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May, 2014



**Not a Hard Riddle**  
- Claims Management

बीमा विनियामक और विकास प्राधिकरण



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**Editor**

U. JAWAHARLAL

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Phone: +91-40-23381100  
Fax: +91-40-66823334  
e-mail: [irdajournal@irda.gov.in](mailto:irdajournal@irda.gov.in)

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## From the Publisher

Insurance, as a financial service, is differently positioned as compared to banking or capital markets. While the other financial services are necessarily investment-related and emphasize on a return on one's investment, insurance is all about risk coverage. It is this unique quality of insurance that often turns out to be the bone of contention between the insurers and the insured. In most cases, it is difficult to convince the policyholder that payment of a claim is contingent upon the happening of the event that is covered under the policy.



Very often, we get to hear that the most important function that an insurer performs is 'claim settlement'. In this scenario, when there is an occasion for an insurer to either repudiate or reject a claim - either wholly or partially, it is viewed as a disservice by the claimant, even when it is justified on the basis of reciprocal obligations. It once again establishes the fact that not enough has been done to explain the terms of the contract to the prospect. Although the forwarding of the proposal form along with the policy bond is being followed by insurers religiously as mandated, it often raises a doubt whether the spirit behind such a practice is in place.

Further, there are occasions when a claim is disallowed for such reasons as suppression of facts that are material to the acceptance of the risk. Once again, while the intention is not to blame the insurers for such an incidence invariably, it is advised that walking that extra mile in making the proponents understand the implications will make all the difference in properly settling the claims. In the modern day context of rapid and wide-spread communication, even an insignificant and seemingly innocuous confrontation with a policyholder can lead to an irreparable damage of an insurer's reputation.

Above all, insurers would do well to scientifically follow the practice of responsible underwriting in order that the risk at their disposal is duly assessed upfront. Indiscreet acceptance of business in order to shore up the top-lines; and looking for any possible loopholes to avoid claims later smacks of poor business management. It not only affects the business interests of the player in question but also badly reflects on the reputation of the industry in the long run.

'Claims Management' is the focus of this issue of the Journal. Being a subject of wide coverage and importance, the next issue of the Journal will also focus on 'Claims Management'.

**T.S. Vijayan**



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FROM THE EDITOR

## Calling for Great Adroitness - Claims Management

**A**mong all the reasons for which policyholders complain about a dissatisfactory service by the insurance companies, the settlement of claims occupies a place of prominence. For one thing, it is not easy to convince the policyholders about various deductibles, excesses, exclusions etc.; and for another, the fact that they are paying for an event that they do not desire to happen is hard for them to digest. On several occasions, the disputes end in several policyholders strongly believing that insurers are, all said and done, 'fair weather friends'. The huge business attrition and the continuing trend of a large number of consumer complaints often leaves a doubt whether the entire exercise of setting the house in order is really being practised in the industry in right earnest.

In order to overcome these constraints, a high order of transparency as to what is really applicable in a particular contract and what is not is absolutely necessary before the contract is consummated. It is indeed a tragedy that not many policyholders make use of the free-look period that could improve the consumer satisfaction levels by a few notches. While a small number of cancellations during the free-look period should be a reason for the insurers to smile, the unduly large number of complaints at a later stage indicates that we are still not in a position to educate the customer with

the need for going through the policy conditions.

At the same time, another very important factor that bothers the insurers is a high incidence of fraudulent claims. Depending on the actual line of operation, these frauds can come in the shape of engineering fake accidents, impersonation, excessive claims and many other ingenious methods being adopted by unscrupulous elements that are on the prowl to exploit weak links. Apart from being a heavy drain on the profitability of the insurers, they lead to an escalation in the premiums that will directly penalize the sincere policyholder - a situation that the industry can hardly afford. It once again sums up the need for the managements being ahead of the 'smart moves' of the fraudulent policyholders and plug the loopholes wherever necessary.

'Claims Management' is the focus of this issue of the Journal. Mr. Sanjay Datta, an experienced practitioner, takes the first shot at the debate through his article 'Need for Utmost Alacrity' in which he exhorts the systematic method that has to be followed in order that an application for a claim is properly attended to by the Non-life insurers. In the next article, Mr. C.L. Baradhwaj discusses the importance of empathizing with the claimant in the case of a Life insurance contract; and the various stages that need to be handled with

efficiency so that the policyholders appreciate the role of the insurers in the long run. For a claim to be paid promptly, it is essential that the nitty-gritty of the various stages of policy servicing is totally in order. Dr. G. Gopalakrishna takes up the process of what amounts to good service by a Life insurer.

Mr. N.M. Behera, in his article titled 'The Touchstone of Policyholders' Faith', brings out succinctly the constraints being faced by the insurers, especially in the Health insurance domain; and suggests a few ways for an efficient claims management portfolio. Repudiation of a claim is not a desired event, either for the policyholder or for the insurer; but often times it is something that cannot be helped. What are the factors that lead to an avoidable repudiation in a Life insurance contract? Get to know some of these reasons from Mr. R. Venugopal who puts it in the form of a case study. 'An accreditation of the various stakeholders in the domain of healthcare would bring about a great deal of improvement in the health standards of the country' in the opinion of a team of experts. Mr. Praveen Yadav, Dr. Geeta Bharadwaj and Dr. (Maj.) Anuradha Monga discuss in detail this very important topic and how it would benefit the insurance industry in the long run.

'Claims Management' will continue to be the focus of the next issue of the Journal.

U. Jawaharlal



# Circular

Ref No: IRDA/ACT/CIR/PRD/089/03/2013-14

21-03-2014

To  
All CEOs of Life Insurance  
Companies

Sub: Clarifications on IRDA (Non-linked Insurance Products) Regulations, 2013 and IRDA (Linked Insurance Products) Regulations, 2013.

Re: 1. IRDA (Non-linked Insurance Products) Regulations, 2013 and IRDA (Linked Insurance Products) Regulations, 2013

2. Cir: IRDA/ACT/CIR/PRD/119/06/2013 dated 20th June, 2013

In response to the representations received from the industry and after detailed examination of such representations, the Authority, in accordance with the powers vested in Section 14 (2) of the IRDA Act, 1999, Regulations 49 and 51 of IRDA (Nonlinked Insurance Products) Regulations, 2013 and Regulations 66 and 68 of IRDA (Linked Insurance Products) Regulations, 2013 issue the circular in the form of an addendum to IRDA (Non-Linked Insurance Products) Regulations, 2013 and IRDA (Linked Insurance Products) Regulations, 2013.

Clarifications on IRDA (Non-linked Insurance Products) Regulations, 2013 and IRDA (Linked Insurance Products) Regulations, 2013:

“Advance premium:

1. Regulation 36 of IRDA (Non-linked Insurance Products) Regulations, 2013 is substituted as below:

- (i) Collection of advance premium shall be allowed within the same financial year for the premium due in that financial year. However, where the premium due in one financial year is being collected in advance in earlier financial year, insurers may collect the same for a maximum period of three months in advance of the due date of the premium.
- (ii) The premium so collected in advance shall only be adjusted on the due date of the premium.
- (iii) The commission shall only be paid after adjustment of premium on due date.

2. Regulation 52 of IRDA (Linked Insurance Products) Regulations, 2013 is substituted as below:

“Advance premium:

- (i) Collection of advance premium shall be allowed within the same financial year for the premium due in that financial year. However, where the premium due in one financial year is being collected in advance in earlier financial year, insurers may collect the same for a maximum period of three months in advance of the due date of the premium.
- (ii) The premium so collected in advance shall only be adjusted on the due date of the premium.
- (iii) The commission shall only be paid after adjustment of premium on due date.

The circular shall be applicable with immediate effect.

**T.S.Vijayan**  
Chairman

## To All Insurers

Ref:IRDA/Life/Cir/GLD/104 /04/2014

10-04-2014

**Delegation of policies / reviews by the Boards of the Insurers to Board approved Subordinate Committees**

1) Reference is invited to the Authority's Circular No. IRDA/Life/CIR/GLD/013/02/2011 dated 01/02/2011 wherein Vide Clause 9.1 it was prescribed that

the Board of Directors of Insurers shall approve the comprehensive outsourcing policy and Vide Clause 9.3 it was also prescribed that the Board of Directors of Insurers shall annually review the performance of all third party service providers. In partial

modification of the above provisions, it is now clarified that:

- a) The Board may consider delegating to the Risk Management Committee constituted as per Clause 7.3 of Corporate Governance



Guidelines for Insurance Companies (Circular No. IRDA/F&A/Cir/025/2009-10 dated 05/08/2009), the mandate of approving the outsourcing policy and reviewing the performance of all the third party service providers as required under Clause 9.1 and Clause 9.3 of Outsourcing Guidelines dated 01/02/2011.

- b) Where a review is carried out by the Risk Management Committee as envisaged under Clause 9.1 and Clause 9.3 of the Outsourcing Guidelines, the minutes of the meetings of Risk Management Committee that reviewed the 'outsourcing policy and performance of all the third party service

providers' shall be placed before the Board of Directors in the ensuing meeting.

- c) It is further clarified that though the Risk Management Committee is also now permitted to review the 'outsourcing policy and the performance of Third Party Service Providers', the onus of compliance with all relevant laws, regulations/ guidelines/ notifications issued from time to time, with regard to outsourcing, rests with the Board of Directors of Insurers.
- 2) In compliance to Clause 15 of Guidelines on Servicing of Orphan policies (Ref: IRDA/Life/GDL/Agn/134/06/2012 dated

13th June, 2012), the Boards may delegate laying down a 'policy for allotment of lapsed orphan policies' to Risk Management Committee in compliance with the relevant regulatory framework.

- 3) The minutes of the meetings of the Risk Management Committee referred at Clause (2) above shall be placed before the Board in the ensuing meeting.

The above modifications will come into effect immediately.

(T S Vijayan)  
Chairman

## To All Insurers

Ref:IRDA/Life/Misc/Cir/123/05/2014

05-05-2014

### Guidelines on usage of Trade Logo of Promoting Partners of Insurance Companies

It is a common business requirement that companies shall have in place a distinct trade logo / emblem / icon (referred as trade logo hereafter) so as to build the brand image / draw the attention of their respective customers. Insurance Companies being in the business of promoting insurance services may have a trade logo so as to seamlessly reach the minds of insuring public. While adopting the 'Trade Logo' of their choice is the business prerogative of the Insurers, keeping in view the risks associated with trade logo and the long term interests of policyholders and insurance business, all Insurers may

consider developing a distinct trade logo of their own. Further when insurers use the trade logo of their promoting partners, it is desired that they observe certain risk mitigation norms to ensure that the interests of the policyholders are completely protected. Towards this objective the following guidelines are issued under Section 14 (2) of IRDA Act, 1999.

**Definition:** The 'Trade Logo' for the purpose of these guidelines is 'a name or a mark, such as symbol, monogram or logo which uses the name of an Insurance Company as an acronym for the purpose of promoting, canvassing and publicizing the company or the products and services offered'.

### Guidelines:

- a) Where an Insurer adopts the trade logo of any of its promoting partners, there shall be a prominent disclosure in all the Insurance Advertisements on the following lines
- i. Indicative Disclosure: Trade Logo displayed above belongs to M/s XYZ Ltd (mention here the name of the owner of the trade logo) and used by Insurer (mention here name of the Insurance company) under license.
- b) Where an Insurer uses the trade logo of any of its partners, there shall be in place a written agreement setting forth the underlying terms and conditions.



There shall also be a specific caveat that the agreements entered shall be subject to the jurisdictions of Indian courts.

c) The parties to the agreement shall specify the consideration, leaving no scope for any arbitrary payments. Where the consideration is not mentioned as an absolute amount, but referred to as a percentage of any variable elements, specific ceiling in absolute amount shall be mentioned leaving no scope for any disproportionate windfall gains to the other party.

d) The consideration agreed shall be reasonable and according to sound business principles.

e) Where there is no monetary consideration involved, there shall be a specific mention of the same in unambiguous terms.

f) The agreement may be for a specific period of time with a provision to renew in the agreed periodicity.

g) Any pay-out towards compensation made, on account of alleged damages owing to usage of trade logo of the promoting partner shall be remitted from the Shareholders' Account.

All the Insurance Companies are hereby directed to comply with these guidelines. The agreements entered into in accordance with these guidelines shall be filed with the Authority within 30 days from the effective date of the circular. Any changes / modifications to the terms and conditions shall also be filed, within 30 days from the date of effecting the changes.

The guidelines will come into force with effect from 01st October, 2014.

**T S Vijayan**  
Chairman

## Circular

Ref:IRDA/BRK/Misc/Cir/121/05/2014

01-05-2014

RE: CHANGES IN THE SHARE HOLDING PATTERN OF A BROKING ENTITY

Regulation 10 of IRDA (Insurance Brokers) Regulations, 2013 lays down the regulatory obligations to be complied with by a Broking Entity in case of any change in its shareholding pattern.

The Authority has been receiving frequent requests for changes in the shareholding pattern by the Broking Entities. Such frequent changes are not viewed in good light by the Authority as they reflect financial volatility of the Company. Since, it has always been the endeavor of the Authority to ensure presence of long term players in the market, the

need for certain stipulations in this regard, is considered necessary.

The Authority, by virtue of the power vested in the Authority under Section 14 (1) of the Insurance Regulatory and Development Authority Act, 1999 read with Regulation 50 of IRDA (Insurance Brokers) Regulations, 2013, brings forth the following procedure, for compliance by all brokers in case of share transfers:-

- 1) For changes in shareholding pattern (including arising out of induction of capital)
  - where after the transfer, the total paid up equity holding/ contribution of the transferee is

likely to exceed, fifty per cent of their paid up capital/ contribution OR

- where the nominal value of the shares intended to be transferred by any individual, firm, group, constituent of a group, or a body corporate under the same management jointly or severally exceeds fifty per cent of the paid-up capital or the contribution
- a. The applicant and the proposed shareholders would be subjected to the Due-Diligence, as applicable for fresh applications for Insurance Broking Licences.
  - b. The broker has to submit the following:-





- i. All documents, as specified in annexure VII of Regulation 10.
  - ii. A fresh Application form and necessary undertakings, as per undertaking format in annexure III C of the Broking Regulations, 2013
  - iii. Fit & Proper undertakings [as per the format given in annexure II B of IRDA (Insurance Brokers) Regulations, 2013], in respect of the Principal Officer, Directors, Partners/Promoters/ Shareholders & Key Management Personnel
  - c. The new promoters would be called for a Personal presentation
  - d. The Authority, on being satisfied that the applicant fulfils all the conditions specified, shall grant its approval and send intimation thereof to the applicant. There would be a time limit of 60 days, from the date of communication of approval, within which such transfer should be effected
  - e. There will be a lock-in period of 3 years, from the date of concluding share transfer, during which no request would be entertained for any further changes in the shareholding pattern.
- 2) For changes in shareholding pattern (including arising out of induction of capital)
- where after the transfer, the total paid up equity holding/ contribution of the transferee is likely to exceed five percent but not fifty percent of their paid up capital or contribution OR
- a. The broker to submit the following:-
    - i. All documents, as specified in annexure VII of Regulation 10
    - ii. Fit & Proper undertakings [as per the format given in annexure II B of IRDA (Insurance Brokers) Regulations, 2013], in respect of all the transferees/new shareholders, as applicable.
  - b. The Authority, on being satisfied that the applicant fulfils all the conditions specified, shall grant its approval and send intimation thereof to the applicant. There would be a time limit of 30 days, from the date of communication of approval, within which such transfer should be effected
  - c. There will be a lock-in period of 1 year, from the date of concluding share transfer, during which no request would be entertained for any further changes in shareholding pattern.
- 3) For changes in shareholding pattern (including arising out of induction of capital)
- where after the transfer, the total paid up equity holding/ contribution of the transferee is not likely to exceed five per cent of their paid up capital or contribution OR
  - where the nominal value of the shares intended to be transferred by any individual, firm, group, constituent of a group, or a body corporate under the same management, jointly severally does not exceed five per cent of the paid-up capital or the contribution
- a. The broker has to submit Fit & proper undertakings [as per the format given in annexure II B of IRDA (Insurance Brokers) Regulations, 2013], in respect of all the transferees/new shareholder as applicable.
  - b. The information would be taken on record by the Authority.
- In all the scenarios explained above, the Authority reserves the right to call for any additional document or clarification for disposal of the application.
- The Authority, in exceptional cases, may consider relaxing the conditions laid down in clauses 1 (e) & 2 (c) and examine the same on merits.
- The Circular comes in to force with immediate effect.

Member



## To All Life Insurers

Ref:IRDA/F&A/Cir/ACTS /118/04/2014

28.04.2014

### Re: Premium Recognition for Variable Insurance Products

The Authority had brought in new set of Regulations in February 2013 which permitted life insurance companies to come up with Variable Insurance Products. These products can be issued in both, linked as well as non-linked formats. The products are distinct insofar as they carry a Fund Account Value irrespective of whether they are issued on Linked or Non-Linked platform.

The basis for recognition of premium income in case of Linked

and Non-Linked products has been indicated in Part I of Schedule A of the IRDA (Preparation of Financial Statements and Auditor's Report of Insurance Companies) Regulations, 2002. However, that basis would not be appropriate for the purpose of recognizing premium on Variable Insurance Products, given their peculiar nature.

In order to ensure uniformity in adopting the principles for recognition of income for Variable Insurance Products by all the insurers and also to align the same with respect to method used for the purpose of actuarial valuation

for such products, the Authority hereby advises that:

(a) in respect of Unit Linked Variable Insurance Products, the premium shall be recognized on the date of creation of units; and

(b) in respect of Non-Linked Variable Insurance Products, the premium shall be recognized on the date of receipt.

All insurers are advised to ensure compliance with the same.

R.K. Nair

Member F&I

## Circular

Ref:IRDA/NL/CIR/F&U/112/04/2014

17-04-2014

### Guidelines on "File & Use" requirement for General Insurance Products

The extant guidelines on F&U requirements for general insurance products were issued by the Authority vide circular No.021/IRDA/F&U/Sep.06, dated 28<sup>th</sup> September 2006. Subsequent to this order, Directions were issued through various circulars modifying some of the guidelines.

The above order was issued in the context of de-tariffing of erstwhile lines of business under Fire, Engineering, Motor OD and Workmen

Compensation w.e.f. 01<sup>st</sup> January 2007.

In the 8 years since the above guidelines were issued, licensed insurers have filed various products as well as Add-ons to erstwhile tariff products and most of the filed products have been approved by the Authority. It is felt by the Authority that a review of extant guidelines has to be undertaken to ensure that products are designed, marketed, sold and serviced ensuring that a viable, simple, useful product is available to consumers and is sustainable for insurers.

The Authority has decided to form a Working Group to review the F&U Guidelines, consisting of the following members.

1. Shri Suresh Mathur, IRDA-Chairman of Workgroup
2. Shri Pankaj kurnar Tewari, IRDA- Member-Convenor
3. Shri Anurag Rastogi, HDFC ERGO General Insurance-Member
4. Shri Arunachalam R, Cholamandalam General Insurance -Member
5. Shri Ashesh Anupam, Tata AIG General Insurance-Member



6. Shri Sanjay Dutta,  
ICICI Lombard, General Insurance-Member
7. Shri P.K. Mahapatra,  
United India Insurance-Member
8. Smt. Anuja Shiromani  
Oriental Insurance -Member

The working group is authorized to invite any expert on the subject for interaction during the assigned exercise. The group may meet as many times as may be required either in Hyderabad or any other place depending on the requirement.

The workgroup shall submit its report to Member (Non-Life) in three months time.

**M.Ramaprasad**  
Member (Non-Life)

## Order

Ref:IRDA/BRK/ORD/REORE/NO/CH/2014

11-04-2014

### RECONSIDERATION ORDER OF THE CHAIRMAN OF THE INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY UNDER REGULATION 14(4) OF IRDA (INSURANCE BROKERS) REGULATIONS, 2002

In the matter of M/s. NetAmbit Insurance Broking India Limited Direct Broker License No. 403 application dated 7<sup>th</sup> March, 2013, seeking grant of Renewal of Direct Braking License

1. M/s. NetAmbit Insurance Broking India Ltd hereinafter called the 'Broker' having its Corporate Office at C-16, Second Floor, Sector 15, Vasundhara (Near Atal Chowk), Ghaziabad (Uttar Pradesh) has been granted license to act as a Direct Broker by the Insurance Regulatory and Development Authority, hereinafter called the 'Authority', vide license No. 403 on 28.05.2010 which was valid upto 27.05.2013.
2. An On-site inspection of the broker was conducted by a team of officials of the Authority from 26.08.2010 to 27.08.2010. The findings of the inspection were forwarded to the broker vide letter NO. IRDA/DB 417/08 dated 13.01.2011. The broker replied vide their letter dated

10.02.2011. The reply was examined and further clarifications were sought vide letter No. IRDA/DB 417/08 dated 20.06.2011 and reminders were sent on 09.11.2011 and also by e-mail dated 01.12.2011. The broker replied vide their letter dated 23.12.2011.

3. The broker had submitted its application for renewal of their license vide their letter dated 07.03.2013 to the Authority and the same was processed in the Authority.
4. A Notice to Show Cause under Regulation 32(1) of IRDA (Insurance Brokers) Regulations, 2002 vide letter No. IRDA/DB 417/08 dated 20.06.2013 was issued to the broker and the broker responded to the Notice vide their letter dated 28.06.2013. A personal hearing was held on 18.07.2013 in the office of the Authority.
5. The Authority upon the hearing the submissions made by the broker and arising out of the revelation made thereon, the broker was advised to submit additional information regarding Directorship details in various companies of NetAmbit,

Complaint registers maintained by them, Details of placement of business with various insurers, Details pertaining to M/s. Netambit Info Source & E Services Ltd. and details of other companies to whom this: company provides telemarketing services and Explanation in respect of the significant number of complaints against the broker. An e-mail was sent to the broker on 19.07.2013 indicating the information sought during the personal hearing. The broker vide their letter dated 08.08.2013 had furnished the information sought.

6. Upon examination of the documents collected by the inspection team, renewal application filed by the broker, along with documents required as well as the additional information furnished by the broker subsequent to the hearing, the Authority vide Order No.IRDA/BRK/ORD/LC/200/10/2013 dated 03.10.2013 had rejected the application filed for renewal of their direct braking licence for violating the following provisions of IRDA (Insurance Brokers) Regulations, 2002



- (a) Regulation 34(1)(C) by not disclosing the material facts at the time of filing the application for grant of license;
- (b) Regulation 9(2)(G) by violating various Clauses of Code of Conduct as stated in various paragraphs of this Order;
- (c) Regulation 9(2)(H), by offering and cross selling various products in addition to insurance products.
7. The broker has vide their letter dated 30.10.2013 applied for reconsideration of the said order of the Authority, as allowed under Reg. 14(3) of the IRDA (Insurance Brokers) Regulations, 2002. As requested by the broker, a personal hearing was granted by the undersigned to the broker on 04.12.2013.
8. Subsequent to the personal hearing, the Authority vide letter No. IRDA/DB 417/08 dated 18.12.2013 has advised the broker to state their position on each of the charges levied in the Order of the Authority dated 03.10.2013. The broker vide their letter dated 19.12.2013 has responded to the same and submitted undertakings to implement the corrective actions in respect of the some of the charges 'agreed' or 'partially agreed' and submitted reasons for 'denying' some other charges.
9. The Authority vide letter dated 26.12.2013 has appointed M/s. M. Anandam & Co as investigators to conduct the Systems Audit of the broker to verify various submissions of the broker since issuance of Authority's Order dated 03.10.2013. The Auditors have submitted their report vide letter dated 12.02.2014. The report of Auditors was shared with the broker vide e-mail dated 05.03.2014 and sought their comments. The comments of the broker on the same were received vide their letter dated 10.03.2014.
10. On careful examination of the application dated 31.10.2013 of the broker for reconsideration of the Authority's Order dated 03.10.2013 refusing their license renewal, submissions of the broker during the personal hearing dated 04.12.2013, contents of the audit report dated 12.02.2014 of CA firm (M. Anandam & Co.) engaged to verify various submissions of the broker since issuance of Authority's Order dated 03.10.2013 and the broker's comments on the audit report in letter dated 10.03.2014 and other records available, the following order is passed under powers vested in Regulation 14(4) of the IRDA (Insurance Brokers) Regulations, 2002.
- i. The broker is one among the entities related to insurance business which are controlled or influenced by the family members of shareholders/promoters of the broker. Details of the insurance business related activities (as agents, tele-callers, etc) of such entities were not disclosed by the broker at the time of applying for license and at any time before the license was granted. In this regard, based on the audit report and other documents available, it is amply clear that M/s Future safe Service Ltd., M/s Netambit Value First Services Ltd., M/s Imax Corporate Service Ltd., and M/s Netambit Info Source & E Services Ltd. were involved in insurance related activities. Thus, the broker has violated the provisions of Reg. 34(1)(C) of the Regulations. In view of the same a penalty of ₹20 lakh is imposed for the said four violations at the rate of ₹5 lakh each;
- ii. The website 'netambit.com' was displaying the products other than insurance products thus violating the provisions of Reg. 9(2)(H) of the Regulations wherein the applicant company is not allowed to engage in other business. In view of the same a penalty of ₹2 lakh is imposed for the said violation;
- iii. (A) On two occasions (07.03.2013 and 08.08.2013) the broker submitted the copies of agreement entered on 01.10.2011 with 'M/s Netambit Info Source & E Services Ltd.' for telemarketing services. In this regard, only upon the Authority highlighting the differences in the two versions, the broker submitted that the copy submitted on 08.08.2013 is correct. As per the conditions in the copy of agreement submitted on 08.08.2013, substantial concessions were extended by the broker to the telemarketer, without obtaining the approval of their board, in respect of termination of the agreement, restriction on broker to engage other telemarketers, and payment terms. Thus, the broker has violated the provisions of clause-1 of Sch.III read with Reg. 21 of the Regulations;
- (B) The broker has engaged the services of a telemarketing



company M/s Netambit Info Source & E Services Ltd. which was already engaged by seven insurers. As the telemarketer is representing insurers in one scenario and clients in the arrangement with the broker in another case, the situation causes a clear conflict of interest. Thus, the broker has violated the provisions of clause-2(j) of Sch. III read with Reg. 21 of the Regulations;

(C) Three life insurers namely, ICICI Prudential Life Insurance Co. Ltd., SBI Life Insurance Co. Ltd., Tata AIA Life Insurance Co. Ltd., had highlighted the significant number of policyholder complaints pertaining to the insurance policies procured by the broker relating to the mis-selling, mis-appropriation, forgery etc. In this regard, it was observed that the processes adopted by the broker in attending to the policyholder complaints were not commensurate with the business volumes handled by the broker as Grievances register is maintained in excel format without proper documentation being maintained thereby compromising on data security and integrity and also there was absence of oversight of the broker's board of directors on this critical aspect. Thus, the broker has violated provisions of Reg. 9(2)(G) read with Clause-2(a), 2(b), 2(c) & Clause-5 of Sch. III read with Reg. 21 of the Regulations which requires the principal officer of the broker to comply with prescribed 'code of conduct' and the broker to

conduct its dealings with clients with utmost good faith and integrity at all times, act with care and diligence, to ensure that the client understands his relationship with the broker and proper handling of complaints.

In view of the above violations a penalty of ₹14 lakh is imposed for the said seven violations at the rate of ₹2 lakh each.

11. During the period FY 2010-11 to FY 2012-13, the broker has procured more than ₹340 crore under more than 1.26 lakh insurance policies. The proportion of premium procured under life insurance policies is more than 90% of the total premium procured. Minimum policy term of individual life insurance policies is 5 years which requires necessary services should be provided by the broker beyond one license period (3 years) or the broker should enter into suitable arrangements with other licensed brokers for the servicing. Further, as per audit report, the complaints received by the broker have reduced to 21 during the month of September 2013 from 240 in October 2012. In this regard, it was noted that the broker has adopted Pre login verification and duplication check process from the month of April 2013.

12. Upon payment of the penalty of ₹36 lakh as detailed above by the broker, the license of the broker be renewed from 28.05.2013 to 27.05.2016. Accordingly while allowing the license to be renewed, the broker is directed to comply with the following conditions within one month from the date

of receipt of this order, under intimation to the Authority:

- a. The broker should adopt 'Pre Login Verification Call' and 'Duplication Checks' in case of all the life insurance policies to be procured by them;
- b. The broker should not engage any external telemarketing company for any distance marketing activity, except with the prior approval of the Authority;
- c. Keeping in view of the systems audit report, the broker should strengthen the grievance redressal mechanism (including the procedure adopted for taking appropriate action against employees/persons involved) and submit the same to the Authority;
- d. The broker should submit quarterly report in respect of the details of policyholder complaints and action taken on them, in the format prescribed by the Authority. In this regard, the complaints received by the broker directly and those received from the insurers or from any other source should be considered; and
- e. All the agreements entered by the broker with the entities controlled or influenced by the family members of the shareholders or promoters of the broker should be reviewed to ensure that the agreements are at arm's length and a certificate from a chartered accountant to this effect should be submitted.

**T.S. Vijayan**  
Chairman



## VANTAGE POINT

# Acting in True Spirit

- Claims Management

‘Although the policyholder should be strictly guided by the contractual obligations in the policy, insurers should evince a positive attitude towards disposing a claim in the true spirit of the contract’ says **U. Jawaharlal**.

It is common knowledge that a two-way ‘consideration’ is a vital component for any contract. In most contracts where this consideration is tangible, it leaves no room for interpretations of propriety. However, where one of the parties merely makes a promise as a fulfilment of the contractual obligation, there could be complications with regard to the final outcome, if the aggrieved party is not satisfied with it. Insurance, where the insurer only makes a promise to make good a loss in case of happening of the event (and subject to a host of conditions, at that) thus finds itself in the eye of the controversy quite often.

The root of the problem can be attributed to the asymmetry of information that exists between the two parties. To start with, we have one party which is an expert in the understanding of the nuances of the insurance contract and thus created the wording; and on the other side there is the insured who is not conversant (in several cases, that

is) with the intricacies of the contract. In order to obviate a scenario where this ostensible ignorance of the policyholder can be used to act against their interests, insurers obtain a declaration from the applicant that is deemed to come to their rescue in case of such controversies. All the same, the importance of such a vital declaration is vitiated more often than not, in case disputes relating to claims are referred to arbitration.

Educating the prospects with regard to the contractual obligations has been suggested strongly to be antidote for such a malady historically. Most stakeholders have taken it upon themselves to put an end to this shortcoming in right earnest. The number of cases that frequently come up for adjudication bears a silent testimony to the fact that not enough ground has been covered in this regard. There is immediate need for ensuring that this ‘awareness creation’ among the clientele is taken up in the real sense and not just reduced to a formality in order that the long-term

reputation of the industry is protected.

Above all, the players should steadfastly practise openness with relation to claims management. In personal lines where insurance is considered as an economic compensation for the losses sustained, empathizing with the claimant would go a long way in the true fulfilment of the obligations. There should be no room for such practices as completing the formalities of a contract superficially - aimed either at mandatory responsibility or to achieve pre-designed targets, which defeat the very purpose for which insurance is in place. Managements should ensure that claims are settled without undue delays and also with the minimum possible inconvenience for the policyholders.

‘Claims Management’ will once again be the focus of the next issue of the **Journal**.

in the next issue...

## "Claims Management in Insurance"



## ISSUE FOCUS

# Need for Utmost Alacrity

- Claims Management in General Insurance

Sanjay Datta observes that the absence of a shrewd monitoring could often lead to a leakage in the form of excess or fraudulent claims which could eventually lead to heavy losses for the company.

Insurance is a method whereby the uncertain risks of individuals are combined in group through small individual contributions out of which those who suffer losses are reimbursed in the form of a claim by the insurance company if such a loss event conforms to the insurance agreement i.e. the insurance policy document.

Thus, 'claim', which may result from such uncertain event, is notification to the insurance company that payment of an amount is due under the terms of the insurance policy. It is a request that is made by the insured for payment under the contractual obligation to the insurer.

Claim intimation, processing and settlement all the three clubbed together, comes under claims management, which is actually transactional handling of company's insurance claims. Claims management is so critical in the functioning of an insurance company that a firm's success is often defined by one factor i.e. customer's experience in claims servicing, which has also become a defining moment in the customer relationship in Non-life insurance

**Claims management is so critical in the functioning of an insurance company that a firm's success is often defined by one factor i.e. customer's experience in claims servicing.**

firms. Claim settlement being the most important aspect, customers expect:-

- a) Adequate insurance coverage with right pricing
- b) Timely delivery of defect free policy documents with relevant endorsement/warranties/conditions/ guidelines
- c) Quick claim settlement

Unlike Life insurance, where all policies necessarily result in claims-either maturity or death; in General insurance not all policies result in claim. Approximately around 15%<sup>1</sup>

policies in general insurance result in claim. The claim settlement in General insurance thus has its own peculiarities and therefore needs proper handling.

Typically claims handling process involves:-

- a) As soon as a claim is reported, the insurance company checks as to whether the cover was in force at the time of loss and whether the peril is covered under the policy
- b) Surveyor appointed, who visits the loss spot, calls for the supporting documents, does the assessment and submits the report to insurance company
- c) Report is examined by insurance company along with the supporting documents
- d) Claim file is processed and settlement is offered in claims which fall within the purview of the policy.

For Non-life insurers several inefficiencies - including ageing technology, increasing process complexity, rising number of fraudulent claims - are driving up



claims cost and adversely affecting customer's claims experience.

To reduce claims cost and deliver on a value added brand promise to customers, Non-life insurers need to focus on increasing efficiency and effectiveness in claims function. In order to achieve above goal of operational efficiency and better process effectiveness, Non-life insurers are seeking to implement modern claims system or enhance their existing systems, leverage advanced fraud detection technologies, and innovate around self service and straight through processing.

