



Volume VIII, No. 1

Journal

January 2010

Richer Data Better Results



बीमा विनियामक और विकास प्राधिकरण

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Printed by Alapati Bapanna and
published by J. Hari Narayan on behalf of
Insurance Regulatory and Development Authority.

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Printed at Kala Jyothi Process Ltd.
(with design inputs from Wide Reach)
1-1-60/5, RTC Cross Roads
Musheerabad, Hyderabad - 500 020
and published from

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5-9-58/B, Basheer Bagh
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From the Publisher



The increasing importance of information and a strong database is perceptible in modern times, in general; and particularly at times of global financial crises – such as the one we have been witness to, more recently. It is possible that the existence of a strong information base could have bailed out an organization from jeopardy; whereas a better performing firm could have slipped into a chaotic situation, just because they did not have the support of a vibrant database. Considering the value addition that data can bring to management decisions, pioneering work has been done in coming out with industry-related solutions that have been assuming huge importance lately.

Historically, Indian insurance business did not enjoy the benefits of sharing information among its players. For their own reasons, insurers always believed in holding the cards close to their chest; and unfortunately, no major attempt has been made to create a vibrant platform of information that could help the progress of the industry. More recently, this trend has been seen to be reversed; and modern insurers increasingly realize the importance of not only creating a strong database but also to share it with others, so that the adverse factors of business

can be negated. Even for the supervisors, it has been a priority to ensure that there is a reliable and comprehensive database that would serve as a strong basis for taking forward its functions. Thankfully, we have been making good progress in this regard.

Indian insurance industry is still in an evolving stage, in a sense; and in order that the attempt to attain global standards is accomplished eventually, sitting on a mine of information is the first priority. To implement such regulatory regimes as Risk Based Capital, International Financial Reporting Standards etc; the need for a highly efficient informational database is of the highest order. It is our endeavour to progress towards building such a strong database; and in this attempt, we also look forward to total support from the players as well as the other stakeholders.

‘Data Warehousing and Mining in Insurance’ is the focus of this issue of the **Journal**. If the controversies associated with business conduct in the insurance industry are to be brought down drastically, it is essential that there is proper training at every level of management and staff. ‘Training in Insurance’ will be the focus of the next issue of the **Journal**.

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

J. Hari Narayan

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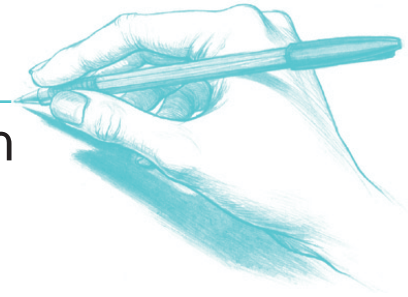
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Going With the Times

- Importance of Information



It is not very long ago that corporate houses used to depend on total manual effort to transact their businesses. Can one really visualize such a possibility today? Leave alone conducting an entire business, we feel greatly handicapped even by the intermittent failure of the computer systems. This holds true for all countries across the world, their level of economic development notwithstanding; and for all businesses however big or small. In a way, one can say that business processes have been revolutionized during the last century.

The other factor that would complement the onset of total computerization is information. The top managements right down up to the lowest levels of decision-making units feel greatly deprived when they are not supported by relevant 'information'. Information support for decision-making has once again cut across the globe and the types of businesses; and has come to occupy a very important place in operations today. Insurance business, more than any other, has to depend on lots of information for taking vital decisions as regards investments, underwriting, pricing etc just to name a few. Apart from the luxury of keeping at one's disposal tonnes of information, it is also essential that there are efficient methods of making use of the same. It would be futile to emphasize that the accent is not merely on gathering information just to be in vogue; but to ensure that it is relevant and useful.

The focus of this issue of the **Journal** is on 'Data Warehousing and Mining'. How

befitting it is then that it is exactly in this issue that we are expanding the scope of statistical information in the **Journal!** But more about that later. We open the account with an article by Mr. Thomas Varghese and Mr. Vishal Shah in which they lucidly describe the relevance of data warehousing in the insurance industry and some of the functions that it can fulfill. Ms. Nirmala Ayyar, in her article entitled 'Data Integrity in Life Insurance' brings in the role of the supervisors in mandating the players towards higher disclosures; and the tools required for such a regime. In the next article by Dr. George Thomas, you get to see the depth up to which the insurers can go to enrich themselves with the benefits of information.

Customer Relationship Management has been occupying a place of prominence in the successful conduct of business. Ms. Geeta Sarin suggests ways on how Data Warehousing and Mining can be made use of to achieve better standards in this area. The next article by Mr. Abhay Johory describes the process of how integration of information from varied sources can be accomplished through warehousing. In the last article, Ms. Vandana Bharadwaj talks about the relationship between business intelligence and data warehousing; and about the required architecture. Starting from this month, we will be publishing several more monthly statistics. In addition, there will also be quarterly information about various business parameters. We look forward to a positive feedback from the readers that will enable us to take it forward and ensure that the **Journal** becomes a good source of information for all the stakeholders.

One aspect that has been talked about frequently in the insurance domain is that the customer is not given to make an informed decision. Perhaps this would explain the reasons for insurance being an oft-quoted activity as regards customer related controversies. A well-trained work-force at all levels will go a long way in alleviating this problem to a great extent. 'Training in Insurance' will be the focus of the next issue of the **Journal**.

U. Jawaharlal

Report Card:LIFE

statistics - life insurance

First Year Premium of Life Insurers for the Period Ended November 2009

Sl No.	Insurer	Premium u/w (Rs. in Crores)			No. of Policies / Schemes			No. of lives covered under Group Schemes		
		November, 09	Up to November, 09	Up to November, 08	November, 09	Up to November, 09	Up to November, 08	November, 09	Up to November, 09	Up to November, 08
1	Bajaj Allianz	35.90	193.52	227.46	6815	42352	57997	8205	57997	1946
	Individual Single Premium	270.18	1618.10	2375.88	194939	1179263	1564597	1461475	1564597	4287358
	Group Single Premium	4.58	34.65	2.42	0	7	2	0	2	0
2	ING Vysya	26.94	243.95	64.48	171	582	414	8205	10769440	47691
	Individual Single Premium	0.89	5.53	18.48	129	782	2256	103	1504	4121
	Individual Non-Single Premium	38.05	371.36	381.32	19074	174789	208375	1405	3248	44119
3	Reliance Life	0.55	0.21	10.84	0	0	1	5031	0	40805
	Group Single Premium	0.04	0.21	17.09	0	0	81	29262	600646	486643
	Group Non-Single Premium	50.12	130.84	244.01	8635	24572	60647	0	0	0
4	SBI Life	189.86	1482.89	1612.79	163867	1226771	1050964	8958	73922	91823
	Individual Single Premium	0.99	76.66	74.47	1	7	19	116652	896612	2963170
	Individual Non-Single Premium	6.41	56.54	19.37	50	318	202	4542	27171	71432
5	Tata AIG	43.21	256.28	350.62	6913	44485	59242	3470	92048	229968
	Individual Single Premium	310.63	1883.19	1550.48	98771	721995	447859	8958	73922	91823
	Group Single Premium	21.94	161.48	160.25	0	1	4	116652	896612	2963170
6	HDFC Standard	74.33	1223.36	1230.64	12	89	75	4542	27171	71432
	Individual Single Premium	1.41	10.82	28.93	237	2316	5924	3470	92048	229968
	Individual Non-Single Premium	79.79	601.99	527.25	49889	433916	415398	4542	27171	71432
7	ICICI Prudential	2.35	16.13	23.87	2	8	7	9731	232055	142487
	Group Single Premium	12.58	82.90	44.55	7	48	48	469	6905	15578
	Group Non-Single Premium	12.71	92.73	83.70	10915	257496	31156	9731	232055	142487
8	Birla Sunlife	187.72	1345.15	1487.88	50643	395400	510584	469	790559	464748
	Individual Single Premium	12.28	144.22	54.81	14	154	96	132458	428328	486576
	Individual Non-Single Premium	1.08	25.45	15.29	0	6	8	469	6905	15578
9	Aviva	14.92	85.35	145.93	921	8789	25751	132458	790559	464748
	Individual Single Premium	396.03	2430.04	3239.52	129799	1074604	1620096	132458	428328	486576
	Group Single Premium	10.20	107.17	171.58	23	217	175	11282	428328	486576
10	Kotak Mahindra Old Mutual	22.74	409.34	691.21	2	267	299	8	226768	37238
	Individual Single Premium	3.40	28.42	22.92	13402	76709	102705	8	676	148274
	Individual Non-Single Premium	174.62	1316.50	1355.05	142260	980639	587579	0	0	65
11	Max New York	-0.03	0.01	0.05	0	0	1	158972	1259939	598759
	Group Single Premium	0.85	55.86	13.81	40	453	282	34088	108885	90206
	Group Non-Single Premium	16.21	125.02	160.67	502	4623	11098	72246	436242	369250
12	Met Life	104.36	940.38	989.46	57524	599305	724840	486	3863240	206478
	Individual Single Premium	0.16	3.28	7.45	0	17	10	486	3863240	194326
	Individual Non-Single Premium	0.85	55.86	13.81	40	453	282	34088	108885	90206
13	Met Life	2.30	6.62	4.09	91	716	1459	2087	10342	215919
	Individual Single Premium	80.78	487.12	579.16	25518	162163	157343	2087	10342	215919
	Group Single Premium	4.63	21.89	19.85	0	0	91	71996	282129	0
14	Met Life	2.18	22.35	0.00	14	116	0	71996	282129	0
	Individual Single Premium	0.00	0.00	0.00	0	0	0	71996	282129	0
	Group Single Premium	2.18	22.35	0.00	14	116	0	71996	282129	0

13	Sahara Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	2.52 4.67 0.00 1.18	19.96 36.36 0.00 19.67	29.24 44.81 0.00 0.01	680 5187 0 0	5647 40781 0 1	7610 51899 0 6	0 2196393 0 0	0 542 0 0
14	Shriram Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	6.49 20.08 3.65 0.13	44.91 153.99 3.65 0.41	106.54 93.94 0.00 0.28	1084 8038 1 2	7018 76142 9 1	17687 49317 0 3	0 14014 43555 0	0 14445 0 0
15	Bharti Axi Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.61 24.51 1.49 0.00	3.92 194.70 15.11 0.00	3.96 152.29 5.04 0.00	440 12300 0 0	4451 91459 7 0	907 104166 1 0	0 9424 0 0	0 25300 0 0
16	Future Generali Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.41 40.54 0.00 1.15	4.80 206.74 0.03 15.35	1.43 15.13 0.03 9.66	67 32069 0 7	748 167756 0 65	296 18483 1 38	119 1050087 0 0	220 246835 0 0
17	IDBI Fortis Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	4.65 16.73 0.00 0.01	52.80 132.51 0.00 0.04	65.14 81.86 0.00 0.00	853 5434 0 0	8514 40156 0 3	10151 28015 0 0	0 2700 0 0	0 0 0 0
18	Canara HSBC OBC Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.79 42.96 0.39 0.00	5.72 370.65 1.68 0.00	0.54 121.21 0.00 0.00	54 5858 0 0	289 55645 3 0	18 12361 0 0	1106 0 0 0	0 0 0 0
19	Aegon Religare Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.15 9.98 0.00 0.00	1.03 57.12 0.00 0.00	0.22 8.24 0.00 0.00	11 3355 0 0	200 20157 0 0	33 8196 0 0	0 0 0 0	0 0 0 0
20	DLF Pramerica Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.00 2.87 0.00 0.00	0.03 14.69 0.00 0.00	0.00 0.24 0.00 0.00	0 1507 0 0	0 9259 0 0	0 294 0 0	0 0 0 0	0 0 0 0
21	Star Union Dai-ichi @ Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	32.74 23.85 67.61 235.81	96.93 108.36 5.36 0.78	1539.45 15720.34 568.69 2289.01	3552 8256 0 2	11256 41549 4 6	400422 8142299 415 1887	5290 10330 0 0	1392988 10085843 0 0
22	IndiaFirst # Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	1.66 2.51 0.00 0.00	1.66 2.51 0.00 0.00	1539.45 15720.34 568.69 2289.01	88 1889 0 0	88 1889 0 0	2356872 14938541 12098 0	0 0 0 0	0 0 0 0
23	Private Total Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	241.86 2142.47 67.61 235.81	1227.56 14578.95 627.53 2473.57	9829.26 25167.57 8052.26 2289.01	56512 1059549 45 369	508476 7802531 457 2550	400422 8142299 415 1887	1875331 22186767 0 0	1392988 10085843 0 0
	Grand Total	1926.20 1609.35 2442.82 0.00	11876.78 11258.27 13314.44 0.00	8289.81 9447.23 7483.58 0.00	462058 2307829 2160 0	2873212 16690347 13529 0	2356872 14938541 12098 0	20073157 0 0 0	16956045 0 0 0
	Individual Single Premium	2168.06 3751.82 2512.43 235.81	13104.34 25837.21 13941.97 2473.57	9829.26 25167.57 8052.26 2289.01	518570 3367398 2205 369	3381688 24492878 13966 2550	2757244 23080840 12513 1887	21948488 22186767 0 0	18349033 10085843 0 0

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

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

3. @. Starred operations in February, 2009

4. #. Starred operations in November, 2009

PRESS RELEASE

15th December, 2009

SBI General Insurance Company Limited, a joint venture general insurance company promoted by State Bank of India and Insurance Australia Group, Australia has been registered as a General Insurer under Section 3 of the Insurance Act, 1938 with the Authority. The Certificate of Registration (Forms IRDA/R3) has been issued

by the Authority on 15.12.2009. With this registration, the total number of **general insurers** registered with the Authority has gone up to 22.

R. Kannan
Member (Actuary)

CANCELLATION OF BROKER LICENSE

15th December, 2009

IRDA/DB025/03

Sub: CANCELLATION OF BROKER LICENSE NO 155

WHEREAS, M/S. RPMG Risk Management Services (P) Ltd., (hereinafter referred to as the 'Broker') having its Registered Office at 305, Surya Kiran, 19 K.G. Marg, New Delhi 110001 has been granted license by the Authority to act as a Direct Broker in the field of both life and general insurance vide License No. 155 on 2nd May, 2003 and renewed till 1st May, 2009 pursuant to the provisions of the IRDA (Insurance Brokers) Regulations, 2002.

WHEREAS, the Broker vide letter dated 27th April, 2009 communicated to the Authority that it would like to discontinue as Direct Insurance Broker with immediate effect.

WHEREAS, the Broker has given an undertaking to service the existing contracts concluded by them and also make suitable arrangements with another licensed broker for future servicing as

required under Regulation 40 of the IRDA Insurance Brokers Regulations 2002.

WHEREAS, the Broker vide its letter dated 06.11.2009 surrendered the original license No.155 which expired on 01.05.2009.

NOW THEREFORE, pursuant to the request made by the Broker for surrender of Broker License, the Authority hereby cancels the Direct Broker License No. 155 granted to M/ S. RPMG Risk Management Services (P) Ltd.

Sd/
(Prabodh Chander)
Executive Director

CIRCULAR

23rd December, 2009

No.: IRDA/ LIFE /GDL/MISC/087/12/2009

Re : Guidelines on 'Health plus Life Combi Products'

The Authority on receiving requests for promotion of combined products of pure term life insurance products offered by Life Insurance Companies and standalone health insurance products offered by Non Life insurance Companies considered allowing it as a product class and elicited the views of Life Insurance and Non Life Insurance Councils. Based on responses received the

Authority issues the 'Guidelines on Health plus Life Combi Products' that are attached herewith. The Insurers are advised to ensure the compliance to the guidelines.

Sd/-
(G. Prabhakara)
Member (Life)

CIRCULAR

23rd December, 2009

To

The CEOs of All Insurers,
All ATIs (Online and Off-line),
Examination bodies,
The Secretary General – Life Insurance
Council,
The Secretary General – General Insurance
Council.

Sub: Launching of New Agency Licensing Portal

As you are aware, during the month of June 2009, the Authority initiated the process of revamping the present agency licensing portal in order to widen the scope of the portal – integrating the various stakeholders with this Agency Licensing system namely insurers, agent training institutes, examination bodies and the designated persons.

The development exercise commenced during the month of August 2009 after receiving feedback from various stakeholders of the portal through a workshop held in Hyderabad. More than fifteen short-listed business users from various insurance companies participated for User Acceptance Test (UAT) at NSE-IT development center during the month of October /November. This was followed by detailed workshop presentations on how the portal will function; to all stakeholders at Kolkata, Delhi, Bangalore, Chennai and Mumbai which was successfully completed in the first week of December '09.

It has now been decided to launch the new licensing portal from 5th January 2010 as per the following guidelines:-

1. The current portal would be UNAVAILABLE for use from 2nd January 2010 to 4th January 2010 for migration of data from the current portal to the new one.
2. From 5th January 2010 onwards, both old

and new versions would be simultaneously available for use for a period of one month (i.e. till 5th February 2010). In this one month period, i.e. from 5th January 2010 till 5th February 2010, the current sponsored candidates, who have already undertaken training, and/or have examination scheduled/completed examinations can be licensed in the old portal with the following restrictions:

- i. All candidates must complete the training and examinations by 31st Jan 2010.
- ii. All licenses must be issued in the old portal by 5th February 2010.
3. All candidates sponsored by insurers on or after 5th January 2010 should be registered in the new portal ONLY. Licenses generated in the new portal would start with a new series.
4. All the options EXCEPT issue of new licenses and duplicate license printing (only for the new licenses) would be disabled in the old portal from 5th January 2010.
5. 50% of the available Web Wallet Balance would be transferred to the new portal to enable insurers to issue licenses from the new portal.
6. The login ID/passwords would be emailed to all the new users. In respect of the existing users (DPs, Corporate DPs etc) the login would remain the same.
7. From 5th January 2010 onwards, a unique reference number (URN) will be allocated for the candidates sponsored which will act as reference number for tracking the status of a candidate under licensing process. Hence, the Agent Training Institutes should not allocate training for candidates without an IRDA URN after 20th January 2010. The Examination Bodies also should not allocate examination slots for candidates without an IRDA URN after 31st Jan 2010.
8. Reports option on the old portal would continue to be available till **5th February 2010**
9. All candidates licensed in the old portal between 5th January 2010 – 5th February 2010 would be migrated to the new portal during 6th to 7th February 2010 (Saturday and Sunday). The entire web wallet balance from old portal would also be transferred to new portal during this period. To enable the service provider to complete this process, both old and new portal would not be available for use during these days.
10. From 8th February 2010 onwards, only the new portal would be active.

The demonstration videos and the user manuals explaining all the functions of the portal have been made available in our website under the following link:

<http://www.irdaonline.org/videos/AvailableVideos.htm>

11. The minimum software and hardware required for usage of the new portal are:

- Hardware: Pentium IV, 3.0 Ghz / 512 MB RAM or above
- Software: Windows XP SP2 or above with Microsoft Internet Explorer 7.0 and above
- A good quality entry level scanner for scanning the photographs and signatures

All the insurers, ATIs and examination bodies are requested to make a note of the above and comply. You may kindly contact our service provider NSE-IT in case of any difficulties. The contact details of the service provider have been made available in our agency licensing portal www.irdaonline.org.

Sd/-

(A. Giridhar)

Executive Director (Admn)

GUIDELINES

Date: 23/12/2009

Ref: IRDA/LIFE/GDL/MISC/087/12/2009

Guidelines on '*Health plus Life Combi Products*':

I. Introduction

1. In response to the proposals received for promoting the combined products of pure term life insurance products offered by life insurance companies along with standalone health insurance products offered by non-life insurance companies under the umbrella of a single product, the Authority considers allowing the same as a product class within a broader policy framework of ensuring an informed choice and effective policy service to the policyholders. It is envisaged that the proposed product class enhances the penetration of personal lines of insurance business with a wider product choice to policyholders. While the Authority adopts a business facilitative approach, it is expected that all insurance companies will put in place prudent market conduct practices and operational procedures for protecting the interests of policyholders.
2. It is proposed to name this product class as '*Health plus Life Combi Products*' referred as '*Combi Products*' hereafter in these guidelines.
3. These guidelines do not apply to Micro Insurance Products which are governed by IRDA (Micro Insurance) Regulations, 2005.

II. Objectives

1. The market conduct practices adopted in ensuring an informed choice to the insuring public and the extant operational procedures for an efficient policy service are the minimum standards that are expected from insurance companies before considering the convergence of varying product classes on

personal lines of insurance business. It is clarified that the prudential norms of reserving and solvency requirements etc. are as applicable to respective independent products. As insurers leverage on the marketing and operational network of their partner-insurers the proposed product innovation is expected to facilitate policy holders to choose an integrated product of their choice under a single roof without shopping around the market for two different insurance coverages from two different insurers. Therefore the insurers are expected to offer the best covers as an attractive proposition for the policyholders. The underwriting aspects, premium collection issues and also other policy service related issues of the '*Combi Products*' under reference require suitable I T support at the offices of both the insurers. Hence, insurers may note that an advanced technology support is an essential pre-requisite to support the service of the '*Combi Product class*'.

2. In accomplishment of the objectives cited the Authority issues the following guidelines under Section 14 (2) (b) and 14 (2) (e) of Insurance Regulatory and Development Authority Act, 1999.

III. Guidelines

All insurance companies that promote 'Health plus Life Combi products' shall adhere to the following guidelines

1. Scope of Combi Product Class

- 1.1. The 'Combi Products' may be promoted by all Life Insurance and Non-Life Insurance Companies.
- 1.2. The 'Combi Product' shall be the combination of Pure Term Life Insurance cover offered by life insurance companies and Health Insurance cover offered by non life insurance companies. Health Insurance for the purpose of this product class means effecting of contracts which exclusively provide sickness benefits or medical, surgical or hospital expense benefits, whether in-patient or out-patient, on an indemnity or reimbursement basis.
- 1.3. The Policy Term and Sum Assured limits are as proposed and cleared under File and Use norms.
- 1.4. Riders / Add-on covers may be offered subject to File and Use clearance
- 1.5. The premium components of both risks are to be separately identifiable and disclosed to the policyholders at both pre-sale stage and post-sale stage and in all documents like policy document, sales literature etc.
- 1.6. The product may be offered both as individual insurance policy and on group insurance basis. However in respect of health insurance floater policies, the pure term life insurance coverage is allowed on the life of one of the earning members of the family who is also the proposer on health insurance policy subject to insurable interest and other applicable underwriting norms of respective insurers.

1.7. The integrated premium amount of the 'Combi Product' shall be basis for reckoning the threshold limit / applicability of extant Regulations, guidelines and circulars etc. issued by the Authority or any other statutory body.

1.8. Commission and Claim payouts in respect of 'Combi Products' shall be by respective insurers only.

1.9. 'Combi product' shall have a free look option as outlined in Regulation (6) (2) of IRDA (Protection of Policyholders' Interests) Regulations, 2002. Free Look option is to be applied to the 'Combi Product' as a whole.

1.10. The Health portion of the 'Combi Product' shall entitle its renewability at the option of policy holder to have an independent / standalone health insurance policy from Non-Life Insurance Company of the respective 'Combi Product'.

2. **Tie up between insurers:** It is mandatory that insurance companies offering the 'Combi Product' shall have in place a Memorandum of Understanding covering the modus operandi of marketing, policy service and sharing of common expenses.

2.1. Insurers forming the tie-up shall obtain prior approval of IRDA by duly filing the copy of the agreement entered in this regard. Approval may be obtained by any one of insurers.

2.2. A tie up is permitted between one life insurer and one non-life insurer only. Thus a life insurer is permitted to tie up with only one non-life insurer and vice-versa.

2.3. Between these two Insurers any number of 'Combi Products' may be promoted.

2.4. It is expected that insurance companies would carry out an appropriate due diligence before establishing the business relationship for the purpose of promoting 'Combi Products'. Insurers are also expected to have a long-term understanding for effective policy service of the proposed 'Combi Products'.

2.5. Withdrawal from the tie-up is generally not desirable. However, in exceptional cases where insurers desire to withdraw from MOU they shall obtain prior permission of the Authority.

2.6. There shall be specific time frames / Turn around Times (TAT) to be agreed between the insurance companies as part of MOU for effective policy service, transmission of premiums received etc. at various stages of policy i.e., at pre-sale stage and post-sale stage.

3. **Lead Insurer:** As two insurance companies are involved in offering the 'Combi Product' one of the insurance companies

may be mutually agreed to act as a lead insurer in respect of each 'Combi Product' marketed with agreed terms, conditions and considerations. The Lead Insurer for the purpose of these guidelines is the insurance company mutually agreed by both the insurers to play a critical role in facilitating the policy service as a contact point for rendering various services as required in these guidelines. It is envisaged that the lead insurer would play a major role in facilitating underwriting and policy service. However, the role of lead insurer shall not deter in relying upon the existing operational infrastructure of the partner-insurance company for effective policy servicing of 'Combi Products'. However, IRDA do not absolve either of the insurers in relegating the responsibility of proactive settlement of claims.

4. **Underwriting:** Under the 'Combi Product', underwriting of respective portion of risk shall be underwritten by respective insurance companies, that is; Life Insurance risk shall be underwritten by Life Insurance Company and the Health Insurance portion of risk to be underwritten by Non-Life Insurance Company.
5. **File and Use:** It is expected that the common strength of both insurers are leveraged and consequent benefits are passed on to policyholders under this product class. Hence, to examine this aspect it is proposed that both the independent products are integrated as a single product and filed with a common brand name. Both the insurance companies are advised to carry out the cost benefit analysis from the perspective of common policyholders before filing the product. Insurers may also utilize the existing insurance products 'as it is without modifications' that are already cleared under the extant File and Use norms. However the 'Combi Product' is to be filed at the stage of integrating for getting File and Use approval irrespective of the earlier approval to either of products. 'Combi Product' filing shall follow the File and Use guidelines in vogue and all such guidelines that would be issued from time to time. 'Combi Product' is to be filed with Actuarial Department of IRDA in File and Use formats that are in vogue. The File and Use application of the 'Combi Product' shall also specify the proposed approach in respect of the following.

