52	10.81
AIC	74.61	45.82	1795.52	1293.84	38.77
PRIVATE TOTAL	1948.56	1558.12	17525.27	13829.05	26.73
PUBLIC TOTAL	2693.31	2284.21	24498.08	20060.19	22.12
GRAND TOTAL	4641.88	3842.33	42023.35	33889.24	24.00

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

* Figures revised by insurance companies



Institute of Insurance and Risk Management conducted a seminar “A Decade of Experience: Healthcare Insurance...Present Scenario” on 24th January, 2012 at Hyderabad. The objective and purpose of this seminar was to create a single platform for all the stakeholders of the healthcare insurance business that include insurers, brokerage firms, Third Party Administrators and healthcare providers; for the healthy and wholesome growth of the industry by understanding the issues concerning each of them. Mr. Vepa Kamesam, Managing Director, IIRM delivered the welcome address; and Mr. J. Hari Narayan, Chairman, IRDA & IIRM delivered the inaugural address that set the tone for the seminar. Ms. K.G.P.L. Ramadevi, Dy. Director (Health), IRDA; and Ms. V. Jayalakshmi, Asst. Professor, Siva Sivani Institute of Management were declared winners of the IIRM cash prize award for their Research Papers on the problems ailing the industry and the policyholders’ perspectives.



Mr. VepaKamesam delivering the welcome address. Others in the photograph are (L to R): Mr. M. Ramaprasad, Member (Non-Life), IRDA; Mr. G. Srinivasan, CMD, United India Insurance Co. Ltd.; and Mr. J. Hari Narayan.



Ms. K.G.P.L. Ramadevi handing over a memento to Mr. G. Srinivasan on behalf of IIRM.



Ms. V. Jayalakshmi receiving the IIRM award from Mr. B.N. Prasad, AGM, India Insure Risk Management and Insurance Broking Services Pvt. Ltd.

Insurance Institute of India, Mumbai conducted a National Conference, 'Back to the Basics of Insurance' on 27th January 2012 at Mumbai. The focus of the Conference inaugurated by Mr J. Hari Narayan, Chairman, IRDA, was on the insurance industry's need to examine whether it has lost touch with the basics in its pursuit for fast pace of growth over a decade of liberalization. Insurance Institute of India, through this conference, has pointed out to the industry the necessity to review its position against the fundamentals of insurance like mutuality, financial security, utmost good-faith, financial soundness, customer relationship; and above all, trust. The theme is of added significance as the insurance industry has attracted a lot of professionals across different sectors as well as a lot of young talent in the recent past. The conference comprised of three panel discussions – each on Life, Non-Life and Distribution aspects.

Seen in the photograph taken at the inaugural session are (L to R): Mr. Sharad Shrivastava, Secretary General, Insurance Institute of India; Mr. H. Ansari, former Member (Non-Life) IRDA; Mr. D.K. Mehrotra, Acting Chairman, LIC of India; Mr. J. Hari Narayan; Mr. G.N. Bajpai, Chairman of Future Generali Insurance Co. and former Chairman of SEBI and LIC of India; and Mr. P.K. Rath, Director, College of Insurance, Mumbai.



The Distribution panelists (from L to R): Mr. Rajesh Ajgaonkar, VP, IDBI Federal LI Co. Ltd.; Mr Malay Ghosh, CEO, Reliance LI Co. Ltd.; Mr. N.N. Joshi, Director, ING Vysya LI Co. Ltd. (Chairman); Mr. Hemant Bhargava, ED, LIC of India; and Mr. Prerak Parmar, Zonal VP, Max New York LI Co. Ltd.



The Non-Life panelists (from L to R): Mr. Sadashiv Mishra, General Manager, The New India Assurance Company Limited; Mr. H. Ansari (Chairman); Ms. T.L. Alamelu, DGM, United India Insurance Co. Ltd.; Mr. Arun Agarwal, Consultant, Lloyds; and Mr. Shrirang Samant, Country Head, Travelers Companies Inc.



The Life panelists (from L to R): Mr. M. Suresh, MD & CEO, Tata-AIG Life Insurance Co. Ltd.; Mr. Sandeep Ghosh, MD & CEO, Bharti Axa Life Insurance Co. Ltd.; Mr. G. N. Bajpai (Chairman); Mr. Kamalji Sahay MD & CEO, Star Union Dai-ichi Life Insurance Co. Ltd.; Mr. S.Roy Chowdhury, ED, LIC of India; and Mr. Deepak Sood, MD & CEO, Future Generali Life Insurance Co. Ltd.

Statistical Supplement

(Monthly - November, 2011)

Name of the Insurer: Bajaz 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	1756.00	20189.81	31156	258889	-259.50	2451.48	46392053.00	332703311.00
Previous year	2015.50	17738.33	29319	239329	290.67	1514.57	19808826.00	242690766.00
Marine Cargo	580.13	5758.18	15069	111784	134.25	895.91	12507448.00	72374041.00
Previous year	445.88	4862.27	13640	112654	-0.15	561.76	10598564.00	100875232.00
Marine Hull (Including Onshore & Offshore oil energy)	15.63	74.05	4	79	7.02	-266.32	15749.00	1498907.00
Previous year	8.61	340.37	23	255	-97.05	-126.32	6574.00	2448703.00
Marine (Total)	595.75	5832.23	15073	111863	141.27	629.59	12523197.00	73872948.00
Previous year (Total)	454.49	5202.64	13663	112909	-97.20	435.44	10605138.00	103323935.00
Aviation	362.35	1927.99	32	236	277.81	11.27	5711502.00	27200837.00
Previous year	84.54	1916.72	25	213	-115.72	-364.11	924633.00	28430523.00
Engineering	996.81	7558.22	1561	11038	45.83	1001.39	14701341.00	105810506.00
Previous year	950.98	6556.83	1419	10873	235.39	92.00	14685290.00	125518803.00
Motor Own Damage	11663.46	91590.63	345718	2676188	1130.54	7674.73	849989.00	6606366.00
Previous year	10532.92	83915.90	0	2309801	2450.29	18605.13	721684.00	6043300.00
Motor Third party	4223.46	33922.96	347958	2694020	991.69	6562.14		
Previous year	3231.77	27360.83	335213	2685752	168.61	2164.83		
Motor (Total)	15886.92	125513.59	347958	2694020	2122.22	14236.87	849989.00	6606366.00
Previous year (Total)	13764.70	111276.72	335213	2685752	2618.90	20769.96	721684.00	6043300.00
Workmen's compensation / Employer's liability	252.86	2022.58	1626	14303	10.58	365.71	52535.00	364743.00
Previous year	242.29	1656.87	1408	13266	92.74	502.36	32900.00	230768.00
Public Liability	3.44	47.87	9	150	-0.89	3.63	9417.00	282406.00
Previous year	4.34	44.24	8	99	1.02	3.52	9672.00	112906.00
Product Liability	83.36	1073.24	41	429	28.70	250.43	43567.00	509742.00
Previous year	54.66	822.81	37	340	3.73	196.50	34982.00	388704.00
Other Liability Covers	314.16	5431.77	286	2342	130.96	802.07	221665.00	2090326.00
Previous year	183.20	4629.70	235	2223	-110.36	1568.75	157312.00	1689843.00
Liability (Total)	653.82	8575.46	1962	17224	169.34	1421.84	327184.00	3247217.00
Previous year (Total)	484.48	7153.63	1688	15928	-12.87	2271.12	234866.00	2422221.00
Personal Accident	475.90	3593.13	5999	50254	98.60	142.34	1640384.00	15484610.00
Previous year	377.30	3450.79	6148	60419	81.27	-208.37	2102330.00	31629878.00
Medical Insurance	2122.33	22186.06	68513	523769	591.11	5436.67	15227311.00	38919402.00
Previous year	1531.22	16749.39	62331	613640	362.44	552.75	1848863.00	18780450.00
Overseas Medical Insurance	364.26	4625.17	41612	392816	37.49	538.57	259860.00	7693472.00
Previous year	326.77	4086.59	36160	365874	-38.96	202.34	191634.00	957054.00
Health (Total)	2486.59	26811.23	110125	916585	628.60	5975.24	15487171.00	46612874.00
Previous year (Total)	1858.00	20835.99	98491	979514	323.48	755.09	2040497.00	19737504.00
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	35.67	696.01	12	126	-167.41	-776.20	217365.00	2949110.00
Previous year	203.08	1472.21	20	164	128.17	224.63	470084.00	2575497.00
All Other Miscellaneous	1363.14	11466.76	60897	423736	185.09	359.55	3117514.00	42353327.00
Previous year	1178.05	11107.21	56153	417670	-181.82	886.24	2270658.00	69125642.00
Grand Total	24612.96	212164.44	574775	4483971	3241.84	25453.36	100967700.00	656841106.00
Previous year (Total)	21371.12	186711.07	542139	4522771	3270.26	26376.57	53864006.00	631498069.00

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
95.88	1051.40	2437	21313	0.00	0.00	0.00	0.00		
116.94	1350.24	4145	32731	0.00	0.00	0.00	0.00		
26.78	319.35	631	6708	0.00	0.00	0.00	0.00		
12.92	144.50	551	5236	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		
26.78	319.35	631	6708	0.00	0.00	0	0	0	0
12.92	144.50	551	5236	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		
61.31	660.26	138	1190	0.00	0.00	0.00	0.00		
109.00	996.13	194	1747	0.00	0.00	0.00	0.00		
783.83	7405.15	3137	125292	0.00	0.00	0.00	0.00		
78.86	688.69	2616	19931	0.00	0.00	0.00	0.00		
317.68	3025.88	25626	127011	0.00	0.00	0.00	0.00		
1263.48	9412.47	33972	262194	0.00	0.00	0.00	0.00		
1101.51	10431.03	25626	127011	0.00	0.00	0	0	0	0
1342.34	10101.15	33972	262194	0.00	0.00	0	0	0	0
36.00	277.93	246	2061	0.00	0.00	0.00	0.00		
27.00	260.93	309	2365	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		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
1.63	212.27	10	2581	0.00	0.00	0.00	0.00		
1.55	148.86	13	81	0.00	0.00	0.00	0.00		
37.63	490.20	256	4642	0.00	0.00	0	0	0	0
28.55	409.79	322	2446	0.00	0.00	0	0	0	0
42.82	410.40	4815	37640	4.99	30.45	10987.00	65643.00		
13.77	537.22	665	19065	2.85	15.79	9500.00	53210.00		
97.00	904.18	1940	17064	0.00	0.00	0.00	0.00	91177.00	787284.00
53.23	561.47	1342	13108	0.00	0.00	0.00	0.00	58312.00	598216.00
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
97.00	904.18	1940	17064	0.00	0.00	0	0	91177	787284
53.23	561.47	1342	13108	0.00	0.00	0	0	58312	598216
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		
293.84	2461.60	11239	88095	0.00	0.00	0.00	0.00		
310.00	2137.37	14932	99301	0.00	0.00	0.00	0.00		
1756.77	16728.42	47082	303663	4.99	30.45	10987	65643	91177	787284
1986.75	16237.88	56123	435828	2.85	15.79	9500	53210	58312	598216

Name of the Insurer: Bharti Axa 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	210.40	3249.84	965	11015	210.40	3039.44	247344.84	6539628.07
Previous year	173.68	2733.12	1851	11959	173.68	2559.45	12729421.98	63946892.47
Marine Cargo	147.83	1294.49	172	1503	147.83	1146.66	98695.09	2259799.89
Previous year	53.05	765.50	225	1556	53.05	712.45	5025449.08	24459400.44
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	147.83	1294.49	172	1503	147.83	1146.66	98695.09	2259799.89
Previous year (Total)	53.05	765.50	225	1556	53.05	712.45	5025449.08	24459400.44
Aviation								
Previous year								
Engineering	148.27	872.09	115	885	148.27	723.82	149034.14	719357.97
Previous year	70.18	795.10	170	1167	70.18	724.92	11859495.72	42873128.52
Motor Own Damage	4134.06	26276.08	59778	381447	4134.06	22142.02	229605.87	1522802.24
Previous year	2807.88	19236.84	54005	328961	2807.88	16428.96	2841188.26	11762688.53
Motor Third party	1318.08	9237.97	59778	381447	1318.08	7919.89		
Previous year	783.50	5612.43	54005	328961	783.50	4828.93		
Motor (Total)	5452.14	35514.05	59778	381447	5452.14	30061.91	229605.87	1522802.24
Previous year (Total)	3591.38	24849.27	54005	328961	3591.38	21257.89	2841188.26	11762688.53
Workmen's compensation / Employer's liability	6.85	107	38	361	6.85	100.02	1055.35	17881
Previous year	3.53	83.93	36	593	3.53	80.40	38887.08	188640.78
Public Liability	0.00		0		0.00		0.00	
Previous year	0.00		0		0.00		0.00	
Product Liability	0.00		0		0.00		0.00	
Previous year	0.00		0		0.00		0.00	
Other Liability Covers	5.75	151	8	96	5.75	145.20	1885.00	54130
Previous year	20.83	68.17	5	95	20.83	47.34	64051.54	322853.19
Liability (Total)	12.60	257.83	46	457	12.60	245.23	2940.35	72011.01
Previous year (Total)	24.36	152.10	41	688	24.36	127.74	102938.63	511493.97
Personal Accident	117.01	1527.46	619	7806	117.01	1410.45	175179.00	3409497.95
Previous year	81.57	1113.45	1825	12107	81.57	1031.88	17440836.24	87044316.51
Medical Insurance	900.82	9711.27	1071	11576	900.82	8810.46	6809.09	41927.94
Previous year	355.68	3344.22	1899	13135	355.68	2988.54	78865.23	297366.26
Overseas Medical Insurance								
Previous year								
Health (Total)	900.82	9711.27	1071	11576	900.82	8810.46	6809.09	41927.94
Previous year (Total)	355.68	3344.22	1899	13135	355.68	2988.54	78865.23	297366.26
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	88.21	594.88	1021	10204	88.21	506.67	118969.43	702974.46
Previous year	36.87	296.60	1261	9502	36.87	259.73	1126168.34	4751562.12
Grand Total	7077.29	53021.92	63787	424893	7077.29	45944.63	1028577.80	15267999.53
Previous year (Total)	4386.77	34049.35	61277	379075	4386.77	29662.58	51204363.48	235646848.82