#### **Features of Efficient Claims management Systems:**

The insurance industry has been witnessing continuous evolution in insurance products (especially Health insurance) and processes. The trend to move the claims function in-house has also been adopted by many insurers. This has created a unique opportunity for claims system vendors to offer systems and applications with a high level of flexibility and automation. Well defined and intelligent work flow management module to ensure optimum work routing and distribution, in-built escalation and strong external communication features (like auto letter generation for various scenario's or SMS gateway). The ability to configure new products at a granular level is a vital requirement - this enables the automation of various validation checks on policy, claimant, benefits

and provider. A product configuration interacts with a rules engine to define product benefits and exclusions to facilitate automated adjudication of claims. Appropriate pre-processing edits before the adjudication can substantially increase efficiency and process claims faster. In fact in U.S. auto adjudication rates of 65% to 85% are not uncommon, albeit a very high percentage of these are simple primary care claims. Since new products attempt to differentiate themselves with new service models, the claims systems requires business process builder to build operational workflow compatible with the product. Such integrated solutions enable the claims teams to achieve significant automation of validation checks at the policy and the product level including verification of benefit and coverage

**An ideal claims management system should also include a fraud management module that identifies possible fraudulent patterns based on policy holder profile, underwriting information and provider profile.**

limits to streamline prior authorization for cashless claims. Access to data in the policy administration system and provider module is vital at this stage.

We can understand the same, taking the example of Health insurance. Once the claim data is in the system, pre-defined rules and product specific processes can be applied. After ensuring that all mandatory information is provided and is valid, the first step would be to match the claim against the prior authorization. The second step would be to conduct checks for medical appropriateness, compliance with provider contracts and variation from usual and customary practices. Much of this can be automated through the use of standard treatment guidelines embedded in the system to identify excessive or unwarranted billing item, therefore generating cost savings for the insurer. An ideal claims management system should also include a fraud management module that identifies possible fraudulent patterns based on policy holder profile, underwriting information and provider profile. Since fraud or abuse patterns frequently reoccur, such a tool can be very useful.

Once a claim has been processed, the claim payment process starts. Integration with payment gateways is a common feature now and significantly simplifies this process when paying network hospitals. In case of non-network hospitals or reimbursement claims, it helps to



have a good cheque printing module. Finally, an effective claims management system can provide excellent insight to management. Not only can past trends be identified and leveraged, the vast amount of claims data can be combined with enrollment data to be efficiently used in actuarial pricing and underwriting.

In today's liberalized scenario, with cut throat competition, the insurance companies have to go much beyond claims handling. The following aspects need to be considered-

a) General insurance being a market driven service industry, the customer has to be satisfied. With so many options available, a customer once lost is most likely a loss forever. Claims settlement can be used as a marketing tool. Bringing in a new customer is much more costly than retaining the existing one

b) In a de-tariffed market, pricing will be the key factor. Proper claims management - quick settlement at optimal cost will help keep the price competitive

c) A dis-satisfied customer is a source for bad publicity which has got all the potential to damage the reputation of the company. It is an accepted fact that most of the customer complaints relate to claims. It should be the endeavour of any insurance company to ensure

**Claims settlement has a social service angle which must be met. In times of natural calamity lot of bad publicity comes to insurance companies due to delay in claims settlement.**

that such complaints do not occur in first place and in some cases if they do occur, it is attended to promptly, efficiently and transparently

d) IRDA's guidelines on 'Protection of Policyholder's interest stipulates certain obligations on the part of insurance company including time limit for claim settlement

e) Delayed claim settlement results in higher claim cost. Claims cost is a very important factor vis-à-vis profitability

f) Claim files must be monitored as they progress. Unpleasant decisions conveyed timely with proper justification of the decision is better than procrastination which is bound to create more problems and unpleasant situation

g) Proper underwriting is also important as defective

underwriting results in complication at the time of claims settlement. Underwriting in claims department should not work in isolation. Defective underwriting may saddle the companies with unwanted claims. Various court judgements and consumers forum awards bear testimony to the same. Any defect/ambiguity on the documents issued invariably goes against insurance companies. It is therefore of utmost importance that the client is made aware in very clear terms about what exactly is covered and what is not. There should be a string system of audit for examining the documents being issued

h) Claims settlement has a social service angle which must be met. In times of natural calamity lot of bad publicity comes to insurance companies due to delay in claims settlement. This is in spite of the fact that in such situations, insurance companies go out of their way to settle claims. In any case, claims relating to assets of weaker section need to be attended to on priority. So, do health/medical related claims

So, it is necessary that

i) Insurance companies manage the claim rather than handling them

ii) Insurance companies have a corporate claims management philosophy



Managing claims involves not only claims processing but goes on to cover entire gamut of claims management - strategic role, cost monitoring role, service aspect as also the role of people handling the claim.

**The technological and operational factors have led to the emergence of the following key trends within the claims function for Non-life insurers:**

- Implementation of a modern claims processing platform or enhancements/ upgrades to existing claims processing platforms
- Use of advanced analytics tools to track and reduce fraudulent claims
- Increased use of claims document and content management tools
- Adoption of mobile solutions for claims management
- Leverage straight-through processing (STP) to streamline claims processing in some select lines of business

**Implementation of integrated claims processing platform:**

An integrated claims system helps Non-life insurers achieve the goal of improved operational efficiency, reduced claims management costs, and enhanced customer claims experience. Implementing a single integrated claims system can help an insurer:-

- Minimize the built in complexity of desperate legacy systems and improve the flexibility of the claims processing system
- Reduce claims settlement time and costs, and ultimately enhance the customer experience
- Integrate systems with third parties and other internal systems
- Other benefits include:-
  - o Claims data can be leveraged efficiently by insurers' management information systems and underwriting decision support systems.
  - o Business interactions and transactions can be automated with external systems, such as third-party administrators, salvage vendors, or loss adjustors.
  - o Claims handling costs can be reduced through efficient management of claims costs and claims leakage expenses.

- o Improved customer satisfaction and higher customer retention levels can be achieved by implementation of straight-through processing and self-service.

**Use of advanced analytics tools to track and reduce fraudulent claims:**

- Fraudulent claims account for 10-15% of the Non-life insurance industry's incurred losses and loss-adjusted expenses every year
- Missed recovery opportunities, including salvage, subrogation, and third-party recovery, have considerable impact on insurers' profitability.

Some insurers are using a combination of advanced analytics tools to detect and prevent fraudulent claims which include:

- Rules-based systems that test each claims notification against a set of predefined business rules to detect fraud patterns that are known to the company
- Exception reporting that highlights when a threshold for a particular measure is exceeded
- Predictive modeling that helps insurance companies detect complex fraud patterns by using data-mining tools and programs that produce fraud-tendency scores
- Social networking analysis that identifies fraud activities by establishing relationships between entities in claims.

**Business interactions and transactions can be automated with external systems, such as third-party administrators, salvage vendors, or loss adjustors.**



### Increased use of claims document and content management tools:

Lack of integrated claim data creates unwanted risks and cost for insurers such as payments of fraudulent claims as well as missed opportunities for salvage, subrogation, and third party recovery. Moreover, inadequate and delayed sharing of claims data also results in mispricing of risk as well as adverse risk selection.

Three key factors driving the need for Non-life insurers to invest in claims data management tools:

- Availability of accurate and reliable claims data is likely to improve the efficiency of claims adjusters by allowing them to focus their time on adjudicating claims and controlling claims adjustment costs
- Insurers need high-quality claims intelligence to make efficient underwriting decisions, control over-all claims expenses, and adapt to a changing operating environment
- An efficient claims data management system helps in better pricing of risk and reduces the chance of adverse selection of risk by sharing



Source: World Insurance Report 2011, Capgemini and Efrna<sup>2</sup>

claims experience data with the underwriting system

An efficient claims document and content management tool is critical for insurers to improve their operational efficiency, contain costs, and benchmark their own claims data with industry data. These systems also help management benchmark the standards that can provide potential cost benefits, as well as contain costs by reducing multiple points of data translation, which eliminates the costly manual input of a claim adjuster's data and improves data quality.

### Adoption of mobile solution for Claims Management:

Technology-enabled mobile solutions offer insurers an opportunity to gain a competitive edge by turning a customer's unpleasant and stressful claims situation into a positive service experience. Companies that use mobile solutions to successfully transform the customers' claims experience are likely to gain a competitive edge in the Non-life insurance industry. Worldwide, 57 insurers had already introduced mobile claims solutions by November 2010 with U.S. and European insurers leading the trend. Asian insurers are still in the initial stages of adoption.

Thus, underwriting and claims handling are two core functions of an insurer and technology offers a lot to streamline both these functions. The recent advances in claims system ensures that in a few years a significant portion of claims in India will be processed without

any significant manual intervention. Technology, business practices such as contracted rates and standardized processing guidelines will do much to change claims management in the near future.

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*The author is Head, Claims and Underwriting, ICICI Lombard General Insurance Company Ltd.*



## ISSUE FOCUS

# Empathizing with the Claimant

- Policyholder Services

C.L. Baradhwaj argues that claims settlement has a unique place among all the services in a Life insurance contract as it has to do with the family's bereavement as also the immediate financial needs.

Service is not just delivery of policy document or processing customer requests. It is something beyond that - it is the delivery of value, feeling, experience which a customer relishes and remembers. For example, the ambience we get while shopping in an air-conditioned departmental store, a good place to park the car, the convenience of a lift which takes us to the shopping floor, the kart used to carry what we want to buy, the quality, price tag, the pleasantness of the sales persons, the billing time and convenience, the packing and finally the after sales service - all these ingredients complete a "service".

If we try and apply the above concept in Life insurance, where do we stand? What corrections are required? What do we need to do to improve the "service"? These are some of the thoughts which I will be sharing with you in this article.

1) **Customer experience at the selling point:** The starting point of a sale in a good insurance organization originates in customer getting convinced what he needs to buy. While in a departmental store, deciding

The starting point of a sale in a good insurance organization originates in customer getting convinced what he needs to buy.

to purchase groceries is driven by a necessity and the need is immediate, in the case of Life insurance, the need is not easily understood by all customers.

Why does the customer not understand the need easily in insurance? Simple, unlike other financial products, which provide for benefits while the investor is alive, in the case of Life insurance, the primary benefit is paid only on death. Death is the least thing in life anyone wants to think about - yet it is the most "certain thing in life" and could completely disrupt a family's standard of living.

In fact, I remember, during my LIC days in Chennai in the early

90s, the popular quote which insurance salesmen used to quote in Tamil to justify how Life insurance is superior to banking products: "Banks only count and give money, while insurance gives what counts for you".

While, the concepts of "Human Life Value" and "Capital Needs analysis" which help anyone to scientifically arrive at the insurance cover, amazingly appeal to educated persons, a different strategy needs to be adopted for others - the popular strategy would be to focus on real Life insurance stories which are very powerful and appealing to a common man - there is nothing as powerful as stories.

Ultimately, what is important is that customer must understand the primary benefit and be convinced - in fact the first customer experience starts here - the ability of salesman to drive home the point, how he explains the product features etc. Care needs to be taken to disclose about the exclusions and limitations also - a professional salesman needs to be aware



that customer is to be given a holistic picture leading to transparency in sales process. Such disclosures help in avoiding unnecessary freeloop cancellations.

- 2) **Policy pack and welcome kit:** Here, the customer gets the first feel of the insurance company and hence this kit needs to reflect about the company and the values it stands for, besides enclosing the welcome letter and the policy document alongwith other annexures. The feel, look, colour and the quality of the kit needs to reflect the company's brand image.

Clear photo copies of proposal form, benefits illustration and other documents may be attached to ensure that the customer has a chance to review the documents and confirm that they were as per his original understanding.

A hand delivery of the policies by the agent to the customer adds more personal touch - however such facilities are generally restricted to club members.

A welcome calling is normally done after policy issuance by most insurance companies where the customer gets the first personalised touch with the Company.

Delivery of policies is one of the areas which is of utmost

importance for insurance companies. There are places which are not serviceable by couriers and speed post often does not return acknowledgements. Couriers return the policy packs where it is not serviceable. A robust mechanism for tracking "Proof of delivery" will enhance customer satisfaction is upheld.

- 3) **Renewal premium payments:** Every insurance company has various touch points and methods of making renewal premium payments, be it ECS, NEFT, cheque pick up points, mobile payment facilities like m-check etc. But the point to consider here is how a customer is reminded and made aware and how his experience of paying is convenient.

I am not speaking about urban areas where sitting in the home one can make the payout. Mainly it is for policyholders who reside in Class B and Class C cities for customers who are not tech-savvy. While branch offices are the first point of contact, most insurance companies have multiple customer touch points through outsourced vendors, through banks, post offices etc. Since the visibility of the insurer reduces as the premium payment collections are outsourced to third party vendors, insurance companies take care to ensure that a proper receipt is issued by the insurer for all premium collections. Most of the customers who have registered their mobiles get instant acknowledgement through their mobiles. Since such mobile acknowledgements and e-acknowledgements are not recognised for income-tax purposes, I have seen many customers approaching insurers for getting a receipt on insurer's letterhead.

Here again, there is no one who can replace an agent for servicing a customer - more so because he gets renewal commission for every premium payment. In those days when electronic payments were a dream, cheque was the only mode available for premium payments and agents did the job of visiting the customer,


**Since the visibility of the insurer reduces as the premium payment collections are outsourced to third party vendors, insurance companies take care to ensure that a proper receipt is issued by the insurer for all premium collections.**

collecting the cheque, depositing them and delivering the receipt. This made customer very happy as he didn't need to spend time in getting it done. Most agents ensured that the date of premium payment coincided with the salary credit date of the customer, so that the chance of cheque dishonour is minimal.


Insurance companies look at alternative servicing options where distributors move out of an insurance company to ensure that customer is taken care of.

Insurance companies relocating branches take additional care of their customers. Customers are intimated well in advance of the proposed change of address of the servicing office to ensure that the customer is aware of the place of his servicing office.

- 4) **Policy servicing requests:** These requests include change of address, change of nomination, request for loan, repayment of loan, assignment of policies etc. It is prudent to detail the various customer services, the documents required and the location where the customer can submit the documents, in the policy kit itself. Here again, often the customer does not have time to read the policy document and the problem gets compounded. Therefore, the customer touch points must be given publicity through various means such as



**The important thing to note here is that in the case of death claims, it is the nominee who has to complete the formalities to get the claim settled.**



company's website, premium notices, reminders etc.

Who can replace the personalised service of agent in this area also? A professional agent is the first touch point for the customer for all his policy servicing requests - the reason it gives the agent an opportunity to serve the customer and make customers feel good. Indirectly, it also enhances customer trust in the agent and the insurance company and this leads to repeat business from customers as well as referral business of other customers. There are many tenured agents who have become successful in this profession by sheer customer service.

- 5) **Claim settlements:** The most important area as far as customer service is concerned is claims settlement. The important thing to note here is that in the case of death claims, it is the nominee who has to

complete the formalities to get the claim settled. The nominee submits the claim forms to the insurer. The insurer needs to ensure that the nominee's experience is good, especially keeping in mind that he or she has just suffered mental agony on account of the death. All claims documents must be called for in one instalment.

The job of insurance company pauses the moment they have notified the nominee about the claim requirements. But who will assist the nominee in this process? The agent plays a critical role here also. After the form is handed over, the agent needs to explain to the nominee on how to fill those forms, getting the supporting documents like death certificates etc. annexed and submit the form to the insurer.

The agents must grab the opportunity for rendering a noble service to the customer's family which a Life insurance sales profession offers. There is nothing in life which can give satisfaction to anyone than providing a helping hand in times of need. Though the insurance company provides the claim cheque, if the agent hands over the claims cheque to the nominee, the satisfaction which he can get by wiping off one or two tears from the eyes of nominee is irreplaceable. Though charity is in the heart of everyone of us, how many of



us have gone voluntarily and done something. Here is a profession which by its nature provides this opportunity. There is nothing which can replace Life insurance when it comes to providing a selfless service.

Some insurance companies have appointed dedicated claims handlers who assist the nominees in filling up the claim forms and arranging for the documentation. There have been many instances, where the nominees have deposited back claim amounts into single premium policies like annuities which provide a steady monthly income.

Another area which is of importance is investigation of claims and repudiation, wherever warranted. Claims investigation will have to be completed as early as possible (eventhough regulations give 6 months' time) realising that every day's delay could cause irreparable loss to the nominee's family. In fact, there are insurance companies who settle atleast fund value immediately after claim intimation - this gives some relief to the family immediately. Insurance companies must target to give some assured immediate benefit to the nominees in their product structuring.

Where repudiation of claims is inevitable, insurance companies

communicate the decision, outlining the reasons therefor, providing opportunities for resolution through an Insurance Ombudsman giving their contact addresses. Most repudiations happen due to non-disclosure of material facts about the health of the life assured - especially hypertension and diabetes which most of the lives assured are not even aware of. However, the root cause of repudiations is not "voluntary non-disclosure" by customers, but it is "ignorant non-disclosure" - i.e. customers signed the proposal form blindly without knowing that he is signing a health declaration - the agent filling the proposal form, including the health questions in the negative without the knowledge of the customer, resulting in a non-disclosure and repudiation. The problem gets compounded if the customer signs in vernacular or is illiterate and affixes thumb impression.

**Most repudiations happen due to non-disclosure of material facts about the health of the life assured - especially hypertension and diabetes which most of the lives assured are not even aware of.**

The agent plays a crucial role in deciding claims and hence the agent must ensure that all material questions are explained to customers, and are read and understood by him (eventhough he is educated). Insurance companies would do well by highlighting the critical questions in the proposal forms.

I have just quoted a few examples for enriching customer experience. There are many more such areas which if focused by insurance companies would not only increase customer confidence, but also make everyone understand that Life insurance is unique when compared to other financial products.

*The author is Sr. Vice President-Compliance & Chief Risk Officer, Bharti AXA Life Insurance Company Limited. The views expressed in the above article are personal views of the Author and cannot in anyway be deemed to reflect the views of Bharti AXA Life Insurance Company Limited.*

## ISSUE FOCUS

# Effective Claims Settlement in Life Insurance - Through Good Management

Dr. G. Gopalakrishna opines that Life insurance is the device of providing for a life after death and financial independence for those retired, disabled or who live longer.

*Why fear death? It is the most beautiful adventure in life.*

*Charles Frohman*

### INTRODUCTION:

Man's economic problems have existed through the ages but today they are more complicated and more difficult to solve than ever before. As a result, Life insurance now occupies the foremost place in the economic life of man. It has, in reality, become a prime necessity, because it provides food, clothing and shelter for the family if the breadwinner dies too soon; and for the breadwinner himself and the family if he lives too long. Though Life insurance does not and cannot avert death nor can it prolong the normal duration of life, it certainly takes away from death its bitter sting and the anxiety of the dying man about the plight of his family when he is gone. Life insurance solves one of the greatest problems of man by building up a provision for an uncertain future. It ensures economic security; and domestic peace of mind and tranquility. It makes the family free from financial stresses and strains.

The business of Life insurance is affecting contracts whereby a

**Life insurance solves one of the greatest problems of man by building up a provision for an uncertain future. It ensures economic security; and domestic peace of mind and tranquility.**

person/insurer agrees, for a consideration (that is payment of a sum of money for a periodical payment, called the premium) to pay to another (insured or his estate) a stated sum on the happening of an event dependent on human life. In essence, right to payment of the sum assured by insurers in certain circumstances is acquired by the assured and in consideration the assured agrees to pay the stipulated premium. People buy Life insurance to get their claims paid on time to fulfill a need. A Life insurance office exists to pay claims, which of course are payable under the terms of the contract. It is natural, therefore, that the

promptness with which claims are settled should be considered as one of the major criteria for judging the efficiency of working of such an office.

### CLAIMS MANAGEMENT:

'Claim in the context of insurance':

Insurance claim is the request or demand by the insured or beneficiary from the insurance granting company for financial recompense or recoupment of a loss on the happening of an event insured against (either death or maturity) as per the terms and conditions of the policy contract. The person who claims the benefits under the policy is called the claimant. Thus a claim is made by the insured or the claimant under a policy either by the death of the life assured or by its maturity i.e. when the term of the policy is completed. At the time of the issue of the policy or during the currency of the policy, the assured is advised to nominate someone to receive the policy moneys in the event of his premature death. He may also assign the policy, in which case all the rights under the policy are transferred to such assignee.





In the event of death of the life assured, the claim is paid immediately after submission of proof of death, age (if age is not already admitted) and title of the claimant to the policy moneys. In case of maturity claims, the office advises the policy holder well in advance so that necessary papers are completed in time and payment is received by the assured on the date of maturity itself. Generally, there are three types of claims - Maturity, Death and Survival Benefit during the term of the policy.

#### **GOOD CLAIMS MANAGEMENT:**

The processing and settlement of claims is one of the most important functions in an insurance organization. Proper settlement of claims requires sound knowledge of the law, principles and practices, which govern the insurance contracts, a thorough knowledge of the terms and conditions of the standard policies and also extensions and modifications thereunder. Managing the whole ambit of activities, connected with the processing and settlement of claims made by the policyholders or beneficiaries, enumerated below efficiently and expeditiously, can be termed as good claims management:

- Responding and initiating prompt action on receipt of claim intimation from the policyholder or beneficiary.
- Arranging for thorough verification of policy records and documents submitted by the claimant, in support of his

claim, and registering the claim in the books of accounts of the insurer.

- Scrutinizing the claim papers, including the claims investigation report, if any.
- Settling the claim promptly, as per the terms and conditions of the policy, after complying with all the requirements and necessary legal formalities, discharge voucher, etc. from the insured/beneficiary.

The most important factor in insurance business is the management of claims. The efficiency and fairness with which claims are handled by an insurer determines the level of customer satisfaction and customer retention. If a large number of satisfied customers recommend the insurer to others, it increases insurer's further business and results in a wider customer base.

#### **LEGAL ASPECTS THAT NEED THOROUGH VERIFICATION:**

In processing the claims, the main legal aspects that are essentially verified are - whether or not the

claim is genuine; whether or not the insured has complied with the policy conditions - such as due intimation of death, submission of proof of and cause of death etc.; whether or not the warranties have been complied with; and whether there is any infringement of the principles of insurance, particularly that of utmost good faith.

#### **MAJOR CAUSES OF DELAY AND COMMON GREY AREAS IN CLAIMS PROCESSING AND SETTLEMENT:**

Attitude and mindset of the People Processing Claims

More than anything else, it is the attitude and mindset of people working in the claims department that makes all the difference. A rigid and stubborn stance in simple procedural aspects is the biggest single cause of delay, leading to distrust and disillusionment between the insurance organization and the policyholder. In fact, as is rightly said, claims servicing is the lifeline of an insurer; and processing and settlement of claims is the best possible opportunity where the company can possibly cement its relations with the customer, thereby taking advantage of the invaluable goodwill and good publicity that is generated from the process. A satisfied policyholder is a good ambassador for further business.

It is, therefore, rightly accepted universally that the insurer should take utmost care in selecting, training and placing the right people with most responsive and positive frame of mind to man the claims department, since it is the most

**The efficiency and fairness with which claims are handled by an insurer determines the level of customer satisfaction and customer retention.**

crucial and sensitive area of interface with the policyholders or claimants.

Improper Selection of Competent and Suitable Claim Investigators for Claim Investigations

Quite a number of audit reports and analytical studies indicate that more often than not, avoidable complications and delays occur either due to selection of inappropriately qualified and less competent, independent claim investigators; or due to laxity of the department personnel, in the follow up action, such as collecting the investigation reports and/or their recommendations.

Prudent and systematic action, on the part of the insurers, in the selection and deputation of all such claim investigators and vigorous follow up action, is essentially needed, on day-to-day basis, for securing their reports and findings at the earliest.

#### **GUIDELINES IN THE MATTER OF SETTLEMENT OF CLAIMS:**

The office may have the following objectives in the matter of settlement of claims.

1. All maturity claims under 'in-force' policies be settled within one month of the date of maturity.
2. Maturity claims under 'paid-up' policies are settled within three months.
3. Death claims, other than early claims involving investigation, are paid within a maximum period of three months.

**The success stories of many giant insurers, around the world, are a clear indicator as to the prudence and precision with which they excelled in mastering the skills of claims management to the satisfaction of their valued customers.**

4. Early death claims, where investigation is necessary, be settled within six months.
5. Claims should not remain pending over a year unless legal matters are involved.

#### **CONCLUSION:**

The basic policy of settling a claim on time is to give the clients the benefits of insurance as early as possible; and to serve the purpose for which they bought insurance. It is redemption of faith which the people have reposed in insurance. The office should be very vigilant in this fundamental aspect of its function. The insurer knows that just as it sold the policy, it is its responsibility to see that the fruits of the same are passed on to the policyholders/beneficiaries. Therein lays the fulfillment of its noble task.

While playing a vital role in various spheres, the insurer is always conscious of its primary responsibilities to the policyholders

i.e. to render prompt and better service to them. In this regard the insurer continuously reviews its working and streamlines its procedures. Some of the areas which can be considered by the insurers progressively towards attainment of better customer satisfaction are:

- Certain requirements like age proof and legal evidence of title for settlement of claims up to a particular amount are dispensed with.
- Investigation of early claims is waived for small sums assured in appropriate cases.
- A high level committee/body is set up to review claim appeals.

The insurer's efforts at quick settlement of claims need be both sincere and effective. The success stories of many giant insurers, around the world, are a clear indicator as to the prudence and precision with which they excelled in mastering the skills of claims management to the satisfaction of their valued customers. As observed by late Prime Minister of India, Mrs. Indira Gandhi, "Life insurance is an ideal form of saving, both from the direct interest of individual and from the interest of the nation .... The objective of the Life insurance industry should be this, as well as constantly to improve its own efficiency in serving policyholders and the national goal".

*The author is a retired Senior Officer, L.I.C. of India. The views expressed in the article are personal.*


## ISSUE FOCUS

# The Touchstone of Policyholders' Faith

- Insurance Claims

N M Behera emphasizes that managements should treat claims management portfolio with utmost sincerity so that the reputation that they have garnered over the years is not tarnished because of inept handling.

One of the basic purposes of insurance business is the settlement of claims. In the age of competition and fight for survival, there is hardly any scope to increase the premium and therefore, the success of an insurance company primarily depends on how successfully it handles its claims. The designing of the preamble of each insurance policy may vary from the other, but the meaning of such preambles remains to be one and same i.e. the insurance company, through the insurance contract, promises to pay the loss if it occurs to the insured risk, during the policy period and caused by the insured perils. This, of course, is always subject to the terms, conditions, exclusions, endorsements and limitations as specified in the policy. In simple terms the quintessence of selling or buying of an insurance policy is to provide or to get monetary compensation in the event of an insured loss. The insurer sells the promise and the insured buys the faith. Both are invisible and untouchable. Therefore, the real test of insurance lies on how quickly and judiciously the claims are settled.



There is a general agreement even amongst insurance practitioners that the insurance industry does not enjoy a favorable public image unlike other services.

**Public image:** Insurance company's attitude to claims settlement has, in the past, provoked a lot of public criticism and even attracted the attention of governments. It was believed that the insurance companies would do anything possible to squirm out of paying claims. Insurers have been criticized for their marketing methods based on cloudiness, twisting and mis-selling. There is a general agreement even amongst insurance practitioners that the insurance industry does not enjoy a favorable public image unlike other services. In some circles, there is even an extremely radical thought that the

insurance companies serve their own cause and that they do not bother about the policyholders' plight.

Although these beliefs have been progressively reduced to a great extent due to enforcement of laws, regulations, judgements, penalties and thankfully due to the public awareness; but still it cannot be said for certain that the beliefs have completely died down. Increase in number of insurance players in the market, competition to get bigger market share have thrown a challenge to enhance the claims settlement approach of the insurance companies. Now it is realized that the claims settlement department of a company can effectively make or mar the company's image.

**Effects of Claims Settlements:** Faster claims settlement has its cyclical effect, generating trust, spreading good word about the company, help creating good public image, retain the customers, beget new customers either by winning them over from other insurers or creating new prospects and making itself the lead market player in the insurance industry. Conversely, a



company, which fails to settle claims to the satisfaction of claimants, will lose customers, attract less business, as it is likely to discourage such clients to continue to insure with the company. Such clients might even advise their friends, colleagues and relations not to patronize such a company. The consequent effects of the above problem could lead to downward trends in sales and marketing figure, low premium income, low capital formation (savings and loans) and minimal contribution of an insurance company to the gross domestic product (GDP).

**Frauds:** Claims and frauds often go hand in hand. Fraud is a hidden tax on everyone. It increases the cost of goods and services. Although insurance companies are joining other bodies to launch a major crackdown on fraudulent insurance proposals and claims such as false theft reports, stage-managed accidents, claims for personal profit, multiple claims on same property and material falsehood at the proposal stage, the result has not been seen as an impressive one. Needless to say, sometimes even the most honest claims may have been refused their compensation because of difficulty in deciding whether the claims were genuine. Nonetheless the insurance companies must realize that non-settlement of genuine claims can pose more danger than the insured frauds. It damages business growth and investment.

**Claims related work-load:** As far as Non-life business is concerned, approximately 15% of the policies result into claims and around 10 to 15% of claims account for as frauds. Therefore, on a rough calculation, the insurer is required to be more sincere for settlement of genuine claims to the tune of just around 12 to 13% of the total policies issued. The success of the company lies in how it handles this small percentage of the total policies. It is seen that around 0.1% of the total claims result into dis-satisfied customers leading to grievances/litigations. This is the most crucial segment, which deserves the dynamism and special care of the insurance company. The grievance percentage may look very small, but may explode to cause a big unwanted loss. One must always remember that one negative experience could

traverse well beyond a complaint cell to the neighbour's house at lightning speed.

**Unjust Claims Settlements:** Settlement of claims is not an easy task. It is seen, people are even ready to accept the claims settled at a slightly lesser amount rather than waiting for a long time to get the actual and therefore, on many occasions, claims are accepted on compromise basis. Sometimes, claims settlements and non-settlements act as two sides of a sword. Claims management functions have a direct impact on an insurer's expenses and combined ratio. They must balance costs against services carefully and still deliver every time. Moreover, the strategy to attract and retain customers includes tactical plans for tailoring claimant's experience. Settlement of claims reduces revenues, delayed settlements invite payment of interests, penalty, costs and non-settlements defame the company's image. Over-settlement and delayed settlements with penalties leads to mismanagement of claims giving rise to high incurred claims ratio (ICR). Every extra cent paid affects the policyholders' money and a high ICR results into an increase in premium. Increase in premium becomes a burden on the genuine and innocent policyholders for no fault of theirs and they pay a price for the mismanagement of the insurance company. After all, it is the duty of the company to manage the claims in a responsible manner

**Claims management functions have a direct impact on an insurer's expenses and combined ratio. They must balance costs against services carefully and still deliver every time.**

more or less as a trustee of the premium that is collected from a large number of policyholders. It is the responsibility of the company to provide insurance policies at an affordable cost. It needs experience, expertise and patience with an overall mindset of positivity, without being suspicious of each and every claim.

By combining best practices and efficient claims management, insurers will be able to minimize claims costs, improve efficiency, enhance customer satisfaction and can keep the price at an affordable level. This will align customer needs with business objectives. Containing a claim to its genuineness is always welcome, but curtailing genuine claims can have many side effects. Payment of just claims is always in the interest of the policyholders and the economy.

**Settlement TAT:** The old adage 'a stitch in time saves nine' is equally applicable for claims management. A claim, settled in time, saves a lot of money for the policyholders. More than a decade earlier, when the Motor Third Party claims were awarded by the courts, the awards were followed with huge interests for the period the claim was kept unsettled. Records show that the courts were awarding around 18% interest in third party claim compensation settlements. It can be well imagined that the insurance company was required to pay almost double the amount after 5 to 6 years of loss, if not settled in time. Statistics show that the outstanding

**Non-appointment of investigators, surveyors, lawyers in time is another cause of concern. Delay at any point of time of the claims processing system has its negative impact on the insured.**

Motor Third Party claim amount as on 31st March, 2013 is around ₹22000 crore. Even if 50% of these claims are to be settled in time, the remaining outstanding claims will carry the extra baggage of a minimum of ₹550 crore towards interest awards every year, even at the lowest simple rate of 5%.

**Actions responsible for mismanagement:**

A claim if not settled fairly, timely and genuinely may cause irreparable loss for the insurance companies. A few of such acts are highlighted below, where the policyholders get a scope to suspect the trustworthiness of the insurance companies.

**Timelessness:** Silence, non-response, non-acknowledgement to the claim intimation or delays, denials of claims settlements

without providing any reason, cause more tension and unpleasant situations in the minds of the policyholders' minds. Similarly, failure to offer or attempt to effect prompt, fair and reasonable evaluation within a reasonable time, in spite of a situation where the liability is reasonably established, will have its adverse effects. Non-appointment of investigators, surveyors, lawyers in time is another cause of concern. Delay at any point of time of the claims processing system has its negative impact on the insured.

**Procedural lapses:** Attempts to settle a claim for less than the entitled amount may lead to disputes and litigation. One must understand that insured has not taken a policy to run through courts. He looks forward to a peaceful settlement of getting compensation at the time of adversities. Making payments without attaching or explaining the coverage for which the claim is paid or the non-coverage for which the claim is not paid is a procedural lapse. Sometimes, the policyholder loses faith when he is asked to provide unnecessary and irrelevant documents. Failure to live up to the contract, deficiency in complying with the insurance laws, practices, regulations, circulars, guidelines and even deviating from the standard procedures called for in an insurance claim manual do harm the intentions of the institute of insurance.



**Intentional motives:** Biased investigation, which is supposed to be neutral, may cause harassment in the minds of the insuring public. Using illegal, fraudulent, intrusive or demeaning investigative methods will certainly victimize the policyholders. Intentionally misinterpreting policy provisions and misconstruing claims information will lead to trust deficit. It is sometimes seen that the claimant is treated as an adversary and has received unwarranted accusations. It is also seen that the policies are altered with an ulterior motive without obtaining any instruction or consent of the insured to do so, with an intention to decline the claim.

**Mis-selling:** The process of contract to cover uncertainty starts from the point of canvassing a prospect. A policy sold on false promises will finally lead to non-settlement of claims. Making tall promises, winning trust of the customer, not guiding properly and issuing a policy of different nature, never wanted by the customer, will put the customer in the real problem at the time of claim. This business not only becomes a one-time transaction but also denies the new prospects, thereby causing trust deficit leading to loss of market share and image. Business with truth and openness helps the insured get his genuine claim timely and satisfactorily, and the relationship lasts long and helps create more customers for the company.

**Faulty underwriting:** Policies issued with wrong wordings will cause concerns at the time of settlement of claims. If the intentions of the proposer are not taken care of in the policy wordings, the claims dept will naturally face the embarrassment. It is often seen that due to poor underwriting, the risk is something, and the coverage is something else; and the poor insured runs from pillar to post. Poor underwriting is an equal contributor to creating a dissatisfied customer especially at the time of claims.