5.1. Lead Insurer for the proposed 'Combi Product' and demarcation of functions between insurers for carrying out the following activities:

- a) Procedures proposed for issuance of the premium notices, where applicable and final lapse notices in terms of Section 50 of the Insurance Act, 1938.
- b) Proposed policy service. Where the servicing is to be necessarily attended by the original insurer, the lead insurer facilitates the policy servicing. As far as the

policyholder is concerned lead insurer could be made as the single nodal point for receiving the servicing requests, fulfilling the services and issuing acknowledgements.

- c) Results of feasibility study, if any, in giving a limited access to the policy data base of policies for effecting over-the-counter policy service requests to the lead insurer.
- d) Proposed facilitative role of the lead insurer in settlement of claims.
 - i. Based on the type of claim, the other insurer shall also take proactive measures for settlement of claims. As far as health portion of 'Combi Policies' are concerned, they may be serviced by Third Party Administrators. Where the policies are serviceable directly, the lead insurer is to play a facilitative role.
 - ii. Lead insurer not to guarantee the settlement of claim on behalf of the other insurer. The risks accepted by one insurer under 'Combi Product' shall not affect the business of other insurance company.
- e) The operational procedures proposed to be put in place for timely dispatch of the policy bond of 'Combi Products'.
- f) Proposed procedures for filing the advertisements in accordance with IRDA (Insurance Advertisements and Disclosures) Regulations, 2000 within 30 days from the date of issuing the advertisement with IRDA.
- g) Proposed procedures for

- obtaining the prior approval of IRDA for issuing Joint Sale Advertisements along with the common corporate agents.
- 5.2. The results of the cost benefit analysis carried out by both the insurers.
 - 5.3. The *modus operandi* of proposed policy service at various stages of the policy viz., proposal stage, policy servicing, premium collection arrangements and claims service etc.
 - 5.4. The IT systems put in place for supporting the sale and policy service of the 'Combi Products'.
 - 5.5. Agreement on reimbursement of expenses in consideration of common services rendered by each other of insurance companies.
 - 5.6. Distribution Channel wise maximum commission allowed under the 'Combi Products'.
 - 5.7. The manner in which premium is proposed to be collected subject to provisions of Section 64 VB of Insurance Act, 1938.
 - 5.8. The procedures put in place for expeditious transfer of the portion of premium that pertains to the other insurer of the product.
 - 5.9. Operational procedures put in place for updating premium on policy data base on a real time basis.
 - 5.10. Proposed policy document
 - a) As the risks under both the liabilities namely; life insurance and health insurance coverage, are assumed by different insurers it is required that policy document is to be approved at File and Use.
 - 5.11. Proposal forms to be used for 'Combi Products'.
 - 5.12. The Terms and Conditions under which the Health portion of the 'Combi Product' entitles its renewability at the option of policy holder to have an independent / standalone health insurance policy from Non-Life Insurance Company of the respective 'Combi Product'.
 - 5.13. Options available to policyholders of 'Combi Products' to discontinue either portion of risk coverage while continuing with the other portion.
 - 5.14. Copy of proposed common Sales Literature / Sales Illustrations to be issued by both the insurers in respect of 'Combi Products'.
 - a) Common Advertisements of 'Combi Products' shall be restricted to the features, terms and conditions of the 'Combi Product'.
6. **Distribution Channel:** In light of the prevailing statutory provisions that are in place in respect of tied Individual/ Corporate agents, a beginning is to be made by limiting sale of the 'Combi Product' through
 - a. Direct Marketing channels
 - b. Brokers and
 - c. Composite Individual and Corporate Agents, common to both insurers
 - 6.1. 'Combi Products' are not allowed to be marketed through 'Bank Referral' arrangements.
 - 6.2. Insurers shall ensure that the 'Combi Product' is not marketed by those insurance intermediaries who are not authorised to market either of the products of either of the insurers.
 7. **Mandatory Minimum Disclosures:** It is required that in a product class where two insurers are involved there shall be minimum disclosures in all the related documents viz., proposal form, policy document and sales literature. The minimum disclosures, *inter alia*, shall be;
 - a. The product is jointly offered by *abc insurance company* (specify non-life insurer name) and *xyz insurance company* (specify life insurer name)
 - b. The risks of this 'Combi Product' are distinct and are assumed / accepted by respective insurance companies.
 - c. The liability to settle the claim benefits vests with respective insurers that is for health insurance benefits *abc insurance company* (specify non-life insurer name) and for life insurance benefits *xyz insurance company* (Specify life insurer name)
 - d. The legal/quasi legal disputes, if any, shall be dealt with the respective insurers for respective benefits
 - e. The policy holders of the 'Combi Product' under reference shall be eligible to continue with either part of the policy discontinuing the other during the policy term.

- f. Where guaranteed renewability of health insurance plan is allowed, the health insurance portion of this 'Combi Product' is entitled to that facility
 - g. Specific Disclosures on the available premium payment options on these 'Combi Products'.
 - h. Specific Disclosures about the available Policy Servicing facilities for these 'Combi Products'.
 - i. Specific Disclosures about the proposed claims service of these policies under both the risks.
 - j. Specific Disclosures on the availability of services of 'Third Party Administrators (TPAs)' for health insurance portion of risk, if available.
 - k. Specific Disclosures on the available Grievances Redressal Options including particulars of Ombudsman under these 'Combi products'.
 - l. Policyholders are to be advised to familiarize themselves with the policy benefits and policy service structure of the 'Combi Product' before deciding to purchase the policy.
1. Policy documents of 'Combi Products' shall contain the above referred points c, d, e, f, g, h, i and k as minimum disclosures.
 2. Declaration from the prospect shall be obtained and attached to proposal form that he / she has understood the disclosures mentioned at a, b, h and i above.
8. **Compliance related matters:** In respect of 'Combi Products' both the insurers shall comply with the provisions Insurance Act, 1938 and Regulations notified there under and other guidelines, circulars that are applicable to health insurance business and life insurance business respectively.
9. For the purpose of these guidelines non-life insurance company includes standalone health insurance Company also.
 10. In order to monitor the progress of the penetration of the product class before enlarging the scope of the same all insurance companies that are marketing 'Combi Products' shall submit the information that is required by the Authority from time to time.
 11. The Authority may stipulate such other terms and conditions from time to time for monitoring activities of insurance companies offering 'Combi Products'.

Sd/-
(J Hari Narayan)
Chairman

PRESS RELEASE

24th December, 2009

IRDA/ACT/PR/PRD/088/12/2009

Life Insurance Products clearance position as on 23 rd December 2009

Consequent to our circular on 'cap on charges', life insurers have been asked to modify the existing products, which do not satisfy the contents of the above mentioned circular. We have asked insurance companies to submit the revised 'File & Use' applications on or before 1st December, 2009. Please note that all products which are sold in the market on or after 1st January, 2010 must comply with the features indicated in the above mentioned circular.

We have received around 230 'File & Use' applications including riders. As on the close of business of 23rd December, 2009, 186

products including riders were cleared and 17 products will be processed in the next 2 days. 27 products are with the insurers for their replies to the queries which we raised.

We have also received 14 products after 1st December, 2009 and it is our endeavor to clear all the products on or before 31st December, 2009 so long as the products satisfy the norms.

Sd/-
(R. Kannan)

CIRCULAR

17th December, 2009

Ref: IRDA/LGL/CIR/MISC/080/12/2009

To
The CEO's of all
Life and General Insurers

as also reports of the insurance companies refusing to honour the awards passed by the Ombudsmen.

Sub: Submission of database of cases

The IRDA (Protection of Policyholders' Interests) Regulations, 2002 require all insurers to have in place proper procedures and effective mechanism to address the complaints and grievances of the policyholders efficiently and with speed.

The Authority is thus keen to review the grievance redressal mechanism of all insurers. Consequently, all insurers are advised to submit the information relating to all the cases filed against them by the policyholders in the various consumer courts (viz., District/ State/ NCDRC) in the country challenging such repudiation of the claims as also the details of the cases filed by the insurers challenging the awards passed by the Ombudsmen in the different courts.

There are however, reports of the claims of the policyholders being repudiated resulting in them being forced to challenge the same

The information relating to the same shall be provided from January 2009 onwards, in the enclosed format (Annexure-I) and thereafter on a quarterly basis.

(A. Giridhar)
Executive Director

ANNEXURE I

CASES FILED BY THE INSURED (POLICYHOLDERS):

Name of the Insurance Company				
List of cases filed before the various District Forums (State-wise)				
SNo.	Case No. & Case Title	Name of the Court	Grounds of Repudiation	Status as on date
Total pending		Total closed		

List of cases filed before the various State Commissions (State-wise)				
SNo.	Case No. & Case Title	Name of the Court	Grounds of Repudiation	Status as on date
Total pending		Total closed		

List of cases filed before the NCDRC, Delhi				
SNo.	Case No. & Case Title	Grounds of Repudiation	Status as on date	
Total pending		Total closed		

CASES FILED BY THE INSURERS AGAINST THE AWARDS OF THE OMBUDSMEN

Name of the Insurance Company			
List of cases filed before various courts (court-wise)			
SNo.	Case No. & Case Title	Brief facts / grounds of the case	Status as on date
Total pending		Total closed	

U. Jawaharlal suggests that the manpower resources in an organization have to be kept abreast of the latest developments in the domain in order that they succeed; and to achieve that, they need to be trained from time to time.

Towards Ensuring Total Contribution

Training in Insurance

For an organization to be successful in the long run, it is very essential that its employees – at every level – are well-trained in their respective domains; and are equipped with the latest techniques to acquit themselves creditably. This is an area that is additionally sensitive in the Indian insurance domain because unlike several other areas of operation, even within the financial services space; insurance has been kept out of formal education at any level historically, from schooling up to the university. More recently, it has been observed that some universities have been offering courses in insurance although a lot more needs to be achieved. It has led to a situation where one has to look at the industry personnel to double up as trainers. Owing to their professional rigors as also the lack of experience and skills, insurance has remained one domain where the availability of skilled training personnel is very limited.

In a market where the nuances are yet to be understood totally by the public, the role of the distributor is very vital. It is essential that the distributor, as such, is well-trained; and identifies the needs of the prospect and assists him in making an informed decision. In this competitive world, it is only the best that survive and it puts the onus on the distribution personnel to be updated with the changes from time to time. It does not need to be mentioned that there is need to see beyond mandated levels of training.

The skills of the distribution personnel have to be ably supported by an equally efficient set of back-up staff in order that the business cycle is complete. It presupposes the staff being adept at all aspects

of functioning. Managements should identify the needs of their staff being provided with refresher and reorientation courses from time to time so that the entire team works as a well-oiled unit. Further, there should also be incentives/rewards for higher learning by staff members that would be useful for their regular working.

It is often found that identifying personnel for a training stint is more by default rather than by design. It results in the entire effort being wasted as a break from routine. Managements have to ensure that such trends are arrested. In some very special areas of operation, training should be provided even by sponsoring the staff to outside agencies. Apart from ensuring that their skills are updated, it would also motivate the staff to contribute their best. In order that the end-use of the training programs is ensured, there should be a process of post-training evaluation/feed-back from the participant to ensure that training is taken seriously.

‘Training in Insurance’ will be the focus of the next issue of the **Journal**. We look forward to quality inputs from trainers, practitioners and other professionals in this very vital area of management.

Effective Training



Thomas Varghese and Vishal Shah emphasize that it is very essential to ensure that there is uniformity in data, irrespective of whoever views it. They add that in order to achieve this consistency, the role of Data Warehousing is very crucial.

The Dependable Duo

Data Warehousing / Mining in Insurance Industry

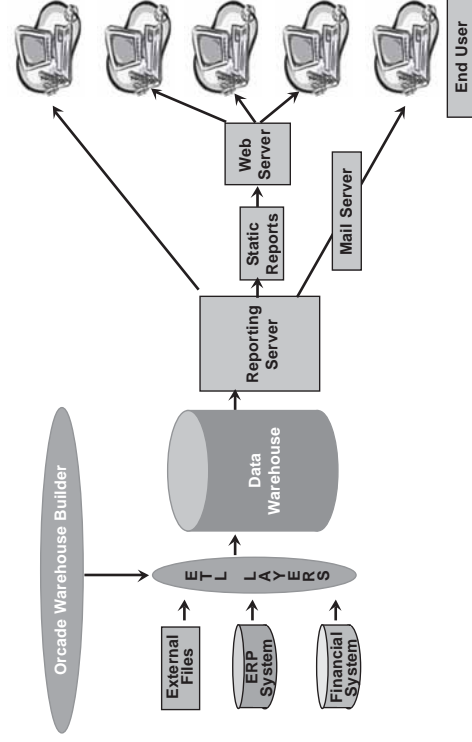
In today's competitive environment, IT not only needs to run business efficiently but also manage the business effectively. IT often forms the backbone of an entity which deals with large volumes of data and repeated transactional operations. Insurance industry today deals with humungous data and the data is subjected to repeated usage for analysis and MIS for decision making. In most of the insurance companies, IT provides the processes and systems to underwrite policies, process claims, commissions etc, which helps the business to run efficiently. For managing the business effectively, the decision makers need to be provided with reliable information based on which the decisions can be taken and not just gut feel.

Need for Data Warehouse in an insurance company

The necessity of a data warehousing system evolved from the fact that the traditional Online Transaction Processing (OLTP) systems provide functional reports which are useful for everyday use but they rarely provide insight into the overall company's operations. Also there is no method to combine and view data from various sources or systems.

To get a holistic picture with various

DW Architecture



analytical capabilities; and slice and dice features from a single source of information, a data warehouse is a necessity. At times, one also needs customised reports for better analysis. A data warehouse can be used for the following functions –

- Executive Dashboards
- Performance Scorecards
- Claims Fraud Detections
- Cross Sell/Up Sell
- Customer Segmentation

Monitoring of KPI's

In the insurance industry, monitoring and controlling of the key ratios viz completion ratio, renewal ratio, claims ratio, retention ratio, combined ratio are the key to successful business. In the

absence of a data warehouse, much of the management time is spent in preparing all these data in silos and it is very difficult to get a combined view. To move towards a single view monitoring of KPI's, the company needs to focus on the following –

Submitting timely and accurate information to a few analysts doesn't really help overall decision-making. The information has to go out to every decision-maker – which can mean hundreds or thousands of people – at the point of decision.

- Getting timely business-ready information consistent with data sources means that the current state of the company can be determined with less guesswork, fewer spreadsheets, and reduced manual reconciliation.
- Enabling people to get information consistent with the most accurate sources and reconciled with industry standard calculations.
- Submitting timely and accurate information to a few analysts doesn't really help overall decision-making. The information has to go out to every decision-maker – which can mean hundreds or thousands of people – at the point of decision.
- Ensure that everyone looks at the same information. This will help focus all efforts on a shared understanding of the business, rather than on debates about what the numbers mean or whose numbers are correct.
- Single view of data involves making sure that information used by actuarial, underwriting, claims, executives, and regulators is always the same by design. Using two or more official data sets is no more acceptable than using two sets of accounting books.

Challenges involved

While data quality is a common issue in any organization, it gains more importance for the insurance industry due to its preoccupation - carrying out risk assessments, which is heavily dependent on data quality. Data quality management in a typical insurance company is a three phased approach which involves the following –

- **Data Quality Checks**
 - Checks to be done for all applications and all databases

- All structures with all fields checked

- **Data Quality Correction**

- Information to users on the data points which have quality issues
- Routines to be inbuilt into the ETL logic of DWH after user signoff

- **Data Quality Prevention**

- One time fixation of all issues
- Feed should go from DW To OLTP system on the fields and programs on which validations needs to be put for avoiding quality issues

Data warehouse & mining

A data warehouse is a relational or multidimensional database that is designed for query and analysis. Data warehouses are not optimized for transaction processing, which is the domain of OLTP systems. Data warehouses usually consolidate historical and analytic data derived from multiple sources. Data warehouses separate analysis workload from transaction workload and enable an organization to consolidate data from several sources.

A data warehouse usually stores data of many months or years to support historical analysis. The data in a data warehouse is typically loaded through an extraction, transformation, and loading (ETL) process from one or more data sources such as OLTP applications, mainframe applications, or external data providers.

Users of the data warehouse perform data analyses that are often time-related. Examples include consolidation of last year's premium figures, product portfolio wise premium analysis, and profit by product portfolio and by customer. More sophisticated analyses include trend analyses and data mining, which use existing data to forecast trends or predict futures. The data warehouse typically provides the foundation for a business intelligence environment.

The key characteristics of a data warehouse are as follows:

- Some data is de-normalized for simplification and to improve performance
- Large amounts of historical data are used
- Queries often retrieve large amounts of data
- Both planned and ad hoc queries are common
- The data load is controlled

In general, fast query performance with high data throughput is the key to a successful data warehouse.

A common way of introducing data warehousing is to refer to the characteristics of a data warehouse as set forth by William Inmon:

- Subject Oriented
- Integrated
- Non-volatile
- Time Variant

These can be elaborated further as below –

- **Subject Oriented** – Data warehouses are designed to help you analyze data. For example, to learn more about your company’s sales data, you can build a data warehouse that concentrates on sales. Using this data warehouse, you can answer questions such as “Who was our best customer for this item last year?” or “Who is likely to be our best customer next year?” This ability to define a data warehouse by subject matter, sales in this case, makes the data warehouse subject oriented.
- **Integrated** – Integration is closely related to subject orientation. Data warehouses must put data from disparate sources into a consistent format. They must resolve such problems as naming conflicts and inconsistencies among units of measure. When they achieve this, they are said to be integrated.
- **Non-volatile** – Non-volatile means that, once entered into the data warehouse, data should not change. This is logical

because the purpose of a data warehouse is to enable you to analyze what has occurred.

- **Time Variant** – A data warehouse’s focus on change over time is what is meant by the term time variant. In order to discover trends and identify hidden patterns and relationships in business, analysts need large amounts of data. This is very much in contrast to OLTP systems, where performance requirements demand that historical data be moved to an archive.

Data mining is the extraction of hidden predictive information from large databases, and is a powerful new technology with a great potential to help companies focus on the most important information in their data warehouses. To use a simple analogy, it’s finding the proverbial needle in the haystack. In this case, the needle is that single piece of intelligence required by the business and the haystack is the large data warehouse that is built up over a long period of time.

Integration is closely related to subject orientation. Data warehouses must put data from disparate sources into a consistent format.

Data mining tools predict future trends and behaviors, allowing businesses to make proactive, knowledge-driven decisions. The automated, prospective analyses offered by data mining move beyond the analyses of past events provided by retrospective tools typical of decision support systems. Data mining tools can answer business questions that traditionally were too time consuming to resolve. They scour databases for hidden patterns, finding predictive information that experts may miss because it lies outside their expectations.

In Insurance industry, companies have to estimate the probability of a claim using historic data. The potential of data mining can be of immense importance to insurance companies.

The following describes an example:

An insurer company wants to create a prediction model to predict the probability of a car accident happening within a certain period of time on the basis of customer data which is available at the time of signing the insurance proposal e.g. personal data, attributes of the car to be insured, history of accidents. Looking at the past

it is known whether past customers had an accident within a certain period of time or not. Past customers are split into different classes with respect to the costs of their claims. Therefore, a data table is available with each data record representing the data of a past customer at the beginning of a year and the customer's claim class in that year. The prediction model is created using this data table. The prediction model also reveals interesting customer segments with a high risk of belonging to a bad claim class.

The features and functionality of such an application is to have –

- User based access
- Drill down from company to agent to branch level
- Department specific hierarchies
- Parameterized reports
- Achievement reports
- Graphical representation
- Data download facility
- Historical information for trend analysis

The typical reports that this application can provide are –

- Daily scheduled reports
- Auto mailers
- Hourly reports
- SMS updates

In a nutshell datawarehousing and data mining is the next stage of automation extensively used in insurance industry. As said, "it is not important to generate or capture data, but what you do with it is more important." If the humongous data generated or captured through various sources in an insurance industry is simply stored, it will be of no use unless it is analysed in a way which can be used to make the right decisions. So both storing data in a warehouse as well as frequent visits to the warehouse i.e. mining can be crucial determining factors for success in the market.

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Nirmala Ayyar asserts that data warehousing is much more than mere number-crunching; and says that the real challenge is the unpredictable human element in it.

Data Integrity in Life Insurance

A Perspective

The IRDA, vide its circular dt 15/10/09, has constituted the Insurance Information Bureau, the purpose being:

- To serve as a single point official reference for the entire data requirement of the insurance sector, and,
- To provide necessary inputs for policy research and development

The move is in the right direction in the context of The Right to Information Act, 2005, which “casts important obligations on public authorities, so as to facilitate the citizens of the country to access the information held under their control”. The sample Transaction level data for Motor and Health insurance provided by IRDA on its website and making the data available to anyone interested in research in that area is a most welcome measure, notwithstanding a disclaimer by IRDA regarding the reliability of the data. This experimental measure will certainly prove a training ground for IRDA for the gigantic venture of building up a data warehouse for the insurance industry as a whole.

The primary consideration in building up any information warehouse, has to be the source of the information. The IRDA requirement for Public Disclosures effective from 1st Nov, 2009 should prove a huge source of information. It has been designed with great care after exhaustive study of several

functioning formats by experts, and, designed to give comprehensive information on:

- Company Profile
- Investment Profile
- Liability valuation
- Risk concentration
- Solvency and business statistics
- Sensitivity analysis
- Related party transactions
- Reinsurance risk concentration

Macro or micro level data also need to be transcribed into Management Information systems, Decision Support Systems and Expert knowledge application systems.

The information covered by the various forms is so comprehensive, that it is doubtful, if any researcher would feel the need to ask for any *relevant* additional information. The periodicity of these statements is also all that can be asked for by any one studying the business at the macro level. The “Vantage Point” of the November’09 Issue has highlighted the need for Company level data like Personnel inventory, underwriting practices, customer data, marketing info etc. Macro or micro level data also need to be transcribed into Management Information systems, Decision Support Systems and Expert knowledge application systems. Apart from information needs, building a data warehouse will also face issues relating to confidentiality, information abuse, data integrity, data collation, connectivity, speed, massive storage and back up,

software and hardware upgradation costs, manpower and training costs, Disaster Recovery/BCP etc. Truly an inspiring challenge!

If the whole project is as simple as number crunching, then we can almost say that there is not much of a challenge. However, there is the highly unpredictable human element in it, the greatest of all challenges. Let us take as an example the number of lives

Co-ordination, a most precious gift for the success of any enterprise, is riddled with the bullets of ego-building, power-mongering, personal vendetta etc.

insured. In India, the name of a person can pose the biggest of challenges to a computer. For instance, in Gujarat, the same person may write his surname as Gala, or Shah, or something else. If he has three policies, we can take it for granted he would have written it in three different ways, so that, the computer will summarise the data as three lives, and not as one life. To get the number of lives correctly is definitely a great challenge, and it is highly doubtful whether any company can really furnish correct data in this regard. The Customer ID can pose its own problems, and will not provide any support in this area. The name Subrahmanyam may be written as Subramanyam, Subramanian, Subramaniam etc. In Andhra, the extended initials may be expanded or shrunk as per the Agent's or proposer's mood at that time. If you examine the customer IDs given to you on your own accounts in the Bank and that of your family members where you might figure as a nominee, you will find that you have multiple customer IDs with the same bank! Using address as a countercheck poses problems of speed, operator time, human errors in matching and bandwidth limitations, as well as the fact that during a lifetime, a person's address may not remain static. It is definitely a volatile factor and therefore not reliable.

The other major hurdle in data integrity at the point of data generation is the lack of training on the one hand, and the enormous pressure on data entry operators. From venal sins to great crimes can be laid at this door, especially in the context of ULIP policies, which are subject to market vagaries on a day to day basis. Front desk operators are not just typists. They need to issue policies, print receipts, answer queries, attend to phone calls, reconcile accounts, submit returns, apart from attending to personal needs, a little chit chat, a whole lot of meetings etc. The cost cutting aspect has a huge impact on recruitment and training policies, and the effect is felt by the Underwriting, Accounts and

IT departments. The invisible costs of correcting mistakes can be really huge, if there was a way to compute it. Apart from these considerations, it affects data integrity significantly.

Account codings and nomenclatures could be another pitfall affecting data integrity. Is it an ADB claim that is outstanding or a PDB claim, if only the rider name is the identity for the account code? Or the rider might not have been given a separate account code at all, in which case it will either not be reflected as outstanding, or show the basic claim paid, and still also be shown as an outstanding claim! There should have been a correlation between the premium, policies and Sum Assured. However it is just not there. This is nothing but a coding problem, but makes the data useless for purposes of analysis or research. Similarly, though there is an exhaustive standard 'cause of death code' list, does the claim assistant understand the implications of selecting the right code? A little study will prove that the reality is very different from what is reflected by the statistics. The IT person might not know if to codify an Ex-gratia death claim payment as death claim paid or give a new code as an Exit! IT may not understand all the implications of a new product, unless it is explained to them in detail by the product developers. But such co-ordination or co-operation may not happen, and IT may set up a product in a way with unexpected consequences, at least in the short term, playing mayhem with the data. This brings us to the problem of silo building within the company, each department acting totally independently, without bothering to communicate with others. Co-ordination, a most precious gift for the success of any enterprise, is riddled with the bullets of ego-building, power-mongering, personal vendetta etc. The ultimate result is unreliable data.