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
13.80	74.86	50	6714						
8.28	8.50	1567	1583						
4.25	5.00	18	33						
0.06	0.06	3	3						
4.25	5.00	18	33	0.00	0.00	0	0	0	0
0.06	0.06	3	3	0.00	0.00	0	0	0	0
6.27	15.81	3	46						
3.40	3.40	1	1						
113.31	822.43	2938	18521						
94.05	294.11	3675	7868						
51.72	391.30	0	0						
	11.64								
165.03	1213.73	2938	18521	0.00	0.00	0	0	0	0
94.05	305.75	3675	7868	0.00	0.00	0	0	0	0
1.14	3	2	11						
0.03	0.26	1	3						
1.17	3.30	3	14	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
6.80	190.14	24	611						
10.93	45.06	104	193						
160.27	204.44	19	408						
5.72	14.58	76	100	0.00	0.00	0.00	0.00		
160.27	204.44	19	408	0.00	0.00	0	0	0	0
5.72	14.58	76	100	0.00	0.00	0	0	0	0
1.55	45.43	77	6483						
3.96	5.50	910	985						
359.15	1752.70	3132	32830	0.00	0.00	0	0	0	0
126.40	382.85	6336	10733	0.00	0.00	0	0	0	0

Name of the Insurer: Cholamandalam Ms 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	520.0	4,997.3	12,310	95,326	184.6	964.6	10,956,198	15,917,116
Previous year	335.4	4,032.8	6,091	51,584	196.6	121.3	664,687	10,491,539
Marine Cargo	188.9	3,063.9	474	5,529	(84.2)	303.0	1,518,346	29,155,050
Previous year	273.0	2,760.9	700	6,096	34.6	(17.7)	1,900,000	15,246,524
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-	-	(1.1)	-	0
Previous year	-	1.1	-	-	5.5	(92.9)	-	104
Marine (Total)	188.9	3,063.9	474	5,529	(84.2)	301.9	1,518,346	29,155,050
Previous year (Total)	273.0	2,762.0	700	6,096	40.1	(110.6)	1,900,000	15,246,628
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	249.1	1,730.3	723	6,369	78.3	152.8	542,663	3,056,281
Previous year	170.8	1,577.5	734	5,663	(27.7)	(20.5)	517,172	2,272,849
Motor Own Damage	4,353.6	34,238.6	62,755	494,861	1,025.8	7,381.2	311,599	2,185,211
Previous year	3,327.8	26,857.4	58,353	465,133	832.6	6,313.6	84,933	1,674,228
Motor Third party	2,948.4	22,541.8	62,952	496,349	1,488.0	10,755.5	-	-
Previous year	1,460.4	11,786.3	-	-	391.0	3,395.2	-	-
Motor (Total)	7,302.0	56,780.4	62,952	496,349	2,513.8	18,136.7	311,599	2,185,211
Previous year (Total)	4,788.3	38,643.8	58,353	465,133	1,223.6	9,708.8	84,933	1,674,228
Workmen's compensation / Employer's liability	(1.5)	137.6	279	2,447	(3.7)	(186.8)	6,005	57,144
Previous year	2.2	324.5	-	720	(30.0)	17.3	3,876	52,086
Public Liability	144.5	967.5	80	848	66.4	482.8	21,821	147,973
Previous year	78.1	484.7	339	2,633	82.4	(172.8)	35,930	219,932
Product Liability	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Other Liability Covers	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Liability (Total)	143.0	1,105.1	359	3,295	62.7	296.0	27,826	205,117
Previous year (Total)	80.2	809.1	339	3,353	52.5	(155.4)	39,806	272,018
Personal Accident	384.0	3,014.7	1,585	12,918	97.9	752.1	380,345	2,504,425
Previous year	286.1	2,262.6	1,825	16,738	12.3	268.5	313,940	2,569,392
Medical Insurance	3,089.1	17,958.2	2,384	16,296	896.0	5,384.9	150,441	848,220
Previous year	2,193.2	12,573.3	1,219	18,014	1,550.2	2,082.6	155,965	718,902
Overseas Medical Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Health (Total)	3,089.1	17,958.2	2,384	16,296	896.0	5,384.9	150,441	848,220
Previous year (Total)	2,193.2	12,573.3	1,219	18,014	1,550.2	2,082.6	155,965	718,902
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	130.3	1,600.8	4,446	47,976	(29.1)	(408.9)	148,999	3,111,320
Previous year	159.5	2,009.7	4,773	66,806	(139.7)	(367.4)	319,161	2,938,776
Grand Total	12,006.4	90,250.8	85,233	684,058	3,719.9	25,580.1	14,036,416	56,982,739
Previous year (Total)	8,286.4	64,670.7	74,034	633,387	2,908.0	11,527.3	3,995,664	36,184,331

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
1.2	5.7	45	847	262.4	3,266.1				
0.4	0.4	-	-	191.4	892.4	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
8.7	28.4	9	26	64.5	567.9	-	-		
-	-	-	-	38.4	189.8	-	-		
374.8	2,321.0	8,266	53,294	-	-	-	-		
224.0	1,608.4	7,672	25,196	-	-	-	-		
182.1	1,180.3	8,306	53,494	-	-	-	-		
-	-	-	-	-	-	-	-		
556.9	3,501.3	8,306	53,494	-	-	-	-		
224.0	1,608.4	7,672	25,196	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
2,868.7	13,356.5	32	119			1,712,481	8,548,707		
-	-	57	57	1,760.4	7,984.1	1,099,464	4,962,216		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
2,868.7	13,356.5	32	119	-	-	1,712,481	8,548,707		
-	-	57	57	1,760.4	7,984.1	1,099,464	4,962,216		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
33.2	249.6	1,385	11,639	1.8	345.1	1,253	12,004		
17.2	86.2	1,489	6,378	73.1	294.4	-	-		
3,468.7	17,141.5	9,777	66,125	328.8	4,179.2	1,713,734	8,560,711	-	-
241.6	1,694.9	9,218	31,631	2,063.3	9,360.7	1,099,464	4,962,216	-	-

Name of the Insurer: Future General 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	540.37	6,799.73	1755	15154	315.97	1,911.14	444.14	1,448,941.64
Previous year	224.40	4,888.59	712	7325	(28.25)	2,582.85	441,874.14	2,788,277.16
Marine Cargo	231.45	2,642.95	676	5666	(40.77)	472.81	156,302.94	3,243,719.85
Previous year	272.22	2,170.14	5015	32936	151.14	1,144.23	356,159.55	3,691,209.19
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Marine (Total)	231.45	2,642.95	676	5666	(40.77)	472.81	156,302.94	3,243,719.85
Previous year (Total)	272.22	2,170.14	5015	32936	151.14	1,144.23	356,159.55	3,691,209.19
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	210.19	1,766.80	468	3476	51.13	142.74	22,585.84	306,569.34
Previous year	159.06	1,624.05	330	2227	2.20	704.77	87,992.13	679,022.59
Motor Own Damage	3,104.88	22,425.04	50027	370143	1,139.03	8,018.09	92,498.68	630,903.32
Previous year	1,965.85	14,406.94	36755	305504	837.48	5,614.50	175,103.40	928,546.48
Motor Third party	1,612.40	11,691.99	50058	370471	907.43	6,177.05		
Previous year	704.97	5,514.94	36774	305638	239.80	2,045.73		
Motor (Total)	4,717.27	34,117.02	50058	370471	2,046.45	14,195.14	92,498.68	630,903.32
Previous year (Total)	2,670.82	19,921.88	36774	305638	1,077.27	7,660.24	175,103.40	928,546.48
Workmen's compensation / Employer's liability	68.80	770.05	439	3770	31.69	397.70	162.32	13,001.27
Previous year	37.11	372.34	288	2405	12.60	181.60	3,629.29	33,790.63
Public Liability	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Product Liability	134.08	749.35	66	761	85.42	274.95	9,891.50	125,227.42
Previous year	48.66	474.40	66	597	(1.28)	176.29	10,766.66	87,348.87
Other Liability Covers	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Liability (Total)	202.89	1,519.39	505	4531	117.11	672.65	10,053.82	138,228.68
Previous year (Total)	85.78	846.75	354	3002	11.31	357.90	14,395.95	121,139.50
Personal Accident	544.83	3,363.86	4546	34106	424.07	1,422.89	84,027.98	6,269,241.30
Previous year	120.77	1,940.98	2938	26009	52.99	1,045.91	130,074.24	5,794,005.86
Medical Insurance	528.36	7,074.22	1550	11339	314.57	1,574.63	14,446.40	69,397.20
Previous year	213.79	5,499.60	944	7410	92.92	2,261.71	5,124.91	37,583.21
Overseas Medical Insurance	59.77	708.28	3783	42827	5.26	94.16	4,724.35	9,726.31
Previous year	54.51	614.12	3868	38707	10.75	213.41	5,700.85	56,639.82
Health (Total)	588.13	7,782.50	5333	54166	319.83	1,668.78	19,170.75	79,123.51
Previous year (Total)	268.30	6,113.72	4812	46117	103.67	2,475.12	10,825.76	94,223.03
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	275.78	2,121.82	2604	18488	151.90	790.72	10,071.13	298,591.31
Previous year	123.89	1,331.10	1750	23635	28.61	656.49	119,220.70	1,057,194.17
Grand Total	7,310.92	60,114.07	65945	506058	3,385.69	21,276.87	395,155.28	12,415,318.97
Previous year (Total)	3,925.23	38,837.19	52685	446889	1,398.95	16,627.50	1,335,645.87	15,153,617.98

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
50.14	440.10	188	1710						
33.95	361.29	56	740						
10.90	322.49	55	393						
26.29	252.98	219	2502						
10.90	322.49	55	393	-	-	0	0		
26.29	252.98	219	2502	-	-	0	0		
5.16	168.58	28	277						
5.49	103.34	20	167						
297.80	2,194.45	4774	35503						
195.58	1,144.92	3607	27323						
184.36	1,273.48								
83.82	513.59	-	6436						
482.17	3,467.94	4774	35503	-	-	0	0		
279.40	1,658.51	3607	27323	-	-	0	0		
2.68	77.35	24	199						
	33.00		54						
0.15	27.39	1	13						
7.10	43.93	27	117						
2.83	104.74	25	212	-	-	0	0		
7.10	76.93	27	171	-	-	0	0		
5.10	86.62	335	2207		33.02		215000		
4.95	39.07	217	1099		5.20		95367		
7.91	167.81	75	606					18909	278166
2.69	75.58	50	365					5773	184869
3.27	33.21	178	2013						
2.69	18.97	206	1199						
11.19	201.02	253	2619	-	-	0	0	18909	278166
5.38	94.55	256	1564	-	-	0	0	5773	184869
105.68	393.95	1296	7962						
27.23	259.43	598	15455						
673.16	5,185.43	6954	50883	-	33.02	0	215000	18909	278166
389.79	2,846.10	5000	49021	-	5.20	0	95367	5773	184869