**Inefficient claims handling:** Most of the deficiencies or so to say mismanagement in claims handling arise due to lack of attitude or non-availability of experts in the claims management system. Problem in attitude is more dangerous although lack of knowledge will equally contribute to the mess. For any organization, getting business

becomes easier than retaining and consolidating it. Initially the marketing is important but gradually the claims management will also affect the marketing. Therefore, the modern day management must look for good people and well trained groups both in terms of attitude and aptitude. The approach can be leveraged to anticipate a policyholder's needs, while addressing concerns raised via web, phone, emails to respond to a claimant's expectations.

**Conclusion:** The need to have a zero gap between the customer's anticipation and the insurer's delivery needs to be the prime concern of an insurance company. Insurance contracts are not electoral promises but legal documents which require promises to be fulfilled on the platform of contract in a seamless manner. Remember, the policyholder has not purchased your policy either to get abused or to get ensconced in a legal battle, but to live peacefully after getting just settlements which is his right. Therefore, the insurer has no other choice but to excel in faster and better claims management system, if it wishes to live in the market.

**Insurance contracts are not electoral promises but legal documents which require promises to be fulfilled on the platform of contract in a seamless manner.**

*The author is Dy. Director (Health), IRDA. Views expressed in the article are his own.*



## ISSUE FOCUS

# Repudiation of a Death Claim

- A Case Study

**R. Venugopal** brings into discussion the importance of giving all the information pertaining to the medical history of the proponent in the proposal form, irrespective of whether the applicant thinks it material or not to the coverage under the policy.

**T**he case study is about a complaint from Mrs. Radha, the claimant under a Life insurance policy for which the claim was rejected by ABC Life Insurance Company for non-disclosure of material fact as the life assured was suffering from TB in the past; and it was not disclosed while signing the Good Health Declaration form. The facts of the case are as under:

Late Mr. Suresh was covered under ABC Life- Super Suraksha Home Loan Insurance Scheme from 28-09-2005 for a sum assured, which is equivalent to the outstanding loan of ₹344,000. Unfortunately, the assured expired on 02-12-2005 due to Collagen Vascular Disease with Myocarditis (Primary cause) and Septicaemia, severe Anemia (Secondary cause). When Mrs. Radha, wife and nominee under the policy, preferred a claim, the insurance company repudiated the liability, contending that the deceased was afflicted with Tuberculosis prior to the enrolment of policy; and had given a false Good Health Declaration at the time of the entry into the scheme and that the cause of death was directly attributable to the pre-existing

medical condition of the deceased at the time of enrolment into the scheme. Since the policy did not cover deaths due to pre-existing illness, the claim was rejected. The claimant lodged a complaint with the Insurance Ombudsman, after exhausting the normal channels of grievance redressal.

After going through the various documents on record, the Insurance Ombudsman heard both the parties. The claimant submitted that the cause of death was different from TB and the assured was totally cured of TB. She also mentioned that the fact that the life assured earlier had TB was not mentioned in the good health declaration form. The insurance company submitted that the assured signed the declaration form on 29-09-2005 and prior to that, he was on sick leave from 16-09-2005 to 02-12-2005 i.e. till his death. Had the deceased declared about TB then the company would not have covered him under the Group Home Loan Insurance Scheme.

The material on record was scrutinized. As per the hospital documents dated 02-12-2005, the cause of death of Mr. Suresh was

‘Collagen Vascular disease with Vasculitis’ and the antecedent cause was Myocarditis with Septicemia. Under the head ‘other significant conditions contributing to death, but not related to the disease or condition causing it’, it was mentioned ‘Old Pulmonary Tuberculosis’. In the certificate issued by Dr X of the same hospital, it was stated that the late Mr. Suresh was under his treatment for 2 days from 01-12-2005 to 02-12-2005. As per the medical certificate dated 21-02-2006 issued by Dr Y, it was mentioned that Mr. Suresh was under his treatment from 17-10-2005 to 16-11-2005 for ‘a high fever and joint pain with anemia’. The certificate of hospital treatment dated 13-07-2006 issued by Dr Z, District Tuberculosis Officer, revealed that Mr. Suresh consulted him on 26-02-2003 for ‘weakness from two months, cough due to 2-3 months with weight loss and the diagnosis arrived was ‘Pulmonary Koch’s disease and that Mr. Suresh was under his treatment up to 29-02-2004 and he recovered (which was found out consequent on an examination at the Tuberculosis Center on 24-02-2004) and was fit from 01-03-2004. In another



certificate of hospital treatment issued by Dr X, it was stated that Mr. Suresh was admitted into the hospital on 01-12-2005 with history of fever and general weakness since one and half months and 'fever high grade since 8 days and frequent vomiting' and the diagnosis arrived at was Collagen Vascular disease. The Medical Attendant's certificate issued by the same doctor reconfirmed the above noting.

#### **An explanation of some of the medical terms used:**

- Collagen Vascular disease is an auto-immune disease in which immunity of one's body goes against itself, attacking and destroying one's own body, leading to various types of infections. It is a very fatal disease.
- Anemia is the reduction of the number of red blood cells; the hemoglobin content is less than that is required.
- Tuberculosis is an infectious disease of lungs that commonly affects the respiratory system.
- Vasculitis is the inflammation of a blood vessel.
- Myocarditis is the inflammation of the myocardium.
- Septicemia is the presence of pathogenic micro-organisms in the blood.

The insurer repudiated the claim on the ground that the deceased had a severe incidence of TB prior to the

date of enrolment under the policy and the cause of death was directly attributable to the pre-existing medical condition of the assured - TB.

Group Insurance Scheme for the Housing Loan borrowers requires the borrowers to sign a Good Health Declaration form which states as follows:

I declare that I am in sound health, do not have any physical defect/ deformity, perform my routine activities independently and that I have never suffered or have been suffering or have been hospitalized for any critical illness or a condition requiring medical treatment for a critical illness, as on date.

#### **Critical illness for the above purpose is defined as follows:**

##### **The life to be insured should not**

1. have suffered or be suffering from cancer
2. be taking treatment for heart disease
3. have undergone or have been advised medically to undergo chest and/or heart surgery within the following six months
4. have irreversible kidney and/or irreversible liver failure
5. have suffered or be suffering from paralysis
6. have undergone or been advised to undergo a major organ transplantation such as heart, lung, liver or kidney

7. have suffered or be suffering from AIDS or venereal diseases.

#### **Conclusion:**

On an analysis of the above case study, the decision of the Life insurance company in repudiating the death claim of Mr. Suresh appears to be correct based on the following facts:

- The Home Loan Group Insurance Scheme commenced on 28-09-2005.
- The Good Health Declaration Form was signed on 29-09-2005 by Mr. Suresh.
- But actually he was on sick leave from 16-09-2005 till his death on 02-12-2005- which means he was not eligible at all for this insurance.
- There was a certificate from the District TB Officer that Mr. Suresh was under treatment from 26-02-2003 to 29-02-2004 for Pulmonary Koch's disease.
- Although Mr. Suresh got cured from TB from 01-03-2004, as per the clinical report, the fact remains that he was suffering from TB for more than a year.
- The fact that Mr. Suresh did not mention it in the Good Health Declaration, goes against him - simply because the form mentions about other diseases like cancer, AIDS etc. and not about the TB, does not hold water.



- Actually the Good Health Declaration says that the person signing the form did not suffer/ does not suffer from any critical illness, whereas in the case of Mr. Suresh not only suffered in the past but in fact he was even suffering from some illness even at the time of signing the form.
- Again, TB was mentioned in the hospital report as one of the causes of death - although not as the proximate cause - adds strength to the argument of the Life insurance company that Mr. Suresh did not reveal all the material facts about his suffering from TB in the Good Health form.

Now while upholding the repudiation decision of the Life insurance company, the

takeaways from this case study are:

- The customer has to reveal all the facts regarding his/her health in the proposal form.
- Notwithstanding whatever the agent/intermediary may brush aside as regards the importance of the relevant health information; it is the duty of the proposer to reveal all information.
- The Principle of Utmost Good Faith applies equally to the insurer too.
- The insurance company should educate all its agents regarding the importance of getting all the information faithfully, make the proposer undergo all the necessary medical tests

sincerely and record the data correctly.

- Lastly it should be the endeavour of the insurance company to settle all the death claims expeditiously without delay- they may take more time in underwriting but complete all the formalities for the death claims promptly as the ultimate proof of the Life insurance is in settlement of the claims.
- The slogan of the life insurance company should be:

PAY IF YOU SHOULD

REJECT IF YOU MUST.

*The author is Retired ED, LIC of India and Retired Professor, National Insurance Academy, Pune.*

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## FOLLOW THROUGH

# Accreditation of Healthcare Facilities

- Road to Quality Healthcare for the Insured

Praveen Yadav, Dr. Geeta Bharadwaj and Dr. (Maj.) Anuradha Monga opine that there is a dire need for regulating healthcare in India so that there is improvement in services along with curtailment of costs which would automatically bring about a positive change in the results of Health insurers.

### INTRODUCTION

Healthcare service providers in India are not only inadequately distributed, but also are marred with gross disparities in terms of standards of practice and pricing. Some of the major complaints often echoed by consumers and payers against private hospitals are that of over-charging, irrational therapeutics, lack of transparent communication about diagnosis and treatment, subjecting patients to unnecessary tests, consultation and surgery. Further, many a times even the Government hospitals do not have functioning equipment and private hospitals may have unqualified doctors, nurses and technicians.

The dismal state of private hospitals could be attributed to there being practically no monitoring and accountability to the people or to any concerned authority. Until recently, only the states of Maharashtra, West Bengal and union territory of Delhi had some legislation for private hospitals in the form of Acts for registration of healthcare establishments.

However, the Acts are only meant for registration of the private hospitals, they do not include details on the standards to be maintained for space, facilities, staff employed, infection control conditions, equipment and other supportive services. It is needless to say, despite long standing legislation in two states and one union territory, standards of medical practice in private hospitals (in terms of qualification of staff, required equipment, administration, treatment, etc.) are as yet not applied in India. This is because the existing legislations are far too few, outdated, inadequate and remain unimplemented.

Even though the private health sector in India has continually grown through 50 years of independence, it continues to be unregulated. In fact, efforts to regulate it have consistently been opposed by vested interests. Although a majority of the population utilizes the services of the private health sector, they have no control on the quality or pricing of care.

### WHAT IS ACCREDITATION AND WHAT ARE THE DIMENSIONS OF ACCREDITATION

Better quality of health care can be pursued in many different ways. One method is regulatory, wherein the Government takes the initiative and responsibility of setting standards. Another one is accreditation, wherein an independent third body with the support of professional organizations sets, assesses and monitors standards on a voluntary basis. Both these methods may be interlinked as accreditation may at times take up a regulatory role.

C.E. Lewis (1984) defines accreditation as “a professional and national recognition to facilities

**The dismal state of private hospitals could be attributed to there being practically no monitoring and accountability to the people or to any concerned authority.**



that provide high quality of care. It is implicit that the particular health facility has voluntarily sought to be measured against high professional standards and is in substantial compliance with them.”

Hospital accreditation is a method of publicly recognizing a healthcare organization by a national or international healthcare accreditation body. Simply put, accreditation refers to a voluntary process wherein the functioning of a participating health care institution is assessed against set standards by external review.

An accreditation system has four basic elements:

1. It is voluntary.
2. Standards are laid down.
3. Compliance is measured by external review.
4. Outcome of standards denotes compliance (good/bad, rating scale).

**There are various models of accreditation.**

The most commonly used accreditation model is ‘standards-based’. In this model hospitals are rated according to their compliance with different sets of standards in terms of facilities, equipment, manpower, technology and so on. The accreditation body recognizes a healthcare organization for achievement of laid down accreditation standards which is examined and reviewed through an

**Accreditation is considered to be an important approach towards incorporating unbiased quality standards in the working environment of a healthcare organization.**

independent external peer assessment of that organization’s level of performance in relation to the standards.

In India, health system currently operates within a dynamic environment of continuously evolving and changing social, economical and technical trends. These changes raise concerns about the hospital’s adaptability and adherence to safety and quality precautions and protocols. Accreditation is considered to be an important approach towards incorporating unbiased quality standards in the working environment of a healthcare organization. Accreditation acts as an incentive to improve service efficiency and effectiveness of national hospitals to provide quality of care.

National accreditation system for hospitals is a concept that has a potential to ensure that hospitals, whether public or private, national or international, play their expected

roles in national health system of a country. The most important aspect of an accreditation system is that it can enable confidence building measures that are obtained by a transparent system of control over the accredited hospital and an assurance given by the accreditation body that the accredited hospital constantly fulfills the accreditation criteria.

### **BENEFITS OF ACCREDITATION**

Accreditation of a healthcare organization brings about benefits for various stakeholders in many different ways; a few of which are enumerated here:

#### **Benefits for Patients**

One of the key stakeholders of a healthcare organization is the “Patient”.

Accreditation standards generally revolve around the care of patient and result in high quality of care and patient safety. Key aspects of these standards are:

- The patients are serviced by credentialed and trained medical staff.
- Rights of patients are respected and protected.
- Patient’s satisfaction is regularly evaluated, monitored and targeted to be improved.

#### **Benefits for Hospitals**

- Accreditation process helps organize and strengthen patient safety efforts.



- Strengthens community confidence in the quality and safety of care, treatment and services.
- Provides a competitive edge in the marketplace.
- Improves risk management and risk reduction as patient and population safety practices are incorporated in a hospital's way of functioning.
- May reduce liability insurance costs.
- Is a way of continuously educating staff on good practices which help to improve business operations.
- Provides a customized, intensive review of patient management.
- Enhances staff learning and development.
- Can be used as a differential pricing tool by insurers and other third parties.
- It may be used as a means of fulfilling various regulatory requirements by staff training on maintaining documentation.

### Benefits for Hospital Staff

An accredited hospital provides for continuous learning, good working environment, leadership and an ownership of clinical processes for the staff involved in patient care. This not only provides an atmosphere of learning, but also empowers employees to take

decisions and thus improves overall professional development of clinicians and paramedical staff.

### Benefits to paying and regulatory bodies

For a payer of healthcare services, accreditation can play a pivotal role in decision making.

- It can be used as a tool to provide an objective system of empanelment by insurance companies and third party administrators.
- In the western countries, more and more insurance companies recognize conformance to accreditation standards as an effective tool for reducing and managing risk. Many insurers even express their confidence in accreditation through insurance premium credits or discounts for accredited providers. In countries where payer-provider relationships are structured, lower insurance premiums are a tangible, value-added benefit of accreditation.

Many insurers even express their confidence in accreditation through insurance premium credits or discounts for accredited providers.

- When cost reductions can be shifted to areas other than service delivery, patients served are the real beneficiaries.
- Since payments for health services depend on multiple factors like availability of adequate infrastructure and expertise, accreditation can provide access to reliable and documented information for designing graded packages for payment.
- Today in India, medication and medical errors are not captured in the form of structured data. As a result, loss to payers and insurance companies in the form of resource leakage due to medical negligence, hospital acquired infections and iatrogenic morbidity and mortality are not documented. Accredited hospitals are not only bound to document errors but also take measures to minimize such issues.

### SOME ACCREDITATION STANDARDS RELEVANT TO HEALTHCARE ORGANIZATIONS AND HOSPITALS RELEVANT IN INDIAN CONTEXT:

#### I. NATIONAL ACCREDITATION BOARD FOR HOSPITALS AND HEALTHCARE PROVIDERS (NABH)

NABH is an arm of Quality Council of India (QCI), which has been set up to establish and operate accreditation programmes for healthcare organizations across the country.



## INDIAN NATIONAL ACCREDITATION STRUCTURE

The attempts to evolve a voluntary accreditation system began in late 1980s with the Bureau of Indian Standards putting down standards for 30, 100 and 250 bed hospitals. The National Institute of Health and Family Welfare had also specified rules for more than 50-bed hospitals. Since health is a state subject, there have been attempts in some states to incorporate standards for hospitals. Compartmentalized initiatives have led to a fragmentation of an already segmented industry.

To overcome this lack of single system to monitor the functioning of hospitals in India and the stringency of compliance to established standards that was suitable to the Indian conditions and credible in the eyes of international markets; an inter-ministerial task force was set-up up in 1991. The report of the task force was brought out in January 1993 and Quality Council of India (QCI) was established in 1997 as an autonomous body as a result of the recommendations of the task force. The mandate given to QCI was to establish and operate the national accreditation structure and obtain international recognition for its accreditation schemes.

## OBJECTIVE OF NABH

The broad objectives of the accrediting system is to develop and update standards to cover various

areas of hospital functioning. It also aims to monitor hospital compliance with the standards prescribed, assist hospitals that need to upgrade their levels and awards accreditation to those institutions demonstrating them. Specific objective of NABH is to enhance health system and promote continuous quality improvement and patient safety.

## ORGANIZATION AND AFFILIATIONS OF NABH

The board is supported by many stakeholders including industry, consumers, government and has a full functional autonomy in its operational activities. NABH provides accreditation to various Healthcare Organizations and entities independent of their ownership status in a non discriminatory way.

The categories of health entities for which currently the standards have been laid out and for which the accreditation process is available are:

### Outline of NABH Standards

Patient Centered Standards
<ul style="list-style-type: none"> <li>• Access, Assessment and Continuity of Care (AAC)</li> <li>• Care of Patient (COP)</li> <li>• Management of Medication (MOM)</li> <li>• Patient Right and Education (PRE)</li> <li>• Hospital Infection Control (HIC)</li> </ul>

- Allopathic Clinics
- AYUSH Hospitals
- Blood Banks
- Blood Storage Centre
- Dental Facilities
- Hospitals
- Medical Imaging Services
- Medical Laboratory Programme
- OST Centre
- PHC/CHC Accreditation
- Small Healthcare Organisations
- Wellness Centre

## NABH STANDARDS

NABH Standards for hospitals prepared by technical committee contains complete set of standards for evaluation of hospitals for grant of accreditation. The standards provide the broad framework for quality of care for patients and quality improvement for hospitals. The standards help to build a quality culture at all level and across all the function of hospital. NABH Standards include ten chapters that incorporate 102 standards and 636 objective elements.

Organisation Centered Standards
<ul style="list-style-type: none"> <li>• Continuous Quality Improvement (CQI)</li> <li>• Responsibility of Management (ROM)</li> <li>• Facility Management and Safety (FMS)</li> <li>• Human Resource Management (HRM)</li> <li>• Information Management System(IMS)</li> </ul>



## II. NATIONAL ACCREDITATION BOARD FOR TESTING AND CALIBRATION LABORATORIES (NABL)

NABL is an autonomous body under the aegis of Department of Science & Technology, Government of India. NABL has been established with the objective to provide government, regulators and industry with a scheme of laboratory accreditation through third-party assessment for formally recognizing the technical competence of laboratories. The accreditation services are provided for testing, calibration and medical laboratories in accordance with International Organization for Standardization (ISO) standards.

## III. Indian Public Health Standard (IPHS)

The Primary Health Centers (PHCs) and Community Health Centers (CHCs) which constitute the primary and secondary level of health care were designed to provide referral as well as specialist health care to the rural population.

In order to provide quality care in these CHCs Indian Public Health Standards (IPHS) are being prescribed to provide optimal expert care to the community and achieve and maintain an acceptable standard of quality of care. These standards would help monitor and improve the functioning of the CHCs.

## IV. JOINT COMMISSION INTERNATIONAL

JCI provides a premier set of international standards. An international committee develops the standards that JCI implements, while regional advisory councils—guided by experts—ensure local and cultural relevance. JCI's standards and accreditation programs are accredited by the International Society for Quality in Health Care, demonstrating that JCI meets the highest international benchmarks for accreditation entities.

Hospitals, laboratories, medical transport organizations, care continuum (non-acute settings from assisted living to private homes), ambulatory care, and primary care providers undergo setting-specific evaluations to achieve The Gold Seal of Approval. Organizations can also pursue Clinical Care Program Certification to demonstrate excellence in the integration and coordination of care for specific diseases. World Health Organization (WHO) partnered with JCI and The Joint Commission to establish the first WHO Collaborating Centre for Patient Safety Solutions.

## CURRENT STATUS OF ACCREDITATION IN INDIA:

In India, accreditation is a voluntary act. As of August 2013, the status of NABH accredited HCOs is as follows:

- Allopathic Clinics: 6
- AYUSH Hospitals: 8
- Blood Banks: 56

- Dental Health Care Service Providers (DHSP): 04
- Hospitals-188
- Medical Imaging Services-07
- Oral Substitution Therapy (OST) Centre-51
- Primary Health Centers-10
- Community Health Centres-1
- Small Healthcare Organisations-22
- Wellness Centre-05

There are 22 hospitals in India with JCI accreditation. Of these, 9 have obtained re-accreditation.

The demand for accreditation is spurred by emerging new markets, like medical tourism, and the insistence by Health insurance companies and third-party administrators for the purpose of reimbursement.

## Government Initiatives:

The government too is taking keen interest in providing services to the population by entering into various kinds of Public Private Partnerships where service delivery is through accredited centers.

- A. The Janani Suraksha Yojana (JSY) of the Government of India, under the National Rural Health Mission (NRHM), has also made accreditation mandatory for private health organizations wishing to participate in order to promote quality and encourage institutional deliveries (MoHFW, 2005: 12, 39).



B. In 2006, the Government of India constituted a 'Working Group on Clinical Establishments, Professional Services Regulation and Accreditation of Health Care Infrastructure' for the 11th Five-Year Plan. The report of the group (Planning Commission, 2007: 11-12) raised the following concerns relating to enforcement, effectiveness and implementation:

1. Out-of-date legislation, which are cumbersome and irrelevant in the current scenario.
2. Ineffective implementation of relevant laws due to weak regulatory controls.
3. Absence of rules for the implementation of the Clinical Establishments Act, 2010.
4. Ineffective content of rules, which refer only to registration without spelling out standards.

5. Non-coverage of other private institutional providers, such as laboratories and diagnostic centres.

6. No uniformity in the standards specified in the acts enacted by different states.

C. The fifth India Health Summit on "Optimising Healthcare Delivery in India: A Patient- Centric Approach", jointly organised by CII (Confederation of Indian Industry), MOHFW (Ministry of Health and Family Welfare) and IHCF (Indian Health Care Federation) on December 15-16, 2008, has come out with useful recommendations that will have a far-reaching impact on the health industry, one of the important recommendations being:

**"Insurance companies driving accreditation:** Globally, medical insurance is linked to accredited

delivery centers. Once there are a sizeable number of accredited hospitals, a directive mandating medical reimbursement to be allowed only from accredited hospitals will be a welcome move, which is likely to induce hospitals to embrace accreditation."

#### D. Kerala takes 'Quality' leap in public health:

Today with its many initiatives, Arogya Keralam has started making its impact on the health sector. To ensure holistic development of healthcare in the state, the government had to counter the shortage of qualified healthcare workers. Before embarking on a process of recruitment of medical and paramedical personnel in the state through NRHM, the critical requirement of the hour was a need assessment survey in the state, through which the critical gaps in human resources could be identified. At the same time, up-gradation of the CHCs to IPHS was essential, since facilities available in these institutions hardly satisfied the prescribed norms.

#### E. Vibrant Gujarat

In an effort to improve the quality of healthcare in the state, the Government of Gujarat has introduced Total Quality Management (TQM) system in its key medical institutions. The system covers the state's Medical College Hospitals and District Hospitals, as per the NABH and NABL standards. Simultaneously, it strived to develop

**Hospitals selected for accreditation**

District	Hospital	Bed Strength
Thiruvanthapuram	W and C Hospital, Thiruvanthapuram	428
Kollam	District Hospital, Kollam	471
Pathanamthitta	General Hospital, Pathanamthitta	414
Alappuzha	Taluk Head Quarters Hospital, Cherthala	251
Kottayam	District Hospital, Kottayam	374
Idukki	Taluk Head Quarters Hospital, Thodupuzha	304
Ernakulam	General Hospital, Ernakulam	779
Thrissur	Taluk Head Quarters Hospital, Chavakkad	140
Palakkad	District Hospital, Palakkad	562
Malappuram	District Hospital, Manjeri	501
Kozhikode	W and C Hospital, Kozhikode	295
Wayanad	Taluk Head Quarters Hospital, Sulthan Bathery	57
Kannur	District Hospital, Kannur	616
Kasaragod	District Hospital, Kanhangad	400



### Hospitals for NABH & NABL accreditation

1st Phase (2007-2008)	2nd Phase (2008-2009)	3rd Phase (2009-2010)
District Hospital Rajpipla	District Hospital Surendranagar	District Hospital Dahod
District Hospital Godhara	District Hospital Porbander	District Hospital Kheda
District Hospital Valsad	District Hospital Petlad	District Hospital Patan
District Hospital Junagadh	District Hospital Nadiad	District Hospital Morvi
District Hospital Kutchch	District Hospital Navsari	District Hospital Limdi
District Hospital Sola	District Hospital Amreli	District Hospital Ahwa -Dang
District Hospital Gandhinagar	District Hospital Himatnagar	District Hospital Bharuch
District Hospital Mehsana Medical	Jamana Bai Hospital Baroda	District Hospital
	Medical College Hospital Baroda	Khambhaliya
	Medical College Hospital Surat	Old Civil Hospital Surat
	Medical College Hospital Jamnagar	
	Medical College Hospital Bhavnagar	
	Medical College Hospital Ahmadabad	

a pool of healthcare professionals in the public health sector, trained in the implementation of healthcare quality standards and information technology, to bring productivity and effectiveness in the healthcare delivery system of the state. Under the system, a policy framework for NABH and NABL accreditation of public hospitals and laboratories, as approved by the state government, was launched, and empanelment of NABH and NABL consultants was undertaken in coordination with QCI.

#### Some examples of how accreditation ensures quality of care and lead to improved outcomes:

1. Wockhardt Hospital in Bangalore, under JCI accreditation implementation, achieved noteworthy decreases in the monthly rate of ventilator-associated pneumonia (from 17 to 7); surgical site infections (from 3.25 to 0.9); hospital associated

urinary tract infections (from 15 to 4) and blood stream infections (from 19 to 3) during the period May 2007 to May 2008 (Cooper, Helfrick and de Silva, 2009).

2. Indraprastha Apollo Hospital in Delhi reduced medication errors by 78 per cent, and its revenue grew by 20 per cent in the six months after it received international accreditation from JCI ([http://johnpunnoose.com/yahoo\\_site\\_admin/assets/docs/Indraprastha\\_Apollo\\_Hospital\\_-\\_Delhi\\_-India.30354104.pdf](http://johnpunnoose.com/yahoo_site_admin/assets/docs/Indraprastha_Apollo_Hospital_-_Delhi_-India.30354104.pdf)). The Apollo Hospitals Group, with 8,000 beds across 47 hospitals (7 accredited by JCI, 2 by NABH) performed over 7,600 cardiac surgeries during 2009-10 with a 99.2 per cent success rate (Apollo Hospitals, 2010: 18).

#### THE FUTURE OF ACCREDITATION:

**Medical Tourism:** Cost-effectiveness and quality cares are the mainstay of Indian hospitals, which have created a new market of medical

tourism. There are several corporate hospitals and some private medical college hospitals with accreditation from Joint Commission International that enjoy a good reputation among the citizens of the US, the UK and other developed countries. These hospitals offer timely and cost-effective treatment, coupled with wellness management, a value addition to medical care, helping the patient to recuperate faster.

India's National Health Policy declares that the treatment of foreign patients is legally an "export" and deemed "eligible for all the fiscal incentives extended to export earnings (MoHFW, 2002:)." Government and private sector studies in India estimate that medical tourism, which is growing by 30 per cent a year, could bring anywhere between US\$ 1 billion and US\$ 2 billion into the country by 2012 (Gupta, 2004). How this booming sector will affect access to affordable and quality care by Indian patients in the long run remains to be seen.

**Health Insurance and TPAs:** By insisting on acceptable standards for doctors as well as hospitals, Health insurance companies can improve the quality of care provided by the private sector hospitals. Public-private partnerships (PPP) are proving to be successful in Health insurance in India. Many state Governments have implemented mass insurance schemes in PPP mode via a trust—





to improve access to quality care for the below poverty line (BPL) population of the respective state. The trust usually prescribes a number of standards for private hospitals and nursing homes participating in the scheme to ensure quality of care and have also instituted a mechanism to receive feedback directly from the patients who received care. However, there is a great need for a formal evaluation of the outcomes of this scheme, such as cure rate, decrease in disability and mortality, and improvement in the quality of life.

Incorporation of standards for accreditation of hospitals participating in such schemes will soon become a need of the hour to ensure that outcomes are measurable and defined.

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*Praveen Yadav is CAO; Dr. Geeta Bharadwaj is General Manager; and Dr. (Maj.) Anuradha Monga is Senior Manager, Training; at MD India Health Services (TPA) Pvt Ltd. The views expressed in the article are their own.*

## प्रकाशक का संदेश

एक वित्तीय सेवा के रूप में बीमे का स्थान बैंकिंग अथवा पूँजी बाजारों की तुलना में एक अलग ही प्रकार का है। एक ओर जहाँ अन्य वित्तीय सेवाएँ आवश्यक रूप से निवेश से संबंध रखती हैं तथा किसी के भी निवेश पर प्रतिलाभ पर बल देती हैं, वहीं दूसरी ओर बीमा सर्वथा जोखिम से रक्षा के बारे में है। बीमे का यही विलक्षण गुण प्रायः बीमाकर्ताओं और बीमाकृत व्यक्तियों के बीच झगड़े की जड़ बन जाता है। अधिकांश मामलों में पॉलिसीधारक को इस बात के लिए मनवाना कठिन है कि दावे का भुगतान उस घटना के घटित होने अधीन है जो पॉलिसी के अंतर्गत रक्षित है।



बहुधा हम यह सुनते हैं कि वह सर्वाधिक महत्वपूर्ण कार्य जो बीमाकर्ता निष्पादित करता है, 'दावे का निपटारा' है। इस परिदृश्य में जब किसी बीमाकर्ता के लिए किसी दावे को पूर्णतः या अंशतः निराकृत अथवा अस्वीकृत करने का अवसर उपस्थित होता है तब उसे दावेदार द्वारा एक अपकार के रूप में देखा जाता है, भले ही पारस्परिक दायित्वों के आधार पर ऐसा करना क्यों न उचित ठहरता हो। यह पुनः एक बार इस तथ्य को प्रमाणित करता है कि संभावित ग्राहक को संविदा की शर्तें स्पष्ट करने के लिए पर्याप्त रूप से प्रयास नहीं किया गया है। यद्यपि पॉलिसी बांड के साथ प्रस्ताव फार्म के प्रेषण की अपेक्षा का अनुसरण बीमाकर्ताओं द्वारा अधिदेश के अनुसार कर्तव्यनिष्ठ रूप में किया जा रहा है, तथापि अक्सर इससे यह संदेह उत्पन्न होता है कि क्या ऐसी प्रथा के पीछे निहित मूल भावना विद्यमान है भी या नहीं।

इसके अलावा, ऐसे भी मौके हैं जब कोई दावा ऐसे कारणों से अस्वीकार किया जाता है जैसे इस प्रकार के तथ्यों को छिपाना, जो जोखिम की स्वीकृति के लिए महत्वपूर्ण है। जबकि इरादा ऐसी घटना के लिए अनिवार्यतः बीमाकर्ताओं को दोष देने का नहीं है, एक बार फिर यह परामर्श दिया जाता है कि प्रस्तावकों को निहितार्थ समझाने में यदि कुछ अतिरिक्त प्रयास किया जाए तो इससे दावों के उचित रूप से निपटान में बहुत फ़र्क पड़ेगा। आज के तेज और व्यापक संचार वाले माहौल में पॉलिसीधारक के साथ एक नगण्य और अहानिकर प्रतीत होनेवाले मुकाबले के कारण भी बीमाकर्ता की प्रतिष्ठा को अपूरणीय क्षति पहुँच सकती है।

सबसे बढ़कर, बीमाकर्ताओं के लिए आवश्यक रूप से जोखिम का विधिवत् निर्धारण सबसे पहले किया जाए, इसके लिए यदि वे दायित्वपूर्ण जोखिम-अंकन की प्रथा का वैज्ञानिक ढंग से अनुसरण करें तो वे अपना कार्य भली भाँति कर सकेंगे। सर्वोच्च स्थिति प्राप्त करने के लिए व्यवसाय को असावधानीपूर्वक स्वीकार करने; तथा बाद में दावों से बचने के लिए बचाव के किन्हीं संभव रास्तों की खोज करने से व्यावसायिक प्रबंध आहत और खराब हो जाता है। यह न केवल प्रश्नगत खिलाड़ी के व्यावसायिक हितों को प्रभावित करता है, बल्कि अंततः उद्योग की प्रतिष्ठा को भी बुरी तरह प्रतिबिंबित करता है।

'दावा प्रबंध' पत्रिका के इस अंक का केन्द्रबिंदु है। व्यापक विस्तार एवं महत्व का विषय होने के कारण पत्रिका के अगले अंक का फोकस भी 'दावा प्रबंध' पर रहेगा।

*टी.एस. विजयन*

टी.एस. विजयन  
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प्रायः लोग बीमे के बारे में केवल तभी सोचते हैं जब कुछ बुरा घटित हो जाता है और उन्हें कोई दावा प्रस्तुत करने अथवा शिकायत दर्ज कराने की आवश्यकता होती है।

**श्री ऐडम हम**

एनएआईसी के अध्यक्ष एवं उत्तरी डकोटा बीमा आयुक्त।

आगे बढ़ते हुए, सरकारें, 'अंतिम बीमाकर्ता' के रूप में अब कार्य नहीं कर सकतीं। एशिया के विस्तृत हो रहे सुरक्षा के अंतराल के आलोक में सरकारों के लिए यह आवश्यक होगा कि वे जोखिम अपने पास न रखें तथा जोखिमों का एक अपेक्षाकृत बड़ा अनुपात बीमा उद्योग को अंतरित करें ताकि वे प्राकृतिक विपदाओं के विरुद्ध अपनी राष्ट्रीय समुत्थान-शक्ति में वृद्धि कर सकें।

**श्री जाक्विलाइन लोह**

उप प्रबंध निदेशक, मौद्रिक प्राधिकरण, सिंगापुर।

यदि किसी जमाकर्ता अथवा पॉलिसीधारक अथवा हमारी संस्थाओं के किसी सदस्य को कोई हानि नहीं पहुँची है, तो क्या इसका अर्थ यह हुआ कि हमने अपना कार्य अच्छी तरह से किया है और मूल्य प्रदान कर दिया है? जरूरी नहीं कि ऐसा है.. यह तो केवल खुशकिस्मती की बात हो सकती है, अथवा मजबूत अर्थव्यवस्था का एक कार्य।