Incomplete or incorrect data entry can happen for other reasons too. There was the case of the smart DP Manager who decided

that 40 characters of information at proposal stage was sufficient to issue policy and got a promotion for disposing of all cases within the time limit. Only when data analysis became a requirement, the lacuna in information was felt. And there was the time when valuation results threw up 25% of cases with no gender indication! The third gender is being issued with ID cards as on date, but no insurance company has a code for the third gender, or insurance plans to cover such lives! The reason for data entry errors is in a large measure due to the fact that the data entry operators have not been taught the importance of each item on the proposal form. Domain knowledge, in the new dispensation, is not a requirement at all for disposing of work on hand.

With such unreliable sources of information, we still need to make a beginning in gathering information and studying them to shape future policies. Otherwise, it will be like waiting for the waves in the ocean to subside before taking a bath! But it is also necessary to make adjustments for margins of error, and not split hairs trying to reconcile data from different statements, or to treat such discrepancies as serious errors. Unless there is evidence of deliberate manipulation, there should not be any questioning of small variations. That, manipulations will occur in new business statistics, has to be accepted as a reality of the business ethos, since the careers of many ambitious persons rest on it. However, for realistic estimates, one should go by money actually realized in the books of the company and how it supports the other figures in the statements. The International standards on Accounting, the Indian institute of Chartered Accountants and other financial arms have issued comprehensive guidelines for financial accounting and if these are enforced and observed with reasonable care, we should be getting sufficiently reliable data for research and policy development.

Aside from data integrity; MIS, DSS and Expert systems also need special focus. In life insurance in India today, no beginnings have

been made for developing expert systems. LIC used to publish a legal digest of cases with important decisions, and circulate it among the divisions. It would have helped in dealing with difficult claim cases, by referring to precedents, or in assessing how the courts might view the facts. Of course, the Legal Digest also provided info on labour related decisions, property, real estate etc. As on date, an extensive legal database has been provided by the courts themselves, and information is available on-line. However, to link up to it, or develop a decision support system out of it, requires a whole lot of initiative and expense.

Consider the huge publicity given by the media to an accident claim recently repudiated by LIC and overruled by the court. Irrespective of the rights or wrongs of either LIC's decision or that of the court, the media chose to splash mud generously, because LIC is public sector. But many worse cases go hush-hush, because there is a legitimate fear on the part of the powers-that-be that any publicity to such cases may undermine the confidence of the public in the industry as a whole. Thus, information dissemination is invariably motivated and mostly biased. There is an elaborate Grievance Redressal engine designed by IRDA and perhaps

Aside from data integrity; MIS, DSS and Expert systems also need special focus. In life insurance in India today, no beginnings have been made for developing expert systems.

implemented by all insurers. The Annual Report bears witness to how it is analysed and results disseminated for public awareness. However, any interaction with the common man will reveal that few people are aware of the elaborate machinery set up to help them.

A management consultant's effort once threw light on the fact that few people know how to analyse data and derive fruitful conclusions from it, to enable proactive strategies to be set in motion. Marketing people may analyse it only to highlight the deficiencies of a rival, or to project deficiencies that may not really exist. Misuse of data for such purposes is easily learnt without training, but to really use data for strategy development comes from experience or rare talent. If it is found anywhere in an institution, it should be nurtured and put to good use. Otherwise, the best database in the world is nothing but just so much statistics – not information.

The author is a Retired Senior Officer, LIC of India. Views expressed are her own.

Dr. George E. Thomas opines that the Indian insurance market enjoyed the late mover advantage, in a manner of speaking, by not being exposed to the pitfalls that its predecessors were victims of.

Dig Deep or Stay Away

Appreciating Data Mining in Indian Insurance

The importance of analytical information to the insurance professional cannot be overstated. From the underwriter of the teeny-weeny beehives to the reinsurer of multi-billion dollar worth of satellites, insurers need information for their business decisions. Insurers need information from the initial stages of setting up a company for a host of activities, making business plans, working out turn-around times and designing products, to name a few. All

Insurers today have a treasure trove of information at their disposal. Thanks to computer systems and networking facilities, large amounts of data are available today at one place.

along the life cycle of an insurance company, insurers have various requirements of information for purposes like fixing/ revising internal tariffs, deciding retention levels, designing reinsurance strategies, making provisions for claims, making long-term investments etc.

While insurers of yore had only the Hobson's choice of digging deep into their internal resources that they used to call by different terms like market know-how, accumulated wisdom, personal experiences and gut-feelings; their modern day counterparts are much better placed. Insurers today have a treasure trove of information at their disposal. Thanks to computer systems and networking facilities, large amounts of data are available today at one place. Advanced software and computation techniques allow

users to slice the huge data stacks from multiple dimensions to locate the right chunks of information. Empowered with actuarial knowledge and statistical techniques, insurers are able to analyse data with better precision today. ¹Paolo Giudici explains data mining as "an in-depth search to find additional information which previously went unnoticed in the mass of the data available". He points out that data mining is not just the use of a computer algorithm or a statistical technique but a process of business intelligence. "What distinguishes data mining from statistical analysis," he clarifies, "is not so much the amount of data we analyse or the methods we use but that we integrate what we know about the database, the means of analysis and the business knowledge."

The Path Travelled: There are many factors that made the Indian insurance industry's quest for data successful. After a series of unsuccessful attempts by the industry at computerisation and standardising of data from 1983 onwards; by the time Insurance Regulatory and Development Authority (IRDA) and Tariff Advisory Committee (TAC) restarted the process in 2002, the world had moved ahead. Someone else had already invented the wheel and set it in motion as well! This gave the Indian market the late

mover's advantage – it did not have to re-invent the wheel; it only had to imitate, improve and customise things to the Indian market, carefully avoiding the pits the early-movers had fallen into. Most of the credit goes to the foot soldiers, who defined the granules of the data, created the rudimentary systems and got the data donors to implement them.

Thanks to the work of professional bodies like Association for Cooperative Operations Research and Development (ACORD) and Insurance Data Management Association (IDMA) that recommended data standards for the industry, the Australian Prudential Regulation Authority (APRA) that successfully used the XBRL platform to receive data from multiple donors, the World Health Organisation that evolved the International Classification of Disease (ICD) Codes, the quality of data is getting better day by day around the world. In the Indian context, PSU insurers who developed an elaborate set of codes used in 'Oriental's prototype Front Office Computerisation (FOC) package and 'Genisys' package used by 'National', 'New India' and 'United India'; TAC's employees who created data dictionaries with definitions and data formats and got these integrated into all insurers' systems and the persistence of IRDA – all these have directly or indirectly helped the industry in putting together a stack of usable data in one place – in IRDA's data warehouse. Today with data getting defined at lower levels of granularity, standardised codes that speak the same language across multiple countries and technologies that cut across multiple computer languages and platforms, data has become more manageable.

Clarity on the Destination: Having the data in a warehouse is one thing and using it is another. The industry has to decide to use the data and decide how to do it. IRDA has possibly drawn the road map for the future by placing 6 lakhs records from the data repository on its website so that insurers, researchers or anyone else can try their hand

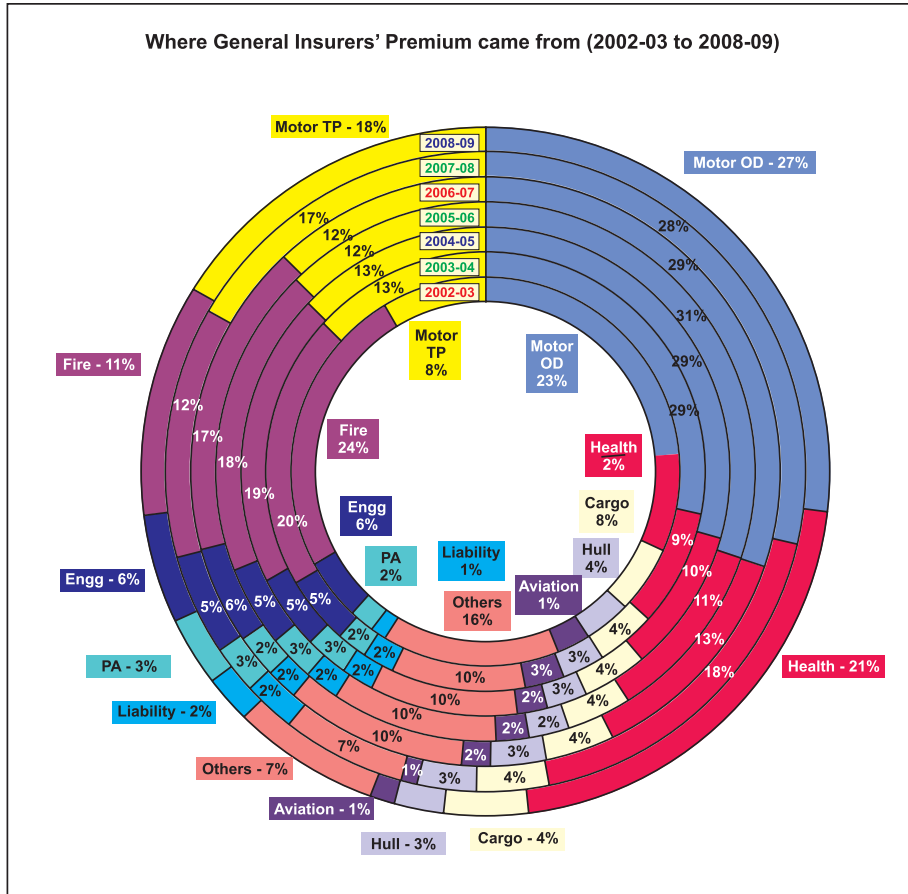
at analysing the data. ²Berson and Smith warn us of the error that *"happens when the business problem is not fully understood by those responsible for the data handling or the analysis itself."* They point out the case of the CEO of an insurance company who wanted to estimate the possible payout to homeowners when a hurricane devastated a certain county of Florida. The IT

Historically, using data for decision-making had never been the forte of insurers in India. It was perceived to be relevant only for actuarial and investment departments.

department did the data mining and located the number of policies issued in the affected county. When the actual claims came to twice the estimate, it turned out that most of the policies were issued from the main sales office in the neighbouring county. Those who are familiar with the business would have done the mining with the focus on the address of the policyholders and not on the policy issuing office. They point out that with business centric view on data mining, *"a great deal of effort will be put in up-front in the definition of the business problem, the definition of the actual prediction, and understanding of the data"* while the technology-centric view will be focussed *"on the logistics of data processing and movement and the human intensive cycle of trying out different data mining technologies."*

Historically, using data for decision-making had never been the forte of insurers in India. It was perceived to be relevant only for actuarial and investment departments. The constant regulatory pressure IRDA has exerted on insurance companies over the years on divergent areas like data submission, actuarial evaluation of products, maintaining of solvency margins, loss reserving; the technical know how that came into the industry in the wake of globalisation, statistical reports published on the TAC website and the regular reports published in the IRDA Journal have successfully brought about a change in the industry's perception of data.

Picking Nuggets on the Way: Figures from 2002-03 compiled from the IRDA Journal presented in the doughnut chart shows how the industry's portfolio mix has changed over the years. While fire insurance business was giving insurers 24% of their premium in 2002-03, only 11% of the premium comes from that portfolio in 2008-09. Dependence on health and motor third party premiums has increased from 8% and 9% in 2002-03, to 21% and 19% respectively. The share of motor own damage grew from 23% in 2002-03 to more than 30% during 2005-06 and 2006-07 and got reduced to 27% in 2008-09.

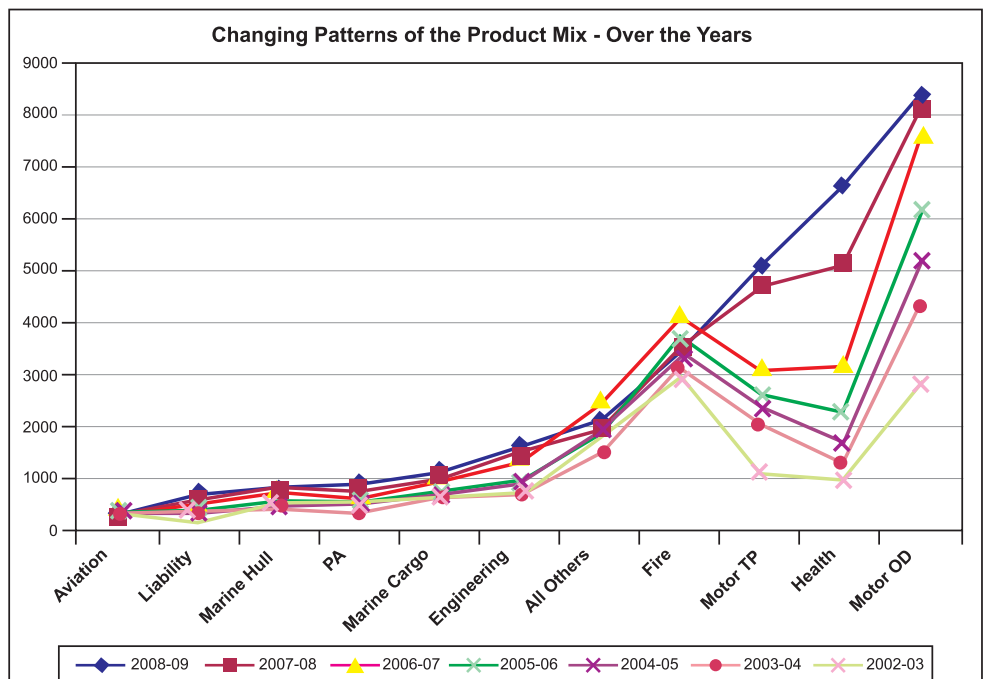


Rs.13,927 crores to Rs.31,159 crores from 2002-03 to 2008-09, at a growth percent of 124% over 6 years, health insurance premium grew from Rs.1,002 crores to Rs.6,625 crores over the same period, at an overall increase of 561% that is indicative of the increased focus on personal lines of business with special emphasis on the health sector.

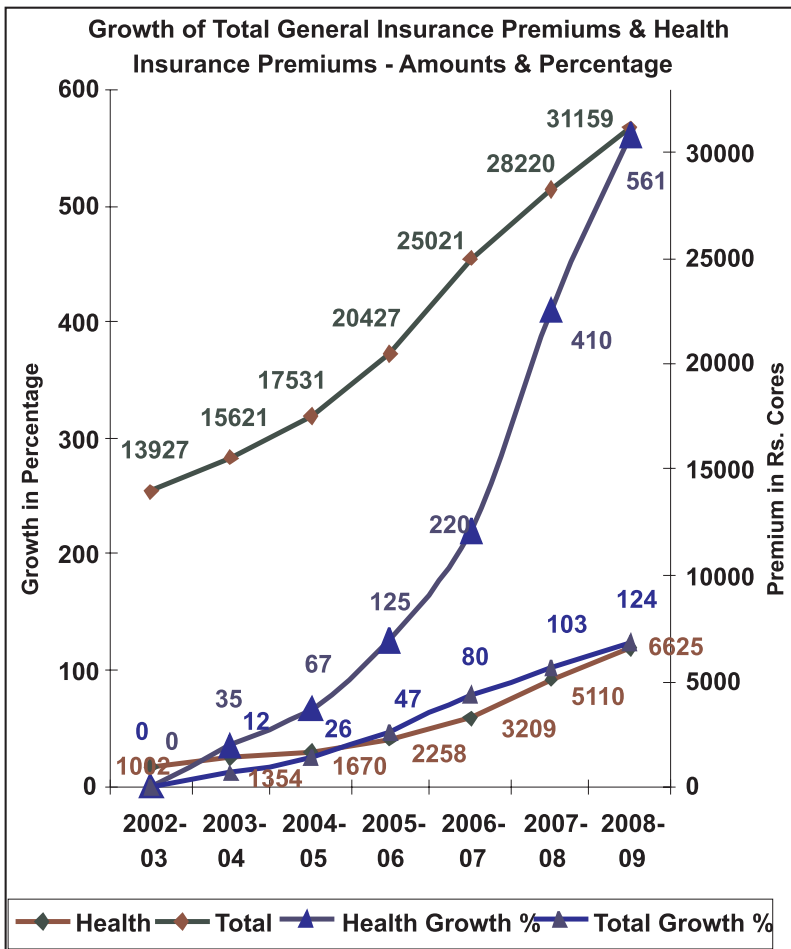
It is interesting to note that though changes in the product mix of the industry were limited to the four portfolios of Fire, Health, Motor OD and Motor TP, the changes were not uniform among the insurers. The product mix patterns of two of the PSU biggies indicate a fair degree of consistency with the each other. However, the product mix patterns of two of the private sector biggies, ICICI and Bajaj show a drastic degree of divergence in their approach to Motor OD and Health

The line graph showing the changing patterns of the product mix indicate that changes were limited to Fire, Health, Motor OD and Motor TP while the remaining portfolios were practically static all along the years. Underwriters would be quick to correlate the sharp dip in Fire premium between 2006-07 and 2007-08 to the detariffing effective from 1.1.2007. The sharp increase in the Motor TP premium between 2006-07 and 2007-08 (when the share of the portfolio increased from 12.36% to 16.71%) can be easily traced back to the increase in Motor TP rates by IRDA from 1.1.2007 when the motor portfolio was detariffed.

private sector biggies, ICICI and Bajaj show a drastic degree of divergence in their approach to Motor OD and Health



While the industry's premium grew from



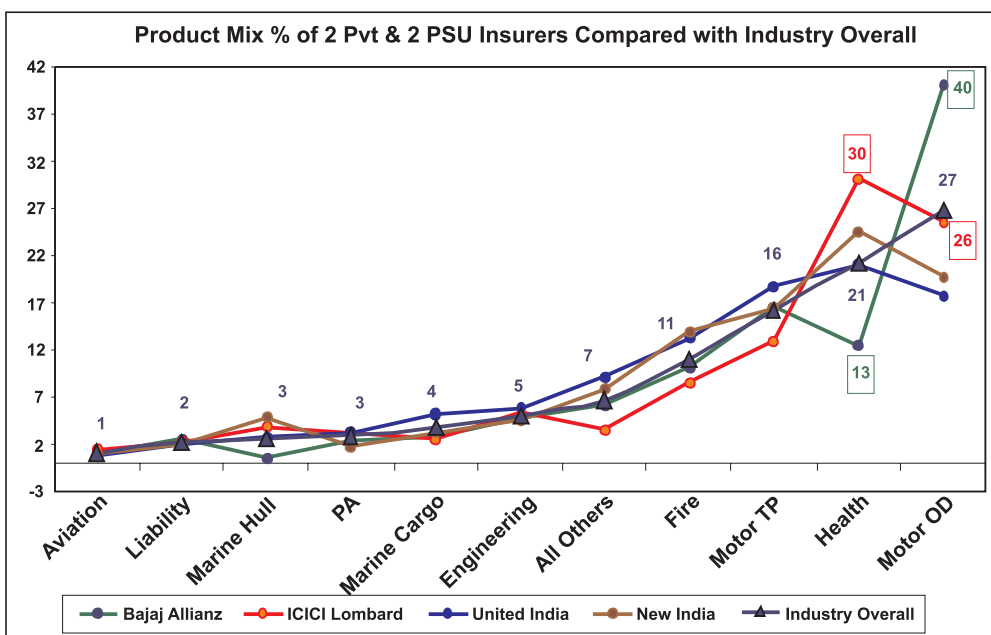
sharing knowledge is yet to evolve; and anyone dealing with business related knowledge willy-nilly runs the risk of being looked at with suspicion by one's own organisation on data confidentiality issues. This situation has been possibly hampering the growth of business intelligence in the insurance industry. In this context, the decision of the regulator to publish its data for the industry to study, understand and analyse is of immense significance. Six lakh records made available to the thinking minds of the industry with no confidentiality restrictions can open up the way the industry looks at data. The dough is made available for those interested; one can try kneading it and using it the way they want and in the process learn and enjoy the art of making cakes. 'Please try your hand at using the data and use the experience to use your own data', appears to be the message. One should also note that the reports published on the TAC website are at aggregate levels. If one can visualize data as a giant Rubik's cube, the analysis only proves

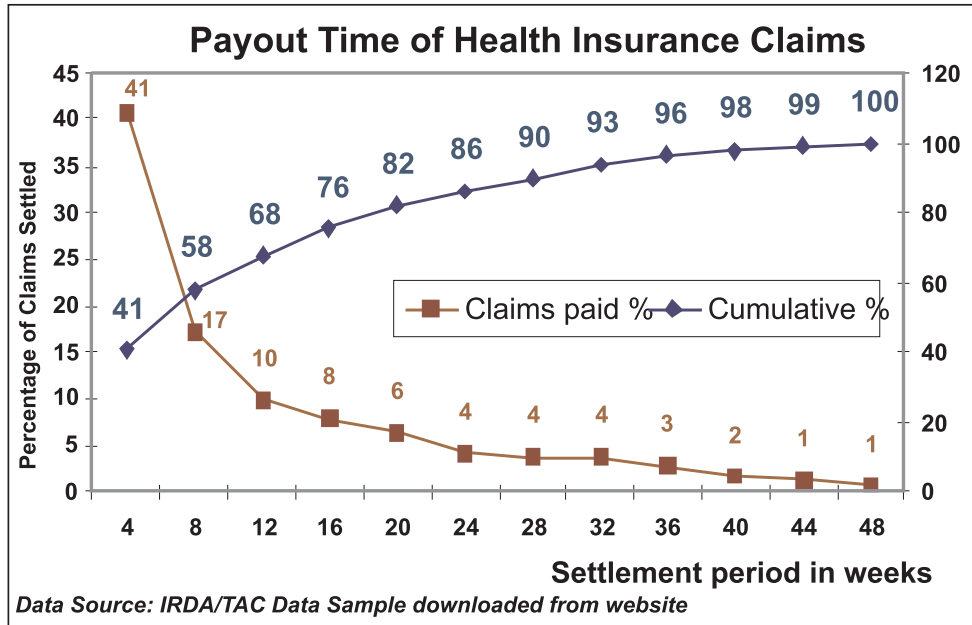
portfolios. 40% of Bajaj's premium comes from Motor OD while ICICI gets only 26% of its premium income from the portfolio.

In stark contrast to the industry trends, Bajaj has chosen to depend on its Health portfolio for only 13% of its premium income, while the largest chunk (30%) of ICICI's premium income comes from its Health business. Incidentally, ICICI has decided to depend less on Fire and Motor TP businesses for its premium income.

In the Indian insurance domain, the culture of

that some sides of some of the cubes appear to be of the same colour. One has to look at the different sides, slice and dice the stack; to find out whether single block or granule of data is in the





get paid was 77 days.

The data throws some light on the length of hospital stay, a critical determinant of insurers' claims payout. First of all the data breaks the common man's myth that Indian insurers do not pay claims without at least a day of hospitalisation. An examination of 84,670 claims revealed that a whopping 15% of the claims were of the 'zero' day hospitalisation category, more than the

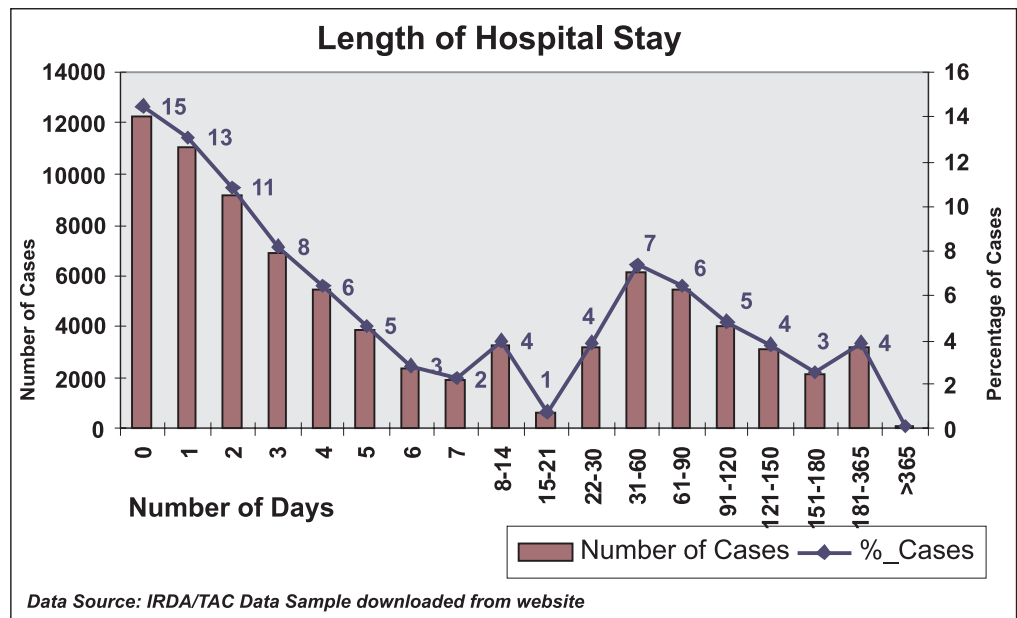
right shape and position. An open-minded analysis of the data by outsiders would be the ideal way to test the correctness of the data definitions and the quality of the data.