Name of the Insurer: *HDFC ERGO 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	969.48	19,268.41	3,737	30,982	261.02	5,711.39	1,110,859	49,666,490
Previous year	708.46	13,557.02	2,333	21,114	377.64	5,836.44	1,009,192	28,034,885
Marine Cargo	320.31	2,990.97	236	1,612	31.56	1,073.25	1,352,931	11,467,878
Previous year	288.75	1,917.71	136	1,194	211.04	1,096.12	909,063	6,736,021
Marine Hull (Including Onshore & Offshore oil energy)	111.37	1,391.21	32	286	(173.45)	449.56	11,000	191,577
Previous year	284.82	941.65	17	247	178.28	146.42	60,804	208,856
Marine (Total)	431.68	4,382.18	268	1,898	(141.89)	1,522.82	1,363,930	11,659,455
Previous year (Total)	573.58	2,859.36	153	1,441	389.32	1,242.54	969,868	6,944,876
Aviation	62.76	1,716.84	11	42	(4.06)	(1,077.84)	18,600	1,678,639
Previous year	66.82	2,794.69	2	23	(49.35)	1,734.94	138,100	1,368,814
Engineering	488.14	4,944.68	498	2,965	81.82	1,382.88	122,209	2,500,931
Previous year	406.32	3,561.80	213	1,903	270.14	1,878.94	351,559	3,515,306
Motor Own Damage	4,083.75	26,491.87	57,522	383,470	1,499.08	8,367.99	271,082	1,770,373
Previous year	2,584.67	18,123.89	41,269	286,125	780.93	6,746.05	171,811	1,204,178
Motor Third party	2,030.46	13,833.47	98,235	671,205	1,107.89	6,972.74		
Previous year	922.57	6,860.73	55,556	381,340	181.73	1,658.37		
Motor (Total)	6,114.22	40,325.34	98,235	671,205	2,606.97	15,340.73	271,082	1,770,373
Previous year (Total)	3,507.25	24,984.61	55,556	381,340	962.65	8,404.43	171,811	1,204,178
Workmen's compensation / Employer's liability	38.39	324.90	57	439	(7.84)	118.56	26,488	337,204
Previous year	46.24	206.34	31	267	37.04	93.70	41,721	204,903
Public Liability	5.63	169.63	9	146	(3.00)	12.18	3,864	(323,410)
Previous year	8.63	157.45	13	108	7.65	100.11	5,910	497,300
Product Liability	0.00	208.82	1	23	0.00	56.61	1	18,141
Previous year	-	152.21	-	21	(5.90)	124.69	-	42,666
Other Liability Covers	977.53	6,387.74	108	849	179.73	1,108.89	254,030	1,591,525
Previous year	797.80	5,278.85	100	681	(176.68)	274.47	178,450	1,148,976
Liability (Total)	1,021.55	7,091.09	175	1,457	168.89	1,296.23	284,383	1,623,461
Previous year (Total)	852.66	5,794.85	144	1,077	(137.88)	592.97	226,081	1,893,845
Personal Accident	1,589.67	11,707.41	100,147	714,611	550.60	3,616.65	2,711,285	12,450,791
Previous year	1,039.07	8,090.76	103,197	597,051	234.36	4,575.86	337,028	1,614,062
Medical Insurance	3,647.29	26,351.34	39,846	281,533	1,273.53	5,680.55	130,373	1,007,188
Previous year	2,373.76	20,670.78	31,474	205,377	1,517.16	4,607.97	99,934	728,968
Overseas Medical Insurance	53.32	1,055.85	553	5,117	(3.15)	500.55	36,811	7,433,204
Previous year	56.48	555.31	387	4,219	10.85	143.24	1,120,953	8,403,117
Health (Total)	3,700.62	27,407.19	40,399	286,650	1,270.38	6,181.10	167,183	8,440,391
Previous year (Total)	2,430.24	21,226.09	31,861	209,596	1,528.01	4,751.21	1,220,887	9,132,085
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	74.86	1,921.97	532	1,564	103.14	1,213.13	195,628	2,419,256
Previous year	(28.27)	708.84	2,598	14,670	(619.91)	(4,228.66)	(158,038)	522,152
Grand Total	14,452.99	118,765.11	244,002	1,711,374	4,896.86	35,187.10	6,245,160	92,209,787
Previous year (Total)	9,556.12	83,578.02	196,057	1,228,215	2,954.99	24,788.67	4,266,488	54,230,203

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
5.49	723.11	217	1,679		-		-		
19.76	721.66	161	1,460	-	-	-	-		
10.67	70.42	29	163		-		-		
16.92	188.61	14	92	-	-	-	-		
0.36	8.45	-	2		-		-		
-	0.22	-	22	-	-	-	-		
11.03	78.88	29	165	-	-	-	-	-	-
16.92	188.83	14	114	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
28.38	288.37	49	322		-		-		
7.61	187.54	19	226	-	-	-	-		
365.29	2,552.69	5,458	37,825		-		-		
248.39	1,613.05	4,484	28,665	-	-	-	-		
262.08	1,817.19	12,124	86,850		-		-		
115.90	828.95	6,505	45,697	-	-	-	-		
627.37	4,369.88	12,124	86,850	-	-	-	-	-	-
364.29	2,442.00	6,505	45,697	-	-	-	-	-	-
1.15	9.55	1	18		-		-		
-	11.55	-	19	-	-	-	-		
0.25	0.67	2	3		-		-		
-	35.84	-	2	-	-	-	-		
-	-	-	-		-		-		
-	18.51	-	3	-	-	-	-		
3.41	112.26	2	23		-		-		
25.42	248.24	10	33	-	-	-	-		
4.81	122.48	5	44	-	-	-	-	-	-
25.42	314.14	10	57	-	-	-	-	-	-
141.85	938.96	8,965	63,564	55.74	118.03	61,250	192,083		
106.04	671.33	18,626	74,559	-	-	-	-		
78.18	1,546.81	1,644	14,038	6.35	14.16	4,614	10,297	77,270	824,920
66.81	2,896.12	1,479	10,053	-	58.13	-	53,279	115,474	691,545
0.39	15.82	4	133	-	-	-	-	10,589	98,979
1.05	11.35	11	105	-	-	-	-	10,387	134,746
78.57	1,562.64	1,648	14,171	6.35	14.16	4,614	10,297	87,859	923,899
67.86	2,907.47	1,490	10,158	-	58.13	-	53,279	125,861	826,291
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
20.88	1,390.49	18	61		-		-		
7.45	44.14	1,009	4,584	-	-	-	-		
918.38	9,474.80	23,055	166,856	62.09	132.19	65,864	202,380	87,859	923,899
615.35	7,477.11	27,834	136,855	-	58.13	-	53,279	125,861	826,291

Name of the Insurer: ICICI Lombard 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	1,296.99	25,456.90	2,060	16,528	282.12	1,856.40	2,397,117	56,071,708
Previous year	1,014.87	23,600.49	1,995	16,599	(180.19)	948.25	2,103,937	43,354,053
Marine Cargo	1,114.80	9,085.47	1,398	9,208	234.51	1,747.85	2,668,512	33,668,518
Previous year	880.30	7,337.62	943	6,801	286.56	1,656.66	2,422,612	26,391,557
Marine Hull (Including Onshore & Offshore oil energy)	500.24	4,994.34	20	110	365.43	1,199.13	406,525	1,355,373
Previous year	134.80	3,795.22	35	381	(579.95)	(1,051.68)	136,876	2,125,147
Marine (Total)	1615.04	14079.81	1418	9318	599.94	2946.98	3075036.77	35023890.85
Previous year (Total)	1015.10	11132.84	978	7182	-293.39	604.98	2559487.90	28516703.82
Aviation	394.34	9,136.20	9	116	127.65	1,097.93	1,033,951	4,249,519
Previous year	266.69	8,038.27	12	118	126.16	3,832.54	5,798,884	18,244,731
Engineering	1,175.89	11,945.95	597	4,886	482.58	1,585.76	933,907	7,396,971
Previous year	693.31	10,360.20	528	4,494	(415.12)	(1,149.33)	499,078	8,448,133
Motor Own Damage	13,650.98	91,927.68	584,669	3,505,886	4,164.27	21,208.31	1,854,890	12,185,035
Previous year	9,486.71	70,719.37	402,602	2,617,102	1,712.26	10,261.68	1,327,363	9,817,186
Motor Third party	6,026.06	38,900.47	591,323	3,559,801	2,692.19	12,615.18		
Previous year	3,333.87	26,285.29	409,365	2,689,063	90.14	97.09		
Motor (Total)	19677.04	130828.15	591323	3559801	6856.46	33823.49	1854890.23	12185034.71
Previous year (Total)	12820.58	97004.66	409365	2689063	1802.40	10358.77	1327362.56	9817186.32
Workmen's compensation / Employer's liability	238.21	1,901.26	626	4,757	88.76	619.67	30,940	259,618
Previous year	149.44	1,281.59	397	3,647	57.01	505.75	18,577	180,996
Public Liability	1.71	34.49	7	90	(1.02)	(11.95)	3,500	50,699
Previous year	2.73	46.45	7	97	1.37	4.43	2,425	20,027
Product Liability	20.96	170.83	7	43	13.20	2.34	3,215	36,789
Previous year	7.75	168.48	3	43	(0.41)	11.35	1,400	33,312
Other Liability Covers	939.51	6,382.15	155	1,308	80.21	0.56	339,877	4,156,897
Previous year	859.30	6,381.59	108	1,135	49.91	(231.29)	302,046	1,352,355
Liability (Total)	1200.38	8488.73	795	6198	181.16	610.62	377531.79	4504001.67
Previous year (Total)	1019.23	7878.11	515	4922	107.88	290.23	324448.03	1586690.35
Personal Accident	1,070.98	9,011.68	60,124	411,059	487.54	2,377.93	1,556,164	20,807,828
Previous year	583.44	6,633.75	32,924	206,123	68.01	647.22	987,603	15,088,284
Medical Insurance	16,536.70	103,412.21	29,937	239,753	8,423.88	11,948.89	569,818	4,428,600
Previous year	8,112.82	91,463.32	22,275	186,106	3,252.19	40,726.53	369,364	7,273,670
Overseas Medical Insurance	366.02	4,672.95	73,930	399,967	50.77	133.95	1,215,522	9,666,447
Previous year	315.25	4,539.01	38,783	320,511	46.85	333.78	801,862.40	8,084,514
Health (Total)	16902.72	108085.16	103867	639720	8474.65	12082.84	1785339.96	14095047.18
Previous year (Total)	8428.07	96002.33	61058	506617	3299.04	41060.31	1171226.55	15358184.27
Crop Insurance	-	0.00	-	-	-	0.00	-	-
Previous year	0.00	0.00	-	-	0.00	0.00	-	-
Credit Guarantee	94.10	1,126.65	3	29	8.06	(441.57)	6,954	37,455
Previous year	86.04	1,568.22	1	31	(37.45)	(382.41)	1,085	38,665
All Other Miscellaneous	601.78	21,336.01	5,461	49,136	(552.36)	2,109.42	4,997,089	14,676,832
Previous year	1,154.14	19,226.58	8,865	80,176	509.05	11,687.37	1,151,211	21,418,468
Grand Total	44029.26	339495.25	765657	4696791	16947.79	58049.80	18017980.25	169048288.45
Previous year (Total)	27081.48	281445.45	516241	3515325	4986.37	67897.91	15924322.25	161871098.17

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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	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	-	-		
0.00	0.84	-	14	-	0.00	-	-		
0.00	4.74	-	33	0.00	0.00	-	-		
1461.01	9,157.25	-	-	-	0.00	-	-		
852.86	7,532.36	-	-	0.00	0.00	-	-		
1028.19	6,567.74	35,034	237,126	-	0.00	-	-		
431.07	4,160.87	25,326	224,834	0.00	0.00	-	-		
2489.20	15724.99	35034	237126	0.00	0.00	0	0	0	0
1283.93	11693.23	25326	224834	0.00	0.00	0	0	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	-	-		
-	121.62	-	-	-	0.00	-	-		
(3.62)	777.56	-	-	0.00	0.00	-	-		
0.00	121.62	0	0	0.00	0.00	0	0	0	0
-3.62	777.56	0	0	0.00	0.00	0	0	0	0
0.00	0.00	-	-	-	5.30	-	58,502		
0.00	0.00	-	-	0.00	0.00	-	-		
1961.18	26,017.21	303	2,231	0.01	279.02	1	128,462	939,473	13,890,888
2,077.86	28,179.25	113	2,960	36.92	663.59	12,202	225,970	792,253	15,381,794
7.14	67.65	203	1,692	-	0.00	-	-	73,930	399,967
1.52	127.74	68	3,285	0.00	0.00	-	-	38,783	320,511
1968.32	26084.85	506	3923	0.01	279.02	1	128462	1013403	14290855
2079.38	28306.99	181	6245	36.92	663.59	12202	225970	831036	15702305
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-75	9,958	42	1,472	-	-	-	-		
1	33	15	473	-	-	-	-		
4382.31	51890.07	35582	242535	0.01	284.32	1	186964	1013403	14290855
3360.67	40815.74	25522	231585	36.92	663.59	12202	225970	831036	15702305

Name of the Insurer: *Iffco Tokio 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	549.75	16108.53	5932	52304	-319.99	549.75	1296536.02	19302845.35
Previous year	982.04	16709.11	6224	57436	256.72	982.04	5194940.99	88390056.91
Marine Cargo	659.47	7016.12	905	6705	-482.15	659.47	421101.43	9272130.42
Previous year	554.58	5941.79	953	7794	-253.03	554.58	4024420.23	43117998.86
Marine Hull (Including Onshore & Offshore oil energy)	73.85	1967.52	92	297	16.34	73.85	1703949.57	23541745.12
Previous year	307.56	3668.80	45	303	-308.19	307.56	1995797.42	23807101.10
Marine (Total)	733.31	8983.64	997	7002	-465.81	733.31	2125051.00	32813875.54
Previous year (Total)	862.14	9610.59	998	8097	-561.22	862.14	6020217.65	66925099.96
Aviation	162.06	1467.44	37	257	22.21	162.06	3286666.96	13993598.94
Previous year	125.26	2679.68	19	217	-7.70	125.26	828095.88	17715388.68
Engineering	302.01	3904.14	391	3161	-146.36	302.01	15603.71	285786.07
Previous year	420.45	4020.87	547	3831	2.39	420.45	34714.79	331985.86
Motor Own Damage	7026.80	45537.30	332939	2382947	886.95	7026.80	42459995.98	274126771.86
Previous year	6021.94	41015.58	342547	2362158	352.65	6021.94	245059.30	1669103.69
Motor Third party	3428.67	23394.61	1312	23418	395.96	3428.67		
Previous year	2565.76	18078.83	5112	37046	116.35	2565.76		
Motor (Total)	10455.47	68931.91	332939	2382947	1282.91	10455.47	42459995.98	274126771.86
Previous year (Total)	8587.71	59094.41	342547	2362158	468.99	8587.71	245059.30	1669103.69
Workmen's compensation / Employer's liability	115.24	897.97	849	6390	33.13	115.24	156509.63	687213.84
Previous year	107	818	814	6416	-12	107.26	6687	51029
Public Liability	30.26	540.43	10	119	10.73	30.26	35612.80	170051.34
Previous year	27	591	5	109	8	26.74	127170	2809921
Product Liability	22.90	113.79	9	98	19.08	22.90	175616.89	245464.81
Previous year	7	146	8	108	0	7.25	3930	79259
Other Liability Covers	84.01	1579.39	152	1672	5.66	84.01	24635.73	622465.75
Previous year	136	2907	136	1916	25	136.42	131951	2811993
Liability (Total)	252.41	3131.58	1020	8279	68.59	252.41	392375.05	1725195.74
Previous year (Total)	277.67	4462.89	963	8549	20.24	277.67	269737.80	5752201.86
Personal Accident	184.90	1869.81	2146	18045	-57.49	184.90	3086196.01	41330029.14
Previous year	319.49	1855.04	4405	30909	131.39	319.49	684981.78	3977153.84
Medical Insurance	1106.61	11103.72	1641	19902	400.44	1106.61	21711.31	100747.58
Previous year	752.01	11965.27	2794	20601	-2480.48	752.01	31732.28	504892.02
Overseas Medical Insurance	23.22	211.77	2856	29453	-1.04	23.22	565630.26	3909315.61
Previous year	16.84	175.76	2512	20960	-4.07	16.84	2802.51	29244.01
Health (Total)	1129.83	11315.49	4497	49355	399.39	1129.83	587341.56	4010063.19
Previous year (Total)	768.86	12141.03	5306	41561	-2484.55	768.86	34534.79	534136.03
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	779.61	13509.79	7974	68976	-138.33	779.61	151925411.74	828280618.05
Previous year	887.31	7903.81	6418	57438	-111.54	887.31	658775.36	5868095.70
Grand Total	14549.36	129222.32	355933	2590326	645.13	14549.36	205175178.03	1215868783.88
Previous year (Total)	13230.94	118477.42	367427	2570196	-2285.27	13230.94	13971058.33	191163222.53