**श्री अयान लाफ़लिन**

उपाध्यक्ष, आस्ट्रेलियन प्रुडेन्शियल रेगुलेशन अथॉरिटी।

यह सुनिश्चित करने के लिए एशिया के पास काफी कम समय-सीमा होगी कि वयोवृद्धि समाज को सहारा देने हेतु एक पर्याप्त सामाजिक सुरक्षा जाल विद्यमान हो। अतः वयोवृद्धों के संरक्षण और स्वास्थ्य-रक्षा के निधीयन के लिए बढ़ती हुई माँग को पूरा किया जा सके, इसके लिए बीमा क्षेत्र पर अधिकाधिक निर्भरता रखी जाएगी।

**श्री डोनाल्ड जॉशुआ जगन्नाथन**

सहायक गवर्नर, बैंक नेगारा मलेशिया।

प्राधिकरण की धारणा यह है कि उपयुक्त विनियामक पर्यवेक्षण के बिना समुदाय को किसी भी वित्तीय सेवा उत्पाद का विक्रय नहीं किया जाना चाहिए।

**श्री क्रेडग स्वैन**

प्रबंध निदेशक, पर्यवेक्षण, बेरमुडा मौद्रिक प्राधिकरण

उचित रूप से कीमत-निर्धारित उत्पादों के माध्यम से व्यापन में प्राप्त सुधार ग्राहकों के लिए एवं साथ ही उद्योग के लिए भी श्रेयस्कर है।

**श्री टी.एस. विजयन**

अध्यक्ष, बीमा विनियामक और विकास प्राधिकरण, भारत।

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## ग्राहक का प्रतिनिधि

- बीमा दलाल

**संजय केडिया** इस बात पर जोर देते हैं कि यद्यपि दलाली के माध्यम ने भारत में बीमा व्यवसाय के लिए बहुत कुछ मूल्य वर्धन किया है, तथापि इस रूप में इसकी पहचान होना अभी बाकी है।

### ऐतिहासिक परिप्रेक्ष्य

दलाल के मूल्य की प्रस्थापना बहुत पहले ही 16वीं सदी में 1688 में लॉयड की काफ़ी दुकान में प्रतिपादित की गई थी। जहाज, माल और मार्ग के खंबंध में सूचना से युक्त 'पर्चियाँ' लेकर दलाल काफ़ी दुकानों में खरीदारी करते हुए बीमे के लिए प्रत्येक वित्तदाता के पास जाते थे। दलालों ने अपने ग्राहक अर्थात् माल के व्यापारियों के लिए संभावित बीमाकर्ताओं की वित्तीय स्थिति का निर्धारण किया था। ग्राहक के लिए उपयुक्त बीमाकर्ता की पहचान करने की आवश्यकता ने उस पुराने जमाने में दलाल के मूल्य की प्रस्थापना हेतु मार्ग प्रशस्त किया था। पहले के उस जमाने से लेकर बीमा दलालों ने बीमा बाजार में ग्राहकों का प्रतिनिधित्व किया। इसके परिणामस्वरूप दलालों और जोखिम-अंककों के जिस समूह का आविर्भाव हुआ वही लॉयड्स है जिसे हम आज इस रूप में जानते हैं। ग्राहक के समर्थन के रूप में दलाल के इस विकास को लॉयड के बाजार के संगठन द्वारा भी प्रोत्साहन मिला तथा वह अपने पास व्यवसाय लाने के लिए प्राथमिक रूप से दलालों पर निर्भर रहा।

### भारत में दलाल का आविर्भाव

भारत में बीमा दलाल समुदाय केवल एक दशक पुराना है तथा आज 300 से अधिक लाइसेंसप्राप्त दलाल हैं। कुल जीवनेतर प्रीमियम में से दलालों का प्रत्यक्ष बाजार अंश 2009-10 में विद्यमान 16% से बढ़कर 2012-13 में 23.3% (₹. 14,699 करोड़) हो गया है। जीवन बीमा बाजार के संबंध में दलालों का अंश लगभग 0.5% था।

**भारत में दलाली के प्रारंभिक चरण के दौरान, 'दलाल' शब्द के साथ संबंध एक मानसिक अवरोध था, जो एक 'मध्यस्थ' का संकेत करता है। तथापि, 'बीमा दलाल' शब्द वास्तविकता को सही तौर पर प्रतिबिंबित नहीं करता।**

बीमा बाजार के उदारीकरण ने ग्राहक के लिए विकल्पों में वृद्धि देखी है जो अधिक बीमा कंपनियों, उत्पादों की संख्या और तत्पश्चात् 2007-08 में प्रशुल्क-समाप्ति (डीटैरिफिकेशन) के कारण दरों के रूप में है। इन विकल्पों और जटिलताओं ने ग्राहकों के लिए उनके हितों का प्रतिनिधित्व करने तथा उनकी जोखिम संबंधी आवश्यकताओं हेतु सर्वोत्तम चयन करने में उनकी सहायकता करने के लिए एक परामर्शदाता और दलाल को प्राप्त करने की एक दृढ़तर आवश्यकता का निर्माण किया। प्रशुल्क-समाप्ति जीवनेतर खंड में, विशेष रूप से कॉर्पोरेट क्षेत्र में दलाल बाजार के अंश में उल्लेखनीय रूप से आकस्मिक वृद्धि का कारण बनी।

भारत में दलाली के प्रारंभिक चरण के दौरान, 'दलाल' शब्द के साथ संबंध एक मानसिक अवरोध था, जो एक 'मध्यस्थ' का संकेत करता है। तथापि, 'बीमा दलाल' शब्द वास्तविकता को सही तौर पर प्रतिबिंबित नहीं करता। बीमा दलाल ग्राहक के लिए सलाहकार के रूप में कार्य करता है तथा बीमा बाजार में ग्राहक के हितों का प्रतिनिधित्व करता है।

**2012-13 में विभिन्न उत्पाद श्रेणियों के लिए दलाल बाजार का अंश निम्नानुसार था:**  
(रु. करोड़ में)

संविभाग	बाजार	दलाल	दलाल का अंश
अग्नि	6,760	1,591	24%
मरीन कार्गो	1,941	683	35%
मरी हल	1,087	131	12%
विमानन	479	129	27%
इंजीनियरिंग	2,470	833	34%
मोटरओडी	19,595	4,726	24%
मोटर टीपी	10,094	1,997	20%
देयता	1,138	504	44%
पीए	1,615	274	17%
चिकित्सा	15,011	3,203	21%
विदेशी	365	49	13%
ऋण	1,261	70	6%
विविध	3,938	482	12%

स्रोत: बीमा विनियामक और विकास प्राधिकरण की वार्षिक रिपोर्ट 2012-13

जटिल उत्पादों, जिनके लिए अधिक गहन समझ और विशेषज्ञता की आवश्यकता होती है, जैसे देयता की व्यवस्थाएँ और इंजीनियरिंग, ने क्रमशः 44% और 34% तक दलाल का अधिक बाजार अंश देखा है।

वैश्विक रूप से दलाल बीमे की दोनों कॉर्पोरेट और वैयक्तिक व्यवस्थाओं सहित, जीवनेतर बाजार में कॉर्पोरेट प्रीमियमों के एक काफी बड़े भाग को प्राप्त करने की प्रवृत्ति दर्शाती है। चयनित एशिया-पैसिफिक देशों में, जैसा कि नीचे दी गई सारणी दर्शाती है, फिलीपीन्स और इंडोनेशिया जैसे बाजारों के पास कुल जीवनेतर बाजार (कॉर्पोरेट और वैयक्तिक दोनों मिलाकर)

का 40% से भी अधिक भाग ऐसा है जो बीमा दलालों के माध्य से रखा गया है। भारत में वर्ष 2012 में बाजार अंश 18% था (2013 में यह 23% था) जो आनेवाले वर्षों में दलालों के बाजार अंश की वृद्धि के लिए बहुत बड़ी गुंजाइश का संकेत करता है। दलाल भारत के जीवनेतर बाजार में एक महत्वपूर्ण माध्यम है, लेकिन एशिया में स्थित अन्य बाजारों की तुलना में अपेक्षाकृत अल्प परिमाण में है।

प्रौद्योगिकी के आगमन के साथ ही, बीमे की वैयक्तिक व्यवस्थाओं के लिए वैयक्तिक ग्राहक भी अब अपने सर्वोत्तम हितों का प्रतिनिधित्व करने के लिए किसी दलाल की सेवाओं का उपयोग

कर सकते हैं तथा इंटरनेट पर दलाली माध्यम के द्वारा अधिकाधिक विकल्प प्राप्त कर सकते हैं। प्राधिकरण के दूरस्थ विपणन संबंधी दिशानिर्देशों, जो व्यक्तिगत रूप से बिक्री को छोड़कर परंतु दूरविपणन, एसएमएस, इंटरनेट आदि जैसे विभिन्न माध्यमों द्वारा बीमे का विक्रय करने की अनुमति देते हैं, ने बीमा दलालों को इस बात की अनुमति दी है कि वे ग्राहक को उत्कृष्ट मूल्य वितरित करें तथा लेनदेन की अपेक्षाकृत कम लागत पर विकल्पों का निर्माण करें।

भारतीय बीमा उद्योग से यह प्रत्याशित है कि वह प्रति वर्ष 15% और 20% के बीच वृद्धि करेगा, तथा दलाल के अंश में उल्लेखनीय रूप से और बढ़ोतरी होनी चाहिए। भारतीय बाजार की संवृद्धि के इतिहास में योगदान करने के विषय में दलालों को काफी बृहत्तर दायित्व को वहन करना चाहिए।

ग्राहक और बीमा बाजार के प्रति बीमा दलाल का मूल्य अतः दलाल ऐसा कौन-सा मूल्य उत्पन्न करता है जिससे वे बीमा के व्यापन के ऐसे बड़े हिस्से का योगदान करते हैं ?

जोखिम प्रबंधन: इस बात की अवश्य पहचान करनी चाहिए कि ग्राहक की आवश्यकताओं को समझना किसी दीर्घकालिक धारणीय व्यवसाय के विकास के लिए कुंजी है। ग्राहक की वास्तविक समस्या 'जोखिम' है, बीमा नहीं। बीमा तो जोखिम का अंतरण और प्रबंध करने के तरीके में से एक है। इसलिए दलाल की भूमिका उस जोखिम को समझना है जिसका सामना ग्राहक कर रहा है और ऐसे समाधान प्रस्तावित करना है

**दलालों के माध्यम से कुल लिखित प्रीमियमों का अनुपात**

2012 के लिए जीडब्ल्यूपी का प्रतिशत

56%	46%	45%	44%	42%	35%	20%	18%	16%	8%
न्यूजीलैंड	फिलीपीन्स	सिंगापुर	आस्ट्रेलिया	इंडोनेशिया	हांगकांग	ताइवान	भारत	मलेशिया	चीन

स्रोत: एएक्ससीओ, कंट्री इंश्योरेंस रेगुलेटरी अथॉरिटी, ऑलिवर वाइमैन विश्लेषण

जो आवश्यकता पर आधारित हों। अधिकांश परिदृश्यों में दलाल नये उत्पादों के नवोन्मेषण में सहायता कर सकते हैं क्योंकि वे ऐसी विलक्षण स्थिति में है जहाँ वे ग्राहकों की बदलती आवश्यकताओं को समझ सकते हैं और बीमा बाजार के माध्यम से इन आवश्यकताओं को पूरा करने के लिए एक विपणन-स्थान का निर्माण कर सकते हैं।

विश्वास की कमी की पूर्ति: ग्राहकों के साथ विश्वास की कमी का कुछ तत्व बीमा बाजार के पास हर जगह विद्यमान है। दलाल जो ग्राहक की सहायता के लिए कार्य करते हैं, विश्वास के उस अभाव को पूरा करते हैं जिससे ग्राहक बीमा बाजार के और करीब आ जाता है। सामान्यतः बीमा बेचा जाता है, इसलिए वह धकेलने का तत्व है। दलाल खींचने का तत्व लाने में सहायता करते हैं। यह सर्वाधिक महत्वपूर्ण मूल्य और भूमिका है-- ग्राहक का प्रतिनिधि और समर्थक होना।

नये उत्पाद और क्षमता: (क) समग्र रूप में उद्योग के मानकों को उन्नत बनाने, (ख) ग्राहकों की आवश्यकताओं के आधार पर बीमा उत्पादों की नई श्रेणियाँ विकसित करने तथा (ग) संवृद्धि को सुसाध्य बनानेवाली जोखिम पूँजी और क्षमता का निर्माण करने के द्वारा दलाल रुकावट को हटाने और क्षमता निर्मित करने में मददगार साबित होते हैं।

अधिकाधिक जटिल जोखिम, व्यवसाय, और आर्थित परिदृश्य बीमा दलालों को समग्र जोखिम सलाहकारों और परामर्शदाताओं के रूप में स्थापित करने के लिए एक महत्वपूर्ण अवसर प्रस्तुत करते हैं। दावों के समर्थन, हानि नियंत्रण और जोखिम न्यूनीकरण में हमारी भूमिका हमारे ग्राहकों और बीमाकर्ताओं को एकसामन रूप से अत्यावश्यक मूल्य प्रदान करती है।

**दलाली माध्यम (ब्रोकिंग चैनल) के लिए यह महत्वपूर्ण है कि इस विश्वास को बनाये रखा जाए, यह सुनिश्चित करने के लिए हर संभव प्रयास किया जाना चाहिए। दलाल बिरादरी के सभी सदस्यों के लिए व्यावसायिक मानकों के उन्नयन हेतु अभी बहुत काम करने की आवश्यकता है।**

एक और दिलचस्प तथ्य यह है कि अब अधिक से अधिक कंपनियाँ दलाल की भूमिका को समझती हैं तथा यह स्वीकार करती हैं कि दलाल उनके हितों का प्रतिनिधित्व करते हैं। दलाली माध्यम (ब्रोकिंग चैनल) के लिए यह महत्वपूर्ण है कि इस विश्वास को बनाये रखा जाए, यह सुनिश्चित करने के लिए हर संभव प्रयास किया जाना चाहिए। दलाल बिरादरी के सभी सदस्यों के लिए व्यावसायिक मानकों के उन्नयन हेतु अभी बहुत काम करने की आवश्यकता है। भारतीय बीमा दलाल संघ की भूमिका और योगदान में सारे दलाल समुदाय के लिए एक स्व-नियंत्रक और उच्चतर व्यावसायिक मानकों के संचालक के रूप में उल्लेखनीय रूप में उन्नति करने की क्षमता है, जो प्राधिकरण और सभी हितधारकों में अधिकाधिक विश्वास भर सकेगी।

वैश्विक रूप से दलाल के मुख्य कार्यों में निम्नलिखित शामिल है:

### 1. बीमा स्थापन:

- क. प्रदाता के समाधानों के साथ ग्राहक की आवश्यकताओं का मिलान
- ख. ग्राहकों के लिए सर्वोत्तम समाधानों का समझौता और खरीद (सोर्सिंग)
- ग. (विशेष रूप से बड़े और जटिल) लेनदेनों का कुशल निष्पादन

### 2. जोखिम प्रबंधन और परामर्श

- क. जोखिम की पहचान, निर्धारण, परिमाणन और जोखिम का वित्तपोषण (बीमे की व्यवस्था करना)
- ख. बीमायोग्य और बीमे के लिए अयोग्य जोखिमों के लिए जोखिम प्रबंध समाधानों का अभिकल्पन और विकास करना, उदा. आबद्ध, वैकल्पिक जोखिम अंतरण (एआरटी)
- ग. उद्योग को जोखिम विशेषता के विशेषज्ञ और पूरी जानकारी उपलब्ध कराना।

- घ. (प्रायः बहुविध) प्रदाताओं से खरीद (सोर्सिंग) और आवश्यकता-आधारित समाधानों का अभिकल्पन।

### 3. सर्विसिंग और सहायता

- क. ग्राहकों और प्रदाताओं को बीमा संविदाओं की सर्विसिंग, उदा. दावों के निपटान, में सहायता।
- ख. आउटसोर्सिंग और प्रशासन संबंधी सेवाएँ
- ग. जोखिम प्रबंधन से सहायता करने के लिए प्रौद्योगिकीगत समाधानों और बाजार आसूचना की व्यवस्था

### 4. “बाजार-निर्माता”

- क. पारदर्शिता बढ़ाना और प्रतियोगिता को सुसाध्य करना

ख. लघु और मध्यम उद्यमों (एसएमई) को बड़े प्रदाताओं के पास अधिकाधिक पहुँच और उनके साथ सौदेबाजी की शक्ति प्रदान करना

ग. समग्र रूप में प्रस्ताव करना, विस्तृत दायरे में प्रदाताओं तक पहुँच का उन्नयन

## 5. ज्ञान और विशेषज्ञता

क. वैश्विक बाजारों और प्रदाताओं तक पहुँच

ख. दोनों स्थानीय और अंतरराष्ट्रीय तौर पर बीमा बाजारों का ज्ञान और विशेषज्ञता

ग. सीमाओं, कटौतीयोग्य राशियों और कीमत-निर्माण के संबंध में न्यूनतम मानदंड (बेंचमार्किंग) तय करना

भारतीय बाजार में दलालों के पास ग्राहकों से बीमा प्रीमियम वसूल करने और बीमा संबंधी दावों का निपटान करने के लिए स्पष्ट रूप से कोई दायित्व नहीं है। अंतरराष्ट्रीय तौर पर जब एक दलाल यह भूमिका निभाता है, तब ग्राहकों को एक ही स्थान (सिंगल विंडो) पर भुगतान की प्रशासनिक सुविधा उपलब्ध कराने के साथ-साथ विभिन्न बीमाकर्ताओं के बीच निपटान जोखिम (सह बीमा निपटानों) का प्रबंध करने के लिए बीमा बाजार को सहायता मिलती है। मजबूत विनियामक नियंत्रणों के साथ एक जोखिम-रहित संस्था होने के नाते दलाल इस प्रत्ययी निधि निपटान कार्य का प्रबंध अत्यंत कुशलतापूर्वक करने में मदद कर सकता है।

भारतीय बाजार के संदर्भ में पुनर्बीमा दलाल प्रत्ययी प्रीमियमों और दावों के कार्य का निर्वाह प्राधिकरण द्वारा निर्धारित मानदंडों के अनुसार करते हैं।

साथ ही, अंतरराष्ट्रीय तौर पर दलाल पॉलिसी संबंधी नई शब्द-रचना निर्मित करने में सक्रिय भूमिका अदा करते हैं, वे ग्राहकों के लिए

पॉलिसियों का प्रबंध और निर्गम भी कर सकते हैं।

वितरण माध्यम के रूप में दलाल एक खुला संघटन है। आर्थिक कोई भी बीमाकर्ता साझेदार उस माध्यम के साथ कार्य कर सकता है। बीमाकर्ता के लिए कोई निश्चित लागत नहीं है। वे कारोबार के लिए अन्वेषण लागत एवं प्रक्रिया लागत घटाते हैं क्योंकि दलाल ग्राहकों की सर्विसिंग के विभिन्न कार्य निष्पादित करता है।

इस प्रकार दलाल अपने ग्राहकों की आवश्यकताएँ पूरी करते हैं तथा ऐसे विभिन्न कार्य निष्पादित करते हैं जो समग्र बाजार को अधिक कार्यक्षम बनाते हैं।

## जोखिम प्रबंध-ग्राहक के लिए कम दावों के निदर्शक सुधार

जोखिमों की निरंतर बढ़ती हुई जटिलता ने दलालों द्वारा प्रदान किये जानेवाले अत्यधिक विशेषीकृत तकनीकी ज्ञान और अनुभव के लिए माँग में तीव्र वृद्धि की है। अधिकांश बड़े औद्योगिक और वित्तीय निगमों के पास जटिल जोखिम की समस्या है तथा दलाल जोखिम का प्रबंधन प्रभावी ढंग से करने और बीमा बाजार को जोखिम का अंतरण करने में जोखिम प्रबंधक की सहायता करते हैं।

**जोखिमों की निरंतर बढ़ती हुई  
जटिलता ने दलालों द्वारा प्रदान  
किये जानेवाले अत्यधिक  
विशेषीकृत तकनीकी ज्ञान और  
अनुभव के लिए माँग में तीव्र  
वृद्धि की है।**

दावों के स्वरूप की समझ और कारणों के विश्लेषण का संचालन प्रायः हानियों के संबंध में अंतर्दृष्टि प्रदान करता है जिन्हें रोका जा सकता है अथवा कम किया जा सकता है। दलाल दावों के कारण की पहचान करने में ग्राहकों की सहायता करते हैं तथा ऐसी प्रथाओं को अपनाने में उनका समर्थन करते हैं जो जोखिम की घटनाओं को रोकती हैं। जबकि जोखिम की घटनाएँ अधिकांशतः अप्रत्याशित रूप से होती हैं। व्यवसाय से संबंधित सभी परिणाम एक दम स्पष्ट हैं। भौतिक आस्तियों की हानि, व्यावसायिक क्रमभंग और परिचालनगत क्षमताएँ शीघ्र ही बाजार अंश, राजस्व, ब्रैंड ईक्यूटी और शेयरधारक मूल्य में हानि के रूप में परिवर्तित हो जाती हैं।

दलाल ग्राहकों की सहायता व्यावसायिक उद्देश्यों के साथ अपने बीमा कार्यक्रम के सुयोजन के लिए कार्यनीति विकसित करने में करते हैं। जोखिम प्रबंधन और हानि के न्यूनीकरण से बीमा बाजार और अर्थव्यवस्था के लिए न्यूनतर दावों हेतु मार्ग प्रशस्त होता है। कम दावों का अनुभव ग्राहकों के लिए अपने दीर्घकालिक प्रीमियों को कम रखने के लिए सर्वाधिक महत्वपूर्ण साधन है जो सभी सहभागियों के लिए एक सही जीत है।

## दलाली संबंधी मुख्य विनियामक पहलें-ग्राहक के लिए निहितार्थ

हाली ही में प्राधिकरण ने बीमा दलाल समुदाय के प्रतिनिधियों को और समितियों के शामिल किया है। जबकि यह एक प्रारंभ है, दलाल समुदाय का अधिकाधिक प्रतिनिधित्व आवश्यक है जो पॉलिसीधारक की चिंताओं और विचारों को सामने रखता है क्योंकि ये पॉलिसीधारक के सबसे करीब हैं।

प्राधिकरण ने अपने प्रारंभ से ही ग्राहक के प्रतिनिधि (दलाल) और बीमाकर्ता (एजेंट) की

भूमिका के बीच एक स्पष्ट सीमांकन किया था। स्पष्ट विभेदीकरण ने प्रतिद्वंद्व को शांत रखा है तथा ग्राहकों ने इस बारे में एक बेहतर जागरूकता विकसित की है कि उनका प्रतिनिधित्व कौन करता है। भारतीय बाजार अब तक बहुविध बीमाकर्ताओं का प्रतिनिधित्व करनेवाले एजेंटों के सुस्पष्ट प्रतिद्वंद्वों से दूर रहा है तथा ग्राहक के हित के दृष्टिकोण से यह सर्वोत्तम है कि बाजार में यह स्पष्टता जारी रखी जाए।

**दलालों के रूप में बैंक:** दलाल बनने के लिए बैंकों को अनुमति देने वाले हाल के दिशानिर्देशों ने उद्योग के अंदर विभिन्न वैचारिक सिद्धांतों को जन्म दिया है। जैसा कि समझा जा सकता है, सभी मौजूदा दलालों के लिए इसका अर्थ है सुदृढ़ प्रतियोगिता।

तथापि, ग्राहक और समग्र रूप में उद्योग के हित को ध्यान में रखते हुए इस तर्क के विरुद्ध प्रतिवाद करना कठिन है कि बैंक दलाल नहीं हो सकते तथा वे ग्राहक को एक विकल्प और वरणाधिकार प्रदान कर सकते हैं। इसे सफलतापूर्वक कार्यान्वित करने के लिए कुछ चुनौतियों का समाधान करने की आवश्यकता है। अपेक्षित मॉडल अपनाने के लिए बैंकों हेतु एक स्वाभाविक आकर्षण निर्मित करने के लिए प्रोत्साहनों और अवप्रेरणों का प्रयोग करने पर प्राधिकरण विचार कर सकता है, जो ग्राहकों और बाजार के हित में है।

(1) एक एजेंसी के रूप में बैंक का वर्तमान वित्तीय मॉडल दलाली मॉडल की तुलना में बैंक को बेहतर मूल्य प्रदान करता है, अतः पारिश्रमिक के ढाँचे को थोड़ा-बहुत सुधारना अत्यंत महत्वपूर्ण है जो दलाली मॉडल पर विचार करने के लिए बैंक के लिए प्रोत्साहनों के सही सेट प्रदान करता है। (2) दलाल बनने के बाद बैंक ग्राहक का प्रतिनिधित्व करेंगे तथा इसलिए वे

**दलाल बनने के बाद बैंक ग्राहक का प्रतिनिधित्व करेंगे तथा इसलिए वे विनियमों के अधीन और ग्राहक के प्रति जिम्मेदार होंगे, जो स्थिति एजेंसी मॉडल में नहीं होगी।**

विनियमों के अधीन और ग्राहक के प्रति जिम्मेदार होंगे, जो स्थिति एजेंसी मॉडल में नहीं होगी।

**उप दलाली:** प्राधिकरण ने भारत में उप दलाली की अनुमति देने के निहितार्थ का अध्ययन करने के लिए एक समिति की भी नियुक्ति की थी। उप दलाली के संबंध में रिपोर्ट के अनुसार, “...दोनों बीमा दलाली मॉडल और विनियमनकर्ता का समग्र उद्देश्य यह सुनिश्चित करना है कि ग्राहक वह सेवा और वे उत्पाद प्राप्त करें जिनकी प्रत्याशा वे करते हैं तथा उनके प्रति उचित व्यवहार किया जाए। यह किसी भी वितरण पद्धति पर लागू है जिसे अपनाने के लिए विनियमित फर्म चयन करता है, चाहे वह एक उप-दलाली मॉडल के माध्यम से हो अथवा बाजार के प्रति प्रत्यक्ष रूप में।” उप दलाली को विभिन्न आकारों और रूपों में ढाला जा सकता है। उदाहरण के लिए, ऐसा एक मॉडल हो सकता है जहाँ दलाल के फर्म ने प्रधान फर्म की सेवाओं का सक्रिय रूप से संवर्धन करने के लिए अन्य पक्ष के परिचयकर्ता की नियुक्ति करने के लिए सहमति दी है तथा वह केवल ग्राहकों को निर्दिष्ट (रिफर) कर सकता है और विशिष्ट रूप से सलाह देने की अनुमति उन्हें नहीं है।

इस मॉडल का एक और विस्तार वह है जहाँ पॉलिसी बेचने की अनुमति अन्य पक्षकार को भी दी जाती है तथा इस परिदृश्य में अन्य पक्षकार की शैक्षणिक योग्यता की अपेक्षा अनिवार्य हो सकती है।

अंत में, नियुक्त प्रतिनिधि (एआर) हो सकते हैं जो एक ऐसा अन्य पक्षकार है जिसे प्रधान दलाल की अनुमतियों की सीमा तक विनियमित कार्यकलापों के संचालन हेतु नियुक्त करने के लिए प्रधान दलाल ने सहमति दी हो। इस स्थिति में इस कारण से प्रधान दलाल यह सुनिश्चित करने के लिए जिम्मेदार है कि नियुक्त प्रतिनिधि के पास विनियमित कार्यकलाप संचालित करने के लिए उपयुक्त प्रणालियाँ और नियंत्रण मौजूद हों तथा प्रधान दलाल के पास अपने नियुक्त प्रतिनिधियों के संबंध में नियंत्रण विद्यमान हो, जैसे संविदा, निगरानी की व्यवस्था, उचित प्रशिक्षण का प्रबंध आदि।

भारत में उप दलाली मॉडल को ढालने के लिए विभिन्न प्रमापीय (मॉड्युलर) दृष्टिकोण अपनाये जा सकते हैं। दलाली की संकल्पना नीचे छोटे नगरों, शहरों और गाँवों तक व्याप्त नहीं हुई है जिसके लिए प्राथमिक रूप से कारण है-- लाइसेंस प्राप्त करने के लिए कठोर प्रक्रिया, प्रशिक्षित श्रमशक्ति की उपलब्धता और कारोबार की मात्रा के अस्तित्व का अभाव। दलाल के लिए व्यवसाय की स्थापना करना अथवा शाखा कार्यालय स्थापित करना आर्थिक रूप से अलाभकारी हो जाता है। फिर भी, ऐसे छोटे शहरों में व्यवसाय के अस्तित्व को नकारा नहीं जा सकता। ऐसे छोटे आकार के व्यवसाय की आवश्यकता पूरी करने के लिए एक व्यवसाय मॉडल को आजमाना उपयुक्त होगा जो कारोबार का प्रचार करने वाले व्यक्ति को पारिश्रमिक प्रदान करें जो संस्था के लिए उसके द्वारा लाये जानेवाले कारोबार की मात्रा पर आधारित हो।



**दलाली उद्योग: आगे का पथ** बीमा दलाली उद्योग भी अपने नवोदित चरण से आगे बढ़ गया है, क्योंकि यह भारत में अभी केवल एक दशक पुराना है। व्यावसायिक मानकों में निश्चित रूप से वृद्धि हुई है, परंतु यह एक ऐसा क्षेत्र है जहाँ दलाल समुदाय को विश्वसनीयता और विशेषज्ञता हासिल करने के लिए काफी अधिक दायित्व को स्वीकार करना होगा।

ऐतिहासिक रूप से दलाल अपनी ग्राहक मूल्य प्रस्थापना को स्पष्ट करने में बहुत उत्तम नहीं रहे हैं। वे ग्राहक के हिमायती हैं, लेकिन प्रायः उन्हें इस रूप में नहीं देखा गया है। वे नवोन्मेषण के प्रेरक हैं, परंतु उनका इस प्रकार से अवलोकन नहीं किया गया है। दरअसल एक दलाल के लिए अधिक अभिव्यक्तिशील होने की आवश्यकता है तथा उसको चाहिए कि वह ग्राहक के समर्थन में समुदाय द्वारा जो भी अच्छा कार्य किया गया है उसे पूर्णतः सुस्पष्ट रूप में व्यक्त करे।

### बीमा दलाल की भूमिका संबंधी मिथक

भारत में बीमा दलाली के 11 वर्ष बाद अभी भी भारतीय बाजार में बीमा दलालों की भूमिका को लेकर कुछ दिलचस्प मिथक हैं।

**मिथक 1 - बीमा दलाल बीमाकर्ता और बीमाकृत व्यक्ति दोनों का प्रतिनिधि है, क्योंकि यह दलाल शब्द में विशिष्ट रूप से अंतर्निहित है।**

**तथ्य:** बीमा दलाल केवल पॉलिसीधारक/ग्राहक के हित का प्रतिनिधित्व करता है। दलाल के विभिन्न कार्य बीमाकर्ताओं की प्रशासन लागत को कम कर सकते हैं, लेकिन दलाल लगातार ग्राहक के हित का प्रतिनिधित्व करता है।

**मिथक 2 - बीमा दलाल और बीमा एजेंट दोनों की मध्यवर्तियों के रूप में एक ही भूमिका है।**

**तथ्य:** पॉलिसीधारकों के लिए यह सबसे अधिक उलझन वाले क्षेत्रों में से एक है। जैसा कि आप जानते हैं, बीमा एजेंट किसी खास बीमा कंपनी के हित का प्रतिनिधित्व करते हैं जबकि बीमा दलाल पॉलिसीधारक/ग्राहक का प्रतिनिधित्व करता है।

**मिथक 3-बीमा दलाल का काम ग्राहक को अधिक बीमा बेचना है।**

**तथ्य:** बीमा दलाल की भूमिका ग्राहक की जोखिम संबंधी आवश्यकताओं के विषय में पूरी जानकारी प्राप्त करने के लिए एक आवश्यकता विश्लेषण (जोखिम निर्धारण) संचालित करना है और तब एक समाधान उपलब्ध कराना है, जो या तो बीमा खरीदना हो सकता है या बीमा खरीदे बिना स्व-प्रतिधारण अथवा हानि-नियंत्रण आदि के रूप में जोखिमों का प्रबंध करना।

**मिथक 4 - ग्राहक को दलाली सेवाओं के लिए अलग से भुगतान करने की आवश्यकता है।**

**तथ्य:** बीमा दलालों का पारिश्रमिक पारंपरिक रूप से बीमा प्रीमियमों के अंदर शामिल है। बीमाकर्ता दलाली की राशि प्राधिकरण द्वारा अधिसूचित सीमाओं के अंदर अदा करते हैं। एक सर्वोत्तम प्रथा के तौर पर, जब अनुरोध किया जाता है तब ग्राहकों को दलालों का पारिश्रमिक पूरी तरह प्रकट किया जाता है।

**मिथक 5 - बीमा दलाल का कार्य केवल बीमे का स्थापन करना है।**

**तथ्य:** बीमा दलाल की भूमिका का विस्तार जोखिम निर्धारण पर सलाह से लेकर जोखिम प्रबंधन सर्वोत्तम शर्तों की प्राप्ति, बीमा पॉलिसी का स्थापन, बीमा पॉलिसी के संबंध में सेवा प्रदान करने तथा सर्वाधिक महत्वपूर्ण रूप से ग्राहकों के लिए दावे के समझौते में सहायता करने तक है।

**मिथक 6 - जोखिम प्रबंधन परामर्शदाताओं का काम है, बीमा दलालों का नहीं।**

**तथ्य:** बीमा दलाल जोखिम प्रबंधन के क्षेत्रों में वैश्विक रूप से सबसे बड़े खिलाड़ियों में से एक है तथा वे जोखिम प्रबंधन के संबंध में ग्राहकों को परामर्श देते हैं और उनके साथ घनिष्ठ रूप से कार्य करते हैं।

**मिथक 7 - बीमा दलाल बीमा बाजार के आधारणीय निम्न कीमत-निर्धारण के लिए जिम्मेदार हैं और उन्हें बीमाकर्ताओं के लिए कीमत बढ़ाने में मदद करनी चाहिए।**