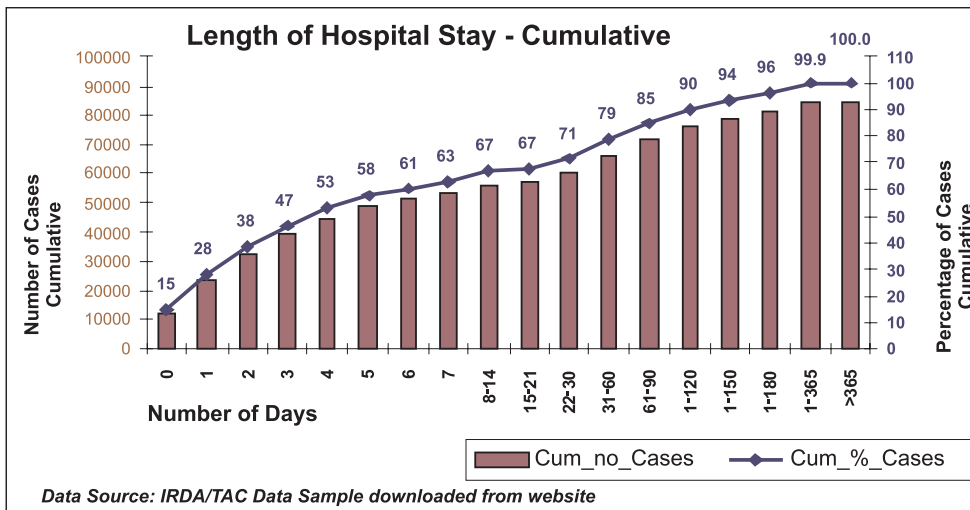
According to published studies done by ^{3,4}IIM Ahmedabad, Indian insurers used to take 7 days to 429 days from the date of discharge for settling health insurance claims, at an average time of 128 days during the period 1997-1999. As per studies done in the year 2005, 3% of the claims got settled within a period 4 weeks and on a cumulative basis, 26% got settled within 8 weeks, 61% got paid within 12 weeks and in 16 weeks' time 76% of claims got settled. The industry can be happy that as per the IRDA sample, 41% of the claims get settled in 4 weeks, 58% in 8 weeks and 68% within a period of 12 weeks.

However, it would disturb the industry to note that even now, it takes a period of 16 weeks for 76% of the claims to get settled. Ignoring 801 claims that took more than a year to get paid as exceptional cases, an analysis of 77,485 claims records showed that the average time taken for these claims to

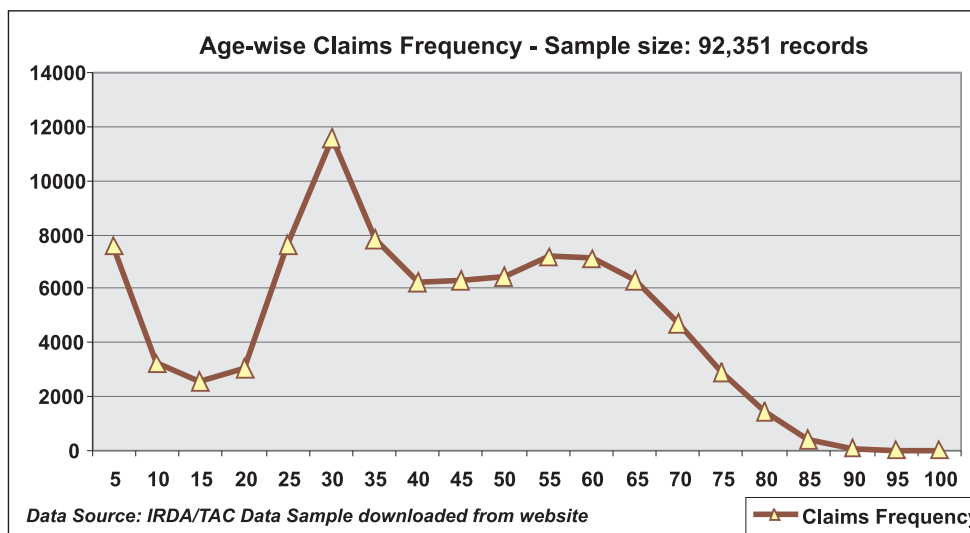
13% that had needed one day's hospitalisation. Some instances of peaking on the chart on 'Length of Hospital Stay' (LOS) can be due to adjustments made to the class intervals for fitting the data into the chart. The clustering at the 22-30 day class interval might possibly indicate a large number of policies with a 30-day cap on hospital stay, but a closer study of the data may be required for conclusive findings.

Insurers would find it interesting that 29% of the claims showed LOS of above 30 days





at TAC's website, tells us that six claims are lodged for every 100 insured persons. Though the frequency does not appear alarming, the fact that these six claims erode the entire premium income at 95% claims ratio is a cause of concern. This indicates that health insurers need to have 16 claim-free insured persons to pay the cost of one claim. From a risk management perspective, if insurers can prevent the occurrence of one loss out of every 60 losses, they would be reducing their burning costs by around 1.6%.



Trudging the Thorny Path: Data Mining can be appreciated better with an example of how it can be used in a practical underwriting context. An imaginary scenario is used, with

and 15% of the claims had a LOS more than 90 days. Actuaries would be interested in finding the real impact of such long periods of hospitalisation on product pricing and the diseases that necessitated prolonged hospital stay.

The 92,351 claims studied indicate that 12.6% of the claimants were of the age group of 25 to 30 years. There are insurance practitioners who believe that claims due to vehicle accidents and maternity are of a high frequency in this age group. However, before arriving at hasty conclusions, this finding has to be properly correlated with the insured population. It is quite possible that a good number of newly employed people fall in this age group. Data published

indicative questions and fictitious figures so that the concept is briefly demonstrated in a simulated situation with no bias attached. An underwriter evaluating a proposal from a Bangalore based software company for an annual health insurance policy covering reimbursement of hospitalisation costs for 5,000 employees would possibly try to understand the set of insured persons. He would get figures like (i) 30% employees are in the age group of 20 to 25, (ii) 60% are in the age group of 25 to 30 and (iii) 10% are above 30. He can observe that (iv) 70% of the employees are male and 30% are female. With a bit of effort, he can find out details like (v) 85% employees stay at company's quarters 20 kilometres away, (vi) most of the ladies travel by company's bus while most of the gents travel by bikes. A few bits of information that the underwriter can mine from the data warehouse through a process of slicing and dicing the data stack at multiple dimensions are given in the table below. A set of hypothetical answers are also provided for demonstrating the progress of the mining process.

Model Questions (Indicative)	Hypothetical Answers (Fictitious)
Which age-group of health insured am I covering most in terms of numbers, total premium and average earning of premium?	Age 25-30 – total numbers Age 45-50 – total premium Age 30-35 – average premium
In the age-group 25-30 , which occupations am I covering more in terms of numbers, premium and average earning of premium?	“Factory Workers” – total numbers “Software” – total premium “Executives” – average premium
Among the software professionals I am covering, which gender makes more claims in terms of numbers, total claim amount paid and average claim size?	“Females” – total numbers “Males” – total claim amount “Males” – average claim size
Among the male software professionals that I am covering, which region ranks highest in terms of numbers, premium and average earning of premium?	“Pune” – total numbers “Bangalore” – total premium “Mumbai” – average premium
Among the male software professionals of Bangalore that I am covering, which diseases/ injuries are causing highest claims in terms of numbers, claim amount paid and average claim size?	“Fever” – total numbers, “Injury” – total claim amounts, “Injury” – average claim size
Among the male software professionals in Bangalore making injury related claims, which cause/type of injury is more in terms of claim numbers, claim amount paid and average claim size?	“Bike Accident-Observation” – total numbers, “Bike Accident-Leg Fracture” – total claims, “Bike Accident-Skull Fracture” – average claim size
In respect of the bike accident-leg fractures treated at Bangalore what is the break up of surgeon’s fees and room charges as per our past experience?	Total Surgery Fees: Rs.31,00,000 (On 100 Claims) – Avg. 31,000 Room Charges: Rs.1,20,000 (On 100 Claims) – Avg. Rs. 1,200 Average Hospital Stay – 12 days
In respect of the bike accident-leg fractures treated at Bangalore, what is the break up of surgeon’s fees and room charges as per the industry’s experience available with the national data repository?	Surgery Fees: Rs. 25,000(Bangalore:Rs. 30,000) Room Charges: Rs.400; (Bangalore: Rs. 700) Average Hospital Stay – 8 days (Bangalore: 6 days)
What is the ratio of male software professionals vis-à-vis bike accident-leg fractures as per our past experience?	1 Bike Accident-Leg Fracture for every 1150 Male Software Professionals
What is the ratio of male software professionals vis-à-vis bike accident-leg fractures as per the industry’s experience available with the national data repository?	1 Bike Accident-Leg Fracture for every 1100 Male Software Professionals
<p>The underwriter can easily make the following deductions from the findings:</p> <p>Deduction 1: Incidence of ‘Bike Accident-Leg Fracture’ among male software professionals in Bangalore is on par with the national averages. (No significant variation)</p> <p>Deduction 2: Surgery charges for ‘Bike Accident-Leg Fracture’ related surgery in Bangalore are also on par with national averages.</p> <p>Deduction 3: Number of days spent in hospital on ‘Bike Accident-Leg Fracture’ related surgery cases in Bangalore are much higher than national averages.</p>	

Deduction 4: Average room charges on ‘Bike Accident-Leg Fracture’ related surgery cases in Bangalore are much higher than national averages.

Deduction 5: In aspects where the insurer’s data greatly differs from the overall national trend, he may try to find out reasons for the aberration and locate deficiencies in his product, underwriting, or claim servicing systems.

Some examples of the reasons for these aberrations are listed below with indicative counter measures that insurers might take in the situation:

Finding 1: Software professionals prefer expensive rooms	1. Impose cap on room charges for accident related surgery cases in Bangalore.
	2. Impose cap on period of stay for accident related surgery cases in Bangalore.
	3. Make excess provisions on accident claims.
	4. Design suitable reinsurance schemes for such policies
Finding 2: They stay for longer periods in hospitals	5. Examine systems for deficiencies in underwriting/ claims processing/ policy wordings. Compare other insurers’ products.
	6. Make enquiries with others like doctors to find out whether there is any hidden reason why software professionals stay longer after such surgeries in Bangalore.
	7. Find out whether any common patterns exist for other accidents/ other illnesses also.
	8. Find out whether the motor department that insures the bikes also shares similar concerns.
	9. If it is a common problem, discuss concerns in insurers’ forums and create awareness.

The Way Ahead: The efficiency of the data mining exercise largely depends on knowing the insurance business, understanding the database, knowing what questions to ask the data mining professional, comprehending what the mined out information indicates, ability to use the information for the intended purpose; and above all applying cold-headed common sense to the entire exercise so that one does not get into the technology loop and forget the purpose of the exercise.

Indian mythology tells us of the sea of milk that was churned, the use of the right tools including the king of snakes and the biggest mountain supported by the cold shell of the

tortoise incarnation, the myriad valuable and worthless stuff that surfaced and the single minded dedication and persistence of the churners who were rewarded with the pot of nectar – a promise from mythology for data miners of all ages!

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

Geeta Sarin says that data mining software can make use of historical information available with a company to build a model of customer behavior that could be used to predict which customers would be likely to respond to a new product launch.

Important Tool for Building Customer Relationship

Data Mining in Insurance

Data refers to a series of facts or statements that may have been collected, stored or processed but not organized or placed into context. The sheer magnitude of data available in large organizations serves as a strong base for companies desiring to be ahead of competition as well as for emerging organizations in

Companies try to capture information from a customer every time he comes in contact with any of its departments.

adopting a customer centric approach. Information access not only helps an organization realize new opportunities and potentials, but also provides far reaching benefits from knowledge management. Organized collection of data generates a database, where each record is a set of data elements and facts. Organizing the data will lead to generation of information, which is what is required in applying to customer centric decision making.

“One manager may access this data base for knowledge discovery while the other may access this for Knowledge deployment”.

Data Warehouse and Data Mining

Each customer is a subject of record in the data base that provides the customer’s or the prospective customer’s personal details and other contact information. Companies try to capture information from a customer every time he comes in contact with any of its

departments. The prime touch points being the i) customer purchase call; ii) on-line enquiry; iii) service related call; iv) complaints generated by existing customers etc. The information generation will include the personal characteristics of the customer, their preferences and choices of products, usage patterns and purchase histories including a record of previous contacts with the competitor companies. These data are collected by the appointed contact centre and organized into a ‘Data Warehouse’. The content of data file will be customized to the specific needs of the company and inferences will then be drawn about an individual customer’s need. ‘Data Mining’ is a process of “extracting hidden information” from the available databases and presenting that information in an organized and systematic manner. It will involve the use of sophisticated statistical and mathematical techniques such as cluster analyses, automatic interaction detection, predictive modeling, etc. to predict customer behaviour and suggest information trends of customers.

It is to be seen that the results of data mining are different from other data-driven business processes. While in the case of customer data interactions, nearly all the results presented to the user are things that they knew existed in the database already. Data mining, on the

other hand, extracts information from a database that the user did not know existed. Data mining unearths the relationships between variables and customer behaviors that are non-intuitive. Extracting hidden patterns of customer behaviour can help in finding an altogether different route to solving a business problem. Data base of the customer information when combined with sophisticated analytical techniques makes possible to derive substantially precise information on customer needs and trends; and monitor changes and variations over a period of time. Through application of Data mining software, companies can predict future trends and behaviours, thereby allowing business to gather hidden predictive information about their customers to solve business problems.

Whether it is to increase market share or improve internal productivity or gain a competitive edge, data mining is the solution to most problems and issues. We see that today all big companies have made data mining an integral and continuous part of their business processes as database management helps in the process of building, maintaining and utilizing the databases on the customer for the purpose of contacting, transacting and building relationships.

For example, consider a life insurance major who wants to launch a new policy and needs to decide on his target customers for offering this particular product. There exists a historical database consisting of age, address, profession, income, previous insurance coverage, etc. of all existing and prospective customers with prior interactions and responses. The data mining software would use this historical information to build a model of customer behavior that could be used to predict which customers would be likely to respond to the new product launch. By using this information a marketing manager can select only those customers who are most likely to respond, thereby saving time and being cost effective.

Data Mining and Relationship building

The concept of Customer Relationship Management involves use of knowledge and analyses about customers with a view to effectively sell them more and more goods and services, and facilitate enhanced customer satisfaction. It is the CRM function

Measuring customer profitability requires data that relate to both revenue generation as well as the costs of serving the product or service.

in the organization that ushers in improvements in customer service to facilitate long term sustained customer satisfaction and paves the way for repeat purchase, improved customer loyalty, reduced customer switch over and off course greater profit and revenue for the firm. Virtually every company knows that 80% of its revenues are coming from 20% of its customers. In insurance industry, with high policy lapsation, it is to be found on an average over 45% of customers as unprofitable. Measuring customer profitability requires data that relate to both revenue generation as well as the costs of serving the product or service.

Imagine that you are the marketing manager for an insurance company. You are responsible for managing the relationships with the company's existing customers. One of your immediate concerns is churning of business and maximizing customer retention. In this business of insurance you understand that the cost of keeping existing customers around is significantly less than the cost of getting new customers, so you need to figure out a cost-effective way of managing this problem.

Traditional Approach – Pick out your high end customers (that is, the ones who pay heavy premiums) and use your persuasive skills to encourage them to pay their next premiums on time and reduce lapsation and loss of contract. You may offer a rebate on late payment charges, or a New Year gift, but this solution is probably very wasteful. These high end customers would be willing to stick around without receiving a persuasion or a gift.

Modern Approach – The solution to the churn problem has to be perceived in an altogether different way - the customers to concentrate on are the ones that will be leaving! There is no need to worry about the ones who will stay. Instead of providing the customer with something that is proportional to 'Their Value' to your company, you should instead provide the customer with

something proportional to 'Your Value' to them'. All customers are different and they need to be understood individually in order to optimize relationships. High value customer might value the relationship because of your trust and reliability, and thus wouldn't need any persuasion to stay on. While on the other hand, small

It has been seen and experienced that 'observed' purchasing behaviours are more powerful predictors of future buying behaviours.

customers who are financially constrained but need the coverage of life the most will require your personalized care and concern to stick on with you. The key is determining which type of customer you're dealing with. The approach to building relationship will be optimized through extracting hidden information.

Applications of a Database in CRM functions

Efficient customer service enhances the insurer's reputation for taking good care of its customers and in a way creates a relationship bonding which helps and assists agents in making further sales. We understand that customer service is that crucial part of insurance administration that helps maintain important contractual and business connections between the insurer and its customers. There is an astute relationship between customer service and policy conservation. An insurer that establishes and maintains superior customer service enhances business in a number of ways. Data mining is one part of a much larger series of steps that takes place between a company and its customers. The way in which data mining impacts the relationship building process depends on the total organizations' vision and mission and not only the data mining process. The customer database can however have broad range of applications –

Meeting Customer Requirements. Database approach to relationship building employs 'observation' rather than 'inference' about customer needs and behaviour. It has been seen and experienced that 'observed' purchasing behaviours are more powerful predictors of future buying behaviours.

Building long-term customer loyalty. By customizing the service approach, insurers build upon the brand loyalty thereby creating such customers who are satisfied with an insurer's service and are more likely to renew and increase their current coverage and

to buy new products. They may also recommend the insurer to friends and family members. In addition, an insurer with a reputation for effective customer service increases its ability to attract new customers and to recruit and retain its sales force.

Improving profitability. Data mining can help in retaining existing business and can greatly increase an insurer's profit margin, because it is less costly to keep an existing customer than to gain new customers. Avoiding the time and resources required to replace customers and agents lost due to poor service allows the insurer to direct those resources into building its business.

Organization of Customer Service with the help of Database. Customer service departments can be organized according to the types of business an insurer does and according to the approaches of each insurer's management. Some insurers establish one department or area to deal with every kind of service to its customers. Other insurers divide customer service activities by product, by distribution system, by client, or by type of service requested. For example, in organizing customer service activities by product, an insurer usually trains specific employees to respond to the questions concerning one or two products – for example, in case of key man insurance or a group life insurance product, an employee who understands all the details of the product, is the one to answer customer queries. If the Data mining results show higher number of internal customers, i.e. more agents, sales managers, the department can be grouped in a manner that internal and external customers are handled separately. If the results of Data mining show that there are requests for multiple services, assigning employees to different types of requests for service will be the best alternative. Using this organizational mode, an insurer can assign certain employees to make minor changes, while others to work with policy loans, assignments and so on.

Service Improvements for Agents through Datamining. Agents need information in the form of organized data to service their existing customers. Policyholders consider the agent to be their link to the insurance company and, therefore, communicate directly with him when they have questions or issues. Answering customer questions promptly is vital to a continuing relationship between the policyholder, the agent, and the insurer. If the insurer makes errors in transactions, is unresponsive to requests for information, or otherwise fails to meet policy owner's expectations, the agent is the one to face their wrath. Providing reliable and effective service by the organization also helps in retention of successful agents to sell an insurer's products.

Conservation of Business and Improving Business Persistency. To get premiums regularly and timely is what every insurer seeks. *Conservation* is the process of ensuring that the insurer retains policies in its books for the entire term of the plan. For many insurers conservation of existing business is as important as selling new policies. Data mining helps in predicting and forecasting the lapsation behaviour of the clients, and it is here that trends can be captured in time and remedial measures taken before much harm is done to the business.

Creating Customer Bonding. A strong relationship between an insurer and its policy owners ensures automatic growth in business. This relationship can be built and enhanced through improved customer interactions. Data captured through customer enquiries, alterations in policies, complaints, and other services related issues enables the insurer to do an in depth analysis to enhance its relationship with its policy owners. By prudent data analyses, an insurer can often identify and help concerned policyholders not only achieve satisfaction but strive towards 'customer delight'.

Conservation of Orphan Policyholders. Since agent is the prime link between the insurer

and the client, without regular communication and touch of the agent, a policy owner could be likely to cancel or surrender the policy and purchase coverage from another insurer whose agent can provide ongoing service. Through Data mining, some insurers have been able to establish electronic tracking of agent activities to identify agents who are no longer active. The sooner an insurer can identify an agent who wants to loosen his ties with the organisation, the more likely the insurer can conserve that business.

To Control Claim Ratios and Fraud Detection. Datamining can be effectively applied to detection of fraudulent claims and fraud analysis in various ways. While analyzing the characteristics of fraudulent insurance claims, prior data like type of insurance, vehicle type, age of policy, age of insured, postal address of insured shall be used for detecting hidden information. Here a

Policyholders consider the agent to be their link to the insurance company and, therefore, communicate directly with him when they have questions or issues.

model might be induced that shows a high propensity for fraud among motorcycle vehicle owners below the age of 25 for policies that have been in force for less than three months. Another approach involving clustering and algorithms could also be used to detect the cluster most worthy of further analysis by reviewing relationship among attributes.

To ensure that customer service is prompt, courteous, complete, and accurate; an insurer from time to time needs to amend its ways and methods and ensure effectiveness in dealings. Providing complete service is sometimes a challenge, especially when requests for service cover a variety of transactions or when transactions are complicated or unusual. It is here that systems need to be put to 'replace older technology'. The system that a company invests must have the ability to handle future predictive models and applications; and allow to increase market share, internal productivity etc and gain competitive advantage.

The author is Associate Professor, IMT Centre for Distance Learning, Ghaziabad.

Abhay Johory writes that Data Warehousing is assuming increasing significance in insurance companies, in order that customer service is given the utmost importance.

A Strategic Gain in Insurance

Data Warehousing

Information is one of the insurer's most powerful assets. Using enterprise data models to define this information enables higher data quality and completeness for both analytical and operational use. Analytically, such models allow insurers to improve their focus on the profitability of different products and lines of business

Data Warehousing, highly relevant and critical to insurers, combines the data from multiple and usually varied sources into one comprehensive and easily manipulated database.

to achieve targeted and more effective marketing for up-selling and cross-selling products and services.

A Data Warehouse can help manage complex information flow in insurance companies, most effectively. Data Warehousing, highly relevant and critical to insurers, combines the data from multiple and usually varied sources into one comprehensive and easily manipulated database. Because Data Warehousing creates one database in the end, the number of sources can be anything you want it to be, provided that the system can handle the volume, of course. The final result, however, is homogeneous data, which can be more easily manipulated.

Data warehousing as an integrated information modus operandi which is non-volatile in its essence and cannot be tampered with; which helps management to attain a realistic and unbiased view of business; and also help them formulate crucial decisions pertaining to the same.

Importance of data warehousing

The importance of accurate and readily available data in an

insurance company can never be emphasized enough. Often, data is captured in various places and formats in the company. This has negative and quantifiable implications: a risk of poor data quality and an increased maintenance burden. The business drivers for Data Warehousing are to reduce multiple data entries (saving costs) and to understand a broader view of key concepts, such as a single view of the customer across the whole company. It enables insurers to:

- Improve business profitability analysis, including underwriting, claims performance, persistency, cross-selling penetration, and fraud detection
- Build Management Information Systems (MIS) to track and analyze key performance indicators
- Develop risk management systems to support extensive risk modeling and data analysis, including asset and liability management.

Insurance thrives on the loyalty and trust of its customer base and as we all know that the cost of acquiring a new customer is much higher than the cost of retaining an existing Customer, creating and maintaining high customer satisfaction is critical to insurers' profitability and competitiveness. This can only be achieved by having a consolidated customer view for an in-depth understanding of those customers' needs. Generally, customer information is scattered across disconnected systems, making it impossible

to obtain a total picture of a customer, while all the Data Warehousing models can be built around the idea of a customer-centric view of the business. Also, critical for the sustenance of an insurance company is the development of new distribution channels/partnerships. It is core of capturing a bigger market share. Providing a wider set of offerings customized to customers' needs through establishing alliances and partnerships is also essential. Open systems are the critical success factor to reaching these goals and can be achieved through clearly defined system interfaces or integration through messaging as supported by Data Warehousing.

A data warehouse, apart from rendering significant customer insights and psychology purview via analysis of trends, also delivers the following added benefits such as:

- Historical information for comparative and competitive analysis
- Enhanced data quality and completeness
- Supplementing disaster recovery plans with another data backup source.
- Information in the Data Warehouse is under the control of Data Warehouse users so that, even if the source system data is purged over time, the information in the Data Warehouse can be stored safely for extended periods of time.
- Because they are separate from operational systems, Data Warehouse provide retrieval of data without slowing down operational systems
- A Data Warehouse provides a common data model for all data of interest regardless of the data's source. This makes it easier to report and analyze information than it would be if multiple data models were used to retrieve information such as sales invoices, order receipts, general ledger charges, etc.
- Prior to loading data into the Data Warehouse, inconsistencies are identified and resolved. This greatly simplifies reporting and analysis.
- Delivering Increased Productivity, by information being readily available and maintained centrally.
- Facilitating business and process re-engineering for the day-to-day operational jobs.

- Meet Regulatory and Legislative requirements
- Identify and manage risks

Benefits of Data Warehousing in Insurance

The potential benefits of data warehousing for the insurance industry are similar in many respects to the benefits realized in other industries where data warehousing is in widespread use. The insurance data warehouse, once established will help improving business operations and for designing new products by identifying correlations and patterns in the data that could not be otherwise deduced or intuited in the absence of data mining analysis. Some of the specific benefits of Data Warehousing in insurance are:



Generally, customer information is scattered across disconnected systems, making it impossible to obtain a total picture of a customer, while all the Data Warehousing models can be built around the idea of a Customer-centric view of the business.