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
24.06	568.56	1136	11214						
18.36	211.88	759	6506						
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.06	47.64	2	90						
0.90	30.26	14	145						
407.86	5188.06	22424	274020						
566.72	4252.94	23371	233994						
190.62	2922.34	0	0						
201.61	1949.11	0	0						
598.48	8110.40	22424	274020	0.00	0.00	0	0		
768.33	6202.05	23371	233994	0.00	0.00	0	0		
1	28	4	190						
0	8	2	106						
0	6	0	16						
0	2	1	7						
0	0	0	0						
0	0	0	0						
1	4	4	84						
0	1	6	98						
1.97	37.72	8	290	0.00	0.00	0	0		
0.23	11.64	9	211	0.00	0.00	0	0		
91.93	734.40	192	2834	5.47	41.53	109413	829376		
258.99	928.79	2939	12556	9.05	48.28	181093	936974		
656.25	4041.57	81	933	64.06	426.16	32436	215768		
1.83	5600.89	45	296						
656.25	4041.57	81	933	64.06	426.16	32436	215768	0	0
1.83	5600.89	45	296	0.00	0.00	0	0	0	0
126.48	5524.48	1460	26334	19.79	2935.06	2128	248872		
62.35	910.54	2077	16861	0.56	316.86	196	50713		
1499.23	19064.77	25303	315715	89.32	3402.75	143977	1294016	0	0
1110.99	13896.05	29214	270569	9.61	365.14	181289	987687	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	3689.62	45289.85	44691	358302	228.16	6477.38	9379006	345341676
Previous year	3461.46	38812.47	45159	365531	1474.86	9666.96	28321636	1297522372
Marine Cargo	1991.66	12410.66	12156	101125	229.03	1557.15	8605466	55051151
Previous year	1762.63	10853.51	7814	69289	736.97	2042.75	8358842	1070519250
Marine Hull (Including Onshore & Offshore oil energy)	1646.17	9325.86	235	1822	204.01	3217.35	122716	129741098
Previous year	1442.16	6108.51	156	1711	-54.81	-1541.26	690596	106474784
Marine (Total)	3637.83	21736.51	12391	102947	433.04	4774.49	8728182	184792250
Previous year (Total)	3204.79	16962.02	7970	71000	682.16	501.49	9049439	1176994033
Aviation	187.48	2884.90	11	114	154.46	1430.58	47424	1027643857
Previous year	33.02	1454.32	14	179	2.87	-1387.20	3652	2728668
Engineering	2147.11	17124.34	3554	25016	196.17	3702.70	16409382	68265968
Previous year	1950.94	13421.64	2407	21000	656.93	3769.47	3469845	1026788770
Motor Own Damage	15461.27	122278.40	453896	3329853	2138.15	23185.28	599077	4746433
Previous year	13323.12	99093.12	413027	2957124	1936.44	10367.69	528877	3939119
Motor Third party	14219.90	110649.58	659982	4884800	3934.55	32411.85	597827	4738407
Previous year	10285.35	78237.73	589667	4334737	1062.14	6467.42	527803	3931265
Motor (Total)	29681.17	232927.98	659982	4884800	6072.70	55597.13	1196904	9484840
Previous year (Total)	23608.47	177330.85	589667	4334737	2998.58	16835.11	1056680	7870384
Workmen's compensation / Employer's liability	492.86	4242.25	4727	36664	71.89	1036.53	40019	378905
Previous year	420.97	3205.72	4019	33785	117.10	756.60	31853	260984
Public Liability	10.59	64.07	97	605	6.70	13.16	3000	54171
Previous year	3.89	50.91	79	661	-0.24	5.59	14000	30055
Product Liability	5.90	267.35	2	75	4.67	106.41	1288	164335
Previous year	1.23	160.94	4	79	1.20	-7.86	722	163019
Other Liability Covers	105.74	1237.10	598	4377	15.50	239.98	47443	1177490
Previous year	90.24	997.12	440	3549	-119.44	182.51	92545	616284
Liability (Total)	615.09	5810.78	5424	41721	98.77	1396.09	91749	1774900
Previous year (Total)	516.32	4414.69	4542	38074	-1.39	936.83	139121	1070342
Personal Accident	658.98	8446.01	27252	238637	-79.33	329.33	1634208	25963424
Previous year	738.31	8116.68	25844	236306	253.91	2306.47	2177222	56223240
Medical Insurance	14257.96	119405.74	114088	890551	3181.31	24894.82	981319	148031683
Previous year	11076.65	94510.92	102048	826961	3773.22	35254.23	1372931	222303050
Overseas Medical Insurance	65.13	491.14	1208	14652	27.19	-18.25	0	5743
Previous year	37.94	509.39	1305	16443	4.92	3.52	69	1601
Health (Total)	14323.09	119896.88	115296	905203	3208.50	24876.57	981319	148037426
Previous year (Total)	11114.59	95020.31	103353	843404	3778.14	35257.75	1373000	222304651
Crop Insurance								
Previous year								
Credit Guarantee	0.00	0.00	0	0	0.00	-21.96	0	0
Previous year	0.00	21.96	0	4	-10.00	-9.26	0	1975
All Other Miscellaneous	3265.63	29459.75	83926	641020	285.53	4803.69	3964895	135713460
Previous year	2980.10	24656.06	86990	712656	726.38	4717.22	13681957	162621603
Grand Total	58206.00	483577.00	952527	7197760	10598.00	103366.00	42433070.66	1947017801.10
Previous year (Total)	47608.00	380211.00	865946	6622891	10562.44	72594.84	59272550.45	3954126037.75

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
360.75	4097.23	7144	55574	535.67	4757.48	0	0	0	0
412.15	4159.38	8815	58124	380.78	4531.94	0	0	0	0
89.09	626.86	650	4446	186.09	1136.84	0	0	0	0
60.46	490.14	326	3216	110.48	726.98	0	0	0	0
22.04	136.95	41	423	23.08	224.88	0	0	0	0
23.56	156.38	36	528	19.07	150.56	0	0	0	0
111.13	763.81	691	4869	209.17	1361.71	0	0	0	0
84.02	646.52	362	3744	129.55	877.54	0	0	0	0
0.00	0.00	0	0	0.80	0.80	0	0	0	0
0.00	0.00	0	0	0.80	3.30	0	0	0	0
117.42	1263.31	399	2933	270.98	2114.15	0	0	0	0
127.45	895.80	365	2683	147.99	1343.43	0	0	0	0
1277.90	9984.61	83321	603165	771.16	5007.83	0	0	0	0
1110.78	7957.25	72230	490982	538.54	4142.33	0	0	0	0
1688.77	13091.43	122542	907139	879.17	5925.95	0	0	0	0
1091.40	8008.37	105545	732217	489.10	3839.83	0	0	0	0
2966.68	23076.04	122542	907139	1650.33	10933.78	0	0	0	0
2202.19	15965.62	105545	732217	1027.64	7982.16	0	0	0	0
63.08	484.51	803	6149	65.01	444.30	0	0	0	0
65.38	354.51	738	5909	44.75	296.19	0	0	0	0
0.03	2.50	11	44	0.12	2.74	0	0	0	0
0.00	0.77	3	47	0.03	2.12	0	0	0	0
0.00	5.93	0	2	0.00	11.18	0	0	0	0
0.00	5.93	0	2	0.40	12.72	0	0	0	0
1.55	17.47	27	201	9.58	114.62	0	0	0	0
2.55	16.94	18	168	8.07	86.95	0	0	0	0
64.66	510.42	841	6396	74.71	572.84	0	0	0	0
67.93	378.15	759	6126	53.24	397.97	0	0	0	0
72.18	399.74	3890	34552	66.65	611.93	29197	139674	166930	1427228
36.48	375.55	3689	33680	48.43	708.98	15117	153110	142173	1377062
550.09	4794.13	10227	76936	1186.96	10474.43	37568	263585	316824	2460578
552.45	5792.73	9466	80398	1322.74	12014.63	28865	239179	282274	2352614
1.16	17.57	46	543					1247	15002
2.22	18.70	30	586					1362	17005
551.25	4811.70	10273	77479	1192.57	10517.91	37568	263585	318071	2475580
554.67	5811.44	9496	80984	1327.68	12061.34	28865	239179	283636	2369619
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
476.86	4234.17	26062	173009	346.88	2200.72	2629	69437	32188	426742
426.52	3609.21	26228	197001	253.57	2214.16	22392	86566	68573	495813
4720.93	39156.42	171842	1261951	4347.76	33071.32	69394	472696	517189	4329550
3911.41	31841.67	155259	1114559	3369.68	30120.82	66374	478855	494382	4242494

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	3.54	141.68	7	45	3.54	141.68	3841.36	318852.64
Previous year	5.52	84.30	2	61	5.52	84.30	10750.00	106631.23
Marine Cargo	0.00	0.71	0	13	0.00	0.71	0.00	5681.05
Previous year	0.57	3.01	2	25	0.57	3.01	710.10	3570.12
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.71	0	13	0.00	0.71	0.00	5681.05
Previous year (Total)	0.57	3.01	2	25	0.57	3.01	710.10	3570.12
Aviation								
Previous year								
Engineering	1.07	11.24	3	27	1.07	11.24	1092.88	15403.38
Previous year	2.78	24.44	1	19	2.78	24.44	2997.95	18418.03
Motor Own Damage	2.34	12.99	20	116	2.34	12.99	303.38	1544.87
Previous year	5.13	12.60	50	133	5.13	12.60	669.67	1856.84
Motor Third party	0.91	8.15	76	719	0.91	8.15	0.00	0.00
Previous year	0.00	1.74	0	43	0.00	1.74		
Motor (Total)	3.24	21.13	76	719	3.24	21.13	303.38	1544.87
Previous year (Total)	5.13	14.33	50	133	5.13	14.33	669.67	1856.84
Workmen's compensation / Employer's liability	0.76	9.18	4	27	0.76	9.18	257.97	2599.36
Previous year	0.00	3.15	0	2	0.00	3.15		550.00
Public Liability	0.00	2.16	0	3	0.00	2.16	0.00	1500
Previous year	0.00	2.16	0	3	0.00	2.16	0.00	2500
Product Liability								
Previous year								
Other Liability Covers	81.38	822.65	16	176	81.38	822.65	24250.60	241161
Previous year	40.97	367.28	7	63	40.97	367.28	14041	149267
Liability (Total)	82.14	833.99	20	206	82.14	833.99	24508.57	245260.30
Previous year (Total)	40.97	372.59	7	68	40.97	372.59	14040.65	152316.67
Personal Accident	27.11	43.28	11	44	27.11	43.28	8956.51	47134.51
Previous year	11.99	32.06	3	20	11.99	32.06	10261.00	47065.50
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	93	338.09	6	37	93.37	338.09	14284	55777.52
Previous year	1.44	3.30	2	30	1.44	3.30	370.02	1813.16
Grand Total	210.49	1390.14	123	1091	210.49	1390.14	52986.80	689654.27
Previous year (Total)	68.40	534.03	67	356	68.40	534.03	39799.40	331671.54