**तथ्य:** चूंकि दलाल ग्राहक के लिए काम करता है, अतः उनकी भूमिका और कर्तव्य सर्वोत्तम संभव दरों पर सर्वाधिक संभव शर्तें प्राप्त करना है। बीमा कंपनियों के लिए जोखिम आधारित कीमत-निर्धारण मॉडल विकसित करने तथा ऐसी कीमतों के लिए 'नहीं' कहने की आवश्यकता है जो जोखिम-अंकन के सिद्धांतों के अनुसार नहीं हैं। सुदृढ़ जोखिम-अंकन को प्रोत्साहित करने के लिए बीमाकर्ताओं के फोकस को चाहिए कि वह उच्चतम पंक्ति से निम्नतम पंक्ति तक अग्रसर हो।

लेखक कंट्री प्रधान एवं मुख्य कार्यकारी अधिकारी, मार्श इंडिया इन्श्योरेंस ब्रोकर्स प्राइवेट लिमिटेड हैं।



## STATISTICS NON-LIFE INSURANCE

# Report Card : General

Gross Premium underwritten for and up to the month of March 2014

(₹ in Crores)

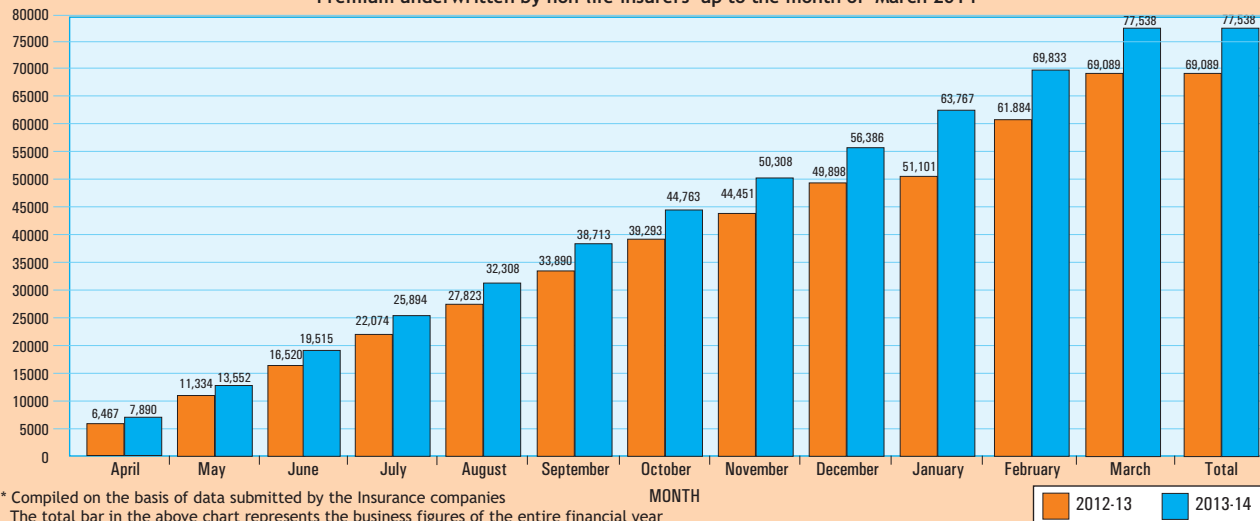
(%)

INSURER	MARCH		APRIL - MARCH		GROWTH OVER THE CORRESPONDENCE PREVIOUS YEAR
	2013-14	2012-13*	2013-14	2012-13*	
Royal Sundaram	120.21	153.80	1,437.00	1,561.09	-7.95
Tata-AIG	222.95	231.78	2,362.71	2,135.08	10.66
Reliance General	165.00	156.74	2,388.82	2,010.01	18.85
IFFCO-Tokio	339.11	240.74	2,930.92	2,570.18	14.04
ICICI-lombard	557.57	478.72	6,856.16	6,133.98	11.77
Bajaj Allianz	486.91	473.17	4,516.45	4,001.40	12.87
HDFC ERGO General	336.10	251.43	2,906.99	2,453.20	18.50
Cholamandalam	248.75	161.71	1,854.45	1,620.89	14.41
Future Generali	111.96	101.67	1,264.42	1,105.27	14.40
Universal Sampo	71.59	70.55	540.45	534.35	1.14
Shriram General	150.61	171.42	1,510.59	1,541.38	-2.00
Bharti AXA General	120.90	119.71	1,407.43	1,218.43	15.51
Raheja QBE	1.61	1.75	23.28	21.26	9.51
SBI General	146.76	117.68	1,187.57	770.85	54.06
L&T General	31.82	36.38	252.82	182.07	38.86
Magma HDI	47.81	28.39	424.93	95.14	346.64
Liberty	22.17	1.33	129.82	2.19	NA
Star Health & Allied Insurance	152.65	119.82	1,097.21	860.22	27.55
Apollo MUNICH	93.88	72.34	692.48	619.99	11.69
Max BUPA	42.29	32.01	308.85	207.22	49.05
Religare	11.55	5.80	152.31	38.80	292.59
Cigna TTK	0.29	NA	0.34	NA	NA
<b>New India</b>	<b>1,222.95</b>	<b>1,081.47</b>	<b>11,523.04</b>	<b>10,037.95</b>	<b>14.79</b>
<b>National</b>	<b>1,155.74</b>	<b>1,026.32</b>	<b>10,244.43</b>	<b>9,165.73</b>	<b>11.77</b>
<b>United India</b>	<b>954.83</b>	<b>954.60</b>	<b>9,705.69</b>	<b>9,266.04</b>	<b>4.74</b>
<b>Oriental</b>	<b>670.05</b>	<b>700.43</b>	<b>7,131.28</b>	<b>6,543.51</b>	<b>8.98</b>
<b>ECGC</b>	<b>160.64</b>	<b>132.43</b>	<b>1,303.85</b>	<b>1,157.22</b>	<b>12.67</b>
<b>AIC</b>	<b>258.11</b>	<b>226.57</b>	<b>3,383.95</b>	<b>3,235.25</b>	<b>4.60</b>
<b>PRIVATE TOTAL</b>	<b>3,482.50</b>	<b>3,026.95</b>	<b>34,246.01</b>	<b>29,682.99</b>	<b>15.37</b>
<b>PUBLIC TOTAL</b>	<b>4,422.32</b>	<b>4,121.83</b>	<b>43,292.24</b>	<b>39,405.70</b>	<b>9.86</b>
<b>GRAND TOTAL</b>	<b>7,904.83</b>	<b>7,148.78</b>	<b>77,538.25</b>	<b>69,088.69</b>	<b>12.23</b>

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

\* Figures revised by insurance companies

Premium underwritten by non-life insurers up to the month of March 2014



# **Statistical Supplement**

(Monthly - February, 2014)



Name of the Insurer: *Bajaj Allianz General Insurance Company Limited*

## BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	3125.92	32498.49	34642.00	349999.00	-108.24	2482.07	26127884.00	241112514.00
Previous year	3234.16	30016.42	27411.00	325368.00	72.83	4568.48	51749269.00	623813956.00
Marine Cargo	761.71	10496.69	11407.00	129614.00	218.94	1844.31	979765.00	35631231.00
Previous year	542.77	8652.37	11169.00	129256.00	-26.32	594.39	22350140.00	154461072.00
Marine Hull (Including Onshore & Offshore oil energy)	65.52	975.65	4.00	35.00	65.00	829.91	82.00	8085937.00
Previous year	0.52	145.74	1.00	21.00	-9.41	246.33	26.00	8631014.00
Marine (Total)	827.23	11472.33	11411	129649	283.94	2674.22	979847.00	43717168.00
Previous year (Total)	543.29	8798.11	11170	129277	-35.73	840.72	22350166.00	163092086.00
Aviation	134.59	715.52	7.00	65.00	89.67	18.06	161047.00	3301383.00
Previous year	44.91	697.46	13.00	63.00	-474.61	-1906.25	691081.00	11837084.00
Engineering	1089.72	11276.93	1078.00	10638.00	349.95	-807.67	1803058.00	16418676.00
Previous year	739.76	12084.60	1522.00	12099.00	-129.89	994.46	18628511.00	192561363.00
Motor Own Damage	14637.57	167077.85	304423.00	3400584.00	444.57	15226.81	795488.00	9061281.00
Previous year	14193.00	151851.03	296329.00	3243372.00	1800.16	24371.05	972107.00	10283340.00
Motor Third party	6787.43	73958.06	318132.00	3530193.00	966.67	12875.84		
Previous year	5820.76	61082.23	309246.00	3361698.00	1386.42	14468.49		
Motor (Total)	21425.01	241035.91	318132	3530193	1411.25	28102.65	795488.00	9061281.00
Previous year (Total)	20013.76	212933.26	309246	3361698	3186.58	38839.54	972107.00	10283340.00
Workmen's compensation / Employer's liability	240.11	3156.41	1496.00	16966.00	16.09	263.71	40395.00	441100.00
Previous year	224.02	2892.70	1301.00	15564.00	-23.85	114.10	44464.00	763778.00
Public Liability	4.82	81.16	12.00	175.00	1.71	20.63	16789.00	209170.00
Previous year	3.10	60.52	11.00	142.00	-0.51	-0.38	14334.00	232985.00
Product Liability	110.39	2324.42	48.00	545.00	44.20	399.37	48984.00	1182041.00
Previous year	66.19	1925.05	33.00	406.00	6.99	476.94	85229.00	1125663.00
Other Liability Covers	386.03	10282.65	223.00	3015.00	75.13	1345.99	143358.00	3572536.00
Previous year	310.90	8936.67	185.00	2486.00	20.57	1962.41	341933.00	5499166.00
Liability (Total)	741.35	15844.64	1779	20701	137.13	2029.70	249526.00	5404847.00
Previous year (Total)	604.22	13814.94	1530	18598	3.20	2553.07	485960.00	7621592.00
Personal Accident	413.58	4785.65	73816.00	571150.00	90.77	-364.78	347423.00	6715864.00
Previous year	322.81	5150.43	50540.00	466551.00	-157.51	-134.03	3249596.00	34027290.00
Medical Insurance	3701.51	59976.16	38796.00	361913.00	-666.09	14628.16	511375.00	5047401.00
Previous year	4367.59	45348.00	70872.00	359756.00	1478.87	13904.45	8978449.00	46455623.00
Overseas Medical Insurance	561.94	7648.22	25154.00	363005.00	118.67	901.98	69382.00	3173684.00
Previous year	443.27	6746.24	26407.00	360717.00	54.95	857.04	1615107.00	8304337.00
Health (Total)	4263.45	67624.38	63950	724918	-547.41	15530.14	580757.00	8221085.00
Previous year (Total)	4810.86	52094.23	97279	720473	1533.83	14761.49	10593556.00	54759960.00
Crop Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Credit Guarantee	-2.58	843.49	0.00	30.00	-7.01	205.44	0.00	2699196.00
Previous year	4.43	638.05	0.00	26.00	-41.85	-409.35	86308.00	7229068.00
All Other Miscellaneous	1533.42	16856.18	138250.00	643619.00	159.02	259.87	4060201.00	22493230.00
Previous year	1374.40	16596.31	57093.00	521217.00	-297.42	31.18	3350704.00	32485795.00
<b>Grand Total</b>	<b>33551.67</b>	<b>402953.52</b>	<b>643065</b>	<b>5980962</b>	<b>1859.07</b>	<b>50129.71</b>	<b>35105231.00</b>	<b>359145244.00</b>
Previous year (Total)	<b>31692.60</b>	<b>352823.81</b>	<b>555804</b>	<b>5555370</b>	<b>3659.42</b>	<b>60139.32</b>	<b>112157258.00</b>	<b>1137711534.00</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
166.36	2761.12	2587.00	27447.00	0.00	0.00	0.00	0.00		
106.18	1920.94	2531.00	26846.00	0.00	0.00	0.00	0.00		
18.72	402.24	875.00	8805.00	0.00	0.00	0.00	0.00		
32.04	356.11	858.00	8807.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
18.72	402.24	875	8805	0.00	0.00	0	0	0	0
32.04	356.11	858	8807	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		
63.04	799.39	151.00	1710.00	0.00	0.00	0.00	0.00		
59.27	934.95	350.00	2437.00	0.00	0.00	0.00	0.00		
1072.66	12719.29	460.00	6100.00	0.00	0.00	0.00	0.00		
1157.48	12315.36	637.00	46333.00	0.00	0.00	0.00	0.00		
577.74	6485.84	35795.00	386100.00	0.00	0.00	0.00	0.00		
538.79	5610.52	34935.00	319666.00	0.00	0.00	0.00	0.00		
1650.40	19205.13	35795	386100	0.00	0.00	0	0	0	0
1696.27	17925.88	34935	319666	0.00	0.00	0	0	0	0
34.36	430.68	299.00	3125.00	0.00	0.00	0.00	0.00		
32.86	383.74	265.00	2827.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
13.16	617.40	25.00	338.00	0.00	0.00	0.00	0.00		
13.88	446.39	27.00	271.00	0.00	0.00	0.00	0.00		
47.51	1048.08	324	3463	0.00	0.00	0	0	0	0
46.75	830.13	292	3098	0.00	0.00	0	0	0	0
29.59	374.92	8402.00	50743.00	14.42	143.43	33845.00	332249.00		
33.84	449.88	6535.00	53976.00	14.57	99.20	29290.00	292406.00		
268.34	3920.60	4016.00	36785.00	0.00	0.00	0.00	0.00	111020.00	1228495.00
255.06	3385.88	6110.00	31848.00	0.00	0.00	0.00	0.00	160499.00	1389601.00
46.53	678.47	2646.00	29536.00	0.00	0.00	0.00	0.00	0.00	0.00
43.05	532.74	1529.00	21482.00	0.00	0.00	0.00	0.00	0.00	0.00
314.87	4599.06	6662	66321	0.00	0.00	0	0	111020	1228495
298.11	3918.62	7639	53330	0.00	0.00	0	0	160499	1389601
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
95.59	1122.76	12112.00	48842.00	0.00	0.00	0.00	0.00		
81.12	1113.59	5300.00	49924.00	0.00	0.00	0.00	0.00		
<b>2386.08</b>	<b>30312.70</b>	<b>66908</b>	<b>593431</b>	<b>14.42</b>	<b>143.43</b>	<b>33845</b>	<b>332249</b>	<b>111020</b>	<b>1228495</b>
<b>2353.58</b>	<b>27450.09</b>	<b>58440</b>	<b>518084</b>	<b>14.57</b>	<b>99.20</b>	<b>29290</b>	<b>292406</b>	<b>160499</b>	<b>1389601</b>



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	271.00	7379.62	937.00	12494.00	271.00	7108.62	2910148.77	32281747.53
Previous year	184.24	4946.54	1235.00	17410.00	184.24	4762.30	717047.07	11121470.50
Marine Cargo	189.42	3143.08	191.00	2986.00	189.42	2953.66	2062866.04	15939615.40
Previous year	120.98	2058.25	302.00	3064.00	120.98	1937.27	1346728.87	6348079.56
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	189.42	3143.08	191	2986	189.42	2953.66	2062866.04	15939615.40
Previous year (Total)	120.98	2058.25	302	3064	120.98	1937.27	1346728.87	6348079.56
Aviation								
Previous year								
Engineering	110.25	3152.46	281.00	3797.00	110.25	3042.21	299444.44	4516808.42
Previous year	300.76	2445.25	339.00	2705.00	300.76	2144.49	265291.47	1626804.41
Motor Own Damage	6001.24	65807.04	138125.00	1497593.00	6001.24	59805.80	529655.08	6046606.13
Previous year	5680.80	56252.85	111071.00	943710.00	5680.80	50572.05	546917.34	5893858.26
Motor Third party	2303.29	28890.12	138125.00	1497593.00	2303.29	26586.83		
Previous year	2286.86	20330.33	111071.00	943710.00	2286.86	18043.48		
Motor (Total)	8304.52	94697.15	138125	1497593	8304.52	86392.63	529655.08	6046606.13
Previous year (Total)	7967.66	76583.19	111071	943710	7967.66	68615.53	546917.34	5893858.26
Workmen's compensation / Employer's liability	59.46	637.65	244	2391	59.46	578.19	15378	158753
Previous year	52.63	421	174	1369	52.63	368.47	218689	306035
Public Liability	1	9	1	29	0.74	8.47		
Previous year	1	8.01	1	20.00	1.10	6.91		
Product Liability					0.00	0.00	0	0
Previous year							0	0
Other Liability Covers	57	921	47	504	57.14	864.05	26839	449791
Previous year	30	572	23	319	29.74	542.17	24271	218629
Liability (Total)	117.34	1568.05	292	2924	117.34	1450.71	42216.59	608544.19
Previous year (Total)	83.47	1001.02	198	1708	83.47	917.55	242959.92	524664.56
Personal Accident	115.42	2225.93	1034.00	11120.00	115.42	2110.51	11772659.11	54981196.94
Previous year	143.32	2600.39	818.00	9918.00	143.32	2457.08	10765758.14	19996060.48
Medical Insurance	1049.41	14903.89	1798.00	16678.00	1049.41	13854.48	12822.51	182558.90
Previous year	1237.79	18959.42	1702.00	16036.00	1237.79	17721.63	10872.19	106937.12
Overseas Medical Insurance								
Previous year								
Health (Total)	1049.41	14903.89	1798	16678	1049.41	13854.48	12822.51	182558.90
Previous year (Total)	1237.79	18959.42	1702	16036	1237.79	17721.63	10872.19	106937.12
Crop Insurance								
Previous year								
Credit Guarantee	20	174	1	4	19.80	154.69	0	0
Previous year	8	139	1	3	8.17	130.94		
All Other Miscellaneous	114.69	1402.52	687.00	10244.00	114.69	1287.83	475420.61	2876550.77
Previous year	75.95	1138.01	1149.00	15691.00	75.95	1062.07	234215.42	2287256.80
<b>Grand Total</b>	<b>10291.85</b>	<b>128647.18</b>	<b>143346</b>	<b>1557840</b>	<b>10291.85</b>	<b>118355.34</b>	<b>18105233.15</b>	<b>117433628.28</b>
Previous year (Total)	<b>10122.33</b>	<b>109871.18</b>	<b>116815</b>	<b>1010245</b>	<b>10122.33</b>	<b>99748.85</b>	<b>14129790.42</b>	<b>47905131.69</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
12.32	636.60	498.00	4203.00						
15.04	202.43	815.00	13115.00						
86.11	385.16	6.00	312.00						
0.48	3.55	5.00	35.00						
86.11	385.16	6	312	0.00	0.00	0	0	0	0
0.48	3.55	5	35	0.00	0.00	0	0	0	0
3.29	149.47	20.00	485.00						
5.04	47.49	27.00	199.00						
314.97	5585.90	6326.00	171712.00						
437.17	3435.36	5913.00	62799.00						
155.63	3534.72		0.00						
	1239.70		0.00	0.00					
470.60	9120.63	6326	171712	0.00	0.00	0	0	0	0
437.17	4675.06	5913	62799	0.00	0.00	0	0	0	0
1.04	64.53	12.00	252.00						
1.98	15	3.00	26.00						
0.00	1.01	0.00	3.00						
0.00	0.53	0.00	1.00						
	0.00								
0.00	9.23	0.00	20.00						
0.00	3.93	0.00	5						
1.04	74.77	12	275	0.00	0.00	0	0	0	0
1.98	19.70	3	32	0.00	0.00	0	0	0	0
4.48	136.06	43.00	788.00	0.00	53.45	0	874631		
4.66	392.38	56.00	769.00						
0.97	310.55	25.00	1036.00						
17.54	243.41	12.00	293.00						
0.97	310.55	25	1036	0.00	0.00	0	0	0	0
17.54	243.41	12	293	0.00	0.00	0	0	0	0
0	0	0.00	0.00						
	0								
4.52	101.43	359.00	3874.00						
8.21	139.90	749.00	11635.00						
<b>583.33</b>	<b>10914.67</b>	<b>7289</b>	<b>182685</b>	<b>0.00</b>	<b>53.45</b>	<b>0</b>	<b>874631</b>	<b>0</b>	<b>0</b>
<b>490.12</b>	<b>5723.94</b>	<b>7580</b>	<b>88877</b>	<b>0.00</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



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	865.3	9,797.1	17,188	157,534	310.0	1,281.4	4,748,077	29,026,190
Previous year	555.3	8,515.7	10,275	134,794	41.8	1,944.4	862,531	24,357,811
Marine Cargo	354.7	6,072.9	371	4,864	(3.6)	1,217.6	9,802,928	46,048,405
Previous year	358.3	4,855.3	49	5,186	155.2	377.6	2,327,399	30,650,052
Marine Hull (Including Onshore & Offshore oil energy)	-	1.1	-	3	-	-	-	109
Previous year	-	1.1	-	3	-	1.1	-	109
Marine (Total)	354.7	6,074.0	371	4,867	(3.6)	1,217.6	9,802,928	46,048,514
Previous year (Total)	358.3	4,856.3	49	5,189	155.2	378.6	2,327,399	30,650,161
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	234.2	2,570.0	781	9,699	(454.0)	(449.5)	611,406	4,180,421
Previous year	688.3	3,019.5	412	8,636	505.7	764.7	799,408	4,871,018
Motor Own Damage	5,007.2	57,773.2	67,767	770,637	(320.4)	4,103.1	365,332	4,105,299
Previous year	5,327.6	53,670.1	69,472	709,457	765.6	5,540.0	373,278	3,670,712
Motor Third party	5,511.5	55,624.3	74,067	803,024	1,070.4	13,044.7	-	-
Previous year	4,441.1	42,579.7	70,459	716,191	1,437.6	10,892.1	-	-
Motor (Total)	10,518.7	113,397.6	74,067	803,024	750.0	17,147.8	365,332	4,105,299
Previous year (Total)	9,768.6	96,249.8	70,459	716,191	2,203.2	16,432.1	373,278	3,670,712
Workmen's compensation / Employer's liability	44.0	449.1	205	2,165	(1.8)	(154.3)	8,651	98,791
Previous year	45.8	603.5	174	2,665	(19.7)	(70.0)	6,982	135,198
Public Liability	204.1	933.3	75	669	189.9	426.0	35,787	211,852
Previous year	14.2	507.3	24	724	3.2	(211.5)	5,156	130,091
Product Liability	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Other Liability Covers	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Liability (Total)	248.1	1,382.4	280	2,834	188.1	271.7	44,437	310,643
Previous year (Total)	60.0	1,110.8	198	3,389	(16.5)	(281.5)	12,137	265,289
Personal Accident	451.7	5,498.3	2,233	25,561	(5.2)	706.2	1,356,818	6,154,052
Previous year	457.0	4,792.2	1,506	17,015	90.6	562.7	230,029	4,122,703
Medical Insurance	884.9	17,686.2	9,346	77,374	(96.5)	(7,314.2)	129,552	1,045,740
Previous year	981.4	25,000.3	7,123	53,554	(550.4)	2,889.8	129,628	903,856
Overseas Medical Insurance	28.7	542.2	664	14,665	(9.7)	19.6	1,485	28,161
Previous year	38.4	522.6	851	15,766	(7.7)	(115.4)	1,271	28,354
Health (Total)	913.7	18,228.4	10,010	92,039	(106.2)	(7,294.6)	131,037	1,073,902
Previous year (Total)	1,019.8	25,523.0	7,974	69,320	(558.1)	2,774.3	130,900	932,210
Crop Insurance	-	2,516.4	-	94	-	1,637.3	-	30,536
Previous year	-	879.1	-	305	(7.1)	455.7	-	8,855
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	87.2	1,105.0	3,267	38,159	19.8	133.6	339,367	3,783,085
Previous year	67.4	971.4	2,913	38,716	(5.8)	14.5	207,193	3,373,593
<b>Grand Total</b>	<b>13,673.7</b>	<b>160,569.2</b>	<b>108,197</b>	<b>1,133,811</b>	<b>699.0</b>	<b>14,651.5</b>	<b>17,399,402.9</b>	<b>94,712,641.2</b>
Previous year (Total)	<b>12,974.7</b>	<b>145,917.7</b>	<b>93,786</b>	<b>993,555</b>	<b>2,409.0</b>	<b>23,045.5</b>	<b>4,942,875.1</b>	<b>72,252,350.8</b>

\*Wherever applicable







Name of the Insurer: Future Generali 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	581.72	10909.76	3120	34825	39.58	1108.53	1671037.04	29379872.58
Previous year	542.14	9801.23	2383	28694	46.58	2152.83	1107050.98	19658494.52
Marine Cargo	265.60	4918.16	833	10636	-19.27	102.33	309631.18	14121266.67
Previous year	284.87	4815.82	1032	10534	10.71	1142.21	307965.80	13398919.92
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)	265.60	4918.16	833	10636	-19.27	102.33	309631.18	14121266.67
Previous year (Total)	284.87	4815.82	1032	10534	10.71	1142.21	307965.80	13398919.92
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	294.51	3487.02	752	6978	18.95	256.62	145631.44	2347302.03
Previous year	275.56	3230.41	665	6292	41.10	719.52	105843.73	1734805.92
Motor Own Damage	4344.31	44490.17	57635	590957	754.61	6100.00	240769.65	2482471.15
Previous year	3589.70	38390.17	48472	540334	541.46	6815.57	200519.76	2168672.72
Motor Third party	1783.82	18435.11	239	1329	372.16	1377.30		
Previous year	1411.66	17057.81	48535	541092	-162.47	661.70		
Motor (Total)	6128.13	62925.28	57635	590957	1126.78	7477.29	240769.65	2482471.15
Previous year (Total)	5001.35	55447.99	48535	541092	378.99	7477.27	200519.76	2168672.72
Workmen's compensation / Employer's liability	161.99	1863.49	827	10172	25.87	408.60	21839.34	303917.12
Previous year	136.11	1454.88	753	7653	24.74	365.06	17994.67	219297.94
Public Liability	0.70	19.97	2	107	0.70	19.97	1000.00	31257.89
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Product Liability	54.01	1308.25	133	1644	-18.04	33.91	16753.61	429493.37
Previous year	72.04	1274.34	119	1573	-38.40	234.25	18521.81	356750.28
Other Liability Covers	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00		0.00	0.00
Liability (Total)	216.69	3191.70	962	11923	8.54	462.48	39592.95	764668.38
Previous year (Total)	208.15	2729.22	872	9226	-13.66	599.31	36516.48	576048.22
Personal Accident	347.15	4696.99	9339	86355	27.94	-1233.89	384160.46	35381490.37
Previous year	319.21	5930.88	6171	71698	98.48	1649.57	368526.10	17785041.78
Medical Insurance	681.70	11603.24	2733	22813	-20.96	-441.67	26034.23	454318.79
Previous year	702.66	12044.91	2100	20108	-11.27	680.69	21091.55	524156.48
Overseas Medical Insurance	68.28	1022.13	3172	48752	-4.40	63.08	40768.01	814882.33
Previous year	72.68	959.05	3752	53452	2.62	57.81	72740.57	407513.39
Health (Total)	749.97	12625.37	5905	71565	-25.36	-378.59	66802.24	1269201.12
Previous year (Total)	775.34	13003.96	5852	73560	-8.65	738.50	93832.12	931669.87
Crop Insurance	610.88	6535.77	66	1268	610.88	6535.77	9471.19	77210.41
Previous year	0.00	0.00	0.00	0.00	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	381.97	5956.22	5065	56523	69.97	555.15	388274.78	7851235.36
Previous year	312.00	5401.07	3945	48358	40.58	2410.35	304951.55	6277362.37
<b>Grand Total</b>	<b>9576.62</b>	<b>115246.27</b>	<b>83677</b>	<b>871030</b>	<b>1858.01</b>	<b>14885.69</b>	<b>3255370.94</b>	<b>93674718.08</b>
Previous year (Total)	<b>7718.62</b>	<b>100360.59</b>	<b>69455</b>	<b>789454</b>	<b>594.12</b>	<b>16889.57</b>	<b>2525206.51</b>	<b>62531015.32</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
22.47	1,085.77	271	2719						
19.98	939.43	181	2,617						
10.07	369.51	50	757						
15.70	622.24	95	807						
-	-	-	-						
-	-	-	-						
10.07	369.51	50	757	0.00	0.00	0	0		
15.70	622.24	95	807	0.00	0.00	0	0		
-	-	-	-						
-	-	-	-						
28.80	259.40	60	608						
14.79	265.38	65	548						
355.41	3,515.51	4813	47731						
304.99	3,105.40	4,213	45,475						
166.71	1,687.93	-	-						
137.80	1,652.49	-	-						
522.12	5,203.44	4,813	47,731	0.00	0.00	0	0		
442.79	4,757.90	4,213	45,475	0.00	0.00	0	0		
7.40	106.73	45	469						
5.57	100.23	39	395						
		-	-						
		-	-						
7.34	66.95	10	133						
5.10	51.10	8	104						
		-	-						
		-	-						
14.74	173.68	55	602	0.00	0.00	0	0		
10.67	151.33	47	499	0.00	0.00	0	0		
12.16	168.61	773	6129	0.39	50.18	855	104,096		
7.21	154.18	562	6,493						
14.39	179.28	115	1156					23469	361196
5.10	140.80	107	1,087						
4.53	55.77	178	2661						
3.38	49.12	303	2,997						
18.92	235.04	293	3,817	0.00	0.00	0	0	23469	361196
8.48	189.92	410	4,084	0.00	0.00	0	0	0	0
-	-	-	-						
-	-	-	-						
-	-	-	-						
-	-	-	-						
459.20	3,638.81	702	8179						
119.75	1,673.85	2,484	28,796						
<b>1,088.48</b>	<b>11,134.25</b>	<b>7,017</b>	<b>70,542</b>	<b>0.39</b>	<b>50.18</b>	<b>855</b>	<b>104096</b>	<b>23469</b>	<b>361196</b>
<b>639.37</b>	<b>8,754.23</b>	<b>8,057</b>	<b>89,319</b>	<b>0.00</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



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	1,594.98	26,246.15	5,471	62,437	399.62	1,709.01	3,080,815.93	58,639,292.59
Previous year	1,195.36	24,537.14	5,119	50,467	319.07	2,722.82	1,987,899.68	56,181,349.34
Marine Cargo	416.18	6,620.11	690	4,556	258.22	1,067.28	1,227,215.46	25,434,376.63
Previous year	157.96	5,552.83	261	3,006	(32.24)	1,768.13	507,134.81	22,941,249.68
Marine Hull (Including Onshore & Offshore oil energy)	4.29	1,460.71	2	157	(51.54)	38.50	96.98	905,820.03
Previous year	55.83	1,422.21	12	389	(25.96)	(421.36)	26,185.43	776,721.52
Marine (Total)	420.47	8,080.83	692	4,713	206.67	1,105.78	1,227,312.44	26,340,196.66
Previous year (Total)	213.79	6,975.05	273	3,395	(58.19)	1,346.77	533,320.24	23,717,971.20
Aviation	(74.99)	2,187.51	10	72	(56.87)	(273.17)	405,200.00	5,138,956.90
Previous year	(18.12)	2,460.68	1	50	(18.16)	209.55	-	3,393,499.11
Engineering	432.56	6,435.51	337	4,071	1.93	(159.72)	112,224.17	2,484,876.00
Previous year	430.63	6,595.23	472	4,797	(101.33)	412.54	276,895.85	1,999,942.21
Motor Own Damage	5,647.75	55,989.77	75,669	755,634	694.69	8,323.89	398,408.88	3,828,150.82
Previous year	4,953.07	47,665.88	65,468	653,246	908.02	8,889.00	327,394.43	3,104,968.08
Motor Third party	3,597.85	32,106.22	142,186	1,403,985	1,133.92	8,902.12	-	-
Previous year	2,463.92	23,204.10	125,562	1,208,892	314.20	2,951.55	-	-
Motor (Total)	9,245.60	88,095.99	142,186	1,403,985	1,828.61	17,226.01	398,408.88	3,828,150.82
Previous year (Total)	7,416.99	70,869.98	125,562	1,208,892	1,222.22	11,840.54	327,394.43	3,104,968.08
Workmen's compensation / Employer's liability	55.13	701.92	115	1,158	(37.67)	14.14	38,488.76	282,912.16
Previous year	92.79	687.78	133	970	27.65	201.03	19,246.46	192,677.62
Public Liability	9.17	114.00	21	182	2.89	(74.93)	9,662.32	107,114.66
Previous year	6.27	188.93	15	179	0.56	49.86	5,139.25	133,790.36
Product Liability	23.48	78.78	5	23	21.63	(380.73)	6,136.29	27,672.19
Previous year	1.85	459.51	1	26	7.22	224.85	900.00	30,690.00
Other Liability Covers	564.90	10,076.61	113	1,301	156.67	1,348.24	214,887.43	2,821,670.28
Previous year	408.23	8,728.37	87	1,189	95.67	142.62	138,841.83	2,263,649.54
Liability (Total)	652.67	10,971.32	254	2,664	143.52	906.72	269,174.80	3,239,369.29
Previous year (Total)	509.15	10,064.60	236	2,364	131.09	618.36	164,127.54	2,620,807.52
Personal Accident	2,805.43	26,927.44	110,922	1,269,778	453.53	3,660.26	1,362,894.61	23,664,760.50
Previous year	2,351.90	23,267.18	146,485	1,343,473	656.08	6,497.86	2,256,397.91	41,812,343.79
Medical Insurance	3,244.67	53,810.89	35,237	377,635	(645.05)	7,223.76	115,532.40	2,000,220.81
Previous year	3,889.72	46,587.13	36,869	431,153	729.23	10,155.60	161,185.43	1,797,622.63
Overseas Medical Insurance	231.19	2,916.76	1,757	20,394	(34.86)	729.23	689,119.21	25,063,200.90
Previous year	266.05	2,187.53	1,140	13,024	230.21	726.49	2,255,863.43	24,190,435.41
Health (Total)	3,475.86	56,727.65	36,994	398,029	(679.91)	7,952.99	804,651.61	27,063,421.70
Previous year (Total)	4,155.77	48,774.66	38,009	444,177	959.44	10,882.09	2,417,048.87	25,988,058.04
Crop Insurance	8.00	2,141.42	-	64	(128.59)	1,311.43	304.99	63,578.27
Previous year	136.60	829.99	4	11	112.20	805.59	6,132.66	18,481.65
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	7,547.76	29,274.40	225	3,036	3,579.07	3,472.01	223,010.48	4,754,970.67
Previous year	3,968.70	25,802.39	273	5,155	2,613.23	21,760.37	174,276.13	4,076,598.04
<b>Grand Total</b>	<b>26,108.35</b>	<b>257,088.22</b>	<b>297,091</b>	<b>3,148,849</b>	<b>5,747.59</b>	<b>36,911.32</b>	<b>7,883,997.91</b>	<b>155,217,573.40</b>
Previous year (Total)	<b>20,360.77</b>	<b>220,176.90</b>	<b>316,434</b>	<b>3,062,781</b>	<b>5,835.64</b>	<b>57,096.49</b>	<b>8,143,493.31</b>	<b>162,914,018.97</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
91.05	1,416.34	492	5,032	-	-	-	-		
52.07	1,086.99	366	3,432	-	-	-	-		
14.92	547.63	83	410	-	-	-	-		
6.92	137.60	28	328	-	-	-	-		
-	60.65	-	3	-	-	-	-		
-	58.11	-	10	-	-	-	-		
14.92	608.28	83	413	-	-	-	-	-	-
6.92	195.71	28	338	-	-	-	-	-	-
-	82.90	-	7	-	-	-	-		
-	9.83	-	1	-	-	-	-		
47.63	412.42	63	580	-	-	-	-		
32.51	387.74	63	785	-	-	-	-		
749.55	6,188.17	10,288	92,205	-	-	-	-		
522.72	4,604.14	7,325	66,261	-	-	-	-		
707.03	5,556.68	27,773	247,969	-	-	-	-		
418.13	3,610.12	23,295	188,181	-	-	-	-		
1,456.58	11,744.85	27,773	247,969	-	-	-	-	-	-
940.85	8,214.26	23,295	188,181	-	-	-	-	-	-
3.43	62.51	9	71	-	-	-	-		
0.80	36.84	4	57	-	-	-	-		
0.52	4.93	2	12	-	-	-	-		
1.39	3.21	2	7	-	-	-	-		
3.83	7.08	1	3	-	-	-	-		
-	3.28	-	2	-	-	-	-		
23.55	628.58	8	57	-	-	-	-		
22.23	163.41	5	53	-	-	-	-		
31.33	703.10	20	143	-	-	-	-	-	-
24.41	206.74	11	119	-	-	-	-	-	-
249.32	2,072.94	12,945	124,984	-	105.50	-	144,962		
191.84	1,867.08	13,949	122,743	-	66.23	-	79,149		
207.67	2,654.42	2,436	22,480	-	-	-	-	121,959	3,428,052
181.04	2,886.85	2,177	24,217	-	-	-	-	443,289	2,589,839
1.15	13.60	43	565	-	-	-	-	123,480	1,374,739
0.32	6.22	20	274	-	-	-	-	93,098	983,324
208.82	2,668.02	2,479	23,045	-	-	-	-	245,439	4,802,791
181.36	2,893.07	2,197	24,491	-	-	-	-	536,387	3,573,163
0.81	341.13	-	-	-	-	-	-		
-	297.78	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
2,593.32	11,591.82	15	167	-	-	-	-		
861.28	20,408.48	18	257	-	-	-	-		
<b>4,693.78</b>	<b>31,641.79</b>	<b>43,870</b>	<b>402,340</b>	-	<b>105.50</b>	-	<b>144,962</b>	<b>245,439</b>	<b>4,802,791</b>
<b>2,291.24</b>	<b>35,567.69</b>	<b>39,927</b>	<b>340,347</b>	-	<b>66.23</b>	-	<b>79,149</b>	<b>536,387</b>	<b>3,573,163</b>