• Data Analysis and decision making

Data Warehousing can enable the insurers to effectively develop solutions to

- Improve business profitability analysis, including underwriting, claims performance, persistency, cross-selling penetration, and fraud detection
- Build Management Information Systems (MIS) to track and analyze key performance indicators
- Develop risk management systems to support extensive risk modeling and data analysis, including asset and liability management.

Benefit and usage of a data warehouse may vary and substantiate from one level to another as it is basically a tool in the strategic formulation of policies. For example, to a senior manager a data warehouse may come in handy for strategic business direction, information for strategically positioning the Organization, Competitive analysis and performance evaluation, Strategic planning and policy, External factors that influence the direction.

On the other hand a middle level manager may use the technology for organizational and operational functions, information for coordination of work units, information for delivery programs, evaluation of resources usage, budget control, problem solving, operational planning, resource management, project scheduling etc.

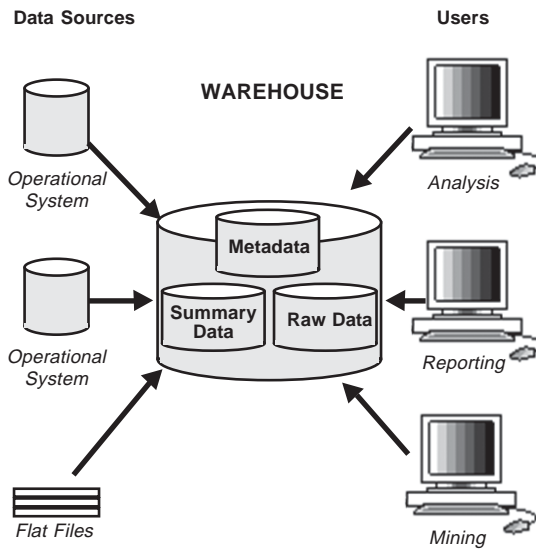
Similarly a Line Manager could also take the data for activity

management, information for routine decision making, information for problem solving, information for service delivery etc.

In insurance industry the biggest consumers of data are actuaries, operations, finance, sales /marketing and audit/compliance.

Architecture of Data Warehouse

In the below diagram, we have illustrated the typical architecture of Data Warehousing. It includes the metadata and raw data of a traditional OLTP system as an additional type of data, summary data. Summaries are very valuable in Data Warehouses because they pre-compute long operations in advance. For example, a typical Data Warehouse query is to retrieve something like August sales.



Systems and products available

There are two key systems - OLTP (Online Transaction Processing) and OLAP (Online Analytical Processing) that are used for computing with certain characteristics, in contrast to more

traditional batch processing. An organisation needs to first and foremost ascertain their data mining needs and objectives to be able to zero down on an appropriate system.

In the market, at present, there are various products available such as:

- ORACLE Data Warehouse
- INFORMATICA Data Warehouse
- MICROSOFT SQL Server Data Warehouse
- NETEZZA Data Warehouse
- COGNOS Data Warehouse
- TERADATA Data Warehouse

In today's business environment, strategic management and decision making without a Data Warehouse is like navigating without a compass. Thus in every organization, specifically insurance companies, information technology is increasingly being depended upon for effective results.

It is imperative for insurance companies to streamline their financial performance reporting processes with a greater focus on accuracy and traceability of the reported numbers.

The author is Chief Operating Officer, Aviva Life Insurance.

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Vandana Bharadwaj observes that insurance companies have come to realize the need to use data warehousing as a business necessity and not just as another tool for the sake of being up-to-date.

Building Data Warehouse

Solutions for Insurance Industry

Data and Analytics

With significant investment in IT solutions over the previous decade, all industry sectors, including insurance have accumulated a huge volume of data. However, most of the insurers are yet to realize the effective use of this data and still view collection of data as a satisfactory goal whereas deriving critical or relevant business insight is the more appropriate goal. An evolved decision support system built around dimensionally modeled data, which is enhanced with rules and can deliver on-demand analytics, is a true business user goal. However, there are significant challenges in achieving this goal, including the fact that data originates from multiple heterogeneous sources, may be lacking in the required granularity; and the collection and consolidation process may not be regular. To achieve the optimum benefit, the implementation of an enterprise wide data warehousing solution is required. It needs to be supported with systematic efforts to collect data on time and concerted efforts to appropriately distribute the advanced analytic and reports it generates to appropriate users across the enterprise. This article will address the technology components which enable a data warehouse to be successful.

Data warehousing is a form of data management and refers to data-intensive systems which aggregate data from enterprise applications serving functional or departmental goals, to give a holistic enterprise wide perspective. Globally, insurance companies have understood the need to use data warehousing as a business necessity and not just as another technology implementation done for the sake of being “up to date”.

Business Intelligence and data warehousing

Insurance data is both, strategic as well as operational. Business intelligence is a strategic goal of all businesses because it delves into deep analytics to facilitate management decision. This helps define and push an organization’s competitive business edge by providing statistics and reports related to business performance such as sales, profitability, consumer profiles and product performance. The starting

Data warehousing is a form of data management and refers to data-intensive systems which aggregate data from enterprise applications serving functional or departmental goals, to give a holistic enterprise wide perspective.

point is always a coherent central repository of operational data, structured as a data warehouse. This has to be supplemented by analytical tools which turn raw data into useable information. Advanced analytics, like predictive modeling, enable decision makers to interpret data to arrive at deductions and inferences. Some practical applications of this would be in risk assessment, fraud prevention, policy pricing and trend analysis.

Data warehouse – design, architecture and components

A data warehouse quite simply provides a framework for query, reporting and analysis. It contains time-variant, non-volatile, historical and subject-oriented data. As with any major IT solution, the initial step is to define the scope, business goals and requirements for building a data warehouse. Critical to this is an understanding of data available that normally happens by first identifying business focus areas and determining what data they generate and how it can be collected. Managers are asked to identify key metrics and reports that they would need because a data warehouse is as much about detailed OLAP tier definition as it is about proficient schemata design for the data warehouse. Then data sources and data extraction

methods are identified and the Manager's needs are mapped against processes and data flows. This process can go through multiple iterations (recommended and expected) before an expansive design is created for the data warehouse. Detailed dimensional data models are designed based on the data items. The dimensional model could be star, snowflake or fact constellation schema. In addition data source mapping and metadata repository management is also defined. Metadata can be split into 3 parts viz. technical, business and operational. The level of normalization of Dimensions (business entity) and its relationship to Fact (numerical data items) tables defines

Regardless of the architectural model, the components of a data warehouse are fairly standard although they might differ in scale.

this model. Some key infrastructure essentials, like hardware platform; need to be defined before full scale development starts.

The data warehouse environment will typically include an ETL tool/interface, analysis tools, OLAP engine and other applications/utilities/tools to gather and deliver data. This is reinforced by establishing rules, standards and adequate procedures for data procurement, cleansing, building and reporting for users across an enterprise. The conformed data is represented in a multidimensional format which enables summarizing, drilling down, slicing and dicing. The User Interface is built intuitive enough to allow searching, combining and analyzing the data repository thus enabling data visualization at varying granularity. A user should be able to start by viewing results by line of business but be able to progress to the details of an individual claim or policy holder.

The most common architectures for building a data warehouse are the hub-spoke, data mart bus and centralized data warehouse. A centralized, persistent data warehouse that integrates enterprise wide data is very challenging to model, takes huge resources to build but gives effective results. On the other hand, data mart dependant architecture can be rapidly built and deployed but could fail when cross-referenced if the data marts are not conformed, have redundant data or do not meet the overall business model. Having a primary data warehouse with functionally diverse data marts is the hub-spoke model which is easier to uniformly scale and extend. Regardless of the architectural model, the components of a data warehouse are fairly standard although they might differ in scale. The primary components are:

Data Sources

Enterprise data warehouses consolidate huge data sets through a varied array of data sources like XML, flat files, RDBMS files and other data formats. This data is collated from internal and/or external sources viz. from an insurance company's own data sources, TPAs, brokers or other stakeholders. Ensuring data quality and correct profiling as per defined standards at the acquisition stage allows for an incisive drill through data and cascading analysis in the end. This

is the first step towards building the data warehouse.

- **ETL (Extract, transform, load)**

A data integration platform enables ETL utilities or tools to process the flow of source data which comprises primarily of claims, enrollments and policy details. The ETL processes, algorithms and rules depend on the complexity, quality, size and granularity of data. These processes extract, clean, de-dupe, reconcile, identify outliers and transform the source data. Data completeness and quality is measured against more detailed metrics that are pre-defined during the design and planning phase. The cleansed data with conformed dimensions is staged for final load, indexing and build into the warehouse. Data backups and archival can be taken at this as well as the next level ie. populating the Data Warehouse.

- **Building the Data Warehouse (model, metadata, data marts and cubes)**

Data from ETL processes flows into the data warehouse building engines that check integrity constraints, distribute, aggregate and store data into data marts and cubes. Data marts and Cubes are multidimensional structures extrapolated from Fact and Dimension tables. Data marts are subject specific logical structures created within the enterprise data warehouse and are typically designed for a set of users or department or business process. Cubes differ from data marts in that they are physical data structures comprising of pre-calculated aggregations (of measures) based on dimensional hierarchies.

Complex business rules, encapsulated within the dimensional model, are used to define aggregation on standardized and consistent data that builds the marts and cubes. The data marts and cubes thus created are used for focused querying by the reporting and analytic interface. This data is useful for analysis such as trends and for development of benchmarks and other performance/operational metrics. Some metrics, common across general insurance verticals, could be - Completion factors for IBNR estimation, Utilization metrics, Risk adjustment, Stop loss factors, cost per member per year (PMPY), Loss ratio etc.

- **Presentation layer (Reports, analytic tools)**

The warehoused data thus built is mined, queried, cross-referenced and pivoted by the presentation layer comprising of visualization tools like reports, dashboards, scorecards etc and other analytic tools like OLAP browsers, mining/statistical interfaces etc. Advanced reporting and analytics uses intensive concurrent querying and computation to execute on the massive aggregated data within the native data warehouse. This layer is most crucial to design for optimal performance and focused results because from a User's perspective this is the interface to the underlying data warehouse as it hides all architectural complexities.

Data warehouse – custom built or pre-packaged

The key to having an efficient and high performance data warehouse is to tune it to your core business requirements. Business organizations, even if they share space in the same vertical, have specific business focus, the roadmap to which could be different. It is these core differences that require a flexible, extensible and efficient data warehouse solution. Broadly, there are three options available – purchase a pre-packaged vendor specific data warehouse/BI solution eg Business Objects from SAP or Cognos from IBM; customize one using an industry specific data warehouse/BI framework eg MedInsight for health insurance from Milliman; or, build one from scratch. The last option is the least fault-tolerant and most risky. The other two approaches have their own pros and cons. Therefore between those two, if the requirements and expected outcomes are defined and can be demonstrated and delivered with pre-packaged solutions then it is indeed a good choice to implement. However, for advanced analytics and data integration processes, it would be prudent to build on a framework which is specifically designed for insurance as it would integrate business logic, actuarial techniques and have in-built industry benchmarks. Also it would be far more scalable and extensible than packaged solutions from a vendor's product line that can potentially be rigid across platforms.

Main benefits of a customized, open-source data warehouse solution are:

- Convergence of key business requirements with high impact performance and robust functionality

- Faster implementation with great ROI
- Efficient costs, easier maintenance
- Scalable and extensible; largely vendor-independent
- Not limited by their inherent definition/design and can build more upon their strengths and eliminate/correct weaknesses
- Measurable benefits

Advances in Data warehousing

Data warehouse is by definition 'historical' data but business demand is pushing for real-time features like very low latency in data between the transaction databases and data marts by having accelerated ETL processes. This would essentially mean combining transactional and analytic platforms to build a mixed-systems environment. We could have a system where Claims processing like payments and reimbursements will be available to the OLAP tier almost on a real time scale.

With the complex nature of content and the unstructured format to go with, it makes more sense to allow for integration and processing of such data content into the data warehouse.

Integrating unusual content types into the data warehouse is the next step. With the complex nature of content and the unstructured format to go with, it makes more sense to allow for integration and processing of such data content into the data warehouse. Such data can come in from web sources like forums, blogs or simple text data from customers that needs to be mined for richer analysis.

Building parallelism in the data warehouse architecture is widely implemented across huge enterprise data warehouse installations. Most of the current server architectures and OS natively support Symmetric multiprocessing for querying, multi-threading and workplans. But with data builds expected to run into hundreds of terabytes or even pentabytes for some sectors like finance and insurance within the next few years, the move is towards a hyper-cluster of servers that will provide massive parallel processing among multiple nodes.

Advances in data mining techniques like predictive modeling that uses approaches like decision trees and artificial neural networks are becoming progressively more complex due to availability of massive data, quantifiable content and huge computing power.

Conclusion

Data warehousing has evolved rapidly over the last decade and is poised for much greater role in an organizational IT structure. It can co-exist or integrate with existing operations systems. It is no longer an option, it has become mandatory due to the advanced technology it incorporates at all levels to disseminate and reorganize data into knowledge for a Business enterprise.

The author is IT Consultant with Milliman India, Gurgaon.

प्रकाशक का संदेश



आधुनिक समय में सूचना का बढ़ता महत्व तथा एक मजबूत डाटाबेस साधारणतः तथा विशेषतः वैश्विक वित्तिय संकट के समय दृष्टिगोचर होता है। वह संकट जो हमने हाल ही में देखा है संभव है की मजबूत सूचना आधार ने संगठनों को संकट से बचा लिया होता। एक बेहतर कार्य संपादन करने वाली संस्था अव्यवस्थित स्थिति में फंस सकती है क्योंकि उनके पास एक गुंजायमान डाटा बेस का समर्थन नहीं है। इस तथ्य को समझते हुए की प्रबन्धकीय निर्णय में किस प्रकार डाटा बेस मूल्य संवर्धन कर सकता है, महत्वपूर्ण कार्य कर लिया गया है जो उद्योग से संबन्धित व्याख्या में है जो अन्ततः बड़ा महत्व रखता है।

ऐतिहासिक रूप से, भारतीय बीमा व्यवसाय ने अपने व्यवसायियों के मध्य सूचना सहभंजन का कार्य नहीं किया है इसके अपने कारण हैं। बीमाकर्ता हमेशा अपने पते छुपा कर रखना ही उचित समझा, दुर्भाग्यवश ऐसा कोई प्रयास नहीं किया गया की कोई अनुवादी सूचना का ढाँचा तैयार किया जाए जो उद्योग की प्रगति में सहायक हो। हाल ही में यह प्रवृत्ति बदलती हुई दिखाई दी है तथा आधुनिक बीमाकर्ता बढ़ते हुए न केवल सुदृढ़ डाटाबेस के महत्व का समझते हैं और उस दूसरों के साथ बढ़ाने को तैयार है। जिससे व्यवसाय के बुरे धारकों को दूर किया जा सके। यहाँ तक की पर्यवेक्षकों के लिए भी, यह सुनिश्चित करना एक प्राथमिकता है कि ऐसा विश्वसनीय तथा मजबूत डाटाबेस जो उनके कार्यों को आगे ले जाने के लिए मजबूत आधार प्रदान करेगा। धन्यवाद पूर्वक हम इस सम्बन्ध में अच्छी प्रगति कर रहे हैं।

एक प्रकार से भारतीय बीमा बाजार अभी विकास के दौर में है और यह

ग्लोबल मानक प्राप्त करने की कोशिश कर सके जो फलतः प्राप्त होंगे, पहली प्राथमिकता सूचना के उपर बैठना है। ऐसी विनियामक प्रणाली के अनुपालन के लिए जिसमें जोखिम आधारित पूँजी अन्तरराष्ट्रीय वित्तिय रिपोर्टिंग मानक इत्यादि हो यह आवश्यकता है कि उच्च दर्जे का प्रभावशाली डाटाबेस तैयार किया जाए। हमारा प्रयास ऐसे सशक्त डाटाबेस को तैयार करने का है और इस कोशिश में हम यह भी देखना चाहते हैं कि हमें हितधारकों तथा सभी व्यवसायियों से पूर्ण सहयोग मिले।

“डाटा भंडारण तथा खनन बीमा में” यह इस अंक के केन्द्र बिन्दु में है। यदि उद्योग में वाद विवाद को कम करना है, यह आवश्यक है कि प्रबन्ध तथा स्टाफ के प्रत्येक स्तर पर उपयुक्त प्रशिक्षण प्रदान किया जाए। “बीमा में प्रशिक्षण” जर्नल के अगले अंक के केन्द्र बिन्दु में होगा।

जे. हरि नारायण

अध्यक्ष



वित्तीय संकट से जो महत्वपूर्ण पाठ हमने सीखा है वह है बीमा पर्यवेक्षण पर पुनर्बल देना विकसित तथा विकासशील दोनों प्रकार के बाजारों पर उसके साथ भूमंडल बीमा बाजार पर वित्तीय समावेश तथा पहुँच को बनाते हुए।

श्री पीटर ब्रामूलर

अध्यक्ष, आई ए आई एस कार्यकारी समिति

अच्छा प्रशासन कभी यह गारंटी नहीं दे सकता की कभी संकट नहीं होगा लेकिन यह संभाव्यता को कम कर सकता है और उसका प्रभाव यदि वह सामने आये।

श्री हैग स्वी कीट

प्रबन्ध निदेशक मोनेटरी एथोरिटी, सिंगपुर

एक लम्बे पीछे की तरफ मोड़ ने सम्पत्ति की गुणवत्ता, लाभप्रदाता तथा पूँजी पर बड़ा दबाव डाल है। इसके कारण उन वित्तीय संस्थानों पर बुरा प्रभाव हुआ है जो धारण करने में ढीले रहे हैं।

श्री जान एफ लेकर

अध्यक्ष, आस्ट्रेलिया प्रुडेंशल रेगुलेशन प्राधिकरण

हम उपभोक्ताओं के बीच बेहतर समझ साधारण बीमा के उत्पादों तथा सेवाओं की तथा महत्वपूर्ण बिन्दु जिन्हें बीमा संविदा करने समय तथा दावा करने समय अपने मस्तिष्क में रखना है।

श्री मासोतोषी सान्तो

अध्यक्ष, जनरल इंशोरेंस एसोसिएशन, जापान

बीमाकर्ता के लिए नैतिक जोखिम तथा विपरित चुनाव से संघर्ष करने के लिए डाटा को सहभंजन करना महत्वपूर्ण पूर्वापेक्षा है।

श्री जे हरि नारायण

अध्यक्ष, बीमा विनियामक और विकास प्राधिकरण, भारत

नीति बनाने वालों के लिए भूमंडलिय वित्तीय संकट के प्रति सख्त जवाब देना तथा अपसंगत नीति साधन धारण करना। एक दीर्घ मंदी को उल्ट दिया गया तथा अब विश्व की अर्थ व्यवस्था उबर रही है।

श्री डाटो ओई संग कुआग

उप गवर्नर, बैंक आफ निगारा, मलेशिया



दृष्टि कोण

जी वी राव का मानना है कि क्लेम स्तर पर किसी भी प्रस्ताव की जांच की पुरातन परिपाटी में बदलाव कर इसे शुरुआती चरण में ही पूरी तरह से वस्तुनिष्ठ बनाया जाना चाहिए। इस प्रकार से नॉन लाइफ इंडस्ट्रीज संबंधी अनेक विवादों से निपटा जा सकता है।

सूचनात्मक असंतुलन -

साधारण (नॉन लाइफ) बीमा विनियम

बीमा कंपनियां जोखिम से निपटने में की दिशा में सूचनात्मक असंतुलन को कम करने में कितनी सक्षम है? ये कंपनियां भौतिक और नैतिक जोखिम से बेहतर ढंग से निपटने में किस प्रकार से लैस हैं। डिटैरिफिंग के साथ-साथ अन्य उपादान कितने कारगर हैं? इस सभी पक्षों पर आइए नजर डालते हैं।

असंतुलन की व्याख्या

सामान्य जन मान्यता है कि बीमा कंपनियां इंश्योरेंस पॉलिसी का बेचान उद्यमियों को खरीदार मान कर करती हैं। ऐसे में सूचनात्मक असंतुलन के आदान-प्रदान की विवेचना में खरीदार को ही उत्तरदायी माना जाता है। बहुधा उसके नैतिक जोखिम पर ही अंगुली उठाई जाती है, जबकि व्यावहारिक और विधिक पैमाने पर यह उल्टा ही होता है।

इस दुनिया में बीमाकर्ता जोखिम को झेलने वाली प्रमुख संस्थाएं हैं, जबकि बीमित वित्तीय सुरक्षा के लिए अपने जोखिम को त्यागने के प्रति उन्मुख रहते हैं।

बीमित अपने जोखिम का बेचान करता है, और बीमा कंपनी उसे एक दाम पर खरीदती है। ऐसे में खरीदार का हक है कि वह किसी भी संविदा से पहले बेचने वाले से जोखिम समेत हर प्रकार के संबंधित सवाल पूछे।

इस डिटैरिफ्ड दौर में क्या बीमा कंपनियां इनका पालन कर रही हैं। बीमित से सारी सूचनाएं प्राप्त करने की पद्धति में किस प्रकार का बदलाव आया है। सभी सूचनाएं प्राप्त करने के लिए तैयार प्रापोजल फॉर्म्स में बदलाव आया है। यदि नहीं तो बीमा कंपनियां सूचनात्मक असंतुलन के बारे में सजीदा नहीं हैं।

लेकिन साथ ही साथ बीमा कंपनियां काफी हद तक सुरक्षित भी हैं। क्योंकि लगभग सभी बीमा संविदाएं उच्च नैतिक आदर्शों (गुड फेथ) के सिद्धांत पर आधारित होती हैं। अतः यह बीमिती कर्तव्य है कि वह स्वप्रेरणा से अपने सभी तथ्यों का खुलासों के आधार पर हम किसी भी असंतुलन के बारे में विवेचना कर सकते हैं। खुलासे जितने ज्यादा और स्पष्ट होते हैं असंतुलन उतना ही के होता है। बीमा कंपनियां इन्हीं तथ्यों के आधार पर लाभ की अवस्था में होती हैं।

किसी भी प्रपोजल फॉर्म में पूछे गए सवालों के जवाब ही पर्याप्त नहीं होते हैं। बीमा कंपनियों के जानने लायक सभी तथ्यों का उल्लेख निया जाना जरूरी होता है। आखिरकार बीमा कंपनी ही समस्त क्लेम निस्तारण में अंतिम जज साबित होती है।

बीमित का सूचनात्मक असंतुलन

बीमित के लिए असंतुलन पॉलिसी संविदा के स्तर से ही शुरू हो जाती है। पॉलिसी के नियम और उपनियम बीमित के कृत्यों पर ही केन्द्रीत होते हैं। क्लेम की स्थिति में बीमित को दिए जाने वाले निर्देशों की भरमार होती है। इसकी तुलना में बीमाकर्ता के लिए निर्देश ना के बराबर होते हैं। केवल क्षतिपूर्ति देयता, ब्याज का भूगतान और गलत निर्णयों से उपजे दायित्व ही बीमाकर्ता के जिम्मे होते हैं। दुर्भाग्यपूर्ण परिस्थिति है कि बीमित और बीमाकर्ता के बीच के इस अंतर को पाटन के कोई भी प्रयास अथवा पहल दृष्टिगोचर नहीं होती है। सभी परिस्थितियों में बीमाकर्ता के उच्च आचरण को ही मानकर चला जाता है।

जोखिम: बीमाकर्ता के मूलन तत्व

इस दुनिया में बीमाकर्ता जोखिम को झेलने वाली प्रमुख संस्थाएं हैं, जबकि बीमित वित्तीय सुरक्षा के लिए अपने जोखिम को त्यागने के प्रति उन्मुख रहते हैं। असल में दूसरे का जोखिम बीमाकर्ता के लिए मुनाफे का मूल तत्व मात्र है। यही उनका व्यवसाय और प्रतिफल है। जितना ज्यादा उत्तरोत्तर जोखिम होगा बीमा कंपनियों की उपादेयता उन्नी ही विकसित और अधिक होगी।

नॉन लाइफ इंश्योरर का एक अन्य प्रमुख आधार जोखिम का उत्कृष्ट प्रबंधन है। आखिरकार कोई भी इंश्योरेंस कवर बीमित के लिए जोखिम प्रबंधन का एक अन्य उत्पाद है। बीमाकर्ता का मुख्य लक्ष्य दुर्घटनाओं की रोकथाम और घटित होने पर हानि को कम से कम करना होता है।

जोखिम के कारणों की बेहतर समझ और मूल्य निर्धारण की दिशा में बीमाकर्ता को बीमित से और अधिक सूचनाओं की दरकार होती है। अतः बीमाकर्ता को अपने सूचना तंत्र को और परिष्कृत करने के लिए प्रपोजल फॉर्म के ढांचे को और सुदृढ़ करना होता है। बीमाकर्ता द्वारा जोखिम वर्गीकरण से जोखिम की परिस्थिति को बेहतर ढंग से समझा जा सकता है। अब बीमाकर्ता बीमित पक्ष के सूचनात्मक असंतुलन को और कम करने में सक्षम है।