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
1.90	24.53	1	2	0.00	0.00	0.00	0.00		
27.47	27.47	4	4	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		
0.03	2.24	2	7	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	4.14	0	610	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.63	0.92	75	110	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.63	5.06	75	610	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	0.00	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		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
24.91	24.95	1	17	0.41	10.24	332	5394		
10.79	11.01	1	1	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		
0.01	0.01	1	1	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
27.48	56.79	80	637	0.41	10.24	332	5394		
38.26	38.48	5	5	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	821.19	8282.22	3778	25884	112.52	1032.81	1526805.59	12556145.56
Previous year	708.67	7249.41	2440	26079	-259.09	-2576.54	1134051.02	9869657.93
Marine Cargo	578.03	3273.51	2306	17752	477.25	1605.35	509551.41	6387382.92
Previous year	100.78	1668.16	2248	16339	3.04	-415.45	297779.71	4328297.89
Marine Hull (Including Onshore & Offshore oil energy)	12.67	68.52	2	6	-128.12	-727.98	8337.39	6003.41
Previous year	140.79	796.50	3	13	-900.24	-648.95	113057.40	357042.36
Marine (Total)	590.70	3342.03	2308	17758	349.13	877.37	517888.80	6393386.33
Previous year (Total)	241.57	2464.66	2251	16352	-897.20	-1064.40	410837.11	4685340.25
Aviation	92.86	288.67	12	40	-0.04	-4235.08	116681.00	484388.75
Previous year	92.90	4523.75	9	41	-674.25	2266.99	103325.00	317509.73
Engineering	518.41	6589.65	333	2898	348.49	3746.01	24224.78	4835579.01
Previous year	169.92	2843.64	289	3116	-340.56	-2636.15	244792.11	3514498.44
Motor Own Damage	5410.69	45945.69	122144	1034730	-1008.55	1246.47	336408.46	2920528.37
Previous year	6419.24	44699.22	133515	904844	-1255.36	-19377.66	392069.73	2810308.04
Motor Third party	3369.45	27914.55	124106	1055242	549.04	7215.93		
Previous year	2820.41	20698.62	135919	1063998	-655.81	-8105.65		
Motor (Total)	8780.14	73860.24	124106	1055242	-459.51	8462.40	336408.46	2920528.37
Previous year (Total)	9239.65	65397.84	135919	1063998	-1911.17	-27483.31	392069.73	2810308.04
Workmen's compensation / Employer's liability	42.31	377.96	137	1282	2.77	-48.35	4132.81	39419.44
Previous year	39.54	426.31	145	1845	47.67	-73.34	3642.65	41004.91
Public Liability	8.93	81.85	48	514	7.76	-2.18	4690.40	56801.09
Previous year	1.17	84.03	15	258	-68.75	-100.17	624.76	162763.21
Product Liability	0.18	7.68	1	10	-0.82	-4.14	100.00	3460.00
Previous year	1.00	11.82	1	10	0.61	-39.80	1000.00	3325.00
Other Liability Covers	22.67	1123.27	602	4306	12.57	285.44	9869.50	386958.99
Previous year	10.10	837.83	336	4123	5.35	90.82	4964.00	282628.80
Liability (Total)	74.09	1590.76	788	6112	22.28	230.77	18792.71	486639.52
Previous year (Total)	51.81	1359.99	497	6236	-15.12	-122.49	10231.41	489721.92
Personal Accident	153.99	1982.57	1145	16023	-267.20	-1675.38	444588.82	5508638.92
Previous year	421.19	3657.95	6004	40878	-4.29	-149.63	2776775.46	9245739.10
Medical Insurance	1349.37	13255.74	9873	64338	228.79	-1560.73	62478.31	594157.82
Previous year	1120.58	14816.47	8790	145570	-300.71	967.71	41751.28	425444.50
Overseas Medical Insurance	299.86	2507.65	68856	473476	50.62	-131.44	2130747.13	17594659.08
Previous year	249.24	2639.09	49446	469449	-6.34	278.90	1941981.97	16397674.72
Health (Total)	1649.23	15763.39	78729	537814	279.41	-1692.17	2193225.44	18188816.90
Previous year (Total)	1369.82	17455.56	58236	615019	-307.05	1246.61	1983733.25	16823119.22
Crop Insurance	0	0	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	0	0	0.00	0.00	0	0
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
All Other Miscellaneous	269.29	2945.42	5200	34940	62.52	393.52	289229.73	6168302.74
Previous year	206.77	2551.90	3474	41986	-100.46	-584.92	323154.82	5635479.09
Grand Total	12949.90	114644.95	216399	1696711	447.60	7140.25	5467845.33	57542426.10
Previous year (Total)	12502.30	107504.70	209119	1813705	-4509.19	-31103.84	7378969.91	53391373.72

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
34.18	767.26	416	2930	0.00	0.00	0.00	0.00		
1.97	332.82	82	840	0.00	0.00	0.00	0.00		
4.95	190.92	106	1221	0.00	0.00	0.00	0.00		
0.00	21.85	0	78	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.30	0	1	0.00	0.00	0.00	0.00		
4.95	190.92	106	1221	0.00	0.00	0	0	0	0
0.00	22.15	0	79	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		
15.10	405.14	25	385	0.00	0.00	0.00	0.00		
0.57	63.03	6	133	0.00	0.00	0.00	0.00		
417.79	4272.18	10794	103308	0.00	0.00	0.00	0.00		
597.97	4117.92	9001	74373	0.00	0.00	0.00	0.00		
278.43	2845.78	94	1648	0.00	0.00	0.00	0.00		
293.41	1984.19	9184	36612	0.00	0.00	0.00	0.00		
696.22	7117.96	10794	103308	0.00	0.00	0	0	0	0
891.38	6102.11	9184	74373	0.00	0.00	0	0	0	0
6.60	91.28	12	125	0.00	0.00	0.00	0.00		
0.19	10.20	0	49	0.00	0.00	0.00	0.00		
0.99	10.97	5	54	0.00	0.00	0.00	0.00		
0.00	1.09	0	3	0.00	0.00	0.00	0.00		
0.00	0.17	0	1	0.00	0.00	0.00	0.00		
0.00	0.27	0	1	0.00	0.00	0.00	0.00		
1.03	14.88	90	922	0.00	0.00	0.00	0.00		
0.00	0.98	0	104	0.00	0.00	0.00	0.00		
8.62	117.30	107	1102	0.00	0.00	0	0	0	0
0.19	12.54	0	157	0.00	0.00	0	0	0	0
0.63	60.99	39	697	0.00	0.00	0.00	0.00		
0.26	42.55	75	3472	5.46	133.25	41492.00	503703.00		
131.17	1285.79	393	4956	0.00	0.00	0.00	0.00	109963	1761646
9.28	1118.72	149	2023	0.00	0.00	0.00	0.00		
10.45	203.26	2223	40214	0.00	0.00	0.00	0.00	16712	101965
1.02	104.83	0	27763	0.00	0.00	0.00	0.00		
141.62	1489.05	2616	45170	0.00	0.00	0	0	126675	1863611
10.30	1223.55	149	29786	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	0	0	0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
15.11	533.35	737	6297	14.66	161.79	46650.00	409888.00		
6.57	73.38	206	3365	4.17	56.62	209.00	6297.00		
916.43	10681.97	14840	161110	14.66	161.79	46650	409888	126675	1863611
911.24	7872.13	9702	112205	9.63	189.87	41701	510000	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	252.31	3585.39	2277	18520	36.54	28.89	487935.07	6442285.31
Previous year	215.77	3556.49	2141	21575	-20.41	505.09	369081.49	5607259.72
Marine Cargo	232.79	1641.87	2593	21393	-1.84	33.10	414133.12	4254215.63
Previous year	234.63	1608.77	3707	23714	120.80	187.68	385540.71	3878783.05
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	-6.60	0.00	0.00
Marine (Total)	232.79	1641.87	2593	21393	-1.84	33.10	414133.12	4254215.63
Previous year (Total)	234.63	1608.77	3707	23714	120.80	181.07	385540.71	3878783.05
Aviation							0.00	
Previous year							0.00	
Engineering	178.68	2346.49	71	763	-108.45	-43.93	27874.36	454794.94
Previous year	287.12	2390.42	77	991	93.31	-80.48	36947.87	932433.46
Motor Own Damage	6761.87	49579.07	86696	664992	1169.82	10889.84	348976.74	2606483.45
Previous year	5592.05	38689.23	77846	539307	2255.84	8511.49	284373.01	2042971.66
Motor Third party	2167.00	16689.12	488	4186	853.28	6558.58		
Previous year	1313.72	10130.54	443	3593	334.27	1288.32		
Motor (Total)	8928.87	66268.19	86696	664992	2023.09	17448.42	348976.74	2606483.45
Previous year (Total)	6905.78	48819.77	77846	539307	2590.10	9799.81	284373.01	2042971.66
Workmen's compensation / Employer's liability	29.25	179.33	49	418	23.06	22.43	2368.30	23233.26
Previous year	6.19	156.90	23	322	-3.23	-12.61	513.60	17388.50
Public Liability	32.78	703.85	23	283	15.21	-15.86	8143.52	140313.90
Previous year	17.57	719.71	28	274	-48.73	175.25	8569.72	115661.74
Product Liability	11.51	183.36	2	35	9.16	15.72	1902.90	40866.79
Previous year	2.36	167.64	2	38	1.74	16.55	2783.89	39532.28
Other Liability Covers								
Previous year								
Liability (Total)	73.55	1066.54	74	736	47.43	22.29	12414.73	204413.95
Previous year (Total)	26.12	1044.25	53	634	-50.22	179.18	11867.22	172582.52
Personal Accident	285.10	2403.52	7283	72744	-156.89	-237.52	2004668.80	16959877.01
Previous year	441.99	2641.04	5647	46960	252.38	726.09	4548776.27	19835177.96
Medical Insurance	1268.00	15933.51	21018	174595	203.69	4704.95	1154797.09	14559904.80
Previous year	1064.31	11228.56	16652	146425	103.96	3269.48	168921.88	1142179.65
Overseas Medical Insurance								
Previous year								
Health (Total)	1268.00	15933.51	21018	174595	203.69	4704.95	1154797.09	14559904.80
Previous year (Total)	1064.31	11228.56	16652	146425	103.96	3269.48	168921.88	1142179.65
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	190.76	2251.22	756	6074	-462.52	-304.07	108011.66	803361.58
Previous year	653.28	2555.29	96427	419675	200.26	759.07	3799988.76	14281453.53
Grand Total	11410.05	95496.73	120768	959817	1581.06	21652.13	4558811.56	46285336.68
Previous year (Total)	9828.99	73844.60	202550	1199281	3290.19	15339.31	9605497.21	47892841.56

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
5.26	34.53	197	1743						
11.31	75.64	281	2513						
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		
0.58	3.37	4	24						
0.26	6.11	1	24						
397.04	3080.57	4820	36190						
662.60	3363.66	14045	43680						
397.04	3080.57	4820	36190	0.00	0.00	0	0		
662.60	3363.66	14045	43680	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		
13.79	120.07	1583	30138	0.00	1.69	0.00	6184.00		
54.16	464.71	27005	286560	0.92	8.03	1190.00	23034.00		
371.88	8389.94	3504	45530	175.33	2564.98	40704.00	633877.00	354092.50	2669886.50
908.06	4377.01	26504	114997	448.64	2261.13	129614.00	629370.00	39125.50	381322.00
371.88	8389.94	3504	45530	175.33	2564.98	40704	633877	354093	2669887
908.06	4377.01	26504	114997	448.64	2261.13	129614	629370	39126	381322
246.67	1510.38	3659	21894	0.00	0.00	0.00	0.00		
161.29	1149.66	2394	16896	0.00	0.00	0.00	0.00		
1035.22	13138.86	13767	135519	175.33	2566.67	40704	640061	354093	2669887
1797.69	9436.79	70230	464670	449.56	2269.16	130804	652404	39126	381322

Name of the Insurer: SBI 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	1223.90	8722.83	17079	104775	1117.62	8407.80	657972.29	5105452.95
Previous year	106.28	315.03	598	1074	106.28	315.03	75386.26	349386.48
Marine Cargo	14.17	85.74	21	68	14.17	85.74	23696.03	268736.25
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)	14.17	85.74	21	68	14.17	85.74	23696.03	268736.25
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation	0.00	1600.63	0	66	0.00	1274.85	0.00	333384.81
Previous year	0.00	325.78	0	26	0.00	325.78	0.00	84152.97
Engineering	100.58	482.64	90	646	70.67	413.44	121330.66	463568.07
Previous year	29.91	69.20	4	6	29.91	69.20	7985.77	16209.12
Motor Own Damage	192.24	846.08	3534	13692	192.24	846.08	110107.87	132021.45
Previous year	0.00		0	0	0.00	0.00	0.00	0.00
Motor Third party	40.79	155.17	0	0	17.59	26.13		
Previous year	0.00	0.00	0	0	0.00	0.00		
Motor (Total)	233.03	1001.25	3534	13692	209.83	872.21	110107.87	132021.45
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's 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
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	0.00	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
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	7.54	573.93	3	12	7.54	118.20	0.00	5788192.00
Previous year	0.00	455.73	0	3	0.00	455.73	0.00	39698.71
Medical Insurance	30.81	279.02	6	33	30.81	279.02	559.00	8587.98
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)	30.81	279.02	6	33	30.81	279.02	559.00	8587.98
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	44.86	611.11	2050	7879	42.90	596.08	92771.55	1984527.39
Previous year	1.96	15.03	18	81	1.96	15.03	8211.34	182252.89
Grand Total	1654.89	13357.15	22783	127171	1493.54	12047.34	1006437.40	14084470.90
Previous year (Total)	138.15	1180.77	620	1190	138.15	1180.77	91583.37	671700.17

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
131.68	1095.83	1364	13127	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.49	0.49	3	3	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		
0.49	0.49	3	3	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	0	0.00	0.00	0.00	0.00		
8.53	57.41	31	183	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
55.86	162.90	1083	2851	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
14.68	33.70	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
70.54	196.60	1083	2851	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	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		
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	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0	1619.00	48634.00
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
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	0	1619	48634
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0.00	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		
13.34	44.93	555	1711	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
224.58	1395.26	3036	17875	0.00	0.00	0	0	1619	48634
0.00	0.00	0	0	0.00	0.00	0	0	0	0