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	3,279.90	45,855.50	2,427	25,429	787.15	10,422.12	4,988,386	75,243,454
Previous year	2,492.75	35,433.38	2,025	24,114	1,265.27	6,908.50	4,272,072	56,750,190
Marine Cargo	1,290.98	18,371.49	1,368	16,670	234.99	3,340.07	5,044,974	70,959,369
Previous year	1,055.98	15,031.41	1,293	11,505	(87.47)	2,646.14	3,728,216	55,753,341
Marine Hull (Including Onshore & Offshore oil energy)	284.88	5,843.04	9	127	(140.19)	(621.91)	15,050	2,035,210
Previous year	425.07	6,464.95	9	129	399.34	(429.10)	39,060	1,614,682
Marine (Total)	1575.86	24214.52	1377	16797	94.80	2718.16	5060023.31	72994578.95
Previous year (Total)	1481.05	21496.36	1302	11634	311.87	2217.05	3767276.95	57368022.62
Aviation	130.88	3,997.03	13	147	(4.77)	(2,573.01)	350,233	5,633,529
Previous year	135.65	6,570.04	9	151	13.75	(5,044.22)	149,587	5,357,725
Engineering	1,429.53	16,941.77	1,035	8,983	(588.34)	(963.76)	910,225	9,395,528
Previous year	2,017.87	17,905.53	711	7,118	811.08	1,351.74	1,178,115	10,509,062
Motor Own Damage	16,072.80	190,192.57	745,207	8,072,970	307.97	23,834.13	2,294,392	25,797,269
Previous year	15,764.83	166,358.44	605,830	6,418,535	1,384.23	32,262.36	2,055,683	21,321,810
Motor Third party	8,984.92	104,444.37	755,169	8,185,685	997.57	25,804.00		
Previous year	7,987.35	78,640.38	615,182	6,518,800	1,891.34	21,797.40		
Motor (Total)	25057.72	294636.94	755169	8185685	1305.54	49638.13	2294392.19	25797269.37
Previous year (Total)	23752.19	244998.81	615182	6518800	3275.57	54059.75	2055683.27	21321809.64
Workmen's compensation / Employer's liability	284.19	3,572.61	1,246	11,316	58.60	340.69	52,137	762,073
Previous year	225.59	3,231.92	812	8,190	48.40	600.41	32,402	611,792
Public Liability	2.23	52.48	9	145	0.30	1.68	2,058	70,916
Previous year	1.93	50.80	7	137	1.05	11.39	2,240	85,541
Product Liability	24.28	213.85	8	59	(10.47)	13.53	5,933	55,319
Previous year	34.75	200.31	11	61	4.95	(13.76)	8,731	53,958
Other Liability Covers	455.15	10,670.32	214	2,449	(37.34)	384.20	133,528	3,245,732
Previous year	492.49	10,286.12	202	2,228	158.77	121.42	122,473	2,342,904
Liability (Total)	765.86	14509.26	1477	13969	11.10	740.10	193655.62	4134039.62
Previous year (Total)	754.76	13769.16	1032	10616	213.16	719.46	165845.67	3094195.70
Personal Accident	1,786.25	18,471.90	31,011	457,933	430.08	2,924.80	1,592,186	27,692,928
Previous year	1,356.17	15,547.10	44,271	536,356	202.44	2,698.62	1,704,733	22,982,555
Medical Insurance	8,575.96	139,990.72	50,220	548,349	(730.46)	(7,034.27)	364,217	6,505,518
Previous year	9,306.42	147,024.98	43,819	381,531	2,504.40	11,646.41	460,425	6,074,744
Overseas Medical Insurance	490.84	8,071.42	80,530	878,100	60.78	1,397.15	1,496,239	16,486,254
Previous year	430.06	6,674.27	67,308	779,515	40.40	803.68	1,301,584.68	20,611,434
Health (Total)	9066.80	148062.14	130750	1426449	-669.69	-5637.12	1860455.27	22991772.05
Previous year (Total)	9736.49	153699.26	111127	1161046	2544.80	12450.09	1762009.35	26686178.35
Crop Insurance	7,006	47,568.20	9	1,444	462	4,324.48	92,704	553,062
Previous year	6,544.21	43,243.72	377	1,906	(1,886.23)	14,400.20	229,989	678,940
Credit Guarantee	157.31	2,463.23	3	71	74.15	700.54	6,290	119,151
Previous year	83.17	1,762.69	4	62	15.31	107.41	4,360	99,550
All Other Miscellaneous	1,461.35	13,138.78	7,369	100,715	174.49	2,038.04	18,354,607	44,784,146
Previous year	1,286.86	11,100.74	7,985	78,245	289.91	2,219.31	1,765,760	29,166,700
<b>Grand Total</b>	<b>51717.94</b>	<b>629859.28</b>	<b>930640</b>	<b>10237622</b>	<b>2076.77</b>	<b>64332.47</b>	<b>35703158.58</b>	<b>289339457.18</b>
Previous year (Total)	<b>49641.16</b>	<b>565526.80</b>	<b>784025</b>	<b>8350048</b>	<b>7056.94</b>	<b>92087.93</b>	<b>17055430.18</b>	<b>234014928.48</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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	0.00	-	-	-	0.00	-	-	-	-
0.00	0.00	-	-	0.00	0.00	-	-	-	-
667.79	8,557.85	-	-	-	0.00	-	-	-	-
838.47	9,738.32	-	-	0.00	0.00	-	-	-	-
713.37	10,305.17	34,898	377,566	-	0.00	-	-	-	-
785.82	7,947.01	32,898	329,262	0.00	0.00	-	-	-	-
1381.15	18863.01	34898	377566	0.00	0.00	0	0	0	0
1624.29	17685.33	32898	329262	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	-	-	-	-
-	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	-	-	-	-
765.58	14,708.52	223	1,727	89.00	349.17	-	81,389	877,703	14,847,141
1,888.11	24,582.38	150	2,393	0.00	252.80	-	75,640	2,026,560	22,364,980
6.07	37.96	105	671	-	0.00	-	-	80,530	878,100
0.26	89.67	18	2,084	0.00	0.00	-	-	67,308	779,515
771.64	14746.48	328	2398	89.00	349.17	0	81389	958233	15725241
1888.37	24672.05	168	4477	0.00	252.80	0	75640	2093868	23144495
4,911	30,295	8	999	-	-	-	-	-	-
5,186	31,709	352	1,648	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
4	39	40	519	-	-	-	-	-	-
2	21	25	296	-	-	-	-	-	-
<b>7067.89</b>	<b>63943.44</b>	<b>35274</b>	<b>381482</b>	<b>89.00</b>	<b>349.17</b>	<b>0</b>	<b>81389</b>	<b>958233</b>	<b>15725241</b>
<b>8700.56</b>	<b>74087.37</b>	<b>33443</b>	<b>335683</b>	<b>0.00</b>	<b>252.80</b>	<b>0</b>	<b>75640</b>	<b>2093868</b>	<b>23144495</b>



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	482.61	18422.09	5040.00	60803.00	-1137.78	482.61	1270008.84	31857117.92
Previous year	748.39	16297.07	5180.00	53308.00	-394.05	748.39	1668301.47	33982329.27
Marine Cargo	540.85	9986.34	1431.00	12494.00	-869.84	540.85	1167027.71	29589970.12
Previous year	396.66	8288.49	864.00	8596.00	-986.63	396.66	864556.41	23308109.74
Marine Hull (Including Onshore & Offshore oil energy)	58.35	1247.24	35.00	436.00	-28.98	58.35	12976.17	686377.15
Previous year	-0.86	1307.26	56.00	463.00	-54.90	-0.86	20364.63	949958.76
Marine (Total)	599.20	11233.57	1466	12930	-898.82	599.20	1180003.88	30276347.27
Previous year (Total)	395.80	9595.75	920	9059	-1041.54	395.80	884921.05	24258068.50
Aviation	10.14	263.00	3.00	21.00	10.22	10.14	150.00	522091.46
Previous year	26.22	472.93	4.00	90.00	-67.89	26.22	243151.43	2268520.36
Engineering	327.61	8465.79	520.00	5357.00	-1071.52	327.61	220625.45	6360370.21
Previous year	1308.68	6067.52	429.00	4588.00	1002.44	1308.68	331710.12	2210566.34
Motor Own Damage	8722.72	93891.02	306194.00	3380645.00	-208.66	8722.72	549810.67	5460262.87
Previous year	9507.78	89801.28	333688.00	3574747.00	-445.41	9507.78	507280.76	5994586.39
Motor Third party	6038.90	64623.39	8374.00	73358.00	-252.69	6038.90		
Previous year	5792.56	53688.00	7734.00	55412.00	-395.67	5792.56		
Motor (Total)	14761.62	158514.41	306194	3380645	-461.35	14761.62	549810.67	5460262.87
Previous year (Total)	15300.34	143489.28	333688	3574747	-841.08	15300.34	507280.76	5994586.39
Workmen's compensation / Employer's liability	160.29	1480.21	947.00	10008.00	40.34	160.29	29924.84	229754.51
Previous year	141	1209	872	9301	41	141.19	3314	24673
Public Liability	3.30	52.50	6.00	137.00	-2.50	3.30	6485.35	123529.45
Previous year	56	627	10	131	7	55.78	81912	260849
Product Liability	22.61	305.52	5.00	80.00	-4.14	22.61	5030.00	112447.50
Previous year	5	214	3	65	-18	5.35	4075	50695
Other Liability Covers	181.22	2618.39	125.00	1203.00	-79.46	181.22	58637.47	888732.83
Previous year	74	1781	34	342	-81	74.07	82057	445123
Liability (Total)	367.43	4456.62	1083	11428	-45.76	367.43	100077.66	1354464.29
Previous year (Total)	276.40	3830.67	919	9839	-50.75	276.40	171358.39	781339.96
Personal Accident	223.80	2845.33	7011.00	117417.00	-52.84	223.80	824451.97	8568101.81
Previous year	178.67	2704.65	1940	21828	-105.23	178.67	316464.75	1772063.42
Medical Insurance	1930.88	23649.94	9011.00	79444.00	-1660.43	1930.88	224356.67	2705358.83
Previous year	1828.60	16767.76	2050	21729	-873.45	1828.60	717568.69	2567325.06
Overseas Medical Insurance	38.40	284.58	4527.00	33037.00	25.73	38.40	7667.50	48891.90
Previous year	17.99	246.17	2226	31757	-1.90	17.99	23804.87	98667.69
Health (Total)	1969.28	23934.52	13538	112481	-1634.70	1969.28	232024.17	2754250.73
Previous year (Total)	1846.59	17013.94	4276	53486	-875.35	1846.59	741373.56	2665992.75
Crop Insurance								
Previous year								
Credit Guarantee	162	5069	3	60	-1413	162	19096	549994
Previous year								
All Other Miscellaneous	1505.33	25976.55	28764.00	284743.00	856.48	1505.33	290045.01	18234549.17
Previous year	1352.14	33472.13	38731	355957	-442.33	1352.14	32997055.09	122968174.67
<b>Grand Total</b>	<b>20408.96</b>	<b>259181.26</b>	<b>363622</b>	<b>3985885</b>	<b>-5848.65</b>	<b>20408.96</b>	<b>4686293.81</b>	<b>105937550.19</b>
Previous year (Total)	<b>21433.23</b>	<b>232943.94</b>	<b>386087</b>	<b>4082902</b>	<b>-2815.79</b>	<b>21433.23</b>	<b>37861616.61</b>	<b>196901641.67</b>

\*Wherever applicable





(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
18.48	207.55	481	5219.00						
18.16	252.95	537	6631.00						
0.00	0.00	0	0.00						
0.00	0.00	0.00	0.00						
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.98	8.95	9.00	87.00						
0.06	30.54	3.00	94.00						
456.51	6996.38	30070.00	349460.00						
440.49	5819.61	22473.00	344197.00						
486.70	7877.91	0.00	0.00						
474.86	4832.75	0.00	0.00						
943.21	14874.29	30070	349460	0.00	0.00	0	0		
915.35	10652.36	22473	344197	0.00	0.00	0	0		
1	20	24	366						
3	31	38	510						
0	1	0	5						
0	0	0	5						
0	0	0	0						
0	0	0	0						
1	4	32	269						
1	10	47	509						
1.74	25.80	56	640	0.00	0.00	0	0		
3.75	41.31	85	1024	0.00	0.00	0	0		
82.96	1035.45	687	15120	4.28	50.69	85634	1013947		
75.46	1368.89	787	8387	3.63	58.46	72591	1063546		
577.32	8086.80	339	3344	273.02	7690.77	240882	4299044		
356.90	5512.63	126	1251	353.83	4995.32	0	2585292		
0.00	0.00	0	0						
0.00	0.00	0	0						
577.32	8086.80	339	3344	273.02	7690.77	240882	4299044	0	0
356.90	5512.63	126	1251	353.83	4995.32	0	2585292	0	0
786.99	18265.87	5280	33435.00	462.97	15138.49	40052	1086068		
236.24	17550.10	5469	42661.00	116.54	14319.49	4427	1037342		
<b>2411.68</b>	<b>42504.71</b>	<b>36922</b>	<b>407305</b>	<b>740.27</b>	<b>22879.95</b>	<b>366568</b>	<b>6399059</b>	<b>0</b>	<b>0</b>
<b>1605.92</b>	<b>35408.78</b>	<b>29480</b>	<b>404245</b>	<b>474.00</b>	<b>19373.27</b>	<b>77018</b>	<b>4686180</b>	<b>0</b>	<b>0</b>



Name of the Insurer: L&T 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	334.64	3,071.64	675	4,716	141.34	892.07	681,366	6,798,113
Previous year	193.30	2,179.57	288	2,289	100.66	996.38	645,302	8,825,456
Marine Cargo	56.30	760.75	489	4,762	(21.32)	81.86	195,935	3,547,237
Previous year	77.63	678.89	446	4,150	25.46	154.05	303,712	3,724,788
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Marine (Total)	56.30	760.75	489	4,762	(21.32)	81.86	195,935	3,547,237
Previous year (Total)	77.63	678.89	446.00	4,150.00	25.46	154.05	303,711.60	3,724,788.33
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	172.50	1,470.36	239	2,667	4.73	108.99	199,216	1,348,124
Previous year	167.77	1,361.36	292.00	3,020.00	(27.69)	277.23	125,174.19	1,530,621.30
Motor Own Damage	595.88	8,687.23	17,984	139,373	(83.05)	3,306.48	63,817	614,225
Previous year	678.93	5,380.75	8,181.00	63,693.00	194.56	183.00	52,976.79	519,087.01
Motor Third party	638.79	3,393.43	104	702	321.44	461.84	-	-
Previous year	317.35	2,931.59	60.00	1,296.46	(334.22)	56.32	-	-
Motor (Total)	1,234.67	12,080.66	17,984	139,373	238.39	3,768.32	63,817	614,225
Previous year (Total)	996.29	8,312.34	8,181	63,693	(139.67)	239.33	52,976.79	519,087.01
Workmen's compensation / Employer's liability	25.73	378.51	187	2,314	(4.30)	25.54	5,828	73,085
Previous year	30.03	352.96	221.00	2,561.00	3.05	113.40	3,921.85	61,843.43
Public Liability								
Previous year								
Product Liability	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Other Liability Covers	7.17	107.73	18	221	1.64	(10.49)	5,026	83,015
Previous year	5.54	118.21	20.00	131.00	5.12	(10.21)	39,464.59	160,056.24
Liability (Total)	32.91	486.23	205	2,535	(2.66)	15.06	10,854	192,467
Previous year (Total)	35.57	471.18	241.00	2,692.00	8.17	103.19	43,386.44	221,899.67
Personal Accident	6.65	280.26	529	4,798	2.00	(7.81)	(14,034)	1,024,963
Previous year	4.65	288.07	459.00	4,897.00	(2.75)	106.83	5,171.52	1,045,486.10
Medical Insurance	282.99	3,752.35	3,240	20,482	209.10	2,705.46	16,980	330,791
Previous year	73.89	1,046.89	788.00	5,337.00	61.22	480.13	2,987.49	49,901.51
Overseas Medical Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Health (Total)	282.99	3,752.35	3,240	20,482	209.10	2,705.46	16,980	330,791
Previous year (Total)	73.89	1,046.89	788.00	5,337.00	61.22	480.13	2,987.49	49,901.51
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	19.30	198.43	473	3,779	6.83	(32.34)	84,840	688,088
Previous year	12.48	230.77	145.00	1,261.00	(2.25)	(233.79)	70,000.56	793,518.99
<b>Grand Total</b>	<b>2,139.97</b>	<b>22,100.68</b>	<b>23,834</b>	<b>183,112</b>	<b>578.41</b>	<b>7,531.61</b>	<b>1,238,976.04</b>	<b>14,544,007.44</b>
Previous year (Total)	<b>1,561.56</b>	<b>14,569.07</b>	<b>10,840</b>	<b>87,339</b>	<b>23.16</b>	<b>2,123.34</b>	<b>1,248,710.68</b>	<b>16,710,758.83</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
6.91	93.80	68	344	-	-	-	-	-	-
5.78	70.93	15	144	-	-	-	-	-	-
5.84	37.58	56	513	-	-	-	-	-	-
1.72	15.86	47	350	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
5.84	37.58	56	513	-	-	-	-	-	-
1.72	15.86	47.00	350.00	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
5.40	77.43	27	347	-	-	-	-	-	-
2.50	48.54	17.00	198.00	-	-	-	-	-	-
124.20	964.34	3,858	20,327	-	-	-	-	-	-
88.80	734.30	1,149.00	8,849.00	-	-	-	-	-	-
53.45	509.46	-	6,267	-	-	-	-	-	-
47.73	390.12	-	-	-	-	-	-	-	-
177.65	1,473.80	3,858	20,327	-	-	-	-	-	-
136.52	1,124.41	1,149	8,849	-	-	-	-	-	-
1.98	23.95	15	205	-	-	-	-	-	-
3.95	16.53	11.00	60.00	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
1.98	23.95	15	205	-	-	-	-	-	-
3.95	16.53	11.00	133.00	-	-	-	-	-	-
0.27	1.75	44	479	0.04	0.61	4,800,000	4,801,785	-	-
0.05	0.51	11.00	149.00	0.14	1.25	309.00	2,820.00	-	-
-	-	-	-	1.21	16.80	7,147,500	7,151,229	29,322	2,372,758
-	-	-	-	0.70	10.43	169.00	2,584.00	1,864.00	12,010.00
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	1.21	16.80	7,147,500	7,151,229	29,322	2,372,758
-	-	-	-	0.70	10.43	169.00	2,584.00	1,864.00	12,010.00
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
1.88	6.40	48	156	-	-	-	-	-	-
0.61	5.91	5.00	49.00	-	-	-	-	-	-
<b>199.93</b>	<b>1,714.70</b>	<b>4,116</b>	<b>22,371</b>	<b>1.25</b>	<b>17.41</b>	<b>11,947,500</b>	<b>11,953,014</b>	<b>29,322</b>	<b>2,372,758</b>
<b>151.13</b>	<b>1,282.68</b>	<b>1,255</b>	<b>9,872</b>	<b>0.84</b>	<b>11.67</b>	<b>478</b>	<b>5,404</b>	<b>1,864</b>	<b>12,010</b>



Name of the Insurer: Liberty Videocon 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	81.62	859.74	156.00	1061.00	0.00	0.00	160504.28	2179984.10
Previous year	10.84	11.47	7.00	12.00	0.00	0.00	17090.25	17886.25
Marine Cargo	18.19	87.17	18.00	79.00	0.00	0.00	56762.63	371556.82
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marine Hull (Including Onshore & Offshore oil energy)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marine (Total)	18.19	87.17	18	79	0.00	0.00	56762.63	371556.82
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Engineering	47.58	469.27	30.00	277.00	0.00	0.00	31093.58	441139.12
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Motor Own Damage	896.04	7015.55	5230.00	39357.00	0.00	0.00	44620.91	337210.42
Previous year	66.25	66.25	468.00	468.00	0.00	0.00	4811.03	4811.03
Motor Third party	153.88	1134.03	5383.00	40639.00	0.00	0.00		
Previous year	8.22	8.22	468.00	468.00	0.00	0.00		
Motor (Total)	1049.92	8149.58	5383	40639	0.00	0.00	44620.91	337210.42
Previous year (Total)	74.47	74.47	468	468	0.00	0.00	4811.03	4811.03
Workmen's compensation / Employer's liability	26.91	117.04	42.00	256.00	0.00	0.00	3292.87	16257.56
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Public Liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Product Liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other Liability Covers	1.34	4.69	5.00	34.00	0.00	0.00	80.00	1775.35
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Liability (Total)	28.25	121.73	47	290	0.00	0.00	3372.87	18032.91
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident	139.27	695.76	31.00	205.00	0.00	0.00	1126944.26	4040873.04
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Medical Insurance	139.24	236.89	23.00	32.00	0.00	0.00	799.28	6689.08
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Overseas Medical Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health (Total)	139.24	236.89	23	32	0.00	0.00	799.28	6689.08
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Crop Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Credit Guarantee	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
All Other Miscellaneous	9.62	144.37	81.00	782.00	0.00	0.00	14831.84	750094.02
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>Grand Total</b>	<b>1513.69</b>	<b>10764.50</b>	<b>5769</b>	<b>43365</b>	<b>0.00</b>	<b>0.00</b>	<b>1438929.65</b>	<b>8145579.51</b>
Previous year (Total)	<b>85.31</b>	<b>85.95</b>	<b>475</b>	<b>480</b>	<b>0.00</b>	<b>0.00</b>	<b>21901.28</b>	<b>22697.28</b>

\*Wherever applicable





Name of the Insurer: Magma HDI 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	45.93	1473.44	107.00	1051.00	44.94	1441.71	61362.90	2499824.77
Previous year	41.95	734.24	8.00	39.00	26.93	719.22	23382.85	706965.45
Marine Cargo	13.04	568.42	22.00	164.00	13.04	507.04	9099.97	1732484.38
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marine Hull (Including Onshore & Offshore oil energy)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marine (Total)	13.04	568.42	22	164	13.04	507.04	9099.97	1732484.38
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Engineering	56.10	385.76	99.00	603.00	55.50	404.92	55720.72	314613.14
Previous year	0.83	0.83	2.00	2.00	0.83	0.83	489.20	489.20
Motor Own Damage	1921.86	17628.97	24053.00	222172.00	1950.72	17900.50	211610.86	1837799.01
Previous year	998.89	3617.25	12545.00	49892.00	1003.02	3623.74	111002.79	359996.50
Motor Third party	1948.33	16710.52	29428.00	252905.00	2016.92	17004.82		
Previous year	722.99	2311.19	12562.00	49941.00	726.79	2318.97		
Motor (Total)	3870.19	34339.50	29428	252905	3967.63	34905.32	211610.86	1837799.01
Previous year (Total)	1721.88	5928.44	12562	49941	1729.81	5942.71	111002.79	359996.50
Workmen's compensation / Employer's liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Public Liability	17.04	817.17	10.00	153.00	17.04	815.53	6389.14	251834.03
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Product Liability	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	11.32	11.32	3.00	3.00	11.32	11.32	6061.37	6061.37
Other Liability Covers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Liability (Total)	17.04	817.17	10	153	17.04	815.53	6389.14	251834.03
Previous year (Total)	11.32	11.32	3	3	11.32	11.32	6061.37	6061.37
Personal Accident	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Medical Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Overseas Medical Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	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	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Credit Guarantee	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
All Other Miscellaneous	8.64	128.23	39.00	567.00	8.66	130.46	16297.32	142820.46
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>Grand Total</b>	<b>4010.95</b>	<b>37712.52</b>	<b>29705</b>	<b>255443</b>	<b>4106.82</b>	<b>38204.98</b>	<b>360480.91</b>	<b>6779375.81</b>
Previous year (Total)	<b>1775.98</b>	<b>6674.83</b>	<b>12575</b>	<b>49985</b>	<b>1768.89</b>	<b>6674.08</b>	<b>140936.21</b>	<b>1073512.52</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
1156.33	10915.64	14670.00	140971.00	0.00	0.00	0.00	0.00		
961.32	3962.26	7226.00	35248.00	0.00	0.00	0.00	0.00		
1160.94	10251.20	15874.00	146130.00	0.00	0.00	0.00	0.00		
	0.25		3.00	0.00	0.00	0.00	0.00		
2317.27	21166.84	15874	146130	0.00	0.00	0	0		
961.32	3962.51	7226	35248	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	540.00	540.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	540	540		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0	0	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	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	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		
2317.27	21166.84	15874	146130	0.00	0.00	0	0	0	0
961.32	3962.51	7226	35248	0.00	0.00	540	540	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	5245.51	77232.56	43350	496571	309.50	5482.85	47569453	846376006
Previous year	4936.01	71749.71	42967	480511	1066.02	12933.27	42188669	582155638
Marine Cargo	1208.90	17453.77	11036	130501	-293.85	-1311.11	1002832007	1070681391
Previous year	1502.75	18764.88	7226	90879	3.59	1544.90	9776098	77515770
Marine Hull (Including Onshore & Offshore oil energy)	410.77	13467.74	282	2790	-672.43	1127.60	169630	37349466
Previous year	1083.19	12340.14	272	2946	-2114.23	-3793.93	508546	29647429
Marine (Total)	1619.67	30921.51	11318	133291	-966.28	-183.51	1003001636	1108030857
Previous year (Total)	2585.96	31104.99	7498	93825	-2110.64	-2249.03	10284644	107163199
Aviation	105.15	8721.67	6	113	-94.63	2370.41	381983	29279147
Previous year	199.78	6351.26	7	111	125.64	2330.87	5097	20230232
Engineering	3123.00	27593.37	2550	27681	637.61	-56.88	3631404	2275167584
Previous year	2485.39	27650.25	3342	33104	-438.56	1886.94	3208867	49249232
Motor Own Damage	19086.44	197433.81	493529	5271111	-206.95	21604.33	857229	8473625
Previous year	19293.39	175829.48	479351	5000549	3577.60	15691.64	758601	7653263
Motor Third party	24858.89	246302.69	714047	7693869	3129.70	44419.49	856449	8460093
Previous year	21729.20	201883.20	716798	7594146	5254.25	29988.61	756664	10239071
Motor (Total)	43945.33	443736.50	714047	7693869	2922.75	66023.81	1713678	16933718
Previous year (Total)	41022.58	377712.69	716798	7594146	8831.84	45680.25	1515265	17892334
Workmen's compensation / Employer's liability	445.17	6027.03	3931	49075	-90.47	-231.91	37755	600837
Previous year	535.64	6258.94	4093	49580	9.73	365.28	47370	670031
Public Liability	4.91	83.09	81	1140	-4.06	-3.03	1647	55652
Previous year	8.97	86.11	59	1050	6.85	6.92	3320	52692
Product Liability	35.21	463.24	11	110	1.44	112.81	47420	258456
Previous year	33.77	350.43	11	109	-13.81	-14.13	24350	191099
Other Liability Covers	226.34	1898.86	861	8834	2.79	-32.46	97558	1626497
Previous year	223.55	1931.32	645	7313	12.70	204.11	82190	1476450
Liability (Total)	711.65	8472.24	4884	59159	-90.29	-154.59	184380	2541441
Previous year (Total)	801.94	8626.80	4808	58052	15.47	562.18	157231	2390271
Personal Accident	1068.70	12006.89	31093	339202	202.61	-260.42	3460784	46177731
Previous year	866.09	12267.31	30995	340090	83.84	-275.37	1522551	32655757
Medical Insurance	17720.81	276207.08	145473	1439894	1138.78	60336.60	1590661	156621969
Previous year	16582.04	215870.48	141548	1379910	3785.33	43709.34	2093650	49584605
Overseas Medical Insurance	132.06	1807.63	998	16300	43.88	45.18	3766	43392
Previous year	88.18	1762.45	978	16927	46.66	1055.07	1671	23634
Health (Total)	17852.87	278014.71	146471	1456194	1182.66	60381.78	1594427	156665362
Previous year (Total)	16670.22	217632.93	142526	1396837	3831.99	44764.41	2095321	49608239
Crop Insurance								
Previous year								
Credit Guarantee	30.36	69.42	3	7	30.36	69.42	26235	56715
Previous year	0.00	0.00	0	0	0.00	-0.05	0	0
All Other Miscellaneous	4135.76	42069.12	68858	743397	-2173.28	-13228.95	1230666799	1510606784
Previous year	6309.04	55298.07	73875	798138	2869.94	14433.21	3918436	170625622
<b>Grand Total</b>	<b>77838.00</b>	<b>928838.00</b>	<b>1022580</b>	<b>10949484</b>	<b>1961.00</b>	<b>120443.94</b>	<b>2292230780</b>	<b>5991835346</b>
Previous year (Total)	<b>75877.00</b>	<b>808394.00</b>	<b>1022816</b>	<b>10794814</b>	<b>14275.54</b>	<b>120066.68</b>	<b>64896079</b>	<b>1031970525</b>

\*Wherever applicable





(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
392.02	4977.02	5771	65984	313.77	5309.35				
477.53	5650.55	5970	63090	513.20	6610.24				
75.37	797.77	437	4967	85.02	1132.57				
67.61	744.06	358	3673	94.42	1408.08				
21.37	162.01	23	416	20.20	293.96				
16.54	164.92	30	543	15.77	217.64				
96.75	959.80	460	5383	105.23	1426.54				
84.14	908.95	388	4216	110.19	1625.71				
5.78	8.85	2	3	0.00	64.81				
7.25	7.25	1	1	0.00	0.00				
54.01	1307.51	302	3534	308.18	3044.25				
14.75	1400.55	380	3375	195.52	3325.04				
1590.71	16429.42	92970	988788	946.56	9612.87				
1526.57	14547.19	89488	877705	968.43	8949.88				
2622.29	26462.15	134301	1441072	1386.67	13617.93				
2156.44	21344.51	134053	1347610	1174.19	11150.53				
4213.00	42891.57	134301	1441072	2333.23	23230.80				
3683.00	35891.70	134053	1347610	2142.62	20100.41				
54.55	657.68	635	7759	30.19	538.54				
60.07	658.67	624	7873	57.26	614.67				
0.11	2.77	4	44	0.10	4.86				
0.08	2.00	1	44	2.03	5.42				
3.91	17.62	3	9	2.85	21.80				
2.78	25.41	2	5	2.78	36.40				
3.44	35.83	63	697	-4.38	119.33				
4.90	26.88	53	407	22.30	174.98				
62.01	713.88	705	8509	28.76	684.53				
67.83	712.95	680	8329	84.37	831.46				
37.88	569.21	4119	44580	50.52	812.88	6097	152689	67322	1267077
39.20	539.46	3764	43378	51.35	867.44	7129	150361	82187	1565950
1271.62	8910.44	10943	105439	2047.69	43381.08	17613	2591011	174665	4863899
471.08	5432.98	11052	105573	1047.54	26825.39	44661	2349045	408477	5777712
1.02	13.94	26	400	2.99	50.83	68	1182	1048	16348
1.47	12.20	29	401	1.88	46.98	72	1450	979	17650
1272.65	8924.39	10969	105839	2050.68	43431.90	17681	2592193	175713	4880247
472.57	5445.20	11081	105974	1049.41	26872.36	44733	2350495	409456	5795362
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
692.84	5370.66	17293	178382	413.67	3786.48	2290	96416	24469	362077
499.25	4966.62	19646	193671	379.18	2864.96	3611	50398	21335	380891
<b>6826.94</b>	<b>65722.89</b>	<b>173922</b>	<b>1853286</b>	<b>5604.03</b>	<b>81791.56</b>	<b>26068</b>	<b>2841298</b>	<b>267504</b>	<b>6509401</b>
<b>5345.53</b>	<b>55523.23</b>	<b>175963</b>	<b>1769644</b>	<b>4525.85</b>	<b>63097.62</b>	<b>55473</b>	<b>2551254</b>	<b>512978</b>	<b>7742203</b>