जीवन बनाम गैर जीवन बीमा संविदाएं

सभी जीवन बीमा संविदाएं समस्त जोखिमों के आंकलन के बाद ही पूर्ण होती हैं। जैसे आयु प्रमाण, डॉक्टर द्वारा बीमित के स्वास्थ्य की वर्तमान स्थिति वगैरह। इसमें बीमाकर्ता अपने ही डॉक्टर से जांच परख करवाता है। जबकि गैर जीवन बीमा संविदाओं में सूचनाओं का सत्यापन केवल क्लेम की सूरत में ही किया अथवा करवाया जाता है। इस प्रकार की संविदाएं पूर्व में बिना किसी सत्यापन के अमल में लाई जाती हैं। क्लेम की स्थिति में इस प्रकार की स्कूटनी विषयनिष्ठ होती है। अतः ऐसी सूरत में जब स्कूटनी होती है मसलन एक्सीडेंट के केस में तो बीमित को लगा है कि बीमाकर्ता उसे क्लेम देने को उत्सुक नहीं है। वैसे इस प्रकार के पूर्वाग्रस्त विचार बहुदा गलत भी साबित होते हैं।

प्रपोजल फॉर्म के उपयोग

भारतीय परिदृश्य में 2007 से पहले तक के सख्त टैरिफ काल में प्रपोजल फॉर्म को पॉलिसी जारी करने पर सूचनात्मक जरिया माना जाता था। इसके आधार पर ही जोखिम निर्धारण और मूल्यांकन नहीं किया जाता है। टैरिफ की वजह से दरें देरी से प्राप्त होती थीं।

टैरिफ राज के उन्मूलन के बाद भी व्यावहारिक विजनस में अब भी पूर्ववर्ती रुख कायम है। यहां तक की नॉन लाइफ इंश्योरेंस अपन विशेषज्ञता के आधार पर अब भी पूर्व टैरिफ के आधार पर ही जोखिम गणना करते हैं।

असल में यदि दो टूक शब्दों में कहा जाए तो आजकल के बीमाकर्ताओं को जोखिम के विभिन्न पक्षों के बारे में थोड़ा अथवा अप्ल ज्ञान ही हासिल है। बीमाकर्ताओं का ज्यादा संकेन्द्रण टैरिफरेंटिंग के आधार पर सेल्स होता है।

बीमाकर्ता के कारण असंतुलन

बीमाकर्ताओं की अनगढ़ बीमा परिपाटियों के चलते भी बीमा के क्षेत्र में सूचनात्मक असंतुलन में इजाफा हुआ है। स्वास्थ्य विभाग प्रपोजल के मामलों में बीमाकर्ता आयु को ही मुख्य कारक मानकर चलता है। लेकिन

क्लेम की स्थिति में बीमित से पूर्व की परिस्थितियों के बारे में सवाल-जवाब पूछे जाते हैं जबकि इस स्थिति से निपटने के लिए पूर्व में ही प्रपोजल फॉर्म में शुरूआती चरण में ही पूर्व की परिस्थितियों के बारे में सूचनाएं जमा कर लेनी चाहिए।

नैतिक आधार पर दी जाने वाली सूचनाओं की प्रकृति ज्यादा घातक होती है। क्योंकि इस प्रकार की सूचनाओं के खुलासे में बीमाकर्ता को कहीं ज्यादा सूचनाओं को प्रवाहित करना होता है।

प्राथमिक तौर पर सभी प्रकार के जोखिमों को कवर करने की जिम्मेदारी बीमाकर्ता पर होनी चाहिए। किसी भी हेल्थ पॉलिसी के नवीनीकरण के समय बीमाकर्ता बीमित से उसके स्वास्थ्य में आए दलाव के बारे में पूछता तक नहीं। लेकिन क्लेम की स्थिति में बीमाकर्ता झट से बीमित से पिछले साल के दौरान आए परिवर्तन के बारे में सवालों की झड़ी लगा देता है। और साथ ही कहता है कि ऐसे बदलाव के बारे में क्यों कर सूचित नहीं किया गया। अतः बीमाकर्ता नए उपायों से यह सुनिश्चित करे कि बीमारी के कारण अक्सर अस्वस्थ रहने वाले का बीमा नहीं कराया जा सके।

नैतिक परेशानियां

सूचनाओं में असंतुलन के दो प्रमुख कारण, भौतिक और नैतिक आचरण। बीमाकर्ता के प्रतिनिधि द्वारा जोखिम के आंकलन की स्थिति में बीमित जोखिम के भौतिक लक्षणों के प्रति गैर जिम्मेदार होता है।

नैतिक आधार पर दी जाने वाली सूचनाओं की प्रकृति ज्यादा घातक होती है। क्योंकि इस प्रकार की सूचनाओं के खुलासे में बीमाकर्ता को कहीं ज्यादा सूचनाओं को प्रवाहित करना होता है। टैरिफ की उपस्थिति में बीमाकर्ता से मानता है कि इस मामले में नैतिक आधार का सवाल ही पैदा नहीं होता है। क्योंकि बीमाकर्ता के मुताबिक टैरिफ दरों का निर्धारण जोखिम की प्रवृत्ति और प्रकृति को ध्यान में रखकर ही निर्धारित किया जाता है।

बीमाकर्ता के व्यापार दर्शन तक में ये प्रवृत्ति परिलक्षित होती है। वर्तमान में नैतिक आचरण क्लेम निस्तारण के समय ही पैदा होता है। व्यापारिक संबंध, बीमित का विधि सम्मत अथवा इसके उलट आचरण, सुरक्षा मानकों की स्थिति और सरकारी नियम कायदों की पालना कुछ ऐसे नैतिक आचरण के प्रमुख विषय हैं।

विशेषज्ञों का तर्क है कि बीमाकर्ता जोखिम और दर निर्धारण के समय नैतिकता के विषय को समय नैतिकता के विषय को अधिक महत्व दें। क्योंकि नैतिकता के अभाव में ही कपटपूर्ण क्लेम आहरण के प्रयास की परिपाटी देखने में आती है। लेकिन दुर्भाग्यपूर्ण हालात है कि वर्तमान में बीमाकर्ताओं के तौर-तरीके और मनःस्थिति इस प्रकार की कदापि नहीं कि वे कपटपूर्ण आचरण करने वाले फर्जी प्रकरणों को शुरूआत में ही चिन्हित कर सकें।

सारांश

संविदा के शुरूआती चरण में ही नैतिक और भौतिक आचरण में अंतर नहीं कर पाने के कारण बीमाकर्ताओं में लगभग सभी बीमितों के प्रति संदेह का भाव रहता है। लेकिन यह बीमाकर्ता की अपने उपभोक्ता प्रति जायज प्रतिक्रिया नहीं घोषित

की जा सकती है। अतः नैतिक आचरण को संविदा के शुरूआती चरण में ही चिन्हित किया जाना जरूरी है, ना कि क्लेम निस्तारण के समय, जैसा कि आजकल देखने में आता है।

यह ध्यान में रखने योग्य तथ्य है कि ज्यादातर उपभोक्ता ईमानदार, जिम्मेदार और निष्ठावान होते हैं। केवल चंद मुट्ठीभर बेईमान उपभोक्ताओं के कारण बीमाकर्ता कंपनियों को क्लेम निस्तारण के वक्त सभी उपभोक्ताओं के प्रति नकारात्मक छवि नहीं बनानी चाहिए। ऐसे में बीमाकर्ता को इस प्रकार के आदानों को अमल में लाना चाहिए जिससे कि उपभोक्ताओं के नैतिक स्तर का आंकलन वे शुरूआती चरण में ही कर सकें। सूचनात्मक असंतुलन निश्चय ही बीमाकर्ता के लिए एक प्रमुख विचारणीय मुद्दा है। लेकिन इसमें बीमाकर्ताओं को भी यह तथ्य स्वीकारण

होगा कि यंत्रवत तरीके से किया जाने वाला उनका व्यापारिक तौर-तरीका भी इसमें काफी हद तक जिम्मेदार रहा है। बीमाकर्ता कंपनियों को बदलते वक्त के साथ आने में बदलाव कर उपभोक्ताओं को साथ लेकर चलना होगा।

लेखक सेवा निवृत्त अध्यक्ष प्रबंध निदेशक ओटिपुंटेल् इंडियोरेंस लिमिटेड।

प्रवीण कुमार कहते हैं, बीमाकर्ता संभावित गलत इस्तेमाल को रोकने के लिए कंपनियों ने अभी ओ.पी.डी खर्च को सीमित करने का निर्णय लिया है।

मेडिकलेम बीमा में अब ओ.पी.डी खर्च भी शामिल

मेडिकलेम बीमा खरीदारों के लिए एक अच्छी खबर यह है कि बीमा कंपनियां अब बहिरंगी विभाग (ओ.पी.डी) में हुए खर्चों के लिए भी सुरक्षा उपलब्ध करवाना प्रारंभ कर रही है। अब तक बीमा कंपनियां ऐसे कवर उपलब्ध नहीं कराती थीं, उनका मानना था कि पॉलिसीधारक इसका बेजा इस्तेमाल कर सकते हैं। संभावित गलत इस्तेमाल को रोकने के लिए कंपनियों ने अभी ओ.पी.डी खर्च को सीमित करने का निर्णय लिया है। इसलिए अगर कोई असीमित व्यक्ति जिसकी उम्र 19 से 35 साल के बीच है, वह 2 या 3 लाख रुपये का स्वास्थ्य बीमा 15,000 रुपये सालाना का प्रिमियम देकर ले सकता है। अगर कोई व्यक्ति 3 लाख रुपये का कवर लेता है तो अधिकतम ओ.पी.डी खर्च 8,800 रुपये और 2 लाख रुपये के कवर पर यह खर्च 9,000 रुपये का होगा। हालांकि, पॉलिसीधारक पॉलिसी अवधि के दौरान सिर्फ एक बार ही ओ.पी.डी खर्च का दावा कर सकता है। इसके अतिरिक्त, अन पॉलिसीधारक के तहत पॉलिसीधारक पॉलिसी लेने के 90 दिनों के भीतर ओ.पी.डी खर्च का दावा नहीं कर सकता।

डॉक्टर का प्रेस्क्रिप्शन और मेडिकल खर्च का ब्योरा देना ओ.पी.डी खर्च का दावा करने के लिए, पॉलिसीधारक के लिए जरूरी होगा। 'बहिरंग विभाग में हुए खर्च को कवर करने का मुख्य मकसद यह है कि बीमारियों की पहचान शुरूआत में ही हो जाए और इससे हेल्थकेयर बेहतर हो सकेगा। पॉलिसीधारक बार-बार अपने स्वास्थ्य की जांच नहीं करवाएंगे। 'यह स्वास्थ्य योजना उन शहरी नौकरी पेशा वालों के लिए बेहतर होगा जिन्हें नियोक्ता की तरफ से स्वास्थ्य सुविधाएं नहीं मिलती है।' यह पॉलिसी रिटेल श्रेणी की आवश्यकताओं को ध्यान में रख कर बनायी गयी है क्योंकि कॉर्पोरेट स्वास्थ्य बीमा के मामले में साधारण बीमा कंपनियों को घाटा उठाना पड़ा है।

बीमा कंपनियों का ध्यान हाल के महीनों में दावों को कम करने की दिशा में बढ़ा है और वे अवधि के बीच में ही कॉर्पोरेट स्वास्थ्य बीमा को समाप्त करने जैसे

कदम उठा चुकी है। इसके अतिरिक्त, दावे की राशि के एक हिस्से का भुगतान बीमित कर्मचारियों से करवाने में भी कंपनियां प्रयासरत है। साधारण बीमा में रिटेल स्वास्थ्य बीमा की हिस्सेदारी कुल स्वास्थ्य बीमा प्रिमियम में 40 प्रतिशत की है। ऐसा आकलन है कि मार्च 2009 को समाप्त हुए वर्ष में स्वास्थ्य बीमा का कुल प्रिमियम लगभग 2,500 करोड़ रुपये था। रिटेल स्वास्थ्य बीमा श्रेणी में दावे का अनुपात कम होने से भी बीमा कंपनियां इस श्रेणी पर अधिक ध्यान दे रही है।

रिटेल स्वास्थ्य श्रेणी में दावे का अनुपात जहां 100 प्रतिशत का है वहीं कुल स्वास्थ्य बीमा दावे का अनुपात 130 प्रतिशत का है। इस प्रकार, बीमा कंपनियों ने 8,500 करोड़ रुपये के दावों का निपटान किया जबकि स्वास्थ्य बीमा से संग्रहित प्रिमियम साल 2008-09 के दौरान 6,500 करोड़ रुपये था।

कर बचत की वजह से भी स्वास्थ्य बीमा की खरीदारी में तेजी आई है। वतमान आयकर नियमों के अनुसार किसी व्यक्ति को सालाना 15,000 रुपये के स्वास्थ्य बीमा प्रिमियम पर कर में छूट का लाभ मिलता है। बुजुर्ग माता-पिता के लिए पॉलिसी लेने पर सालाना 20,000 रुपये का अतिरिक्त छूट मिलती है।

लेखक बनारस हिन्दू विश्वविद्यालय के विद्यार्थी हैं।

सामान्य बीमा के अंतर्गत उत्पन्न दावे

प्रक्रिया

हानि की सूचना

- हानि की सूचना तुरंत बीमाकर्ता को दी जानी चाहिए जिससे बीमाकर्ता प्रारंभिक चरण में ही हानि की जाँच कर सके।
- कुछ योजनाओं में पुलिस प्राधिकरण को भी हानि की सूचना दी जाती है तथा कुछ योजनाओं में रेलवे को भी हानि की सूचना देनी होती है।
- हानि की सूचना प्राप्त होने पर बीमाकर्ता निम्न प्रकार से दावा प्रक्रिया प्रारम्भ करता है।

हानि घटित होने की तिथि को पॉलिसी प्रभावी थी या नहीं, हानि पॉलिसी में आवरित आपदा से हुई है। हानि से प्रभावित विषय-वस्तु वही है जिसका बीमा किया गया है तथा हानि की सूचना तुरन्त प्राप्त हुई है।

हानि का निर्धारण

- बीमाकर्ता से विधिवत रूप से भरा हुआ दावा प्रपत्र प्राप्त होने पर बीमाकर्ता हानि की छानबीन और उसके निर्धारण पर निर्णय लेते हैं। यदि हानि होती हो तो हानि का कारण और मात्रा का निर्धारण करने के लिए बीमाकर्ताओं के किसी अधिकारी द्वारा छानबीन की जाती है। अन्य दवों के मामले की छानबीन का कार्य किसी लाइसेंस प्राप्त स्वतंत्र पेशेवर सर्वेयर को सौंपा जाता है।
- व्यक्तिगत दुर्घटना दावों हेतु इलाज करानेवाले डॉक्टर की रिपोर्ट जिसमें दुर्घटना या बीमारी का कारण और अशक्तता की अवधि के बारे में जानकारी रहती है, आवश्यक है। कर्मकार प्रतीकार दावों में मेडीकल साक्ष्य प्रस्तुत करने आवश्यक है। पशुधन तथा मवेशियों के दावे पशु चिकित्सा की रिपोर्ट के आधार पर निर्धारित होते हैं।
- व्यक्तिगत चोटों वाले तृतीय पक्ष दावे मेडीकल रिपोर्ट के आधार पर निर्धारित होते हैं तथा संपत्ति क्षति वाले मामले सर्वे रिपोर्ट के आधार पर निर्धारित होते हैं। दोनों ही प्रकरणों में विधिक राय ली जाती है।

हानि निर्धारण

आई.आर.डी.ए. विनियमों के अनुसार सर्वेक्षकों को विभिन्न

सात प्रकार के बीमा पॉलिसियों का सर्वे कार्य करने के लिए लाइसेंस प्रदान किये जाते हैं। परन्तु मरीन बीमा के दावों का समायोजन की प्रक्रिया अलग है इसमें सामान्य औरत हानियों का निर्धारण विशेषज्ञों द्वारा किया जाता है।

दावा प्रपत्र

दावा प्रपत्र की विषय वस्तु प्रत्येक बीमा वर्ग में अलग-अलग होती है। सामान्य दावा प्रपत्रों में हानि की परिस्थितियों के संबंध में पूर्ण जानकारी प्राप्त की जाती है। जैसे हानि की तिथि, समय कारण हानि की मात्रा आदि। दावा प्रपत्र के अलावा, स्वतंत्र सर्वे रिपोर्ट, चक्रवात से हुई क्षति के लिए मौसम विभाग की रिपोर्ट, सधमारी दवों में कोरोनर तथा पुलिस रिपोर्ट ली जाती है। मोटर दावों में चालक का लाइसेंस, पंजीकरण पुस्तक, पुलिस रिपोर्ट आदि लिये जाते हैं।

संविदा प्रवृत्त करने या उसके अंतर्गत विवाद निस्तारण के लिए सामान्य प्रक्रिया न्यायालय में जाना है किन्तु ऐसी कानूनी प्रक्रिया में काफी समय और धन लगा है। मध्यस्थता और समाधान अधिनियम 1996 संविदा के अंतर्गत विवादों के मामले प्रस्तुत करने की अनुमति देता है। यह प्रक्रिया अनौपचारिक, कम खर्चीली और निजी प्रकार की होती है। अग्नि और विविध बीमा की अधिकांश पॉलिसियों में आर्बिट्रेशन क्लॉज होता है जिसमें प्रावधान होता है कि यदि पॉलिसी के अंतर्गत कंपनी दायित्व स्वीकार करती है और प्रदत्त दावे की मात्रा पर विवाद होता है तो ऐसे मामले मध्यस्थता के लिए प्रस्तुत किये जा सकते हैं। यदि दावा सही पाया जाता है तो दावाकर्ता को उसका भुगतान किया जाता है तथा अभिलेख में उसकी प्रविष्टि की जाती है। कभी-कभी दावे का भुगतान बीमाधारी के स्थान पर किसी अन्य व्यक्ति को किया जाता है जैसे - अग्नि पॉलिसी के तहत बीमित संपत्ति किसी बैंक में गिरवी रखी गयी हो तो सम्मत बैंक शर्त के अनुसार दावे की रकम बैंक को अदा की जाएगी जिसकी रसीद बीमाकर्ता के लिए पूर्ण उन्मोचन होगी इसी प्रकार किराया खरीद करार वाले वाहनों के कुल हानि दावे वित्त पोषकों को अदा किये जाते हैं।

दावा निस्तारण के बाद बीमाकर्ता प्रस्थापन सिद्धांत के तहत बीमाधारी के अधिकारों तथा उपचारों का अंतरण अपने पक्ष में कर लेते हैं जो तृतीय पक्ष कानून हानि के लिए जिम्मेदार हो इससे पद्धत हानि वसूली कर सकता है। इस प्रकार बीमाकर्ता जहाजरानी कंपनियों, रेलवे, सड़क वाहनो, एयरलाइन पोर्टट्रस्ट अधिकरणों से वसूली कर सकता है। इस प्रयोजन हेतु बीमाधारी से विधिवत रूप से स्टैम्प लगा हुआ प्रस्थापन पत्र लिया जाता है।

लेखक मुकुल गुल, संभार इंश्यूरेन्स आपके लिए।

एच के अवरथी कहते हैं कि डॉक्टर द्वारा मरीज़ को विशेषज्ञ केन्द्र में भेजना यह दर्शाता है कि वह अपने मरीज़ों की सही तरीकों से देखभाल नहीं करता है तो निश्चित ही वह अपने कर्तव्यों से विमुख हो रहा है।

मरीज़ के प्रति डॉक्टर का कर्तव्य

डॉ. लक्ष्मण बालकृष्ण जोशी बनाम डॉ. त्रिम्बक बाबू गोडबोले एवं ए.एन.आर., एआईआर 1969 एससी/28 मामले में माननीय उच्च न्यायालय ने कहा की “एक व्यक्ति जो मेडिकल सलाह देता है एवं उपचार करता है वह मेडिकल में निपूण होता है तथा इसका संपूर्ण ज्ञान रखता है।

ऐसे व्यक्ति के पास जब कोई मरीज़ सलाह के लिए जाता है तो उस व्यक्ति के कई कर्तव्य होते हैं जैसे, यह निर्णय करना की केस को हाथ में लिया जाए या नहीं, किस प्रकार का इलाज किया जाए तथा इलाज के दौरान देखभाल का कर्तव्य।

व्यवसायियों को अपने कार्यों में बेहतरीन कुशलता एवं ज्ञान लाना चाहिए तथा साथ ही देखभाल की तरफ भी ध्यान देना चाहिए। एक डॉक्टर को यह अधिकार है कि वह अपने मरीज़ के लिए सही इलाज का चयन कर सकें।

ऑखों के एक अनुभवी शल्य चिकित्सक ने एक मरीज़ का इलाज करने का फैसला किया। उसने मरीज़ की शल्य चिकित्सा की और उसे सरकारी अस्पताल में भर्ती किया और पाँच दिनों के पश्चात उसे छुट्टी दे दी।

जब संक्रमण फैला तो उसने मरीज़ को एक विशेषज्ञ केन्द्र में भेज दिया। डॉक्टर द्वारा मरीज़ को विशेषज्ञ केन्द्र में भेजना यह दर्शाता है कि वह अपने मरीज़ की हालत के बारे में सावधान था।

अतः इसे उदासीनता नहीं कहा जा सकता है (डॉ.पी.सी. द्वेदी बनाम श्रीमती कमलाबाई पांडे, III (2003) सीपीजे 170)। और श्रीमती कमलाबाई का इलाज एक सरकारी अस्पताल में किया गया जहाँ उनसे कोई फीस नहीं ली गई। ग्राहक की भाषा के अंतर्गत वह ग्राहक नहीं थी जैसा की ग्राहक सुरक्षा एक्ट, 1986 के सेक्शन 2(1)(डी) में बताया गया है।

हाँलाकि एक और उदाहरण भी है जहाँ डॉक्टर ने इलाज में लापरवाही दिखाई है। एक गर्भवती महिला श्रीमती संतोष बाई के पति श्री रमेश चन्द्र प्रजापति, डॉ. जया मिश्रा की सलाह पर उज्जैन चेरिटेबल अस्पताल में भर्ती की थी। 1 मार्च 1999 को दोपहर 1 बजे उनका सोनोग्राफी टेस्ट किया गया।

मरीज़ को दोपहर 3 बजे भर्ती किया गया। डॉक्टर ने पाया की भ्रूण पर चुका था। डॉ. जया मिश्रा ने मरीज़ की पुनः जाँच की और कुछ दवाईयाँ एवं इंजेक्शन लिखकर दिए तथा साथ ही 12 से 14 घंटों के भीतर डिलिवरी की सलाह दी जरूरी हुआ तो शल्य क्रिया द्वारा डिलिवरी की सलाह देकर घर चली गई।

नर्स ने मरीज़ को आवश्यक इंजेक्शन दिया। कुछ समय पश्चात मरीज़ की तकलीफ काफी बढ़ गई और योनि से खून निकलने लगा नर्स ने डॉक्टर को इसकी जानकारी दी परन्तु डॉक्टर ने कहा कि यह सामान्य है और चिंता करने की कोई बात नहीं है।

कुछ समय पश्चात खून काफी मात्रा में बहने लगा और डॉक्टर को पुनः इसकी जानकारी दी गई परन्तु इस बार भी कोई ध्यान नहीं दिया गया। केवल नर्स ही मरीज़ की देखभाल करती रही और इस प्रकार 31 मार्च को सुबह 8 बजे मरीज़ की मृत्यु को गई। इस आशय की रिपोर्ट पुलिस में दर्ज करवाई गई।

जिला उपभोक्ता मामला निवारण समिति में इसके खिलाफ शिकायत दर्ज कराई गई जिसमें उपेक्षा के कारण मृत्यु के लिए 3 लाख रुपये तथा कारवाही खर्च के लिए 7,500 रुपये एवं 500 रुपये की माँग की गई।

समिति ने डा. मिश्रा को इसके लिए दोषी माना तथा तत्काल ही डा. मिश्रा एवं उज्जैन चैरिटेबल अस्पताल को संयुक्त रूप से 80,000 रुपये के भुगतान की आशा दी तथा साथ ही 500 रुपये खर्च के देने को कहा। हाँलाकि डा. मिश्रा एवं उज्जैन चैरिटेबल अस्पताल ने मध्या प्रदेश राज्य मामला निवारण समिति, भोपाल में एक अपील दायर की परन्तु यह अपील खारिज कर दी गई।

समिति ने अपनी जाँच रिपोर्ट में कहा की जब खून बहना शुरू हुआ और मरीज़ की हालत नाजुक थी तो अस्पताल एवं डा. मिश्रा का यह कर्तव्य बनता था कि मरीज़ की तत्काल आधार पर देखभाल की जाती तथा खून को रोकने के लिए आवश्यक उपाय किए जाते और अस्पताल एवं डा. ने इसकी उपेक्षा की। (उज्जैन चैरिटेबल ट्रस्ट अस्पताल बनाम रमेश चन्द्र, III (2003) सीपीजे 181)। चूँकि डाक्टर और मरीज़ के बीच का रिश्ता विश्वास पर कायम है अतः डाक्टरों को अपने कर्तव्यों के प्रति सतर्क होना चाहिए।

लेखक (प्रबंध विधि) उपभोक्ता आवाज संस्था।

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देरी के लिए शुगतान

जब बीमित को इस अधिकार से वंचित रखा जाए कि वह अपने पैसे को व्यापार में अथवा अन्यथा निवेश कर सके तो इस की क्षति पूर्ति अवश्य ही बीमा कंपनियों द्वारा ब्याज के रूप में की जानी चाहिए। इसी बात की पुष्टि सर्वोच्च न्यायलय ने युनाइटेड इंडिया इंश्योरेंस बनाम एम.के.जे कार्पोरेशन केस संख्या 111(1996) सी पी 8 (एस सी) के मामले में निर्णय दिया।