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	39.48	463.52	133	1242	29.57	255.71	50576.49	1054648.88
Previous year	9.91	207.81	112	737	0.44	121.07	14092.26	303998.71
Marine Cargo	12.39	121.02	96	797	11.39	105.76	2434.33	319765.09
Previous year	1.00	15.26	57	282	1.00	15.26	1349.88	16168.10
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)	12.39	121.02	96	797	11.39	105.76	2434.33	319765.09
Previous year (Total)	1.00	15.26	57	282	1.00	15.26	1349.88	16168.10
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	14.72	215.13	54	441	2.12	101.71	4879.91	96525.39
Previous year	12.60	113.42	44	222	-14.82	47.48	19435.19	108002.34
Motor Own Damage	4517.57	31396.52	158735	1015911	1039.43	7995.77	460643.39	3196013.36
Previous year	3478.14	23400.75	104859	624342	1699.59	13220.81	263475.98	1806268.28
Motor Third party	6207.26	41558.87	158787	1016913	3141.25	20286.78		
Previous year	3066.01	21272.09	106011	698097	1200.98	10658.50		
Motor (Total)	10724.83	72955.38	158787	1016913	4180.68	28282.54		
Previous year (Total)	6544.15	44672.84	106011	698097	2900.57	23879.31	263475.98	1806268.28
Workmen's compensation / Employer's liability	2.20	21.63	12	162	1.23	7.15	18.49	407.88
Previous year	0.97	14.48	3	67	0.08	4.64	7.75	180.50
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	0.23	20.85	9	72	-0.09	6.25	144.00	16960.91
Previous year	0.32	14.60	14	62	0.24	13.49	134	9689.82
Liability (Total)	2.43	42.48	21	234	1.14	13.40	162.49	17368.79
Previous year (Total)	1.29	29.08	17	129	0.32	18.13	141.26	9870.32
Personal Accident	43.02	204.74	395	5419	-72.43	33.15	55513.09	253228.80
Previous year	115.45	171.59	836	10055	103.78	52.50	166733.51	217228.20
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	2.71	213.02	92	1051	-87.56	100.44	2760.44	1120152.01
Previous year	90.27	112.58	103	914	87.67	91.24	163079.77	207586.34
Grand Total	10839.59	74215.30	159578	1026097	4064.92	28892.72	116326.74	2861688.97
Previous year (Total)	6774.67	45322.58	107180	710436	3078.96	24224.99	628307.85	2669122.29

* Wherever applicable

Name of the Insurer: Tata AIG 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	1,097	17,029	13,746	138,039		-	9,159,110	85,900,021
Previous year	911	14,767	6,591	79,223	-	-	7,721,782	109,037,774
Marine Cargo	1,537	13,116	3,692	20,113		-	546,015	3,332,370
Previous year	1,185	10,348	2,060	14,110	-	-	359,851	7,161,040
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Marine (Total)	1,537	13,116	3,692	20,113	-	-	546,015	3,332,370
Previous year (Total)	1,185	10,348	2,060	14,110	-	-	359,851	7,161,040
Aviation	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	270	3,857	109	833		-	1,436,579	9,639,428
Previous year	181	3,080	108	653	-	-	1,403,950	11,038,397
Motor Own Damage	5,906	40,402	155,450	1,007,772		-	303,768	2,157,282
Previous year	2,998	20,597	73,388	493,358	-	-	157,692	1,166,649
Motor Third party	1,047	7,043	155,450	906,033		-	-	-
Previous year	506	3,509	73,388	493,358	-	-	-	-
Motor (Total)	6,953	47,446	155,450	1,007,772	-	-	303,768	2,157,282
Previous year (Total)	3,504	24,105	73,388	493,358	-	-	157,692	1,166,649
Workmen's compensation / Employer's liability	123	1,016	22	222		-	19,291	325,613
Previous year	86	680	7	139	-	-	25,143	200,384
Public Liability	186	1,890	43	358		-	626,672	4,687,162
Previous year	84	2,000	33	382	-	-	236,858	3,027,053
Product Liability	29	489	11	88		-	162,261	1,158,776
Previous year	28	387	6	125	-	-	45,822	7,081,379
Other Liability Covers	641	7,617	663	5,211		-	169,699	2,168,753
Previous year	681	5,789	497	4,345	-	-	191,769	2,298,644
Liability (Total)	979	11,013	739	5,879	-	-	977,923	8,340,304
Previous year (Total)	879	8,856	543	4,991	-	-	499,591	12,607,461
Personal Accident	652	8,130	9,940	80,501		-	918,222	7,419,027
Previous year	941	8,529	6,110	62,561	-	-	506,552	5,736,743
Medical Insurance	610	1,493	-	30		-	65,663	65,663
Previous year	-	1,250	-	-	-	-	-	-
Overseas Medical Insurance	698	7,195	33,061	279,899		-	4,240,443	33,769,490
Previous year	919	6,852	24,775	233,764	-	-	2,889,909	27,009,687
Health (Total)	1,308	8,688	33,061	279,929	-	-	4,306,106	33,835,153
Previous year (Total)	919	8,102	24,775	233,764	-	-	2,889,909	27,009,687
Crop Insurance	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	384	2,562	5,645	55,401		-	9,434	83,063
Previous year	199	1,559	4,794	33,117	-	-	5,407	65,195
Grand Total	13,179	111,841	222,382	1,588,467	-	-	17,657,158	150,706,648
Previous year (Total)	8,719	79,345	118,369	921,777	-	-	13,544,736	173,822,946

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
199	1,388	644	2,836		-		-		
78	723	59	539	-	-	-	-		
173	1,523	148	1,063		-		-		
71	635	54	406	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
173	1,523	148	1,063	-	-	-	-	-	-
71	635	54	406	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
33	237	8	49		-		-		
12	63	2	15	-	-	-	-		
1,128	6,917	36,226	210,927		-		-		
227	1,467	5,338	36,721	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
1,128	6,917	36,226	210,927	-	-	-	-	-	-
227	1,467	5,338	36,721	-	-	-	-	-	-
1	36	4	18		-		-		
1	7	1	6	-	-	-	-		
46	509	82	627		-		-		
12	262	19	166	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
47	546	86	645	-	-	-	-	-	-
13	269	20	172	-	-	-	-	-	-
76	711	2,199	18,298		-		-		
25	442	612	5,611	0	2	194	13,337		
610	1,493	-	30	-	883	-	658,216		
-	-	-	-	-	-	-	-		
-	4	12	219		-		-		
6	1,271	53	656	-	-	-	-		
610	1,496	12	249	-	883	-	658,216	-	-
6	1,271	53	656	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
139	1,227	6,532	57,282		-		-		
90	512	4,253	26,061	-	-	-	-		
2,405	14,045	45,855	291,349	-	883	-	658,216	-	-
521	5,383	10,391	70,181	0	2	194	13,337	-	-

Name of the Insurer: The New India Assurance 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	6227.36	78802.99	51370	489132	95.36	2326.82	200595856.98	1279547779.07
Previous year	6132.00	76476.17	67879	603535			707083866.96	1429986576.28
Marine Cargo	2251.15	18164.65	19144	173349	263.99	991.95	42517032.51	115846383.61
Previous year	1987.16	17172.70	17924	189169			8028124.50	81390594.81
Marine Hull (Including Onshore & Offshore oil energy)	1329.55	20723.26	1215	6092	-2006.69	1687.63	2075585.88	20743870.20
Previous year	3336.24	19035.63	2071	8927			1137387.20	20302895.91
Marine (Total)	3580.70	38887.91	20359	179441	-1742.70	2679.58	44592618.39	136590253.81
Previous year (Total)	5323.40	36208.33	19995	198096			9165511.70	101693490.72
Aviation	50.30	7425.47	41	549	-176.88	2864.75	192001.30	90491406.15
Previous year	227.18	4560.72	178	678			53929.42	8643355.98
Engineering	2428.94	25023.26	20178	97105	74.65	4139.41	35641718.12	111612406.24
Previous year	2354.29	20883.85	5479	45263			207730023.38	481940949.55
Motor Own Damage	12967.13	98134.48	574356	3986301	1708.72	13690.65	4157605.01	38866451.38
Previous year	11258.41	84443.83	460985	3430650			1848406.81	19456293.21
Motor Third party	12895.70	90563.06	482475	4092288	5130.14	30613.69		
Previous year	7765.56	59949.37	403795	2738146				
Motor (Total)	25862.83	188697.54	574356	4092288	6838.86	44304.34	4157605.01	38866451.38
Previous year (Total)	19023.97	144393.20	460985	3430650			1848406.81	19456293.21
Workmen's compensation / Employer's liability	670	3705	6946	40415	320	291	594633	3774678
Previous year	350	3414	9601	51282			41859	666949
Public Liability	34	226	-10	548	42	189	1047	21520
Previous year	-8	38	-21	610			37497	564396
Product Liability	18	306	17	75	-6	-54	721	3741
Previous year	24	360	605	730			37227	272593
Other Liability Covers	979	10579	3348	50985	194	3857	118096	1578427
Previous year	784	6722	1805	34712			202648	4485202
Liability (Total)	1700.83	14816.52	10301	92023	550.75	4282.44	714497.56	5378365.78
Previous year (Total)	1150.08	10534.08	11990	87334			319232.20	5989141.20
Personal Accident	922.14	10157.76	43312	358493	42.38	1888.60	3142836.05	34178249.67
Previous year	879.76	8269.16	40266	369343			1013847.49	55252601.96
Medical Insurance	12804.32	155061.15	92633	946574	2617.87	21016.54	3592247.08	119196250.06
Previous year	10186.45	134044.61	78048	806522			18432827.73	426176832.83
Overseas Medical Insurance	180.28	875.80	5298	23386	112.28	-90.64	10425.88	160332.70
Previous year	68.00	966.44	4454	41851			7683.59	214581.56
Health (Total)	12984.60	155936.95	97931	969960	2730.15	146986.08	3602672.96	119356582.76
Previous year (Total)	10254.45	135011.05	82502	848373			18440511.32	426391414.39
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	0.00	0.55	0	15	0.00	-2.17	0.00	3.05
Previous year	0.00	2.72	0	53			0.00	6.25
All Other Miscellaneous	3474.05	34891.20	91490	717676	209.20	3753.33	15285093.47	553427489.37
Previous year	3264.85	31137.87	-3625	817110	0.00		39844701.28	245328361.17
Grand Total	57231.75	554640.15	909338	6996682	8621.77	87163.00	307924899.84	2369448987.28
Previous year (Total)	48609.98	467477.15	685649	6400435			985500030.56	2774682190.71

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
850.01	7109.98	3269	57602	82.98	2204.51				
544.93	3350.00	13093	66370	206.75	2585.63				
155.69	1548.16	1045	8608	-12.55	485.74				
67.17	641.69	1599	7131	67.49	521.70				
2.82	127.70	26	294	-0.22	8.00				
1.67	23.56	145	313	0.88	51.02				
158.51	1675.86	1071	8902	-12.77	493.74	0	0		
68.84	665.25	1744	7444	68.37	572.72	0	0		
-49.64	12.96	0	1	0.00	0.00	0.00	0		
0.00	0.00	0	0	0.00	0.00	0.00	0		
224.47	1459.98	1556	9361	353.29	1651.52	0.00			
85.39	676.57	801	3384	35.48	546.53	0.00	0		
2918.51	23652.06	39187	433074	329.38	4682.10	10722.00	80753		
882.76	4816.29	24769	230034	666.34	4143.55	1889.00	16558		
2634.51	22123.14	10033	371429	177.69	4153.95	156807.00	231683		
344.01	3033.80	18183	184602	433.77	2707.79	74215.00	84866		
5553.02	45775.20	39187	433074	507.07	8836.05	167529	312436		
1226.77	7850.09	24769	230034	1100.11	6851.34	76104	101424		
61	724	344	3620	-16	254	3344	16245		
5	355	117	3237	48	295	2632	14590		
0	0	-1	2	0	0	0	0		
7	7	1	8	6	17	259	259		
-3	13	0	7	0	1	0	0		
2	20	-4	0	3	40	0	0		
136	1368	1122	11956	65	482	1191	6612		
30	341	743	4259	17	154	-2	621		
193.24	2104.25	1465	15585	49.19	736.68	4535	22857		
44.12	723.12	857	7504	75.07	507.07	2889	15470		
72.78	839.30	3386	39651	-119.82	328.25	32854	442667		
69.68	470.07	9465	33586	51.19	467.66	38250	251125		
669.32	6455.34	2429	61120	693.73	5983.96	85267	2639406	-49080661	6263455
137.46	5245.22	13960	102273	982.59	5048.37	408293	2590097	313797	4298747
14.25	40.54	178	1491	2.85	27.44	10347	15650	10655	24067
-11.04	70.95	112	2023	5.56	78.32	564	5823	304	29523
683.57	6495.88	2607	62611	696.58	6011.40	95614	2655056	-49070006	6287522
126.42	5316.17	14072	104296	988.15	5126.69	408857	2595920	314101	4328270
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		
1460.41	8622.17	19369	172985	-64.84	1782.05	327729	3522218		
826.19	7070.68	9067	183924	473.77	2184.60	44241	141134		
9146.37	74095.58	71910	799772	1491.68	22044.20	628261	6955234		
2992.34	26121.95	73868	636542	2998.89	18842.24	570341	3105073		