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	4.04	37.96	3.00	59.00	4.04	37.96	2665.13	42780.97
Previous year	4.22	79.05	5.00	73.00	4.22	79.05	3860.75	125955.12
Marine Cargo	0.00	0.69	0.00	3.00	0.00	0.69	0.00	670.31
Previous year	0.98	2.63	1.00	5.00	0.98	2.63	448.04	3610.92
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	0.00	0	0.00	0.00	0.00	0.00
Marine (Total)	0.00	0.69	0	3	0.00	0.69	0.00	670.31
Previous year (Total)	0.98	2.63	1	5	0.98	2.63	448.04	3610.92
Aviation	0.00	0.00	0	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Engineering	8.58	43.31	2.00	18.00	8.58	43.31	-475.05	21902.73
Previous year	2.12	31.85	2.00	24.00	2.12	31.85	856.72	14334.75
Motor Own Damage	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	11.85	0.00	138.00	0.00	11.85	0.00	1793.02
Motor Third party	1.61	62.03	14.00	1187.00	1.61	62.03	0.00	0.00
Previous year	3.87	18.28	112.00	593.00	3.87	18.28	0.00	0.00
Motor (Total)	1.61	62.03	14	1187	1.61	62.03	0.00	0.00
Previous year (Total)	3.87	30.14	112	593	3.87	30.14	0.00	1793.02
Workmen's compensation / Employer's liability	0.90	13.78	2.00	26.00	0.90	13.78	-37.72	3107.94
Previous year	2.39	16.09	5.00	34.00	2.39	16.09	479.21	26142.03
Public Liability	0.23	14.20	1.00	25.00	0.23	14.20	25.00	9761.95
Previous year	0.57	21.23	3.00	20.00	0.57	21.23	85.00	9855.20
Product Liability	0	0	0	0	0	0	0	0
Previous year	0	0	0	0	0	0	0	0
Other Liability Covers	149.86	1866.43	52.00	456.00	149.86	1866.43	48858.20	584122.48
Previous year	122.38	1281.08	30.00	302.00	122.38	1281.08	27443.33	409605.32
Liability (Total)	150.99	1894.41	55	507	150.99	1894.41	48845.48	596992.37
Previous year (Total)	125.34	1318.40	38	356	125.34	1318.40	28007.53	445602.55
Personal Accident	2.72	36.17	9.00	33.00	2.72	36.17	2226.50	83057.12
Previous year	11.36	60.16	11.00	117.00	11.36	60.16	5976.00	104659.89
Medical Insurance	0.23	1.62	10.00	46.00	0.23	1.62	70.00	110.00
Previous year	0.00	1.02	0.00	17.00	0.00	1.02	0.00	113.00
Overseas Medical Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health (Total)	0.23	1.62	10	46	0.23	1.62	70.00	110.00
Previous year (Total)	0.00	1.02	0	17	0.00	1.02	0.00	113.00
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0	0
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Credit Guarantee	0.00	44.36	0.00	8.00	0.00	44.36	0.00	4810.33
Previous year	0.00	4.18	0.00	1.00	0.00	4.18	0.00	230.05
All Other Miscellaneous	0.59	46.63	4.00	43.00	0.59	46.63	1604.22	25297.31
Previous year	49.26	423.60	5.00	67.00	49.26	423.60	2060.33	115856.24
Grand Total	168.75	2167.18	97	1904	168.75	2167.18	54936.28	775621.15
Previous year (Total)	197.14	1951.02	174	1253	197.14	1951.02	41209.37	812155.54

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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	27.38	0.00	11.00	0.00	0.00	0.00	0.00		
0.00	58.82	3.00	20.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
-3.20	0.20	-2.00	1.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
-3.20	0.20	-2	1	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
4.90	27.89	0.00	5.00	0.00	0.00	0.00	0.00		
1.87	23.63	5.00	38.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.41	23.95	2.00	190.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.41	23.95	2	190	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	1.44	0	2	0.71	1.12	0	62		
0.00	1.85	1	4	0.00	2.00	200	304		
0.00	6.65	0.00	2.00	0	0	0	0		
-0.14	0.00	-1.00	0.00	0.00	0.00	0.00	0.00		
0	0	0	0	0	0	0	0		
0	0	0	0	0.00	0.00	0	0		
0.00	23.52	0.00	1.00	0	0	0	0		
1.16	21.20	0.00	2.00	0.00	0.00	0.00	0.00		
0.00	31.61	0	5	0.71	1.12	0	62		
1.02	23.05	0	6	0.00	2.00	200	304		
-0.02	20.69	0	3	0.23	4.96	188.00	22524		
0.15	29.32	5	93	0.35	3.88	307	4701		
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	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
0.32	1.14	2	10	0.00	0.00	0.00	0.00		
0.95	2.78	0	18	0.00	0.00	0.00	0.00		
5.61	132.67	4	224	0.93	6.08	188	22586		
0.79	137.80	11	176	0.35	5.88	507	5005		



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	727.26	17455.25	3620.00	37600.00	-177.25	1318.91	1892160.54	33902045.76
Previous year	904.52	16136.34	3472.00	34052.00	11.74	4870.62	3621677.29	32245115.49
Marine Cargo	163.24	3599.12	1162.00	15607.00	58.36	892.57	706276.83	11801280.04
Previous year	104.89	2706.55	1094.00	19206.00	-83.45	-1156.31	462785.02	10693751.08
Marine Hull (Including Onshore & Offshore oil energy)	10.85	151.74	0.00	7.00	10.85	96.34	0.00	88949.35
Previous year	0.00	55.40	0.00	7.00	-10.19	-25.53	0.00	9754.95
Marine (Total)	174.09	3750.86	1162	15614	69.21	988.91	706276.83	11890229.39
Previous year (Total)	104.89	2761.95	1094	19213	-93.64	-1181.84	462785.02	10703506.03
Aviation	35.30	286.32	-2.00	22.00	11.05	72.57	-160.00	631330.42
Previous year	24.25	213.75	0.00	32.00	-5.25	-151.00	0.00	820818.51
Engineering	486.04	6944.47	406.00	4289.00	-4.07	-1205.40	210590.99	6827481.22
Previous year	490.12	8149.87	383.00	4048.00	-562.58	-664.86	889553.02	6800683.68
Motor Own Damage	6123.48	70632.69	169675.00	1798345.00	-233.88	2152.29	396396.58	4425504.19
Previous year	6357.36	68480.40	147083.00	1497689.00	526.22	5077.12	386654.96	4378947.27
Motor Third party	6142.06	60639.13	233235.00	2204600.00	1753.76	10805.72		
Previous year	4388.30	49833.41	169803.00	1642362.00	506.89	10525.06		
Motor (Total)	12265.54	131271.83	233235	2204600	1519.88	12958.01	396396.58	4425504.19
Previous year (Total)	10745.66	118313.82	169803	1642362	1033.11	15602.19	386654.96	4378947.27
Workmen's compensation / Employer's liability	48.10	725.65	256.00	3011.00	-3.19	19.84	8957.51	117520.90
Previous year	51.28	705.80	272.00	2617.00	4.13	167.40	7511.75	105191.84
Public Liability	16.29	167.60	39.00	539.00	-35.67	-41.71	11458.64	178279.19
Previous year	51.96	209.31	55.00	577.00	-3.73	22.04	10793.75	110058.71
Product Liability	6.38	36.12	1.00	10.00	6.38	28.95	1596.00	7778.23
Previous year	0.00	7.17	0.00	10.00	-0.21	-0.93	0.00	3480.00
Other Liability Covers	24.22	2517.79	678.00	7539.00	-3.93	-106.05	11605.40	800091.00
Previous year	28.15	2623.84	581.00	6680.00	8.05	1439.55	15065.40	760120.98
Liability (Total)	94.99	3447.15	974	11099	-36.40	-98.96	33617.54	1103669.32
Previous year (Total)	131.39	3546.12	908	9884	8.24	1628.06	33370.90	978851.54
Personal Accident	85.62	2639.54	5638.00	63179.00	-4.70	559.78	231862.90	19773210.03
Previous year	90.31	2079.76	1406.00	15318.00	-42.04	-381.75	201050.52	5589738.79
Medical Insurance	2972.70	41895.89	10620.00	287847.00	574.11	18744.03	881083.63	73628039.53
Previous year	2398.59	23151.86	27371.00	182936.00	1083.21	5536.08	10543713.65	452908534.88
Overseas Medical Insurance	230.03	3172.65	54333.00	672286.00	-41.70	-19.70	1479455.06	25951644.91
Previous year	271.73	3192.35	63743.00	660617.00	3.43	-154.27	1945762.81	35077260.19
Health (Total)	3202.73	45068.53	64953	960133	532.41	18724.33	2360538.69	99579684.44
Previous year (Total)	2670.33	26344.20	91114	843553	1086.65	5381.80	12489476.47	487985795.07
Crop Insurance	660.55	3021.66	128.00	389.00	655.51	2996.00	13857.70	38253.90
Previous year	5.03	25.67	6.00	21.00	5.03	25.67	65.61	374.41
Credit Guarantee	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
All Other Miscellaneous	279.59	8496.98	3628.00	43685.00	-59.64	742.17	231534.92	9032193.59
Previous year	339.23	7754.81	4433.00	48741.00	-97.91	2455.13	186463.16	11232781.27
<b>Grand Total</b>	<b>18011.72</b>	<b>222382.59</b>	<b>313742</b>	<b>3340610</b>	<b>2506.00</b>	<b>37056.31</b>	<b>6076676.69</b>	<b>187203602.26</b>
Previous year (Total)	<b>15505.72</b>	<b>185326.28</b>	<b>272619</b>	<b>2617224</b>	<b>1343.34</b>	<b>27584.01</b>	<b>18271096.95</b>	<b>560736612.04</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0	0	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	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
20.14	256.91	41.00	433.00	0.00	0.00	0.00	0.00		
19.70	215.31	35.00	276.00	0.00	0.00	0.00	0.00		
556.90	6585.11	14263.00	161976.00	0.00	0.00	0.00	0.00		
681.30	6279.70	14769.00	134167.00	0.00	0.00	0.00	0.00		
661.37	6818.59	7513.00	54099.00	0.00	0.00	0.00	0.00		
516.88	4815.89	2357.00	10776.00	0.00	0.00	0.00	0.00		
1218.27	13403.69	14263	161976	0.00	0.00	0	0	0	0
1198.18	11095.59	14769	134167	0.00	0.00	0	0	0	0
2.61	53.75	18.00	163.00	0.00	0.00	0.00	0.00		
3.04	40.12	22.00	199.00	0.00	0.00	0.00	0.00		
0.27	3.19	2.00	25.00	0.00	0.00	0.00	0.00		
0.02	5.04	3.00	59.00	0.00	0.00	0.00	0.00		
6.38	6.38	1.00	1.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
4.06	18.81	31.00	404.00	0.00	0.00	0.00	0.00		
0.87	33.63	45.00	320.00	0.00	0.00	0.00	0.00		
13.33	82.13	52	593	0.00	0.00	0	0	0	0
3.92	78.79	70	578	0.00	0.00	0	0	0	0
5.55	171.84	1188.00	11587.00	0.00	0.00	0.00	0.00		
1.69	101.58	89.00	1074.00	0.00	0.00	0.00	0.00		
12.38	2310.74	193.00	2417.00	0.00	0.00	0.00	0.00	423286	5828507
102.83	3795.45	366.00	2594.00	0.00	0.00	0.00	0.00	645751	5638788
5.92	140.54	2139.00	50812.00	0.00	0.00	0.00	0.00	54713	355158
16.82	166.93	6080.00	42347.00	0.00	0.00	0.00	0.00	7374	83568
18.30	2451.28	2332	53229	0.00	0.00	0	0	477999	6183665
119.64	3962.38	6446	44941	0.00	0.00	0	0	653125	5722356
660.55	3021.66	128.00	389.00	0.00	0.00	0.00	0.00		
5.03	25.67	6.00	21.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
10.08	299.92	421.00	6147.00	10.00	234.92	542.00	296439.00		
15.95	191.21	580.00	6177.00	16.34	204.48	478.00	239724.00		
<b>1946.22</b>	<b>19687.45</b>	<b>18425</b>	<b>234354</b>	<b>10.00</b>	<b>234.92</b>	<b>542</b>	<b>296439</b>	<b>477999</b>	<b>6183665</b>
<b>1364.12</b>	<b>15670.52</b>	<b>21995</b>	<b>187234</b>	<b>16.34</b>	<b>204.48</b>	<b>478</b>	<b>239724</b>	<b>653125</b>	<b>5722356</b>



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	327.82	6322.00	2805.00	30782.00	48.85	-2470.85	483461.22	10838348.25
Previous year	278.96	8792.85	2009.00	26749.00	-1.40	4219.34	580038.19	9635046.24
Marine Cargo	188.67	2622.11	4219.00	49154.00	23.33	168.17	322045.36	5755906.58
Previous year	165.35	2453.94	4437.00	40345.00	-226.76	-266.02	303337.66	6127491.73
Marine Hull (Including Onshore & Offshore oil energy)	-14.64	215.65	0.00	9.00	-45.05	60.59	0.00	206700.08
Previous year	30.42	155.06	0.00	0.00	30.42	120.72	47547.52	179210.81
Marine (Total)	174.04	2837.76	4219	49163	-21.73	228.76	322045.36	5962606.66
Previous year (Total)	195.77	2609.00	4437	40345	-196.34	-145.30	350885.18	6306702.54
Aviation							0.00	
Previous year							0.00	
Engineering	159.67	3331.91	85.00	1216.00	-148.98	-28.46	81641.16	1126794.19
Previous year	308.65	3360.37	109.00	1042.00	-42.73	111.25	168435.53	1029137.62
Motor Own Damage	5720.32	66442.39	75284.00	885741.00	-1635.04	-7121.87	280821.63	3257479.59
Previous year	7355.36	73564.26	88936.00	957801.00	-359.35	2924.74	337643.34	3565274.73
Motor Third party	2223.06	26902.63	1519.00	17161.00	-674.26	1395.62		
Previous year	2897.32	25507.01	1229.00	8212.00	99.73	1099.99		
Motor (Total)	7943.38	93345.02	75284	885741	-2309.30	-5726.25	280821.63	3257479.59
Previous year (Total)	10252.68	99071.27	88936	957801	-259.62	4024.73	337643.34	3565274.73
Workmen's compensation / Employer's liability	13.68	336.58	78.00	1074.00	-12.72	35.62	2619.86	72713.34
Previous year	26.41	300.96	76.00	789.00	-0.96	56.29	4080.39	50177.56
Public Liability	32.44	935.12	26.00	405.00	41.71	-609.22	20086.81	246072.46
Previous year	-9.27	1544.34	26.00	459.00	-140.31	341.27	14335.54	325423.22
Product Liability	3.30	174.09	3.00	55.00	-53.86	-109.49	1067.74	51312.74
Previous year	57.16	283.59	19.00	89.00	50.36	-5.21	16363.34	93990.20
Other Liability Covers								
Previous year								
Liability (Total)	49.42	1445.80	107	1534	-24.88	-683.09	23774.41	370098.53
Previous year (Total)	74.30	2128.88	121	1337	-90.92	392.34	34779.27	469590.99
Personal Accident	224.05	3656.04	10478.00	141294.00	-190.11	-777.85	1684067.60	22620208.64
Previous year	414.16	4433.90	13255.00	147788.00	74.31	1162.65	3675226.97	23209415.78
Medical Insurance	1351.02	19448.59	27554.00	266413.00	-33.98	593.22	107669.39	2690335.42
Previous year	1385.01	18855.36	22886.00	234194.00	90.01	-730.47	213964.98	4768810.70
Overseas Medical Insurance								
Previous year								
Health (Total)	1351.02	19448.59	27554	266413	-33.98	593.22	107669.39	2690335.42
Previous year (Total)	1385.01	18855.36	22886	234194	90.01	-730.47	213964.98	4768810.70
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	67.61	1291.29	817.00	13592.00	-25.52	-186.71	258943.28	2029096.64
Previous year	93.13	1478.00	723.00	9197.00	25.22	-1304.79	981801.08	2843371.39
<b>Grand Total</b>	<b>10297.01</b>	<b>131678.41</b>	<b>121349</b>	<b>1389735</b>	<b>-2705.65</b>	<b>-9051.24</b>	<b>3242424.05</b>	<b>48894967.93</b>
Previous year (Total)	<b>13002.66</b>	<b>140729.64</b>	<b>132476</b>	<b>1418453</b>	<b>-401.47</b>	<b>7729.75</b>	<b>6342774.54</b>	<b>51827349.97</b>

\*Wherever applicable





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	3563.63	39378.49	25282.00	278787.00	518.88	12345.16	2574153.33	33483496.53
Previous year	3044.75	27033.33	23194.00	231872.00	1255.99	13855.40	1728799.07	20067176.55
Marine Cargo	83.90	898.27	314.00	2874.00	52.71	221.78	379622.14	3281452.33
Previous year	31.19	676.49	152.00	1146.00	-37.83	508.79	93741.96	1454934.79
Marine Hull (Including Onshore & Offshore oil energy)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marine (Total)	83.90	898.27	314	2874	52.71	221.78	379622.14	3281452.33
Previous year (Total)	31.19	676.49	152	1146	-37.83	508.79	93741.96	1454934.79
Aviation	0.00	457.88	0.00	100.00	0.00	-1289.90	0.00	120382.01
Previous year	0.00	1747.78	0.00	126.00	-222.49	-484.45	0.00	314697.61
Engineering	154.86	1780.96	333.00	3148.00	17.26	-155.31	142498.51	1365995.41
Previous year	137.60	1936.27	262.00	2563.00	-44.51	959.26	124049.15	1471520.92
Motor Own Damage	2220.58	22179.37	39123.00	379812.00	345.72	8646.91	184109.93	3660912.66
Previous year	1874.86	13532.46	29869.00	223728.00	1413.46	11603.22	502959.20	1690282.62
Motor Third party	1983.23	18431.75	362.00	2753.00	683.88	10013.20		
Previous year	1299.35	8418.55	75.00	640.00	1109.23	7869.73		
Motor (Total)	4203.81	40611.12	39123	379812	1029.60	18660.11	184109.93	3660912.66
Previous year (Total)	3174.21	21951.01	29869	223728	2522.69	19472.95	502959.20	1690282.62
Workmen's compensation / Employer's liability	4.83	170.67	43.00	564.00	-3.10	78.64	580.89	23625.28
Previous year	7.93	92.03	30.00	215.00	4.61	88.48	1054.47	9961.82
Public Liability	0.00	2.07	0.00	5.00	0.00	0.65	0.00	3826.18
Previous year	0.00	1.42	0.00	6.00	0.00	1.42	0.00	4980.00
Product Liability	0.00	13.73	0.00	2.00	0.00	13.73	0.00	7300.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Other Liability Covers	9.51	123.77	15.00	198.00	6.54	22.38	2537.00	52021.66
Previous year	2.97	101.39	9.00	97.00	2.97	101.39	1445.00	69741.00
Liability (Total)	14.34	310.24	58	769	3.44	115.40	3117.89	86773.13
Previous year (Total)	10.90	194.84	39	318	7.58	191.29	2499.47	84682.82
Personal Accident	1763.53	15810.63	585.00	3760.00	504.70	7067.72	3917003.44	43976920.96
Previous year	1258.83	8742.91	60.00	509.00	1258.83	8168.63	579237.80	13687978.22
Medical Insurance	358.40	1629.44	9822	29436	342.12	1005.78	21627.53	94956.48
Previous year	16.28	623.66	86	949	5.67	288.29	352.20	14416.65
Overseas Medical Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health (Total)	358.40	1629.44	9822	29436	342.12	1005.78	21627.53	94956.48
Previous year (Total)	16.28	623.66	86	949	5.67	288.29	352.20	14416.65
Crop Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Credit Guarantee	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
All Other Miscellaneous	260.51	3204.64	28377.00	280370.00	4.81	793.86	888856.82	24658344.49
Previous year	255.70	2410.78	20356.00	151369.00	122.73	1266.84	849125.21	23059497.57
<b>Grand Total</b>	<b>10402.97</b>	<b>104081.67</b>	<b>103894</b>	<b>979056</b>	<b>2473.51</b>	<b>38764.60</b>	<b>8110989.58</b>	<b>110729233.99</b>
Previous year (Total)	<b>7929.46</b>	<b>65317.07</b>	<b>74018</b>	<b>612580</b>	<b>4868.66</b>	<b>44227.00</b>	<b>3880764.05</b>	<b>61845187.75</b>

\*Wherever applicable





(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
856.02	10512.10	10490.00	120999.00	0.00	0.00	0.00	0.00		
710.87	7539.44	9643.00	89990.00	0.00	0.00	0.00	0.00		
28.70	69.87	76.00	214.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
28.70	69.87	76	214	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
38.86	449.45	114.00	1049.00	0.00	0.00	0.00	0.00		
45.29	345.41	92.00	759.00	0.00	0.00	0.00	0.00		
815.78	7760.53	15478.00	144807.00	135.67	468.54	5971.00	20597.00		
680.15	3565.74	12321.00	65453.00	0.00	0.00	0.00	0.00		
792.00	7093.35	133.00	777.00	131.31	452.46	11.00	24.00		
521.48	2342.65	0.00	38.00	0.00	0.00	0.00	0.00		
1607.77	14853.88	15478	144807	266.98	921.00	5982	20621		
1201.63	5908.39	12321	65453	0.00	0.00	0	0		
1.04	18.28	8.00	79.00	0.00	0.00	0.00	0.00		
0.00	17.72	0.00	38.00	0.00	0.00	0.00	0.00		
0.00	0.59	0.00	2.00	0.00	0.00	0.00	0.00		
0.00	0.61	0.00	2.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.32	3.61	1.00	25.00	0.00	0.00	0.00	0.00		
0.41	2.41	1.00	7.00	0.00	0.00	0.00	0.00		
1.36	22.49	9	106	0.00	0.00	0	0		
0.41	20.74	1	47	0.00	0.00	0	0		
5.63	24.05	74.00	95.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
133.42	393.23	4168.00	11747.00	0.00	0.00	0.00	0.00	16839.00	121332.00
1.10	3.11	23.00	103.00	0.00	0.00	0.00	0.00	411.00	24165.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
133.42	393.23	4168	11747	0.00	0.00	0	0	16839	121332
1.10	3.11	23	103	0.00	0.00	0	0	411	24165
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
131.24	857.61	16521.00	97962.00	27.17	161.61	12070.00	101985.00		
17.73	477.53	647.00	44326.00	0.00	0.00	0.00	0.00		
<b>2803.01</b>	<b>27182.68</b>	<b>46930</b>	<b>376979</b>	<b>294.15</b>	<b>1082.61</b>	<b>18052</b>	<b>122606</b>	<b>16839</b>	<b>121332</b>
<b>1977.03</b>	<b>14294.62</b>	<b>22727</b>	<b>200678</b>	<b>0.00</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>411</b>	<b>24165</b>



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	69.59	1012.36	1035	7344	18.07	154.60	81298.95	1710596.30
Previous year	51.52	857.76	682	3224	-22.68	169.02	45890.96	1896815.39
Marine Cargo	8.80	74.52	85	732	0.41	-84.08	16701.34	100226.07
Previous year	8.39	158.60	209	1918	1.08	21.09	14685.56	325275.46
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)	8.80	74.52	85	732	0.41	-84.08	16701.34	100226.07
Previous year (Total)	8.39	158.60	209	1918	1.08	21.09	14685.56	325275.46
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	51.97	579.01	165	1460	13.56	182.98	26333.96	295048.62
Previous year	38.41	396.03	94	627	-1.73	83.27	8826.77	284728.40
Motor Own Damage	4613.46	47156.84	122942	1309595	-775.61	-5082.16	432965.57	4645207.39
Previous year	5389.07	52239.00	134998	1416685	-137.00	4978.08	531049.15	5111713.23
Motor Third party	7655.76	86133.64	123711	1353449	-706.94	3534.23		
Previous year	8362.70	82599.41	139079	1462180	1197.56	20238.84		
Motor (Total)	12269.22	133290.48	123711	1353449	-1482.55	-1547.94	432965.57	4645207.39
Previous year (Total)	13751.77	134838.42	139079	1462180	1060.56	25216.92	531049.15	5111713.23
Workmen's compensation / Employer's liability	15.92	108.96	134	989	0.59	57.36	526.15	2696.30
Previous year	15.33	51.60	95	408	12.68	21.07	287.37	1152.25
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	0.40	24.12	32	137	0.21	4.97	605.00	25816.00
Previous year	0.19	19.15	17	89	-0.17	-2.65	271.00	25111.18
Liability (Total)	16.32	133.08	166	1126	0.80	62.33	1131.15	28512.30
Previous year (Total)	15.52	70.75	112	497	12.51	18.42	558.37	26263.43
Personal Accident	56.97	429.49	11762	39290	8.61	90.81	65369.16	614330.02
Previous year	48.36	338.68	1687	10565	10.90	83.43	56577.93	408524.70
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	16.65	479.29	453	4276	5.14	143.62	22950.77	926780.36
Previous year	11.52	335.67	441	2540	7.69	94.19	38826.53	1574627.19
<b>Grand Total</b>	<b>12489.53</b>	<b>135998.24</b>	<b>137377</b>	<b>1407677</b>	<b>-1435.96</b>	<b>-997.67</b>	<b>646750.90</b>	<b>8320701.05</b>
Previous year (Total)	<b>13925.49</b>	<b>136995.91</b>	<b>142304</b>	<b>1481551</b>	<b>1068.34</b>	<b>25686.34</b>	<b>696415.27</b>	<b>9627947.81</b>

\*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	2,182	30,043	9,474	112,004	-	-	6,967,000	188,085,757
Previous year	1,850	24,205	8,760	66,103	-	-	22,665,880	158,120,309
Marine Cargo	1,318	20,513	287	25,826	-	-	371,084	5,590,175
Previous year	1,169	19,721	3,484	40,070	-	-	428,940	6,072,760
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Marine (Total)	1,318	20,513	287	25,826	-	-	371,084	5,590,175
Previous year (Total)	1,169	19,721	3,484	40,070	-	-	428,940	6,072,760
Aviation	8	273	1	6	-	-	71,875	635,955
Previous year	-	104	-	7	-	-	-	1,450,549
Engineering	718	6,405	20	956	-	-	986,838	32,850,032
Previous year	191	4,917	73	982	-	-	640,921	18,052,688
Motor Own Damage	5,856	63,357	110,042	1,267,336	-	-	362,744	3,886,755
Previous year	6,568	65,070	154,488	1,690,071	-	-	384,107	3,743,622
Motor Third party	3,027	32,349	110,042	1,267,336	-	-	-	-
Previous year	3,004	26,693	154,488	1,690,071	-	-	-	-
Motor (Total)	8,883	95,707	110,042	1,267,336	-	-	362,744	3,886,755
Previous year (Total)	9,572	91,763	154,488	1,690,071	-	-	384,107	3,743,622
Workmen's compensation / Employer's liability	127	1,864	-	477	-	-	44,877	771,244
Previous year	119	1,766	36	396	-	-	52,927	549,572
Public Liability	(28)	2,611	85	595	-	-	78,071	2,550,011
Previous year	258	2,892	68	564	-	-	543,038	5,114,244
Product Liability	1	504	35	152	-	-	15,070	485,221
Previous year	90	529	13	97	-	-	99,416	883,816
Other Liability Covers	1,033	15,349	749	9,137	-	-	302,883	6,247,905
Previous year	621	12,182	797	8,349	-	-	413,725	5,145,377
Liability (Total)	1,133	20,328	869	10,361	-	-	440,902	10,054,381
Previous year (Total)	1,089	17,369	914	9,406	-	-	1,109,105	11,693,008
Personal Accident	681	14,367	15,125	177,694	-	-	13,571,805	108,039,476
Previous year	820	11,202	8,507	62,575	-	-	7,554,715	96,385,223
Medical Insurance	643	8,147	25,371	298,491	-	-	726,843	5,436,798
Previous year	1,577	8,530	3,161	18,086	-	-	254,191	1,871,505
Overseas Medical Insurance	796	11,451	28,057	231,909	-	-	8,061,095	79,446,068
Previous year	416	7,524	12,827	419,122	-	-	8,130,882	139,721,560
Health (Total)	1,440	19,598	53,428	530,400	-	-	8,787,937	84,882,866
Previous year (Total)	1,993	16,053	15,988	437,208	-	-	8,385,073	141,593,065
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	1,630	6,743	4,390	36,738	-	-	90,394	2,715,340
Previous year	303	4,996	5,043	56,667	-	-	15,219	1,992,702
<b>Grand Total</b>	<b>17,992</b>	<b>213,976</b>	<b>193,636</b>	<b>2,161,321</b>	-	-	<b>31,650,580</b>	<b>436,740,737</b>
Previous year (Total)	<b>16,987</b>	<b>190,329</b>	<b>197,257</b>	<b>2,363,089</b>	-	-	<b>41,183,960</b>	<b>439,103,926</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
161	2,770	1,126	13,672		-		-		
656	2,591	1,460	8,469	-	-	-	-	-	-
161	2,365	141	1,598		-		-		
157	2,280	157	1,682	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-	-	-
161	2,365	141	1,598	-	-	-	-	-	-
157	2,280	157	1,682	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-	-	-
4	124	8	147		-		-		
15	197	5	49	-	-	-	-	-	-
1,904	19,321	26,794	307,480		-		-		
1,857	16,416	41,292	419,933	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-	-	-
1,904	19,321	26,794	307,480	-	-	-	-	-	-
1,857	16,416	41,292	419,933	-	-	-	-	-	-
-	66	-	60		-		-		
1	37	5	28	-	-	-	-	-	-
66	1,197	126	1,226		-		-		
194	1,067	118	1,005	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-	-	-
66	1,262	126	1,286	-	-	-	-	-	-
195	1,104	123	1,033	-	-	-	-	-	-
119	1,527	5,730	65,175	-	4,631	-	1,905,392		
59	813	2,841	13,715	1,203	6,519	(77,511)	3,497,687	-	-
250	5,370	3,853	35,174		-		-		
517	5,926	290	3,884	-	-	-	-	-	-
43	582	215	4,278		-		-		
29	417	32	18,640	-	-	-	-	-	-
294	5,952	4,068	39,452	-	-	-	-	-	-
546	6,343	322	22,524	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-	-	-
1,067	2,870	3,276	23,522		-		-		
72	1,330	4,201	42,223	-	-	-	-	-	-
<b>3,776</b>	<b>36,191</b>	<b>41,269</b>	<b>452,332</b>	-	<b>4,631</b>	-	<b>1,905,392</b>	-	-
<b>3,558</b>	<b>31,075</b>	<b>50,401</b>	<b>509,628</b>	<b>1,203</b>	<b>6,519</b>	<b>(77,511)</b>	<b>3,497,687</b>	-	-