केवल यही नहीं सार्वजनिक प्राधिकरणों द्वारा परेशान किए जाने पर क्षतिपूर्ति किए जाने के परिणामस्वरूप व्यक्ति संतुष्ट होता है तथा यह सामाजिक बुराई को दूर करता है। यह कार्य संस्कृति को उन्नत बनाता है तथा अभिवृत्ति को बदलता है।

श्रीमती बसंत पांडे अन्य बनाम एल.आई.सी (शिकायत संख्या 3 (एम) वर्ष 2001) आदेश दिनांक 29-5-2003 जिसका निर्णय खंडपीठ ने किया जिसका सभापतित्व न्यायमूर्ति एन.एस सिंह ने किया जो मेघालय राज्य का राज्य उपभोक्ता शिकायत निवारण कमीशन था। एक विधवा जिसे पहले ही अपने पति की मृत्यु के कारण शोक था ने अपने पोते के साथ 6 वर्षों तक एल.आई.सी से भुगतान प्राप्त करने के लिए पीछे लगे रहे और अन्ततः उन्हें राज्य उपभोक्ता कमीशन के दरवाजे पर दस्तफ देनी पड़ी जिससे उस उद्देश्य की हार हुई जिसके लिए जीवन बीमा पॉलिसी बनाई गई थी तथा अनुपालित की गई थी।

इस मामले में श्री राम पाण्डे ने अपने जीवन काल में 15 वर्ष की अवधि के लिए 3 लाख रुपये की जीवन बीमा अगस्त 28, 1993 से अगस्त 28, 2008 तक के लिए ली थी उन्होंने ठीक समय पर तीन किश्तें भी भर दी थी। दूर्भाग्य से श्री पांडे का निधन 12 अक्टूबर 1995 को हो गया जिसका कारण हृद्यगित रुकना था। इसके उपरान्त उनकी पत्नी श्रीमति बसंत पांडे तथा पोते श्री चन्द्र भूषण पांडे जो नामित थे ने एल.आई.सी. को दावा इस उम्मीद से प्रस्तुत कर दिया की जल्द प्रक्रिया में आकर भुगतान कर दिया जाएगा।

क्योंकि दावे का भुगतान नहीं किया गया इसलिए नामित ने 26 अप्रैल 1999 को एक अनुरोध नोटिस भेजा लेकिन एक.आई.सी फिर भी निष्क्रिय रही। श्रीमति बसंत पांडे ने 8 अगस्त 2000 को एक स्मरण पत्र भेजा

तथा एक अनुरोध नोटिस 6 जून 2001 को भेजा परन्तु एल.आई.सी से कोई भी उत्तर प्राप्त नहीं हुआ।

अत्यधिक देरी दावे के भुगतान में यदि होती है तो एल.आई.सी को इसकी जाँच करनी चाहिए तथा व्यवहार करने वाले का उत्तरदायित्व निर्धारित करना चाहिए।

कुल मिलाकर दावा 6 वर्षों तक निपटारा नहीं गया तथा इतने समय तक कोई उत्तर भी नहीं दिया गया।

तदुपरान्त संयुक्त नामित ने राज्य कमीशन के समक्ष एक शिकायत 20 जुलाई 2001 को प्रस्तुत की जिसमें एल.आई.सी की तरफ से सेवा में असावधानी तथा कमी का आरोप लगाया गया जिसका आधार उनके दावे का भुगतान न होना था जिसने कमीशन से अनुरोध किया गया कि दावा राशि 18 प्रतिशत प्रतिवर्ष ब्याज के साथ दी जाए और यह मृत्यु के दिन से दी जाए और दावा देन की तिथि तक साथ ही 50,000 रुपये की क्षतिपूर्ति उस मानसिक उत्पीड़न के लिए दिया जो एल.आई.सी द्वारा दावा न दिए जाने के कारण याचिकाकर्ता को हुआ।

मामला कई बार आगे बढ़ाया गया इसी बीच एल.आई.सी ने दावा राशि बोनस के साथ 3,60,300 रुपये 11 सितम्बर 2002 को कमीशन के पास जमा किए जो 14 सितम्बर 2002 को याचिकाकर्ता के पास पहुँच गए। कमीशन ने अपनी सुनवाई के समय यह निश्चित किया की यद्यपि एल.आई.सी द्वारा दावा राशि शिकायतकर्ता द्वारा याचिका दायर करने के बाद जारी कर दी गई लेकिन मामला इससे समाप्त नहीं हो जाता क्योंकि याचिकाकर्ता की शिकायत का निपटान लंबी अवधि के पश्चात किया गया इसलिए याचिकाकर्ता का क्षतिपूर्ति का अधिकार बना रहेगा। उपभोक्ता फोरम को इस पर विचार कर उचित निर्देश जारी करने चाहिए। यह पाया की बीमाकंपनी ने अपनी सेवा उपलब्ध करवाने में लापरवाही की और ऐसी देर की जिसको तर्कसंगत नहीं बताया जा सकता और दावे की क्षतिपूर्ति के साथ ब्याज का भुगतान भी करना चाहिए। इसलिए राज्य कमीशन ने एल.आई.सी को निर्देश दिया की 3,60,000 रुपये की राशि पर 12 प्रतिशत की दर से 33 मार्च 1996 से सितम्बर 11, 2002 तक 30 दिनों के भीतर दिया जाए।

दावा निपटान में अक्रमबद्ध देरी होने के कारण एल.आई.सी को जाँच पड़ताल करनी चाहिए तथा व्यवहार करने वाले के साथ उत्तरदायित्व को निर्धारित करना चाहिए। एल.आई.सी के लिए सिटिजन चार्टर्ड का अनुपालन भी जरूरी है - अपनी भावना तथा शब्द के रूप में जिससे अधिक ग्राहक मित्रता का परिचय दिया जा सके। दूरदराज क्षेत्रों में एल.आई.सी अधिकारियों को अधिक प्रभावशाली बनना चाहिए जिससे तीव्र सेवा उपलब्ध करवा कर प्रतिष्ठा प्राप्त करें।

लेखक (प्रबंध विधि) उपभोक्ता आवाज संस्था। उनसे cvvoice@vsnl.net पर संपर्क किया जा सकता है या वेब www.consumer-voice.org पर जानकायी प्राप्त की जा सकती है।

Report Card: General

GROSS PREMIUM UNDERWRITTEN FOR AND UP TO THE MONTH OF NOVEMBER, 2009

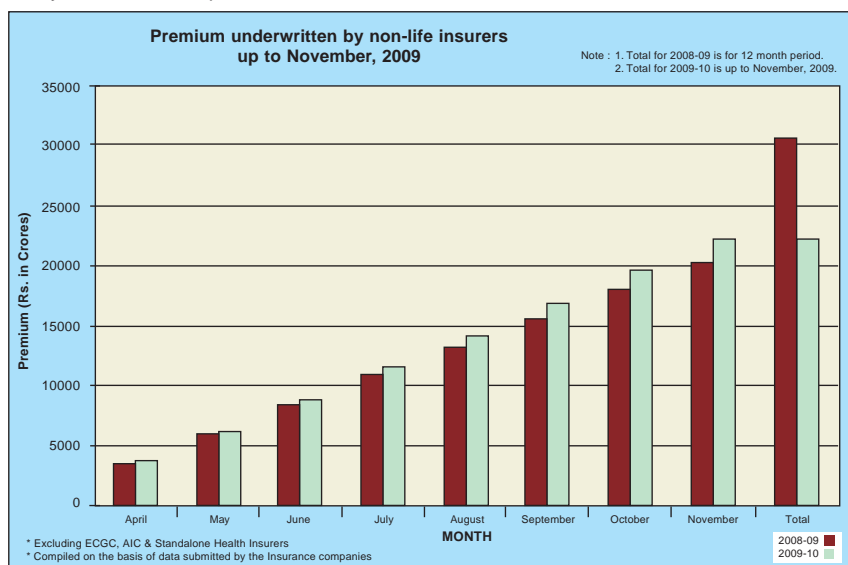
(Rs.in Crore)

INSURER	NOVEMBER		APRIL-NOVEMBER		GROWTH OVER THE CORRESPONDING PERIOD OF PREVIOUS YEAR
	2009-10	2008-09*	2009-10	2008-09*	
Royal Sundaram	65.39	65.77	585.05	527.00	11.02
Tata-AIG	59.14	52.13	583.00	609.05	-4.28
Reliance General	170.11	181.34	1386.09	1316.09	5.32
IFFCO-Tokio	109.66	110.81	982.78	932.09	5.44
ICICI-Iombard	220.95	230.54	2135.48	2471.66	-13.60
Bajaj Allianz	181.01	188.74	1603.35	1801.90	-11.02
HDFC ERGO General	66.01	25.33	587.89	203.58	188.78
Cholamandalam	53.78	52.82	531.43	467.43	13.69
Future Generali	25.26	13.76	222.10	101.19	119.48
Universal Sampo	19.63	0.90	98.64	2.49	3862.24
Shriram General	36.96	17.18	210.98	37.57	461.60
Bharti AXA General	22.17	2.09	147.84	3.93	3661.02
Raheja QBE \$	0.61	0.00	1.11	0.00	
New India	412.29	372.10	3929.73	3603.88	9.04
National	337.68	314.47	2891.37	2823.80	2.39
United India	410.78	339.59	3275.16	2757.41	18.78
Oriental	334.91	269.96	3031.48	2636.40	14.99
PRIVATE TOTAL	1030.69	941.42	9075.74	8473.97	7.10
PUBLIC TOTAL	1495.66	1296.12	13127.74	11821.49	11.05
GRAND TOTAL	2526.36	2237.54	22203.48	20295.46	9.40
SPECIALISED INSTITUTIONS:					
1. Credit Insurance					
ECGC#	63.85	59.93	520.63	465.91	11.75
2. Health Insurance					
Star Health & Allied Insurance	14.32	7.07	644.46	318.76	102.18
Apollo DKV	12.23	7.31	70.55	25.46	177.07
Health Total	26.55	14.39	715.01	344.22	107.72
3. Agriculture Insurance					
AIC	134.80	78.04	1144.15	540.69	111.61

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

\$ Commenced operations in April, 2009.

* Figures revised by insurance companies



Statistical Supplement

(Monthly)

non-life insurance

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	20652.54	100934.98						
Previous year	8358.34	46715.54						
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total								
Previous year (Total)								

* Wherever applicable

non-life insurance

Name of the Insurer: *Apollo DKV Insurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	47.94	236.32	1289	10047	47.94	236.32	159430.82	787086.45
Previous year	10.15	54.69	1058	5268	10.15	54.69	16457.96	59795.26
Medical Insurance	816.87	5040.43	16863	50308	816.87	5040.43	88293.24	514187.43
Previous year	454.18	1612.91	1794	9196	454.18	1612.91	56703.75	108223.75
Overseas Medical Insurance	35.81	317.80	1883	15946	35.81	317.80	173068.00	1206086.50
Previous year	19.35	77.22	1322	4609	19.35	77.22	1627.50	5723.50
Health (Total)	852.68	5358.23	18746	66254	852.68	5358.23	261361.24	1720273.93
Previous year (Total)	473.53	1690.13	3116	13805	473.53	1690.13	58331.25	113947.25
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	39.67	237.09	39396	235200	39.67	237.09	196980.00	1175740.00
Previous year	17.29	70.01	17525	70987	17.29	70.01	87515.00	354380.00
Grand Total	940.29	5831.64	59431	311501	940.29	5831.64	617772.06	3683100.38
Previous year (Total)	500.97	1814.83	21699	90060	500.97	1814.83	162304.21	528122.51

* Wherever applicable

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 Asured	
	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	2246	14498.92	27434	214309	975.57	103.30	22747273.00	181206816.00
Previous year	1270.59	14395.62	27297	228275	-842.32	-2671.32	11168734.00	143948162.00
Marine Cargo	572	3854.48	12778	93803	163.87	-641.77	8841460.00	49003256.00
Previous year	407.96	4833.83	13007	105363	-254.85	44.53	4720269.00	33720034.00
Marine Hull (including Onshore & Offshore oil energy)	35	361.03	115	790	-1.54	-687.97	179596.00	2254369.00
Previous year	36.84	956.14	161	1046	-19.29	319.96	432702.00	34711353.00
Marine (Total)	607.12	4215.51	12893	94593	162.32	-1329.75	9021056.00	51257625.00
Previous year (Total)	444.80	5789.97	13168	106409	-274.14	364.49	5152971.00	37191387.00
Aviation	199	2080.58	22	163	170.68	25.15	3146571.00	17514071.00
Previous year	28.27	1117.09	71	286	-130.28	400.89	551195.00	9760365.00
Engineering	770	5749.24	1254	9576	84.44	-532.16	7318975.00	71214974.00
Previous year	685.72	7781.71	1296	10489	-241.59	-1034.16	4050631.00	56238794.00
Motor Own Damage	8960.92	57228.14	348725	2045512	-512.82	-990.14	672245.00	4282562.00
Previous year	9473.74	65573.95	324966	2335936	564.72	8624.46	616482.00	4738135.00
Motor Third party	3287.93	22132.83	349335	2110104	-61.46	-2899.96		
Previous year	3349.38	28870.39	327470	2363937	17.67	6835.45		
Motor (Total)	12248.85	79360.96	349335	2110104	-574.27	-3890.09	672245.00	4282562.00
Previous year (Total)	12823.12	94444.35	327470	2363937	582.39	15459.90	616482.00	4738135.00
Workmen's compensation / Employer's liability	116	1004.96	1231	10467	10.79	-641.97	26688.00	183619.00
Previous year	105.09	1116.88	1186	10165	-7.17	113.81	18994.00	193812.00
Public Liability	4	37.40	8	103	-1.49	-601.64	8755.00	109565.00
Previous year	5.30	44.48	11	154	1.22	-0.01	5002.00	195401.00
Product Liability	42	575.39	33	299	-31.58	-669.24	22385.00	456703.00
Previous year	74.00	853.35	43	370	6.15	75.11	130180.00	556906.00
Other Liability Covers	223	2767.39	256	2065	143.28	-468.33	169167.00	1512329.00
Previous year	80.15	2609.99	176	1677	-23.16	109.82	51366.00	919965.00
Liability (Total)	385.54	4385.15	1528	12934	121.00	-2381.18	226995.00	2262216.00
Previous year (Total)	264.54	4624.70	1416	12366	-22.96	298.73	205542.00	1866084.00
Personal Accident	360	3363.13	7013	52520	-122.65	-744.25	2806755.00	17578394.00
Previous year	482.26	3117.40	6538	463702	238.09	696.88	37889624.00	165987079.00
Medical Insurance	1952	15027.85	68562	787185	-341.11	-1244.84	2852916.00	22129930.00
Previous year	2293.00	12565.29	185978	655841	350.92	1278.24	3530567.00	29081437.00
Overseas Medical Insurance	337	3518.53	33415	256722	-26.83	-659.37	45260.00	1076335.00
Previous year	363.59	4051.80	36697.00	320803.00	-50.93	49.46	33098.00	208762.00
Health (Total)	2288.66	18546.37	101977	1043907	-367.93	-1904.21	2898176.00	23206265.00
Previous year (Total)	2656.59	16617.09	222675	976644	299.99	1327.70	3563665.00	29290199.00
Crop Insurance	0	0.00	0	0	0.00	-598.96	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Credit Guarantee	243	1172.68	26	170	149.46	-114.26	601600.00	4356335.00
Previous year	93.87	840.00	15	108	42.47	268.71	202020.00	1703919.00
All Other Miscellaneous	1111	8861.10	36175	315191	160.39	-1537.56	22050997.00	73784457.00
Previous year	950.89	12588.15	37603	832067	-206.86	2684.95	1760809.00	135893191.00
Grand Total	20459.66	142233.64	537657	3853467	759.01	-12903.97	71490643.00	446663715.00
Previous year (Total)	19700.65	161316.09	637549	4994283	-555.21	17796.77	65161673.00	586617315.00

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
120.00	1019.50	5990	35495	0.00	0.00	0	0		
321.88	1636.21	4314	41642	0.00	0.00	0	0		
40.60	229.93	428	3491	0.00	0.00	0	0		
16.56	331.23	548	4673	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		
40.60	229.93	428	3491	0.00	0.00	0	0	0	0
16.56	331.23	548	4673	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
45.35	596.37	76	638	0.00	0.00	0	0		
99.93	1337.86	69	869	0.00	0.00	0	0		
134.68	1031.97	4245	36589	0.00	0.00	0	0		
319.86	5048.02	12396	79996	0.00	0.00	0	0		
905.82	7328.11	27335	192729	0.00	0.00	0	0		
1205.72	5491.40	33973	223677	0.00	0.00	0	0		
1040.50	8360.08	31580	229318	0.00	0.00	0	0	0	0
1525.58	10539.42	46369	303673	0.00	0.00	0	0	0	0
19.18	133.31	317	1788	0.00	0.00	0	0		
19.14	193.40	205	1755	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	2.46	0	19	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
6.00	29.57	17	69	0.00	0.00	0	0		
0.24	7.23	5	69	0.00	0.00	0	0		
25.18	162.88	334	1857	0.00	0.00	0	0	0	0
19.38	203.09	210	1843	0.00	0.00	0	0	0	0
15.50	405.76	738	7440	1.28	8.76	4250	33796		
31.51	482.59	522	8908	2.59	19.69	6475	133334		
40.90	260.77	1020	6335	0.00	0.00	0	0	85883	552003
30.32	255.62	889	7656	0.00	0.00	0	0	80085	593185
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
40.90	260.77	1020	6335	0.00	0.00	0	0	85883	552003
30.32	255.62	889	7656	0.00	0.00	0	0	80085	593185
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
429.00	2330.78	2014	87775	0.00	0.00	0	0		
377.73	2237.70	22008	128344	0.00	0.00	0	0		
1757.03	13366.07	42180	372349	1.28	8.76	4250	33796	85883	552003
2422.89	17023.72	74929	497608	2.59	19.69	6475	133334	80085	593185

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	211.29	1616.20	1099	10262	211.29	1404.91	387978.29	2481127.25
Previous year	9.89	18.21	51	79	9.89	18.21	23994.06	42968.46
Marine Cargo	26.20	235.33	140	883	26.20	209.13	158926.53	954479.04
Previous year	1.03	1.03	12	12	1.03	1.03	1499.79	1499.79
Marine Hull (including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	26.20	235.33	140	883	26.20	209.13	158926.53	954479.04
Previous year (Total)	1.03	1.03	12	12	1.03	1.03	1499.79	1499.79
Aviation								
Previous year								
Engineering	95.48	717.98	181	1066	95.48	622.51	455865.51	2511989.84
Previous year	13.12	49.99	18	32	13.12	49.99	52382.34	131219.02
Motor Own Damage	1205.50	5356.50	19523	80824	1205.50	4151.00	97658.41	404640.22
Previous year	73.47	92.83	764	971	73.47	92.83	6107.03	8986.22
Motor Third party	364.70	1607.10	19523	80824	364.70	1242.40		
Previous year	15.48	20.49	764	971	15.48	20.49		
Motor (Total)	1570.20	6963.59	19523	80824	1570.20	5393.40	97658.41	404640.22
Previous year (Total)	88.96	113.32	764	971	88.96	113.32	6107.03	8986.22
Workmen's compensation / Employer's liability	14	100	146	843	13.80	86.17	1580	10677
Previous year	2	2	7	7.00	1.56	1.56	73	72.96
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers	16	33	7	54	16.14	16.48	3064	16141
Previous year								
Liability (Total)	29.94	132.59	153	897	29.94	102.65	4644.17	26817.28
Previous year (Total)	1.56	1.56	7	7	1.56	1.56	72.96	72.96
Personal Accident	316.65	710.33	472	3848	316.65	393.68	5881220.72	7732564.04
Previous year								
Medical Insurance	695.74	2062.08	694	3721	695.74	1366.35	2177.04	11624.29
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)	695.74	2062.08	694	3721	695.74	1366.35	2177.04	11624.29
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	21.40	128.61	1004	8012	21.40	107.21	62176.21	414227.75
Previous year								
Grand Total	2966.89	12566.73	23266	109513	2966.89	9599.84	7050646.87	14537469.70
Previous year (Total)	114.56	184.11	852	1101	114.56	184.11	84056.17	184746.46

* Wherever applicable

New Products introduced during the month: 1. Smart Cargo Project Consequential Loss Insurance Policy
2. Add-on covers for Standard Fire and Special Perils Policy

FOR AND UP TO THE MONTH OF OCTOBER, 2009

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
	13.28		3130.00						
			1.00						
0.00	0.00	0	1	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
	12.80		505						
	4.98								
0.00	17.78	0	505	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
	1		5						
0.00	0.64	0	5	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
244.38	269.96	1	91						
586.25	1178.51	1	24						
586.25	1178.51	1	24	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
	9.94		2559						
830.63	1490.12	2	6315	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0

Name of the Insurer: Cholamandalam MS General Insurance Company Ltd

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	177	3,773	738	9,517	(293)	(391)	1,243,137	13,609,381
Previous year	470	4,163	2,074	13,560	(62)	(1,080)	808,192	14,661,398
Marine Cargo	384	2,540	1,387	6,635	37	87	2,342,113	10,468,715
Previous year	347	2,453	990	7,003	127	528	1,424,321	11,768,890
Marine Hull (including Onshore & Offshore oil energy)	6	100	(1)	38	1	(15)	12,348	20,297
Previous year	5	115	-	-	(103)	1	2,840	22,211
Marine (Total)	390	2,640	1,386	6,673	38	72	2,354,461	10,489,012
Previous year (Total)	352	2,568	990	7,003	24	529	1,427,161	11,791,101
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	156	1,399	161	2,071	(62)	(243)	204,920	3,797,895
Previous year	219	1,642	527	2,302	(119)	(312)	136,925	3,300,700
Motor Own Damage	3,633	19,855	50,876	301,398	2,682	6,312	197,998	1,097,253
Previous year	952	13,543	25,802	188,827	(676)	4,087	-	-
Motor Third party	472	5,516	-	-	(1,022)	692	-	-
Previous year	1,494	4,824	-	-	1,189	2,675	-	-
Motor (Total)	4,105	25,370	50,876	301,398	1,660	7,004	197,998	1,097,253
Previous year (Total)	2,445	18,367	25,802	188,827	514	6,762	-	-
Workmen's compensation / Employer's liability	37	275	28	857	2	(41)	3,703	43,378
Previous year	35	316	-	2,029	(23)	58	4,163	35,566
Public Liability	240	662	4	1,850	(21)	16	22,424	175,264
Previous year	260	646	582	1,117	43	(58)	24,622	166,299
Product Liability	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Other Liability Covers	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Liability (Total)	277	937	32	2,707	(18)	(25)	26,127	218,642
Previous year (Total)	296	962	582	3,146	20	1	28,785	201,865
Personal Accident	203	1,720	2,829	12,839	(26)	139	911,327	3,603,593
Previous year	229	1,582	1,198	7,996	413	802	49,825	506,185
Medical Insurance	770	9,848	79	13,986	(557)	326	57,151	590,802
Previous year	1,326	9,521	2,013	12,520	(19)	2,570	85,181	599,337
Overseas Medical Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Health (Total)	770	9,848	79	13,986	(557)	326	57,151	590,802
Previous year (Total)	1,326	9,521	2,013	12,520	(19)	2,570	85,181	599,337
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	165	2,078	42,412	142,093	(126)	(578)	309,529	3,251,950
Previous year	292	2,656	6,539	265,610	31	712	337,315	2,800,802
Grand Total	6,244	47,765	98,513	491,284	615	6,303	5,304,650	36,658,529
Previous year (Total)	5,628	41,461	39,725	500,964	801	9,983	2,873,385	33,861,386

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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	-	1	-	980				
0	4	47	50	149	1,923				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	222				
-	-	-	-	14	296				
185	1,044	2,634	15,578	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
185	1,044	2,634	15,578	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
288	2,285	2	5	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
288	2,285	2	5	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	-	-	-	-	-				
-	0	-	3	-	326				
-	0	-	2	65	442				
473	3,330	2,636	15,587	-	1,529				
0	4	47	52	228	2,660				

non-life insurance

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 Asured	
	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					1.00			
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	6640	45678	1085	7652	765	5080	276088	2506067
Previous year	5875	40598	1034	7183	711	4109	325315	2103215
All Other Miscellaneous								
Previous year								
Grand Total	6640.00	45678.00	1085	7652	765.00	5080.00	276088.00	2506067.00
Previous year (Total)	5875.00	40598.00	1034	7183	712.00	4109.00	325315.00	2103215.00