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	4162.49	55761.52	38336	332223	635.10	7959.20	17676129.60	131345742.58
Previous year	3527.39	47802.32	36950	342505				
Marine Cargo	2522.54	18995.81	15199	117761	706.32	3602.09	9024208.40	61227803.61
Previous year	1816.22	15393.72	14469	119964				
Marine Hull (Including Onshore & Offshore oil energy)	1646.08	14719.84	459	3550	87.89	-504.23	121965.88	9518990.53
Previous year	1558.19	15224.07	374	3378				
Marine (Total)	4168.62	33715.65	15658	121311	794.21	3097.86	9146174.28	70746794.14
Previous year (Total)	3374.41	30617.79	14843	123342				
Aviation	750.58	5596.95	50	296	-816.27	492.31	62944.79	3809641.31
Previous year	1566.85	5104.64	32	260				
Engineering	2510.15	19895.55	3453	26797	576.34	1894.75	2185205.39	16068273.57
Previous year	1933.81	18000.80	3491	27825				
Motor Own Damage	8302.81	66153.61	500963	3565977	415.69	4250.07	571897.66	4379734.76
Previous year	7887.12	61903.54	469695	3370925				
Motor Third party	9037.98	70459.56	668719	4837897	2652.82	19228.10	0.00	0.00
Previous year	6385.16	51231.46	627805	4635306				
Motor (Total)	17340.79	136613.17	668719	4837897	3068.51	23478.17	571897.66	4379734.76
Previous year (Total)	14272.28	113135.00	627805	4635306				
Workmen's compensation / Employer's liability	662.65	5089.44	5284	42194	104.40	529.96	9014.49	77918.64
Previous year	558.25	4559.48	4702	40860				
Public Liability	6.52	66.88	30	293	0.89	0.88	651252.42	10078104.37
Previous year	5.63	66.00	17	267				
Product Liability	42.42	333.57	11	82	35.71	18.49	221187.27	1253832.62
Previous year	6.71	315.08	9	98				
Other Liability Covers	247.46	2162.06	2834	22439	22.46	233.04	367125.67	12866806.86
Previous year	225.00	1929.02	2174	19442				
Liability (Total)	959.05	7651.95	8159	65008	163.46	782.37	1248579.85	24276662.49
Previous year (Total)	795.59	6869.58	6902	60667				
Personal Accident	784.15	10961.72	76414	614137	129.43	1966.96	1181625.80	27079789.63
Previous year	654.72	8994.76	74295	686884				
Medical Insurance	7126.93	80958.11	71365	590532	209.37	2164.53	536989.53	3907900.96
Previous year	6917.56	78793.58	59661	541489				
Overseas Medical Insurance	33.50	523.01	1002	15325	-9.74	-34.82	84893.51	1492926.31
Previous year	43.24	557.83	1429	16948				
Health (Total)	7160.43	81481.12	72367	605857	199.63	2129.71	621883.04	5400827.27
Previous year (Total)	6960.80	79351.41	61090	558437				
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0				
Credit Guarantee	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0				
All Other Miscellaneous	2871.26	40967.89	71805	590864	-1876.30	6237.78	4509112.03	56190028.77
Previous year	4747.56	34730.11	76864	707553				
Grand Total	40707.52	392645.52	954961	7194390	2874.11	48039.11	37203552.44	339297494.52
Previous year (Total)	37833.41	344606.41	902272	7142779	0.00	0.00	0.00	0.00

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
385.68	3475.68	7333	60427	0.00	0.00	0	0	0	0
352.78	2511.42	6752	57887	658.28	14832.22	0	0	0	0
67.67	660.51	664	5557	0.00	0.00	0	0	0	0
67.73	552.01	737	5603	366.62	3549.64	0	0	0	0
487.35	1270.34	183	1267	0.00	0.00	0	0	0	0
15.38	99.67	146	1364	280.56	2126.25	0	0	0	0
555.02	1930.85	847	6824	0.00	0.00	0	0	0	0
83.11	651.68	883	6967	647.18	5675.89	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
108.20	845.38	452	3737	0.00	0.00	0	0	0	0
93.53	724.09	475	3779	551.00	3726.03	0	0	0	0
1678.63	12570.00	93235	652555	0.00	0.00	0	0	0	0
1427.53	10807.02	81690	573119	2333.47	18062.75	0	0	0	0
2032.54	14843.10	130100	926971	0.00	0.00	333283	1966096	334470	10346497
1278.99	9720.31	112613	806287	1791.33	14418.47	2983	2406840	77700	6311669
3711.17	27413.10	130100	926971	0.00	0.00	333283	1966096	334470	10346497
2706.52	20527.33	112613	806287	4124.80	32481.22	2983	2406840	77700	6311669
69.27	660.41	856	6992	195.07	1346.23	0	7917	0	52988
65.77	566.75	758	6874	166.92	1218.28	1724	118631	2286	620107
4.46	7.71	4	17	0.00	0.00	0	0	0	0
2.27	5.06	3	17	0.05	12.57	0	0	0	0
0.00	0.76	0	2	0.00	0.00	0	0	0	0
0.00	9.13	0	4	4.05	79.32	0	0	0	0
14.53	155.71	209	1929	0.00	0.00	0	0	0	0
12.51	134.81	193	1608	82.00	836.94	154	1130	10309	15343
88.26	824.59	1069	8940	195.07	1346.23	0	7917	0	52988
80.55	715.75	954	8503	253.02	2147.11	1878	119761	12595	635450
65.43	853.70	17102	129772	143.05	2186.24	84	320613	1551	624442
183.30	939.88	15781	151463	234.09	2893.44	22329	1129328	-130295	3233587
266.35	2329.49	4545	37650	1623.00	15399.75	38	1109366	131	309124
189.95	1703.40	3466	32298	1402.34	13579.51	47569	2105067	64837	4459552
0.74	16.15	36	485	0.00	0.00	0	0	0	0
2.34	19.87	80	528	8.52	145.58	9107	9953	9286	14011
267.09	2345.64	4581	38135	1623.00	15399.75	38	1109366	131	309124
192.29	1723.27	3546	32826	1410.86	13725.09	56676	2115020	74123	4473563
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
665.00	11697.49	25412	195427	896.75	10587.43	-4675	531422	-4252	1550605
648.31	8545.80	24399	219315	833.41	8252.41	22970	590117	28961	4672531
5845.85	49386.43	186896	1370233	2857.87	29519.65	328730	3935414	331900	12883656
4340.39	36339.22	165403	1287027	8712.64	83733.41	106836	6361066	63084	19326800

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	6601.00	64903.00	71649	617291	1474.00	10439.00	10553157	103761791
Previous year	5127.00	54464.00	64195	578373	592.00	9592.00	8196643	87145217
Marine Cargo	2394.00	21678.00	18010	219754	-152.00	2917.00	5077413	45976670
Previous year	2546.00	18761.00	21417	212401	597.00	3589.84	5399788	39798045
Marine Hull (Including Onshore & Offshore oil energy)	4313.00	17717.00	1720	17697	-426.00	1810.00	1551439	6373022
Previous year	4739.00	15907.00	1359	15197	114.00	2500.04	1704676	5719617
Marine (Total)	6707.00	39395.00	19730	237451	-578.00	4727.00	6628851	52349692
Previous year (Total)	7285.00	34668.00	22776	227598	711.00	6089.88	7104464	45517662
Aviation	113.00	625.00	88	577	86.00	177.00	16954	93773
Previous year	27.00	448.00	39	509	27.00	100.52	4051	67217
Engineering	4061.00	31572.00	19761	102875	1006.00	6528.00	1750431	13608621
Previous year	3055.00	25044.00	14866	93859	1041.00	7655.32	1316810	10801148
Motor Own Damage	14109.00	88476.00	579121	4125803	4269.00	17177.00	2001992	12554275
Previous year	9840.00	71299.00	464975	3522751	2077.00	5492.15	1396244	10116950
Motor Third party	12901.00	91437.00	920215	6794846	5397.00	30623.00		0
Previous year	7504.00	60814.00	724202	5702260	922.00	12627.40	0	0
Motor (Total)	27010.00	179913.00	920215	6794846	9666.00	47800.00	2001992	12554275
Previous year (Total)	17344.00	132113.00	724202	5702260	2999.00	18119.55	1396244	10116950
Workmen's compensation / Employer's liability	227.21	4223.15	1178	50683	96.19	697.80		0
Previous year	131.02	3525.35	903	47706	-270.36	518.87	0	0
Public Liability	3.55	1070.24	41	4568	1.35	253.48	602	181397
Previous year	2.20	816.76	36	4048	12.25	364.35	373	142144
Product Liability	2.17	711.63	15	1159	0.40	232.33	432	141590
Previous year	1.77	479.30	13	1148	-11.25	240.27	352	95367
Other Liability Covers	45.07	2253.98	366	15434	17.06	363.39	13712	685747
Previous year	28.01	1890.59	228	13995	-226.59	328.51	8522	575192
Liability (Total)	278.00	8259.00	1600	71844	115.00	1547.00	14745.46	1008733.23
Previous year (Total)	163.00	6712.00	1180	66897	-495.95	1452.00	9246.76	812702.18
Personal Accident	1381.00	9563.00	35290	374046	46.00	1736.00	4547251	31488305
Previous year	1335.00	7827.00	33748	368508	703.25	1335.97	4395785	25773407
Medical Insurance	11776.05	130410.83	166383	1105487	677.33	30666.77	1626689	18014349
Previous year	11098.72	99744.06	156818	991110	3093.13	28125.60	1533126	13778183
Overseas Medical Insurance	995.95	7766.17	916	74240	256.67	1312.23	293013	2284841
Previous year	739.28	6453.95	702	77199	6.28	1148.24	217499	1898844
Health (Total)	12772.00	138177.00	167299	1179726	934.00	31979.00	1919702	20299190
Previous year (Total)	11838.00	106198.00	157520	1068310	3099.41	29273.83	1750625	15677027
Crop Insurance	0.00	0.00	0	0	0.00	0.00		0
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Credit Guarantee	0.00	0.00	0	0	0.00	0.00		0
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
All Other Miscellaneous	5369.00	43599.00	203929	1445921	721.00	6508.00	1034988	8404626
Previous year	4648.00	37091.00	185201	1321996	1066.85	3430.19	896000	7150049
Grand Total	64292.00	516006.00	1439561	10824577	13470.00	111441.00	28468072.08	243569004.81
Previous year (Total)	50822.00	404565.00	1203727	9428309	9743.56	77049.26	25069869.21	203061377.73

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
455.07	4564.43	12109	86617	0.00	0.00	0	0		
360.47	4308.32	10264	82712	0.00	0.00	0	0		
50.75	674.06	2121	16361	0.00	0.00	0	0		
100.53	592.83	2886	16361	0.00	0.00	0	0		
5.50	71.78	173	1446	0.00	0.00	0	0		
4.93	55.42	144	1367	0.00	0.00	0	0		
56.25	745.85	2294	17806	0.00	0.00	0	0		
105.46	648.25	3030	17727	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		
260.11	1828.24	2355	14145	0.00	0.00	0	0		
196.98	1604.64	1911	10918	0.00	0.00	16	16		
2645.11	18944.72	72752	547201	0.00	0.00	0	0		
2397.20	16686.75	67990	487776	0.00	0.00	0	0		
1288.37	16009.45	116790	868497	0.00	0.00	0	0		
1066.32	12159.66	116306	777073	0.00	0.00	0	0		
3933.48	34954.17	116790	868497	0.00	0.00	0	0		
3463.52	28846.40	116306	777073	0.00	0.00	0	0		
26.35	351.04	782	6334	35.69	186.32	629	1199		
23.16	269.83	697	5301	19.10	131.50	411	859		
2.91	35.66	106	723	0.00	0.00	0	0		
2.28	30.25	76	621	0.00	0.00	0	0		
0.12	3.79	2	35	0.00	0.00	0	0		
0.11	2.85	1	30	0.00	0.00	0	0		
18.12	120.95	429	1770	0.00	7.78	0	0		
10.46	83.75	304	1413	0.00	5.71	0	0		
47.50	511.44	1319	8862	35.69	194.10	629	1200		
36.01	386.68	1077	7364	19.10	137.21	411	859		
91.64	4739.13	5680	41164	81.95	2162.06	38956	401913		
47.91	4388.05	3904	35642	43.53	2479.86	24042	134613		
1663.80	10466.85	15528	114028	2817.37	16054.77	926695	18516996	500668	18587007
562.33	5604.95	8185	81053	2303.01	9217.47	9393	4778899	330508	1995326
8.97	174.06	226	2985	0.00	0.00	0	0	2776	117489
7.45	255.72	172	3588	0.00	5.94	0	8125	2134	11893
1672.77	10640.91	15754	117013	2817.37	16054.77	926695	18516996	503444	18704496
569.78	5860.67	8357	84641	2303.01	9223.41	9393	4787024	332642	2007219
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	-7736	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		
2109.69	12432.84	99250	345375	202.85	6378.12	62524	197205		
1416.88	11741.67	88277	335864	169.87	4707.68	58769	214206		
8626.52	70417.00	255551	1499480	3137.86	24789.05	1028804	19117313	503444	18704496
6197.01	57784.68	233127	1351942	2535.52	16548.16	84896	5136718	332642	2007219