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	12581.86	123311.44	48009.00	598364	-751.06	4015.94	149414626.94	1090560090.86
Previous year	13332.92	119295.50	54989.00	606015			112911181.44	1086889907.29
Marine Cargo	2332.85	28800.73	20199.00	250621	-55.87	463.44	49274454.53	483489092.45
Previous year	2388.72	28337.29	21933.00	249550			57364675.46	286528050.04
Marine Hull (Including Onshore & Offshore oil energy)	1348.74	33667.84	2154.00	10101	288.02	4167.05	33772207.98	158291157.00
Previous year	1060.72	29500.79	1350.00	10189			104093200.71	307059522.33
Marine (Total)	3681.59	62468.57	22353	260722	232.15	4630.49	83046662.51	641780249.45
Previous year (Total)	3449.44	57838.08	23283	259739	0.00	0.00	161457876.17	593587572.37
Aviation	46.83	9796.16	42.00	706	-257.65	-903.03	6774959.68	270801854.06
Previous year	304.48	10699.19	34.00	675			2012193.14	167815745.60
Engineering	3817.81	36667.52	6104.00	56786	744.30	1196.03	55581812.01	259735008.77
Previous year	3073.51	35471.49	6555.00	60809			12176566.11	119692588.62
Motor Own Damage	20010.37	209692.21	696914.00	7112607	1887.43	32885.95	983045.52	57365332.31
Previous year	18122.94	176806.26	541240.00	6273981			2335095.84	28628328.70
Motor Third party	19600.90	205991.59	759076.00	7552160	4120.39	42875.50	0.00	
Previous year	15480.51	163116.09	838335.00	7891496			0.00	
Motor (Total)	39611.27	415683.80	759076	7552160	6007.82	75761.45	983045.52	57365332.31
Previous year (Total)	33603.45	339922.35	838335	7891496	0.00	0.00	2335095.84	28628328.70
Workmen's compensation / Employer's liability	668.22	8216	4919.00	66577	-232.12	922.19	500551.96	6117263
Previous year	900.34	7294	4889.00	67456			262527.14	1785082
Public Liability	6.14	128	35.00	562	211.16	11.74	1048.23	7718
Previous year	-205.02	117	81.00	596			3493.30	32448
Product Liability	13.17	571	11.00	178	5.60	18.67	288.37	215428.50
Previous year	7.57	553	7.00	78			32.51	12233
Other Liability Covers	986.60	14146	10472.00	82038	34.89	1405.24	283016.74	93855815
Previous year	951.71	12741	6516.00	74283			-11780.20	2493582
Liability (Total)	1674.13	23061.73	15437	149355	19.53	2357.84	784905.30	100196224.77
Previous year (Total)	1654.60	20703.89	11493	142413	0.00	0.00	254272.75	4323345.42
Personal Accident	1708.54	15360.85	43438.00	479328	246.38	-222.78	9503711.14	668001742.25
Previous year	1462.16	15583.63	48940.00	493087			238005750.91	454899484.62
Medical Insurance	21968.66	293123.96	141347.00	1426809	5692.80	46318.99	9707386.48	799383218.47
Previous year	16275.86	246804.97	162938.00	1432358			-103541487.38	124826590.45
Overseas Medical Insurance	160.61	970.14	856.00	26755	185.72	-34.19	66062.04	5548730.75
Previous year	-25.11	1004.33	4740.00	27445			21021.29	867401.69
Health (Total)	22129.27	294094.10	142203	1453564	5878.52	46284.80	9773448.52	804931949.22
Previous year (Total)	16250.75	247809.30	167678	1459803	0.00	0.00	-103520466.09	125693992.14
Crop Insurance	0.00	0.00	0.00	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0			0.00	0.00
Credit Guarantee	0.00	10.78	2.00	5	0.00	-11.95	3500.00	3500
Previous year	0.00	22.73	0.00	4			0.00	15000
All Other Miscellaneous	4801.80	49554.29	54634.00	914401	273.75	1252.30	21919985.60	437355321.60
Previous year	4528.05	48301.99	115561.00	912533			26699804.46	330449035.46
<b>Grand Total</b>	<b>90053.10</b>	<b>1030009.24</b>	<b>1091298</b>	<b>11465391</b>	<b>12393.74</b>	<b>134361.09</b>	<b>337786657.22</b>	<b>4330731273.29</b>
Previous year (Total)	<b>77659.36</b>	<b>895648.15</b>	<b>1266868</b>	<b>11826574</b>	<b>0.00</b>	<b>0.00</b>	<b>452332274.73</b>	<b>2911995000.22</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
1086.24	11134.94	6369.00	75411	193.51	2809.44	0.00	0		
1128.62	14458.95	5091.00	83223	-500.56	5069.63	0.00	0		
1477.99	4032.55	2886.00	18563	69.99	848.84	0.00	0		
206.03	4630.76	423.00	18032	38.24	1483.55	0.00	0		
26.28	338.37	134.00	529	19.55	68.15	0.00	0		
59.04	264.73	154.00	613	2.44	26.08	0.00	0		
1504.27	4370.92	3020	19092	89.54	916.99	0	0		
265.07	4895.49	577	18645	40.68	1509.63	0	0		
0.13	1.62	0.00	0	3.98	3.98	0.00	0		
0.00	12.20	0.00	0	0.00	0.00	0.00	0		
231.28	2758.55	-1500.00	5794	295.88	1205.82	0.00	0		
234.42	3843.09	741.00	6888	-127.41	1510.19	0.00	0		
2518.89	41803.60	59826.00	742230	687.39	8117.35	45197.00	499121		
4633.38	48681.07	116380.00	777766	1574.55	9644.36	125891.00	398790		
4015.25	58764.30	42939.00	785889	2799.87	14778.90	75847.00	741145		
4853.58	52505.47	70568.00	760612	1433.22	10579.14	211458.00	517708		
6534.14	100567.90	59826	785889	3487.26	22896.25	121044	1240266		
9486.96	101186.54	116380	777766	3007.77	20223.50	337349	916498		
62.62	1090	2053.00	6042	111.47	718	2416.00	22954		
123.00	1279	-95.00	9367	238.83	515	670.00	12523		
0.00	1	0.00	10	0.00	0	0.00	0		
0.43	2	0.00	14	0.17	0	0.00	0		
0.09	5	1.00	26	0.00	0	0.00	0		
63.65	82	0.00	19	25.63	28	0.00	0		
110.85	2064	46314.00	63890	43.54	710	964.00	8967		
256.03	2692	1534.00	17001	-132.91	1039	2156.00	9385		
173.56	3159.84	48368	69968	155.01	1428.75	3380	31921		
443.11	4055.00	1439	26401	131.72	1581.93	2826	21908		
66.40	1306.97	4667.00	51539	583.55	1733.52	101482.00	515348		
125.94	1974.16	-2500.00	55171	312.97	2505.59	34371.00	6121132		
2141.11	29620.14	11629.00	84702	546.55	16912.95	2080902.00	22996604	4924962	36780136
976.94	32383.10	1318.00	101755	2211.50	10758.93	-31993487.00	17587607	-32087538	29738569
-117.45	41.20	-642.00	739	13.99	82.94	375.00	3159	2160	24757
216.49	248.24	-110.00	656	0.32	32.44	1741.00	3567	3216	20713
2023.66	29661.34	10987	85441	560.54	16995.89	2081277	22999763	4927122	36804893
1193.43	32631.34	1208	102411	2211.82	10791.37	-31991746	17591174	-32084322	29759282
0.00	0.00	0.00	0	0.00	0	0.00	0		
0.00	0.00	0.00	0	0.00	0	0.00	0		
0.00	0.00	0.00	0	0.00	0	0.00	0		
0.00	0.00	0.00	0	0.00	0	0.00	0		
425.68	10320.08	2135.00	186253	292.43	2696.08	184176.00	5780184		
1173.13	13684.85	9136.00	297163	20.19	3849.93	-144969.00	3689547		
<b>12045.36</b>	<b>163282.16</b>	<b>133872</b>	<b>1279387</b>	<b>5661.70</b>	<b>50686.72</b>	<b>2491359</b>	<b>30567482</b>		
<b>14050.68</b>	<b>176741.62</b>	<b>132072</b>	<b>1367668</b>	<b>5097.18</b>	<b>47041.77</b>	<b>-31762169</b>	<b>28340259</b>		



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	6017.09	88691.86	40372	471627	-365.92	7951.61	10566606.99	231647501.14
Previous year	6383.01	80740.25	40370	453972				
Marine Cargo	2252.77	23543.93	12844	155003	691.54	-1200.65	6947453.88	66879083.08
Previous year	1561.23	24744.58	13160	160535				
Marine Hull (Including Onshore & Offshore oil energy)	599.56	19773.47	587	5120	-792.00	-18.43	198617.24	17290766.44
Previous year	1391.56	19791.90	674	4866				
Marine (Total)	2852.33	43317.40	13431	160123	-100.46	-1219.08	7146071.12	84169849.52
Previous year (Total)	2952.79	44536.48	13834	165401				
Aviation	2075.74	10803.15	39	407	1161.39	1676.31	1246845.38	14964609.34
Previous year	914.35	9126.84	27	358				
Engineering	3198.05	31309.41	4225	38434	-285.85	460.82	4286069.85	22716043.22
Previous year	3483.90	30848.59	4374	40055				
Motor Own Damage	9508.75	105002.41	483878	5369317	12.69	2537.94	678861.44	7144016.49
Previous year	9496.06	102464.47	462345	5145429				
Motor Third party	12127.33	132912.49	641729	7189405	1594.47	18849.33	0.00	0.00
Previous year	10532.86	114063.16	637484	6947740				
Motor (Total)	21636.08	237914.90	641729	7189405	1607.16	21387.27	678861.44	7144016.49
Previous year (Total)	20028.92	216527.63	637484	6947740				
Workmen's compensation / Employer's liability	507.65	7199.96	5312	60264	-19.17	305.82	10699.46	130671.84
Previous year	526.82	6894.14	5047	58764				
Public Liability	17.91	95.60	45	389	1.00	-3.38	764363.36	10286338.45
Previous year	16.91	98.98	35	395				
Product Liability	11.37	681.53	7	103	-6.80	205.18	77647.93	2769043.72
Previous year	18.17	476.35	11	93				
Other Liability Covers	331.17	3131.07	2877	32588	21.48	132.67	745299.38	13307278.81
Previous year	309.69	2998.40	2796	33193				
Liability (Total)	868.10	11108.16	8241	93344	-3.49	640.29	1598010.13	26493332.82
Previous year (Total)	871.59	10467.87	7889	92445				
Personal Accident	949.94	10992.11	72465	771028	-575.77	-638.74	2564297.94	20262132.07
Previous year	1525.71	11630.85	73456	786012				
Medical Insurance	12072.50	154255.26	110847	1058013	852.07	21412.42	436188.50	5764053.13
Previous year	11220.43	132842.84	108118	973691				
Overseas Medical Insurance	36.21	637.13	968	17614	-9.34	66.13	1629446.66	3433968.42
Previous year	45.55	571.00	1029	16244				
Health (Total)	12108.71	154892.39	111815	1075627	842.73	21478.55	2065635.16	9198021.55
Previous year (Total)	11265.98	133413.84	109147	989935				
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	5533.98	57093.41	65904	745545	660.44	10078.51	8912190.93	74147107.42
Previous year	4873.54	47014.90	71802	748672				
<b>Grand Total</b>	<b>55240.02</b>	<b>646122.79</b>	<b>958221</b>	<b>10545540</b>	<b>2940.23</b>	<b>61815.54</b>	<b>39064588.94</b>	<b>490742613.57</b>
Previous year (Total)	<b>52299.79</b>	<b>584307.25</b>	<b>958383</b>	<b>10224590</b>			<b>0.00</b>	<b>0.00</b>

\*Wherever applicable





(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
1396.58	7614.51	8739	94402	0.00	0.00	0	0	0	0
421.67	5405.07	8117	87660	0.00	0.00	0	0	0	0
81.46	1083.59	760	9097	0.00	0.00	0	0	0	0
69.15	933.16	585	7259	0.00	0.00	0	0	0	0
8.23	117.21	104	1137	0.00	0.00	0	0	0	0
8.05	125.31	114	1090	0.00	0.00	0	0	0	0
89.69	1200.80	864	10234	0.00	0.00	0	0	0	0
77.20	1058.47	699	8349	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
103.47	1330.00	475	5394	0.00	0.00	0	0	0	0
83.19	1084.54	522	8233	0.00	0.00	0	0	0	0
1935.49	20779.08	100862	1095747	0.00	0.00	0	0	0	0
1887.54	19393.80	93695	1004931	0.00	0.00	0	0	0	0
2913.12	30724.26	140885	1534036	0.00	0.00	279	43058	35796	784076
2422.58	24820.02	133603	1399146	0.00	0.00	1233	312157	94109	919535
4848.61	51503.34	140885	1534036	0.00	0.00	279	43058	35796	784076
4310.12	44213.82	133603	1399146	0.00	0.00	1233	312157	94109	919535
81.63	1116.56	875	10758	110.49	1793.92	0	0	0	0
76.54	973.91	914	10226	126.58	1784.35	0	0	0	0
1.38	3.69	5	24	0.00	0.00	0	0	0	0
1.64	5.14	2	31	0.00	0.00	0	0	0	0
0.00	2.21	0	4	0.00	0.00	0	0	0	0
0.00	0.74	0	4	0.00	0.00	0	0	0	0
30.18	299.92	282	2904	0.00	0.00	0	0	0	0
24.10	250.73	235	2904	0.00	0.00	0	0	0	0
113.19	1422.38	1162	13690	110.49	1793.92	0	0	0	0
102.28	1230.52	1151	13165	126.58	1784.35	0	0	0	0
64.57	918.56	13863	144523	169.13	2582.12	62	5575	507	25450
79.23	1012.41	14180	153422	628.64	3130.67	255	3706	1359	21901
607.32	5042.15	7952	71293	2069.36	23198.09	38	396	149	1532
433.11	3993.28	7614	63114	1968.28	22315.95	39	397	153	1743
1.49	23.22	40	742	0.00	0.00	0	0	0	0
1.62	25.26	30	690	0.00	0.00	0	0	0	0
608.81	5065.37	7992	72035	2069.36	23198.09	38	396	149	1532
434.73	4018.54	7644	63804	1968.28	22315.95	39	397	153	1743
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
1029.16	11873.35	26120	257723	2988.42	23880.96	1625	17093	1936	20776
863.42	9372.28	27933	250992	2205.93	16889.28	1565	46749	1384	48164
<b>8254.08</b>	<b>80928.31</b>	<b>200100</b>	<b>2132037</b>	<b>5337.40</b>	<b>51455.09</b>	<b>2004</b>	<b>66122</b>	<b>38388</b>	<b>831834</b>
<b>6371.84</b>	<b>67395.65</b>	<b>193849</b>	<b>1984771</b>	<b>4929.43</b>	<b>44120.25</b>	<b>3092</b>	<b>363009</b>	<b>97005</b>	<b>991343</b>



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	6876.01	105959.13	71004	816237	-891.02	6918.31	7449632	114798624
Previous year	7767.03	99040.82	158469	859831	1906.03	15114.82	8414984	107303163
Marine Cargo	2452.61	28408.58	21362	235349	46.92	-1081.49	5201718	60251496
Previous year	2405.69	29490.07	87440	308006	-342.31	-57.93	5102206	62545217
Marine Hull (Including Onshore & Offshore oil energy)	631.48	28352.61	1947	19424	283.89	2694.94	227151	10198781
Previous year	347.59	25657.67	8151	24011	-1417.41	3581.67	125032	9229378
Marine (Total)	3084.09	56761.19	23309	254773	330.81	1613.45	5428869	70450276
Previous year (Total)	2753.28	55147.74	95591	332017	-1759.72	3523.74	5227238	71774595
Aviation	1024.34	4755.64	178	1628	80.40	-391.61	153689	713524
Previous year	943.94	5147.25	199	1868	259.94	2991.25	141626	772280
Engineering	4212.22	48636.35	9798	112073	-7.54	875.32	1815612	20963944
Previous year	4219.76	47761.03	45791	147470	-210.24	2141.03	1818862	20586651
Motor Own Damage	15065.31	150694.29	575137	6411339	124.73	-4013.99	2137688	21382719
Previous year	14940.58	154708.28	525649	6196911	2031.58	29584.28	2119989	21952284
Motor Third party	17649.11	181111.98	918316	10482349	3184.07	29575.95		0
Previous year	14465.04	151536.03	858513	10221255	823.04	19680.03	0	0
Motor (Total)	32714.42	331806.27	918316	10482349	3308.80	25561.96	2137688	21382719
Previous year (Total)	29405.62	306244.31	858513	10221255	2854.62	49264.31	2119989	21952284
Workmen's compensation / Employer's liability	643.90	8105.70	5723	105273	14.28	272.69		0
Previous year	629.62	7833.01	6948	105139	140.26	753.02	0	0
Public Liability	59.20	987.23	442	5378	-29.71	-179.43	10034	167327
Previous year	88.91	1166.66	1920	6404	85.98	-611.24	15069	197739
Product Liability	38.52	915.42	108	5118	-4.54	-29.95	7664	182137
Previous year	43.06	945.37	637	1852	-30.02	64.57	8567	188096
Other Liability Covers	251.27	3519.02	2638	35394	58.62	1347.91	76446	1070620
Previous year	192.65	2171.11	1230	27949	129.34	-608.88	58611	660534
Liability (Total)	992.89	13527.37	8911	151163	38.65	1411.22	94144	1420083
Previous year (Total)	954.24	12116.15	10735	141345	325.56	-402.53	82248	1046369
Personal Accident	1006.58	14285.14	80330	517226	165.32	897.83	3314389	47037011
Previous year	841.26	13387.31	131342	535996	-433.27	-4309.69	2770036	44080704
Medical Insurance	13768.09	241688.09	135765	2165755	-2072.64	8044.11	1901860	33385676
Previous year	15840.73	233643.98	126942	2123810	5486.73	66319.21	2188165	32274500
Overseas Medical Insurance	36.24	558.90	1708	14238	10.58	-250.08	10662	164431
Previous year	25.66	808.98	242	17249	-623.34	-10431.25	7549	238006
Health (Total)	13804.33	242246.99	137473	2179993	-2062.06	7794.03	1912522	33550107
Previous year (Total)	15866.39	234452.96	127184	2141059	4863.39	55887.96	2195715	32512506
Crop Insurance	24.30	219.96	108	50709	24.30	219.96		1463
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Credit Guarantee	0.00	7.51	46	57	0.00	7.51		0
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
All Other Miscellaneous	4351.24	56916.63	130863	1939037	-188.16	-930.03	838793	10971881
Previous year	4539.40	57846.66	132427	2009110	-185.39	5626.34	875065	11151163
<b>Grand Total</b>	<b>68090.42</b>	<b>875122.18</b>	<b>1380336</b>	<b>16505245</b>	<b>799.50</b>	<b>43977.95</b>	<b>23145338</b>	<b>321289633</b>
Previous year (Total)	<b>67290.92</b>	<b>831144.23</b>	<b>1560252</b>	<b>16389952</b>	<b>7620.92</b>	<b>129837.23</b>	<b>23645764</b>	<b>311179716</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

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
134.80	8563.04	6800	172830	0.00	0.00	0	0		
673.94	8002.84	13466	151824	0.00	0.00	0	0		
18.11	1355.54	643	26419	0.00	0.00	0	0		
15.75	1178.73	621	22101	0.00	0.00	0	0		
0.59	133.19	18	2583	0.00	0.00	0	0		
0.47	106.55	16	1848	0.00	0.00	0	0		
18.70	1488.73	661	29002	0.00	0.00	0	0		
16.22	1285.28	637	23949	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.06	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
101.86	2794.99	2689	45591	0.00	0.00	0	0		
99.88	2526.12	2601	38353	0.00	0.00	0	0		
1315.66	35706.18	90135	1174004	0.00	0.00	0	0		
1185.28	32167.73	97143	978337	0.00	0.00	0	0		
1080.83	31431.89	90862	1753998	0.00	0.00	0	0		
973.72	28317.02	123213	1486439	0.00	0.00	0	0		
2396.49	67138.07	90862	1753998	0.00	0.00	0	0		
2159.00	60484.75	123213	1486439	0.00	0.00	0	0		
5.88	888.98	99	20364	835.04	1634.49	44696	90568		
4.52	683.83	77	15909	811.81	1472.51	39096	81593		
1.91	54.98	11	1205	0.00	0.00	0	0		
3.83	49.98	10	1076	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
4.38	223.89	286	3263	0.00	0.00	0	0		
3.78	193.01	284	2610	0.00	0.00	0	0		
12.17	1167.85	396	24832	835.04	1634.49	44696	90568		
12.13	926.82	371	19595	811.81	1472.51	39096	81593		
108.43	9529.29	3666	105230	297.86	5036.92	2364817	9067043		
84.71	7444.76	5120	87692	376.33	4497.25	975385	3663170		
701.04	23744.85	8776	304702	99.36	42697.67	397021	36655664	1236845	38544356
682.94	20378.50	23010	234386	66.23	37779.00	285385	26896903	5239839	32152922
0.00	284.02	0	4558	0.00	0.00	0	0	348	8932
0.00	236.68	0	3561	0.00	0.00	0	0	242	26559
701.04	24028.87	8776	309260	99.36	42697.67	397021	36655664	1237193	38553288
682.94	20615.18	23010	237947	66.23	37779.00	285385	26896903	5240081	32179481
24.30	219.96	108	31919	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	0.01	0	0		
987.21	23215.49	522077	1034434	907.89	16016.77	2978	907938		
1389.12	20831.17	488142	1014151	2403.21	14889.89	7815	789267		
<b>4485.00</b>	<b>138146.29</b>	<b>636035</b>	<b>3507097</b>	<b>2140.15</b>	<b>65385.91</b>	<b>2809512</b>	<b>46721213</b>	<b>1237193</b>	<b>38553288</b>
<b>5117.94</b>	<b>122116.93</b>	<b>656560</b>	<b>3059951</b>	<b>3657.58</b>	<b>58638.66</b>	<b>1307681</b>	<b>31430933</b>	<b>5240081</b>	<b>32179481</b>



Name of the Insurer: Universal Sompo 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	746.33	9553.79	11584.00	116364.00	120.59	1676.25	929046.10	15114297.34
Previous year	625.74	7877.53	9034.00	102567.00	75.51	1193.49	644226.49	13042262.93
Marine Cargo	114.04	1745.68	184.00	2095.00	39.22	414.17	1412921.25	16642367.96
Previous year	74.82	1331.52	224.00	2099.00	65.39	540.23	756482.42	11953983.70
Marine Hull (Including Onshore & Offshore oil energy)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marine (Total)	114.04	1745.68	184	2095	39.22	414.17	1412921.25	16642367.96
Previous year (Total)	74.82	1331.52	224	2099	65.39	540.23	756482.42	11953983.70
Aviation	0.00	34.45	0.00	7.00	0.00	34.45	0.00	50100.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Engineering	75.00	1664.64	125.00	1610.00	-89.28	533.69	18442.78	720926.47
Previous year	164.28	1130.96	158.00	1843.00	-9.96	270.64	31893.14	664118.92
Motor Own Damage	1072.45	11176.89	33213.00	360326.00	-202.56	-1790.00	152356.62	1612379.24
Previous year	1275.01	12966.89	40694.00	420348.00	2.21	-2240.49	106199.16	1078553.27
Motor Third party	848.81	9156.40	0.00	0.00	-434.69	-3181.91		
Previous year	1283.50	12338.31	0.00	0.00	965.29	8483.18		
Motor (Total)	1921.26	20333.29	33213	360326	-637.25	-4971.91	152356.62	1612379.24
Previous year (Total)	2558.51	25305.20	40694	420348	967.50	6242.69	106199.16	1078553.27
Workmen's compensation / Employer's liability	13	192	98	1348	-2.63	-18.10	1217	38286
Previous year	15.84	209.70	145.00	1341.00	-0.14	13.47	2093.54	40649.31
Public Liability	0.00	2.21	0.00	10.00	0.00	-0.47	0	8365
Previous year	0.00	2.68	0.00	11.00	-0.03	-4.89	0.00	6250.00
Product Liability	1.60	28.25	0.00	14.00	1.60	8.63	579.50	5339.00
Previous year	0.00	19.62	0.00	11.00	0.00	10.62	0.00	3952.75
Other Liability Covers	7	153	10	181	-0.52	21.07	1859	38898
Previous year	8	132	15	188	6	69	2940	44631
Liability (Total)	22.03	375.44	108	1553	-1.54	11.14	3656.09	90888.19
Previous year (Total)	23.57	364.31	160	1551	5.97	88.39	5033.84	95482.59
Personal Accident	59.88	572.52	607	6930	22.09	107.91	413819.02	15699944.41
Previous year	37.79	464.61	556.00	6763.00	15.72	27.75	108287.57	3864071.91
Medical Insurance	805.20	7005.85	21066	102119	313.47	2391.18	99153.81	518068.61
Previous year	491.74	4614.67	14177	80288	262.29	1420.61	36807.86	270090.64
Overseas Medical Insurance	1.91	23.57	103.00	1495.00	0.54	9.92	18135.88	407451.21
Previous year	1.37	13.65	66.00	1480.00	0.71	3.77	49759.18	338055.50
Health (Total)	807.11	7029.43	21169	103614	314.00	2401.11	117289.69	925519.81
Previous year (Total)	493.11	4628.32	14243	81768	263.00	1424.37	86567.04	608146.14
Crop Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Credit Guarantee	1.15	18.62	1.00	10.00	1.15	18.62	7000.00	30400.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
All Other Miscellaneous	444.59	5557.59	14420.00	159624.00	25.32	280.40	248252.33	3604008.57
Previous year	419.27	5277.19	14275.00	160039.00	22.73	1006.92	296170.56	3095847.23
<b>Grand Total</b>	<b>4191.39</b>	<b>46885.45</b>	<b>81411</b>	<b>752133</b>	<b>-205.70</b>	<b>505.82</b>	<b>3302783.88</b>	<b>54490832.00</b>
Previous year (Total)	<b>4397.09</b>	<b>46379.62</b>	<b>79344</b>	<b>776978</b>	<b>1405.86</b>	<b>10794.49</b>	<b>2034860.23</b>	<b>34402466.69</b>

\*Wherever applicable



(Premium in ₹ Lakhs)

## FOR AND UP TO THE MONTH OF FEBRUARY, 2014

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0.00	0.00	15.62	113.27	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	493.88	501.96	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0	0	493.88	501.96	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	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		
185.47	2086.47	5056.00	61354.00	0.00	0.00	0.00	0.00		
183.40	2095.25	5551.00	65732.00	0	0.00	0	0		
<b>185.47</b>	<b>2086.47</b>	<b>5056</b>	<b>61354</b>	<b>509.50</b>	<b>615.23</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>183.40</b>	<b>2095.25</b>	<b>5551</b>	<b>65732</b>	<b>0.00</b>	<b>0.00</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



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

## BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)								
Previous year (Total)								
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)								
Previous year (Total)								
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)								
Previous year (Total)								
Personal Accident								
Previous year								
Medical Insurance								
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)								
Previous year (Total)								
Crop Insurance	36900.94	312584.31	50225	1143040	-10815.74	11716.16	354302.83	6082753.01
Previous year	47716.68	300868.15	43889	575410	10166.67	57695.62	617709.17	5768004.38
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total	<b>36900.94</b>	<b>312584.31</b>	<b>50225</b>	<b>1143040</b>	<b>-10815.74</b>	<b>11716.16</b>	<b>354302.83</b>	<b>6082753.01</b>
Previous year (Total)	<b>47716.68</b>	<b>300868.15</b>	<b>43889</b>	<b>575410</b>	<b>10166.67</b>	<b>57695.62</b>	<b>617709.17</b>	<b>5768004.38</b>

\*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	164.06	1394.24	5144	37223.00	164.06	1394.24	247571.62	3007527.09
Previous year	120.43	1088.60	3573	31449.00	120.43	1088.60	191236.29	1633467.85
Medical Insurance	5652.88	56778.80	47732	361353.00	5652.88	56778.80	243324.44	2908028.04
Previous year	7749.78	52383.00	35893	265438.00	7749.78	52383.00	207173.44	2048203.02
Overseas Medical Insurance	44.01	623.79	1865	26402.00	44.01	623.79	289912.00	4067845.25
Previous year	34.97	519.11	2171	22953.00	34.97	519.11	220360.75	2608087.36
Health (Total)	5696.89	57402.59	49597	387755	5696.89	57402.59	533236.44	6975873.29
Previous year (Total)	7784.75	52902.11	38064	288391	7784.75	52902.11	427534.19	4656290.39
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	42.43	1063.08	0	2	42.43	1063.08	25046.00	3350643.00
Previous year	53.99	773.45	0	2	53.99	773.45	400185.00	3767275.00
<b>Grand Total</b>	<b>5903.38</b>	<b>59859.90</b>	<b>54741</b>	<b>424980</b>	<b>5903.38</b>	<b>59859.90</b>	<b>805854.06</b>	<b>13334043.38</b>
Previous year (Total)	<b>7959.17</b>	<b>54764.16</b>	<b>41637</b>	<b>319842</b>	<b>7959.17</b>	<b>54764.16</b>	<b>1018955.48</b>	<b>10057033.24</b>

\*Wherever applicable







Name of the Insurer: CignaTTK 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	29.32	33.66	415	555	29.32	33.66	1540.00	2114.50
Previous year	0.00							
Overseas Medical Insurance								
Previous year								
Health (Total)	29.32	33.66	415	555	29	34	1540.00	2114.50
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								
Previous year								
Grand Total	29.32	33.66	415	555	58.64	67.32	1540.00	2114.50
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00

\*Wherever applicable





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

### BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident								
Previous year								
Medical Insurance								
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Crop Insurance								
Previous year								
Credit Guarantee	11360	114321	775	8327	1207	11843	264635	3458314
Previous year	10153	102478	837	8617	2035	15543	307523	4246707
All Other Miscellaneous								
Previous year								
Grand Total	<b>11359.59</b>	<b>114320.85</b>	<b>775</b>	<b>8327</b>	<b>1206.55</b>	<b>11842.50</b>	<b>264634.73</b>	<b>3458314.08</b>
Previous year (Total)	<b>10153.04</b>	<b>102478.40</b>	<b>837</b>	<b>8617</b>	<b>2034.90</b>	<b>15542.85</b>	<b>307522.70</b>	<b>4246706.95</b>

\*Wherever applicable





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)								
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	13.51	125.96	28.00	267.00	13.51	125.96	13,727.30	159,877.82
Previous year	-	-	-	-	-	-	-	-
Medical Insurance	2,747.77	26,530.91	17,156.00	176,408.00	2,747.77	26,530.91	203,497.30	1,955,556.66
Previous year	1,871.76	17,520.90	15,616.00	134,539.00	1,871.76	17,520.90	125,325.13	690,444.57
Overseas Medical Insurance								
Previous year								
Health (Total)	2747.77	26530.91	17156.00	176408.00	2747.77	26530.91	203497.30	1955556.66
Previous year (Total)	1871.76	17520.90	15616.00	134539.00	1871.76	17520.90	125325.13	690444.57
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total	2,761.28	26,656.87	17,184.00	176,675.00	2,761.28	26,656.87	217,224.60	2,115,434.48
Previous year (Total)	1,871.76	17,520.90	15,616.00	134,539.00	1,871.76	17,520.90	125,325.13	690,444.57

\*Wherever applicable





Name of the Insurer: *Religare 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	16.17	193.92	36.00	248.00	-17.01	160.74	39177.31	445648.58
Previous year	33.18	33.18	23.00	23.00	33.18	33.18	110404.79	110404.79
Medical Insurance	1591.36	13881.86	9617.00	55786.00	1036.93	10615.21	116272.83	972115.83
Previous year	554.43	3266.65	2692.00	12372.00	554.43	3266.65	35917.75	141066.70
Overseas Medical Insurance	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Health (Total)	1591.36	13881.86	9617.00	55786.00	1036.93	10615.21	116272.83	972115.83
Previous year (Total)	554.43	3266.65	2692	12372	554.43	3266.65	35917.75	141066.70
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total	1607.52	14075.78	9653	56034	1019.91	10775.95	155450.14	1417764.41
Previous year (Total)	587.61	3299.83	2715	12395	587.61	3299.83	146322.54	251471.49

\*Wherever applicable







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	160.63	1890.31	13588	136948.00	44.63	542.22	175468.29	2122643.65
Previous year	116.00	1348.09	11445	120575.00	19.69	121.30	131863.35	2076769.58
Medical Insurance	10102.79	91463.08	131316	1206521.00	2676.62	19970.09	723112.26	7486861.63
Previous year	7426.17	71492.99	121071	1087536.00	2382.27	-34481.82	520037.15	4604321.38
Overseas Medical Insurance	60.44	1102.51	1752	36291.00	-26.58	-95.59	245236.48	3921993.88
Previous year	87.02	1198.10	2547	39795.00	12.50	70.26	274942.80	4336859.87
Health (Total)	10163.23	92565.59	133068	1242812	2650.04	19874.50	968348.74	11408855.51
Previous year (Total)	7513.19	72691.09	123618	1127331	2394.77	-34411.56	794979.95	8941181.25
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	0.00	0.00	0	0.00	0.00	0.00	0	0.00
Previous year	0.00	0.00	0	0.00	0.00	-276.10	0	0.00
Grand Total	<b>10323.86</b>	<b>94455.90</b>	<b>146656</b>	<b>1379760</b>	<b>2694.67</b>	<b>20416.72</b>	<b>1143817.03</b>	<b>13531499.16</b>
Previous year (Total)	<b>7629.19</b>	<b>74039.18</b>	<b>135063</b>	<b>1247906</b>	<b>2414.46</b>	<b>-34566.36</b>	<b>926843.30</b>	<b>11017950.83</b>

\*Wherever applicable





# GET READY FOR A MARATHON!

**A Unit Linked Insurance Policy (ULIP) is a long term instrument for Risk Protection with a lock-in period of 5 years.**

- Do you know that if you do not pay your premiums on time, your policy stands discontinued? **You must keep your policy alive by paying premium on time.**
- Do you know that if your policy is discontinued you have an option of reviving it or completely withdrawing from it? **If you don't exercise the option within 30 days, it would be deemed that you are withdrawing from the policy.**
- Do you know what you will get when you discontinue your policy? **If you discontinue your policy, the proceeds of the discontinued policy will be given to you on completion of five policy years and you earn an interest rate of 3.50% p.a on the fund from the date of discontinuance.**
- Have you ascertained the charges levied for discontinuance of your policy? **Ask for details of the Discontinuance Charges.**

**Remember that if you don't pay premium every year for 5 years, there will be a Discontinuance Charge. Discontinuance Charge will not apply to Single Premium policies.**



A public awareness initiative by

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## EVENTS

26 - 28 May 2014 Venue: Singapore	<b>8th Asia Insurance CFO Summit</b> By Asia Insurance Review.
26 - 30 May 2014 Venue: NIA, Pune	<b>Prevention of Insurance Frauds</b> By National Insurance Academy.
02 - 04 Jun 2014 Venue: NIA, Pune	<b>Management of Liability Insurance</b> By National Insurance Academy.
09 - 11 Jun 2014 Venue: NIA, Pune	<b>Claims Management (Non-Life)</b> By National Insurance Academy.
10 - 11 Jun 2014 Venue: Singapore	<b>Asia Agriculture Insurance Conference</b> By Asia Insurance Review.
11 - 12 Jun 2014 Venue: Kuala Lumpur	<b>Family Takaful Summit</b> By World Takaful Conference.
18 - 20 Jun 2014 Venue: Taipei, Taiwan	<b>Strategic Issues Conference</b> By LIMRA/LOMA
02 - 03 Jul 2014 Venue: Singapore	<b>Asia Cyber Liability Insurance Conference</b> By Asia Insurance Review.
02 - 04 Jul 2014 Venue: NIA, Pune	<b>Management of Motor Underwriting &amp; Claims (OD)</b> By National Insurance Academy.
14 - 16 Jul 2014 Venue: NIA, Pune	<b>Workshop on Effective Communication (Non-Life)</b> By National Insurance Academy.

# view point



All too often, people only think about their insurance when something bad happens and they need to file a claim or lodge a complaint.

**Mr. Adam Hamm**

NAIC President and North Dakota Insurance Commissioner.

Going forward, governments can no longer act as the 'insurer of last resort'. In light of Asia's widening protection gap, governments would need to shift away from retaining risks, and transfer a larger proportion of risks to the insurance industry, in order to increase their national resilience against natural disasters.

**Ms. Jacqueline Loh**

Deputy Managing Director, Monetary Authority of Singapore.

If none of the depositors or policyholders or members of our institutions have suffered any losses, does this mean we have done our job well and provided value? Not necessarily - that might be just good luck, or a function of a strong economy.

**Mr. Ian Laughlin**

Deputy Chairman Australian Prudential Regulation Authority.

Asia will have a much shorter timeframe to ensure an adequate social safety net is in place to support an aged society. Greater reliance will therefore be placed on the insurance sector to keep pace with the growing demand for old age protection and healthcare funding.

**Mr. Donald Joshua Jaganathan**

Assistant Governor, Bank Negara Malaysia.

The Authority's view is that no financial services product should be sold to the community without appropriate regulatory oversight.

**Mr. Craig Swan**

Managing Director, Supervision, Bermuda Monetary Authority.

Improvement in insurance penetration achieved through reasonably priced products is good for the customers as well as the industry.

**Mr. T.S. Vijayan**

Chairman, Insurance Regulatory and Development Authority, India.



**If undelivered please return to:**

IRDA, Parishram Bhavan, 3rd Floor, Basheer Bagh, Hyderabad - 500 004. Ph: +91-40-23381100