Name of the Insurer: Universal Sampo 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	890.97	4917.76	9316	70122	449.00	1507.11	689006.53	6033866.10
Previous year	441.97	3410.65	7733	61303	10.83	939.58	489021.30	4045303.41
Marine Cargo	76.03	605.51	176	1227	48.86	257.71	538839.38	4947611.19
Previous year	27.18	347.79	71	804	19.30	77.16	50185.76	2397556.11
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)	76.03	605.51	176	1227	48.86	257.71	538839.38	4947611.19
Previous year (Total)	27.18	347.79	71	804	19.30	77.16	50185.76	2397556.11
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	45.15	567.23	122	976	-6.45	187.53	25050.26	471443.96
Previous year	51.60	379.70	93	684	22.69	124.41	51673.95	227019.47
Motor Own Damage	2037.43	10486.05	59752	286718	1216.14	2185.27	97279.80	519468.39
Previous year	821.29	8300.78	29526	293061	262.60	5770.57	55991.41	545640.64
Motor Third party	509.37	2674.76	0	0	304.04	271.52		
Previous year	205.33	2403.24			65.66	2026.97		
Motor (Total)	2546.80	13160.81	59752	286718	1520.18	2456.79	97279.80	519468.39
Previous year (Total)	1026.62	10704.02	29526	293061	328.26	7797.55	55991.41	545640.64
Workmen's compensation / Employer's liability	32.10	142	91	718	6.17	65.70	6280	26138
Previous year	25.92	76.75	66	482	23.85	51.58	3254.95	8328.18
Public Liability	0.45	7.17	1	15	0.45	2.90	500	6986
Previous year	0.00	4.27	0	4	0.00	-1.74	0.00	5900.00
Product Liability	0.00	8.99	0	6	0.00	8.99	0.00	1993.75
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Other Liability Covers	6	54	18	105	-0.90	14.85	2659	16437
Previous year	7	39	16	46	7	28	3337	37516
Liability (Total)	38.69	212.33	110	844	5.73	92.44	9439.15	51555.04
Previous year (Total)	32.95	119.88	82	532	30.88	77.86	6591.95	51743.77
Personal Accident	35.25	376.09	624	5058	3.08	100.10	105254.35	4234299.54
Previous year	32.17	275.99	620	4157	-213.87	-663.37	97177.75	1841602.14
Medical Insurance	348.91	2439.40	6378	28057	182.22	998.14	17171.65	124436.41
Previous year	166.69	1441.25	5904	21154	-33.07	399.83	10001.20	88762.96
Overseas Medical Insurance	0.32	6.79	23	434	0.32	6.79	3425.87	143601.40
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Health (Total)	349.23	2446.18	6401	28491	182.54	1004.93	20597.52	268037.81
Previous year (Total)	166.69	1441.25	5904	21154	-33.07	399.83	10001.20	88762.96
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	377.20	2914.27	13938	108299	81.50	770.38	187414.93	1777906.76
Previous year	295.70	2143.89	11940	92271	-53.37	206.32	133505.91	1127616.01
Grand Total	4359.32	25200.18	90439	501735	2284.44	6377.00	1672881.92	18304188.79
Previous year (Total)	2074.88	18823.18	55969	473966	111.65	8959.34	894149.23	10325244.51

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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	0.00	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		
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	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		
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	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	0.00	0	0	0.00	0.00	0.00	0.00		
0	0.00	0	0	0.00	0.00	0.00	0.00		
0	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		
0	0.00	0	0	0.00	0.00	0.00	0.00		
0	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	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
0.00	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
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	0.00	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		
148.24	1166.24	5530	42991	0.00	0.00	0.00	0.00		
124.04	911.99	4173	33837	0.00	0.00	0.00	0.00		
148.24	1166.24	5530	42991	0.00	0.00	0	0	0	0
124.04	911.99	4173	33837	0.00	0.00	0	0	0	0

Name of the Insurer: Agriculture Insurance Company of India 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)								
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	15631.34	172090.94	80283	447130	4272.95	47094.77	399776.47	3853307.28
Previous year	11192.7	124801.9	60766.0	430117.0	-645.9	12028.3	389663.2	3419222.0
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total	15631.34	172090.94	80283	447130	4272.95	47094.77	399776.47	3853307.28
Previous year (Total)	11192.7	124801.9	60766.0	430117.0	-645.9	12028.3	389663.2	3419222.0

* 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	55.05	565.55	2710	20202	55.05	565.55	45812.75	318837.13
Previous year	47.84	403.60	2345	20312	47.84	403.60	30752.50	233457.13
Medical Insurance	4159.37	21885.08	18434	122312	4159.37	21885.08	68599.58	440198.76
Previous year	1989.38	11291.94	12966	81474	1989.38	11291.94	43904.25	391152.67
Overseas Medical Insurance	25.02	364.86	1527	16121	25.02	364.86	218275.00	1848044.24
Previous year	28.58	341.37	1422	15243	28.58	341.37	181816.91	1500592.34
Health (Total)	4184.39	22249.93	19961	138433	4184.39	22249.93	286874.58	2288242.99
Previous year (Total)	2017.96	11633.31	14388	96717	2017.96	11633.31	225721.16	1891745.00
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	74.86	521.56	0	2	74.86	521.56	378175.00	2413740.00
Previous year	49.04	398.98	0	2	49.04	398.98	243480.00	1853965.00
Grand Total	4314.31	23337.04	22671	158637	4314.31	23337.04	710862.33	5020820.12
Previous year (Total)	2114.85	12435.89	16733	117031	2114.85	12435.89	499953.66	3979167.13

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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		
6.31	43.34	451	4419	0	0.08	0	751		
3.71	15.23	2203	11426	0	3.12	1843	11010		
253.22	2095.71	3950	152520	53	244.90	13181	61114	64809	779331
133.69	792.80	4104	30094	0.00	45.85	0	9689	47944	354616
								2211	21915
								2138	20339
253.22	2095.71	3950	152520	52.82	244.90	13181	61114	67020	801246
133.69	792.80	4104	30094	0.00	45.85	0	9689	50082	374955
259.52	2139.05	4401	156939	52.82	244.98	13181	61865	67020	801246
137.41	808.03	6307	41520	0.29	48.98	1843	20699	50082	374955

Name of the Insurer: *Export Credit Guarantee Corporation of India 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								
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	8742	61518	1051	7815	1489	5582	320440	2787441
Previous year	7253	55936	979	8241	868	3873	229889	2908703
All Other Miscellaneous								
Previous year								
Grand Total	8742.32	61518.12	1051	7815	1488.94	5582.04	320439.50	2787440.83
Previous year (Total)	7253.35	55936.08	979	8241	868.23	3872.96	229889.43	2908702.79

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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: Max Bupa 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								
Previous year								
Medical Insurance	693.67085	6005.30334	6141	38980	685.87835	4882.90539	18692.8	227261.3
Previous year	194.25799	1247.63031	1958	14140	177.40	1230.78	9130.00	51145.00
Overseas Medical Insurance								
Previous year								
Health (Total)	693.67	6005.30	6141	38980	685.88	4882.91	18692.80	227261.30
Previous year (Total)	194.26	1247.63	1958	14140	177.40	1230.78	9130.00	51145.00
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total	693.67	6005.30	6141	38980	685.88	4882.91	18692.80	227261.30
Previous year (Total)	194.26	1247.63	1958	14140	177.40	1230.78	9130.00	51145.00

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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		
8.35654	46.11658	106	529	2.49938	13.73876	92	2535	16636	95583
1.73	16.20	16	212	0.00	0.00	0	0	2974	21817
8.36	46.12	106	529	2.50	13.74	92	2535	16636	95583
1.73	16.20	16	212	0.00	0.00	0	0	2974	21817
8.36	46.12	106	529	2.50	13.74	92	2535	16636	95583
1.73	16.20	16	212	0.00	0.00	0	0	2974	21817

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	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	113.70	918.63	11458	84443	33.55	127.08	169897.04	1454281.76
Previous year	80.15	791.55	10866	84225	29.62	360.40	133821.74	1093622.12
Medical Insurance	3631.73	78591.64	89191	657207	2973.25	1586.77	301252.00	24892555.00
Previous year	658.48	77004.87	71311	502061	-642.81	13807.63	-500500.60	22269597.35
Overseas Medical Insurance	64.68	910.15	2189	31019	4.08	68.55	237967.65	3377186.02
Previous year	60.60	841.60	2395	28383	15.06	288.42	225098.00	2733436.39
Health (Total)	3696.41	79501.79	91380	688226	2977.33	1655.32	539219.65	28269741.02
Previous year (Total)	719.08	77846.47	73706	530444	-627.75	14096.05	-275402.60	25003033.74
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	11.35	275.97	4035	98909	-25.47	-16.99	40350	989090.00
Previous year	36.82	292.96	13167	104236	2.19	28.82	131670.00	1042360.00
Grand Total	3821.46	80696.39	106873	871578	2985.41	1765.41	749466.69	30713112.78
Previous year (Total)	836.05	78930.98	97739	718905	-595.94	14485.27	-9910.86	27139015.86

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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	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
71.54	614.86	5465	36922	13.16	154.78	6288	67878.00		
22.99	289.23	4457	35744	22.33	256.12	5266	169139.00		
1318.77	43058.05	30544	223018	776.87	24675.35	23477	15892200.00	105562	53071068.00
-362.51	28254.92	24986	173672	690.21	46601.79	33845	8731576.00	-1516681	55807603.00
13.88	161.27	456	5307	22.72	374.75	908	13499.00	2189	31003.00
12.50	177.11	365	4963	34.82	393.18	1323	13982.00	2395	28613.00
1332.65	43219.32	31000	228325	799.59	25050.10	24385	15905699	107751	53102071
-350.01	28432.03	25351	178635	725.03	46994.97	35168	8745558	-1514286	55836216
				0.00	0.00	0	0		
				0.00	108.50	0	38574		
1404.19	43834.18	36465	265247	812.75	25204.88	30673	15973577	107751	53102071
-327.02	28721.26	29808	214379	747.36	47359.59	40434	8953271	-1514286	55836216

Name of the Insurer: L&T 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	80.10	930.07	111	994	80.10	930.07	264,297.05	3,994,645.11
Previous year	18.75	30.17	49	78	18.75	30.17	52,497.21	80,951.56
Marine Cargo	41.11	380.52	311	1,605	41.11	380.52	115,854.04	1,428,878.67
Previous year	-	-	-	-	-	-	-	-
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Marine (Total)	41.11	380.52	311	1,605	41.11	380.52	115,854.04	1,428,878.67
Previous year (Total)	-	-	-	-	-	-	-	-
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	113.97	681.18	262	1,597	113.97	681.18	64,582.56	669,040.19
Previous year	34.78	51.58	24	36	34.78	51.58	49,581.23	65,106.31
Motor Own Damage	542.31	3,375.47	6,191	39,198	542.31	3,375.47	49,586.59	309,902.63
Previous year	22.44	43.59	281	454	22.44	43.59	1567.92	3,185.92
Motor Third party	284.41	1,776.01	24	146	284.41	1,776.01	-	-
Previous year	7.02	11.96	-	-	7.02	11.96	-	-
Motor (Total)	826.72	5,151.49	6,191	39,198	826.72	5,151.49	49,586.59	309,902.63
Previous year (Total)	29.46	55.55	281	454	29.46	55.55	1,567.92	3,185.92
Workmen's compensation / Employer's liability	18.65	165.83	167	858	18.65	165.83	3,831.44	26,847.63
Previous year	0.80	0.80	3	3	0.80	0.80	52.49	52.49
Public Liability								
Previous year								
Product Liability	-	-			-	-	-	-
Previous year	-	8.84	-	2	-	8.84	-	23,750
Other Liability Covers	3.55	107.65	5	63	3.55	107.65	1,725.00	361,209.05
Previous year	-	-	-	-	-	-	-	-
Liability (Total)	22.20	273.48	172	921	22.20	273.48	5,556.44	388,056.69
Previous year (Total)	0.80	9.64	3	5	0.80	9.64	52.49	23,802.49
Personal Accident	3.40	171.47	3,443	6,310	3.40	171.47	4,393.19	541,928.87
Previous year	-	-	-	-	-	-	-	-
Medical Insurance	16.97	430.24	71	185	16.97	430.24	389.25	11,453.43
Previous year	-	-	-	-	-	-	-	-
Overseas Medical Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Health (Total)	16.97	430.24	71	185	16.97	430.24	389.25	11,453.43
Previous year (Total)	-	-	-	-	-	-	-	-
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	27.82	434.97	61	761	27.82	434.97	33,986.42	5,427,268.93
Previous year	17.15	24.21	18	27	17.15	24.21	43,321.43	64,716.35
Grand Total	1,132.29	8,453.42	10,646	51,717	1,132.29	8,453.42	538,645.53	12,771,174.52
Previous year (Total)	100.94	171.15	375	600	100.94	171.15	147,020.28	237,762.63

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF NOVEMBER, 2011

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
0.93	15.22	3	67	-	-	-	-	-	-
0.51	2.88	11	51	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
0.51	2.88	11	51	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
2.11	17.11	8	68	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
65.68	397.07	840	5,041	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
29.07	180.30	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
94.75	577.36	840	5,041	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
1.47	3.77	-	16	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	0.85	-	12	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
1.47	4.62	-	28	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
0.11	0.70	38	210	3.57	3.57	4,220	4,220	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	0.61	-	20	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
99.88	618.51	900	5,485	3.57	3.57	4,220	4,220	-	-
-	-	-	-	-	-	-	-	-	-

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20 – 25 Feb 2012 Venue: NIA Pune	Finance for Non-Finance Executives (Life) By National Insurance Academy.
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view point



Insurance underwriting risks are in most cases not correlated with the economic business cycle and financial market risks; and the magnitude of insurance liabilities are, in very broad terms, not affected by financial market losses.

Mr. Yoshihiro Kawai
Secretary General, IAIS

According to our survey, more than two-thirds of consumers don't know some types of life insurance include a cash value, and nearly half don't think of life insurance as an investment option.

Mr. Adam Hamm
NAIC Vice President and North Dakota Insurance Commissioner

Governance is stronger. Stronger regulatory frameworks and corporate governance reforms following the Asian financial crisis in 1998 have improved the resilience of the financial and corporate sectors.

Mr. Ravi Menon
Managing Director, Monetary Authority of Singapore.

Businesses that have a customer strategy, and can articulate how they want to treat their customers and ensure that their business strategies are aligned, are more equipped to deliver fair consumer outcomes, and to identify where they might present risks to customers.

Ms. Nausicaa Delfas
Head of Department, Conduct Supervision, FSA, UK

The types of failures not only cause detriment to a firm's customers but also erode the special trust customers place in regulated firms, leading to significant reputational and regulatory cost, in the form of penalties and the expense of remedial action for firms.

Mr. Peter Oakes
Director of Enforcement, The Central Bank of Ireland

Owing to the long-term nature of insurance business, one doesn't expect a reversal in the loss-making trend overnight. Insurance companies would have to minimise losses through efficient claims management.

Mr. J. Hari Narayan
Chairman, Insurance Regulatory & Development Authority, India



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