* Wherever applicable

Name of the Insurer: *Future Generali India Insurance Co. Ltd.*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	190.43	2053.09	549	3510	44.50	1175.64	309124.42	1824193.01
Previous year	145.92	877.44	327	1623	145.92	877.44	255929.80	1947974.00
Marine Cargo	186.82	904.83	1271	9940	55.81	560.17	559491.18	2250563.28
Previous year	131.01	344.65	1103	4012	131.01	344.65	264071.70	1211686.00
Marine Hull (including Onshore & Offshore oil energy)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine (Total)	186.82	904.83	1271	9940	55.81	560.17	559491.18	2250563.28
Previous year (Total)	131.01	344.65	1103	4012	131.01	344.65	264071.70	1211686.00
Aviation	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Engineering	149.07	762.42	142	1006	46.78	57.81	118312.94	290621.03
Previous year	102.29	704.62	121	540	102.29	704.62	147892.40	728068.50
Motor Own Damage	1269.00	7664.06	37107	218563	610.98	4720.89	111218.18	578718.84
Previous year	658.02	2943.17	24251	87188	658.02	2943.17	52133.70	197730.40
Motor Third party	503.67	3004.03	749	3612	281.19	2162.62		
Previous year	222.48	841.41	24251	87188	222.48	841.41		
Motor (Total)	1772.67	10668.10	37107	218563	892.17	6883.52	111218.18	578718.84
Previous year (Total)	880.50	3784.58	24251	87188	880.50	3784.58	52133.70	197730.40
Workmen's compensation / Employer's liability	27.27	166.22	177	1187	18.70	109.62	2477.68	12365.12
Previous year	9	57	52	236	9	57	822	6495
Public Liability	0.00	1.83	0	45	-0.36	-1.12	0.00	508.75
Previous year	0	3	10	44	0	3	102	465
Product Liability	25.15	246.33	57	354	11.82	76.06	3207.00	38489.23
Previous year	13	170	28	143	13	170	1565	36632
Other Liability Covers	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Liability (Total)	52.42	414.39	234	1586	30.16	184.56	5684.68	51363.10
Previous year (Total)	22.27	229.83	90	423	22.27	229.83	2489.19	43591.94
Personal Accident	114.41	827.29	1190	6200	87.62	128.06	112111.16	1823712.75
Previous year	26.80	699.22	439	1233	26.80	699.22	31614.28	1483052.00
Medical Insurance	205.00	3117.02	577	3900	42.54	1227.30	2488.66	36035.31
Previous year	162.46	1889.73	477	1824	162.46	1889.73	12816.70	201307.70
Overseas Medical Insurance	48.50	356.95	3474	22071	48.50	0.00	4244.45	26791.60
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Health (Total)	253.50	3473.97	4051	25971	91.04	1227.30	6733.11	62826.91
Previous year (Total)	162.46	1889.73	477	1824	162.46	1889.73	12816.70	201307.70
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	72.12	579.25	3381	16236	-13.23	366.43	54722.08	494714.59
Previous year	85.35	212.82	2009	4918	85.35	212.82	35763.40	396764.00
Grand Total	2791.44	19683.34	47925	283012	1234.84	10583.49	1277397.74	7376713.49
Previous year (Total)	1556.60	8742.89	28817	101761	1556.60	8742.89	802711.17	6210174.54

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
1.01	43.36	22	128						
0.00	0.00	0	00						
2.47	20.29	10	219						
0.00	0.00	0	0						
2.47	20.29	10	219	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
4.66	15.78	5	38						
0.00	0.00	0	0						
48.38	390.03	711	8133						
29.06	87.06	1900	6700						
20.73	167.16	305	3485						
9.00	45.00	1900	6700						
69.11	557.19	711	8133	0.00	0.00	0	0		
38.06	132.06	1900	6700	0.00	0.00	0	0		
0.06	18.50	2	70						
0	0	0	0						
0.06	18.50	2	70	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	43.31	43.31	811726	811726		
3.50	20.50	130	3534	0.00	0.00	0	0		
3.62	257.73	25	309						
0.00	0.00	0	0						
3.62	257.73	25	309	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
29.23	163.42	2918	13717						
0.00	0.00	0	0						
110.16	1076.26	3693	22614	43.31	43.31	811726	811726	0	0
41.56	152.56	2030	10234	0.00	0.00	0	0	0	0

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	1256.36	7389.77	928	3595	793.97	4692.77	6774419.46	16750954.59
Previous year	462.39	2697.00	48	310	389.84	2184.32	2896182.54	4838737.95
Marine Cargo	203.37	743.88	131	520	120.73	443.88	483213.40	2791840.58
Previous year	82.64	300.00	890	6925	64.08	129.86	229272.86	810839.97
Marine Hull (including Onshore & Offshore oil energy)	227.96	688.69	16	40	227.96	688.69	6128.03	38779.29
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine (Total)	431.33	1432.57	147	560	348.69	1132.57	489341.43	2830619.87
Previous year (Total)	82.64	300.00	890	6925	64.08	129.86	229272.86	810839.97
Aviation	530.53	943.57	1	5	530.53	927.79	289721.23	637986.24
Previous year	0.00	15.77	0	2	0.00	15.77	0.00	45868.35
Engineering	314.61	1546.67	254	650	130.16	940.78	389582.56	1769612.23
Previous year	184.44	605.89	36	156	103.19	238.82	446901.54	1001945.41
Motor Own Damage	1722.37	9574.08	28880	174630	569.85	2526.66	105880.76	604713.23
Previous year	1152.52	7047.43	19994	114477	229.77	467.96	58201.94	343194.60
Motor Third party	667.46	4461.51	37056	233928	479.67	3428.39		
Previous year	187.79	1033.11	19994	114477	67.00	195.69		
Motor (Total)	2389.83	14035.59	37056	233928	1049.52	5955.05	105880.76	604713.23
Previous year (Total)	1340.31	8080.54	19994	114477	296.77	663.66	58201.94	343194.60
Workmen's compensation / Employer's liability	19.25	103.45	32	172	6.65	58.81	21470.33	89728
Previous year	12.60	44.64	21	86	10	21	11910	31301
Public Liability	5.65	56.37	11	77	-2.73	32.90	4882.50	50063
Previous year	8.39	23.46	8	41	6	0	3498	11074
Product Liability	6.83	21.63	2	11	0.23	-7.27	2650.00	8937
Previous year	6.60	28.89	2	9	5	22	2749	9197
Other Liability Covers	338.15	4029.90	74	447	37.08	2151.16	78009.91	752388
Previous year	301.06	1878.75	46	348	111	630	109629	493066
Liability (Total)	369.88	4211.35	119	707	41.23	2235.60	107012.74	901115.06
Previous year (Total)	328.65	1975.75	77	484	131.39	672.07	127785.69	544636.94
Personal Accident	842.36	2710.19	47925	118161	798.45	2316.40	424435.39	3988989.78
Previous year	43.91	393.79	110	853	-25.55	-19.36	160689.93	1238503.10
Medical Insurance	3151.80	15206.21	13706	31631	2260.82	12563.63	74706.38	542798.31
Previous year	890.97	2642.58	24	72	703.40	707.92	42360.00	113538.37
Overseas Medical Insurance	52.06	366.44	359	2883	4.56	-82.04	1252793.70	6677259.43
Previous year	47.50	448.48	49	885.00	-5.82	62.76	1362323.42	8461451.27
Health (Total)	3203.85	15572.65	14065	34514	2265.38	12481.60	1327500.08	7220057.74
Previous year (Total)	938.48	3091.05	73	957	697.58	770.68	1404683.42	8574989.64
Crop Insurance	0				0.00	0.00	0.00	
Previous year	0	0	0	0	0	0	0	0
Credit Guarantee	0				0.00	0.00	0.00	
Previous year	0	0	0	0	0	0	0	0
All Other Miscellaneous	735.50	4345.87	2327	9512	627.60	3681.07	662144.65	3694818.22
Previous year	107.90	664.79	212	1064	79.63	213.87	176349.89	1088089.77
Grand Total	10074.26	52188.22	102822	401632	6585.54	34363.63	10570038.31	38398866.96
Previous year (Total)	3488.72	17824.58	21440	125228	1736.94	4869.69	550067.81	18486805.72

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
79.74	409.78	44	116	0.00					
16.21	24.77	8	13	0.00	0.00	0	0		
44.90	134.59	17	61	0.00					
24.94	53.99	3	5	0.00	0.00	0	0		
0.00	0.00	0	0	0.00		0			
0.00	0.00	0	0	0.00	0.00	0	0		
44.90	134.59	17	61	0.00	0.00	0	0	0	0
24.94	53.99	3	5	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00					
0.00	0.00	0	0	0.00	0.00	0	0		
11.38	169.50	21	78	0.00					
0.00	4.08	0	1	0.00	0.00	0	0		
204.55	1740.77	4179	46589	0.00					
330.49	723.68	4654	11482	0.00	0.00	0	0		
0.00	0.00	0	0	0.00					
0.00	0.00	0	0	0.00	0.00	0	0		
204.55	1740.77	4179	46589	0.00	0.00	0	0	0	0
330.49	723.68	4654	11482	0.00	0.00	0	0	0	0
0.33	3.17	4	12	0.00					
0	0	0	1	0	0	0	0		
0.00	0.40	0	3	0.00					
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0.00					
0	0	0	0	0	0	0	0		
19.04	29.23	7	14	0.00					
-3	16	-1	8	0	0	0	0		
19.37	32.80	11	29	0.00	0.00	0	0	0	0
-3.37	16.52	-1	9	0.00	0.00	0	0	0	0
74.04	85.20	4923	5595	0.00		0			
0.00	25.61	0	144	0.00	0.00	0	0		
911.61	964.27	542	1207	0.00				65081	410243
1.65	4.20	1	1	0.00	0.00	0	0	36531	117380
0.41	17.38	23	178	0.00				10018	58960
1.59	8.92	4	15	0.00	0.00	0	0	8004	57727
912.02	981.65	565	1385	0.00	0.00	0	0	75099	469203
3.24	13.12	5	16	0.00	0.00	0	0	44535	175107
0.00	0	0	0	0.00					
0	0	0	0	0	0	0	0		
0.00	0	0	0	0.00					
0	0	0	0	0	0	0	0		
152.26	345.01	83	824	0.00					
30.98	53.00	11	39	0.00	0.00	0	0		
1498.26	3899.30	9843	54677	0.00	0.00	0	0	75099	469203
402.50	914.77	4680	11709	0.00	0.00	0	0	44535	175107

Name of the Insurer: ICICI Lombard General Insurance Company Ltd

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	1,992.10	21,457.19	1,580	15,739	(300.84)	(1,818.02)	2,615,025	32,124,523
Previous year	2,292.94	23,275.21	2,139	19,848	(5,420.17)	(13,177.14)	4,341,279	39,096,911
Marine Cargo	351.97	5,087.22	720	5,464	(265.12)	(1,177.80)	1,321,585	17,987,185
Previous year	617.09	6,265.02	646	6,016	143.18	2,445.12	2,494,559	19,919,191
Marine Hull (including Onshore & Offshore oil energy)	828.50	4,132.14	30	379	(85.45)	(5,259.02)	568,797	2,838,533
Previous year	913.96	9,391.16	23	534	326.78	318.56	1,147,074	3,805,795
Marine (Total)	1180.47	9219.37	750	5843	-350.57	-6436.82	1890381.99	20825717.95
Previous year (Total)	1531.05	15656.19	669	6550	469.97	2763.68	3641632.18	23724986.26
Aviation	373.51	4,065.20	26	122	198.14	841.20	195,695	16,639,525
Previous year	175.38	3,224.00	15	121	(567.98)	664.32	1,365,881	11,554,934
Engineering	1,216.40	10,401.10	529	4,013	(34.91)	(2,588.65)	942,626	7,174,589
Previous year	1,251.31	12,989.74	578	5,301	(409.84)	1,577.33	715,978	13,814,528
Motor Own Damage	9,946.71	52,683.24	351,058	1,735,489	1,798.34	1,494.16	1,291,996	6,564,776
Previous year	8,148.38	51,196.52	257,653	1,309,743	(547.12)	(414.36)	1,048,448	6,086,931
Motor Third party	3,798.38	22,944.47	368,980	1,884,551	(204.71)	(2,394.77)		
Previous year	4,003.09	25,331.78	289,009	1,531,091	657.99	4,419.01		
Motor (Total)	13745.10	75627.70	368980	1884551	1593.63	-900.60	1291996.02	6564776.39
Previous year (Total)	12151.47	76528.31	289009	1531091	110.86	4004.65	1048447.79	6086930.56
Workmen's compensation / Employer's liability	125.39	683.41	308	2,059	41.52	9.72	14,835	105,851
Previous year	83.87	673.69	512	2,533	(41.67)	34.33	8,540	88,341
Public Liability	3.12	40.66	8	92	3.03	(8.75)	3,533	90,309
Previous year	0.10	49.41	6	109	(7.15)	(6.97)	5,450	93,310
Product Liability	1.55	148.97	1	39	(1.96)	(51.26)	63	44,940
Previous year	3.51	200.23	2	46	(5.23)	(80.35)	1,755	66,617
Other Liability Covers	820.04	5,803.50	105	1,026	697.51	927.74	73,071	1,378,301
Previous year	122.54	4,875.76	105	1,209	(1,045.88)	401.40	61,077	1,054,559
Liability (Total)	950.11	6676.53	422	3216	740.10	877.45	91502.18	1619401.60
Previous year (Total)	210.01	5799.08	625	3897	-1099.92	348.40	76821.61	1302828.48
Personal Accident	474.99	5,471.10	15,385	93,795	82.19	(3,257.76)	3,587,554	13,738,471
Previous year	392.80	8,728.86	13,787	47,444	52.72	344.41	1,564,587	121,450,753
Medical Insurance	8,072.44	45,876.16	21,805	180,627	(4,288.21)	(20,012.61)	306,568	2,330,479
Previous year	12,360.65	65,888.77	50,926	316,474	4,369.11	20,546.21	962,680	4,427,730
Overseas Medical Insurance	330.14	3,936.82	24,700	192,760	(55.55)	(75.57)	679,770	6,955,490
Previous year	385.68	4,012.39	17,801	201,737	185.86	(1,325.50)	1,253,714.87	8,920,896
Health (Total)	8402.58	49812.98	46505	373387	-4343.76	-20088.18	986338.16	9285968.29
Previous year (Total)	12746.33	69901.16	68727	518211	4554.97	19220.70	2216394.94	13348625.88
Crop Insurance	-	0.00	-	-	-	0.00	-	-
Previous year	0.00	0.00	-	-	0.00	0.00	-	-
Credit Guarantee	370.76	1,827.14	4	38	170.19	296.41	32,927	100,984
Previous year	200.57	1,530.73	2	56	49.29	629.71	1,058	138,464
All Other Miscellaneous	1,576.53	6,894.13	17,679	76,603	927.76	415.66	2,952,692	29,832,625
Previous year	648.77	6,478.47	12,381	51,949	106.74	1,323.08	744,976	51,335,763
Grand Total	30282.56	191452.44	451860	2457307	-1318.07	-32659.31	14586737.53	137906582.28
Previous year (Total)	31600.63	224111.74	387932	2184468	-2153.37	17699.16	15717054.06	281854724.26

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
-	8.56	-	3	-	0.00	-	-		
0.00	6.59	-	-	0.00	0.00	-	-		
-	(0.18)	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
0.00	-0.18	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
6.85	23.92	38	196	-	0.00	-	-		
6.53	40.68	33	369	0.00	0.00	-	-		
550.50	3,502.46	15,216	89,475	-	0.00	-	-		
993.09	5,945.15	-	-	0.00	0.00	-	-		
380.84	1,620.74	19,288	54,075	-	0.00	-	-		
712.41	4,216.84	43,154	218,995	0.00	0.00	-	-		
931.34	5123.20	19288	89475	0.00	0.00	0	0	0	0
1705.49	10162.00	43154	218995	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	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	965.32	-	8	-	0.00	-	-		
0.13	2,854.34	2	69	0.00	4.86	-	-		
2,000.11	9,084.49	4	2,705	0.00	33.24	-	27,637	731,987	6,207,306
4,441.33	11,144.56	452	3,813	229.41	1,306.74	200,031	1,447,451	1,159,590	15,968,520
18.78	208.25	675	6,818	-	0.00	-	-	24,700	192,760
26.16	267.30	1,895	15,876	0.00	0.00	-	-	17,801	201,737
2018.89	9292.75	679	9523	0.00	33.24	0	27637	756687	6400066
4467.49	11411.87	2347	19689	229.41	1306.74	200031	1447451	1177391	16170257
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
10	399	125	511	-	-	-	-		
107	1,402	122	983	-	-	-	-		
2967.15	15812.64	20130	99716	0.00	33.24	0	27637	756687	6400066
6286.71	25877.79	45658	240105	229.41	1311.60	200031	1447451	1177391	16170257

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	538.87	13921.40	5478	49608	-250.88	538.87	2850595.69	73643273.11
Previous year	1354.15	13480.26	5042	53054	356.20	1354.15	9199994.06	91583905.72
Marine Cargo	573.85	4438.72	711	6674	93.39	573.85	4164285.82	32210605.42
Previous year	845.62	4897.45	795	8606	183.79	845.62	6136438.46	35539471.38
Marine Hull (including Onshore & Offshore oil energy)	1383.72	4724.19	28	198	607.58	1383.72	8979039.43	30655589.86
Previous year	566.51	2582.64	18	218	477.54	566.51	3676121.28	16758927.91
Marine (Total)	1957.57	9162.91	739	6872	700.97	1957.57	13143325.26	62866195.27
Previous year (Total)	1412.13	7480.09	813	8824	661.33	1412.13	9812559.74	52298399.29
Aviation	214.46	1757.51	43	179	-214.78	214.46	1417805.63	11618923.96
Previous year	7.23	553.26	7	126	-146.22	7.23	47797.66	3669496.69
Engineering	662.64	6089.51	391	3410	82.99	662.64	54711.24	502785.16
Previous year	572.00	4628.88	377	3539	-55.96	572.00	53755.12	435010.96
Motor Own Damage	4323.22	26549.79	280503	1705041	437.45	4323.22	175930.66	1080427.29
Previous year	3832.44	27130.12	212581	1451250	170.81	3832.44	155958.70	1104043.32
Motor Third party	1945.52	12009.73	4367	31462	200.28	1945.52		
Previous year	1645.92	11706.13	212581	1451250	1.77	1645.92		
Motor (Total)	6268.73	38559.52	280503	1705041	637.73	6268.73	175930.66	1080427.29
Previous year (Total)	5478.36	38836.25	212581	1451250	172.58	5478.36	155958.70	1104043.32
Workmen's compensation / Employer's liability	49.62	552.78	518	4698	-32.76	49.62	3093.56	34462.86
Previous year	45	602	494	4446	-49	44.67	2785	37534
Public Liability	14.18	270.05	23	342	0.89	14.18	67436.26	1284155.92
Previous year	10	254	24	327	-15	9.67	45983	1208478
Product Liability	0.33	47.02	1	54	-0.75	0.33	178.89	32207.04
Previous year	0	50	0	62	-3	0.00	0	26944
Other Liability Covers	98.23	2396.80	155	1016	22.32	98.23	95005.67	2318243.82
Previous year	37	1371	94	970	-51	37.11	35891	1326091
Liability (Total)	162.36	3266.65	697	6110	-10.30	162.36	165714.39	3669069.64
Previous year (Total)	91.45	2276.90	612	5806	-117.92	91.45	84659.35	2599046.91
Personal Accident	152.62	1144.41	2291	17155	-7.01	152.62	327207.46	2453586.09
Previous year	170.62	1383.78	3280	18684	-30.35	170.62	365804.38	2966792.04
Medical Insurance	1963.71	7890.03	3649	26657	1541.43	1963.71	82861.52	332931.35
Previous year	862.81	7618.62	2992	24846	214.50	862.81	36407.54	321478.99
Overseas Medical Insurance	14.26	155.36	1643	13807	-2.25	14.26	2613.91	28468.30
Previous year	20.71	229.75	2576	22231	-6.14	20.71	3794.95	42099.26
Health (Total)	1977.97	8045.39	5292	40464	1539.18	1977.97	85475.43	361399.65
Previous year (Total)	883.52	7848.37	5568	47077	208.36	883.52	40202.49	363578.25
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	557.08	5365.03	8416	77461	-390.15	557.08	413598.82	3983205.89
Previous year	555.72	5639.39	6764	56874	-305.39	555.72	412357.71	4184565.60
Grand Total	12492.30	87312.32	303850	1906300	2087.74	12492.30	18634364.58	160178866.07
Previous year (Total)	10525.17	82127.19	235044	1645234	742.64	10525.17	20173089.22	159204838.79

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
33.18	239.62	892	7932						
2.08	39.10	171	2472						
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
2407.21	10538.36	46382	336381	7.82	413.19	109063	704160		
426.65	3928.86	13388	152190	5.85	27.31	117198	546040		
2440.39	10777.98	47274	344313	7.82	413.19	109063	704160	0	0
428.73	3967.96	13559	154662	5.85	27.31	117198	546040	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 Asured	
	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	3014.61	28159.66	39846	300078	-256.23	2948.85		
Previous year	3270.84	25210.81	43195	279922	1185.12	826.72		
Marine Cargo	915.67	7967.75	11007	109927	-143.61	-273.33		
Previous year	1059.28	8241.08	12846	112639	77.37	1134.17		
Marine Hull (including Onshore & Offshore oil energy)	1506.55	6685.02	861	2335	1367.76	3278.14		
Previous year	138.79	3406.88	749	2253	-333.75	103.54		
Marine (Total)	2422.22	14652.77	11868	112262	1224.15	3004.81	0.00	0.00
Previous year (Total)	1198.07	11647.96	13595	114892	-256.38	1237.71	0.00	0.00
Aviation	122.78	2816.87	9	75	-461.42	-376.65		
Previous year	584.20	3193.52	13	84	-340.73	-463.27		
Engineering	1138.28	8433.11	6421	44172	279.79	-328.34		
Previous year	858.49	8761.45	4837	41357	-152.88	1109.48		
Motor Own Damage	12123.97	76008.73	272047	1775541	12.34	-4042.16		
Previous year	12111.63	80050.89	273421	1796356	70.23	5376.93		
Motor Third party	6606.82	44575.79	95413	736760	19.83	-960.63		
Previous year	6586.99	45536.42	94368	756336	1430.85	1997.95		
Motor (Total)	18730.79	120584.52	367460	2512301	32.17	-5002.79	0.00	0.00
Previous year (Total)	18698.62	125587.31	367789	2552692	1501.08	7374.88	0.00	0.00
Workmen's compensation / Employer's liability	286.50	2120.25	4286	20277	3.26	436.96		
Previous year	283.24	1683.29	3907	17042	60.91	290.56		
Public Liability	52.19	474.02	643	4557	15.80	103.65		
Previous year	36.39	370.37	597	4111	11.73	44.48		
Product Liability	20.71	226.32	56	301	1.29	67.70		
Previous year	19.42	158.62	47	217	2.40	9.10		
Other Liability Covers	58.73	420.75	8761	14188	12.72	-149.61		
Previous year	46.01	570.36	8568	14186	7.57	172.05		
Liability (Total)	418.13	3241.34	13746	39323	33.07	458.70	0.00	0.00
Previous year (Total)	385.06	2782.64	13119	35556	82.61	516.19	0.00	0.00
Personal Accident	696.25	5155.80	41609	248271	235.18	940.68		
Previous year	461.07	4215.12	35012	227330	-279.43	343.70		
Medical Insurance	6547.31	52075.17	100427	573089	1081.39	3742.76		
Previous year	5465.92	48332.41	91503	515709	558.24	12359.39		
Overseas Medical Insurance	30.09	204.26	819	5329	1.45	0.14		
Previous year	28.64	204.12	866	5892	-1.45	-77.27		
Health (Total)	6577.40	52279.43	101246	578418	1082.84	3742.90	0.00	0.00
Previous year (Total)	5494.56	48536.53	92369	521601	556.79	12282.12	0.00	0.00
Crop Insurance	0.00		0					
Previous year	0.00		0					
Credit Guarantee	0.00		0					
Previous year	0.00		0					
All Other Miscellaneous	2974.42	20045.50	137941	987831	-541.68	-952.17		
Previous year	3516.10	20997.67	142079	986645	39.84	116.54		
Grand Total	36094.88	255369.00	720146	4822731	1627.87	4435.99	0.00	0.00
Previous year (Total)	34467.01	250933.01	712008	4760079	2336.02	23344.07	0.00	0.00

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
229.07	1258.19	5463	30992	98.11	754.73				
241.09	1179.28	5871	30561	109.14	785.82				
21.54	150.94	1907	3326	9.06	70.25				
25.71	159.84	693	2278	13.09	87.26				
0.00	0.00	0	0	0.00	0.00				
0.00	0.00	0	0	0.00	0.00				
21.54	150.94	1907	3326	9.06	70.25			0	0
25.71	159.84	693	2278	13.09	87.26			0	0
0.00	0.00	0	0	0.00	0.00				
0.00	0.00	0	0	0.00	0.00				
45.69	243.35	584	2861	12.39	140.96				
39.11	239.24	542	2777	11.02	134.38				
831.63	5608.64	46384	249210	251.30	2244.36				
817.39	5398.79	45139	247314	246.09	2195.32				
397.85	3498.89	31429	150558	171.29	1407.77				
379.46	3382.71	25982	144764	164.30	1398.56				
1229.48	9107.53	77813	399768	422.59	3652.13			0	0
1196.85	8781.50	71121	392078	410.39	3593.88			0	0
31.43	115.52	186	1387	2.03	35.69	31	305		
26.19	91.74	156	1078	1.87	41.05	23	274		
0.00	0.00	0	0	0.00	0.00	0			
0.00	2.91	0	34	0.00	0.00	0			
0.00	0.00	0	0	0.00	0.00	0			
0.00	0.00	0	0	0.00	0.00	0			
3.31	16.71	34	285	2.12	9.35	0			
2.80	15.26	21	183	1.94	10.00	0			
34.74	132.23	220	1672	4.15	45.04	31	305	0	0
28.99	109.91	177	1295	3.81	51.05	23	274	0	0
32.41	259.88	24351	47149	83.91	345.69	8134	164707		
19.75	175.03	3109	22850	57.36	225.74	6901	117671		
206.29	1000.57	6423	44605	297.66	1368.40	34287	188056		
178.04	816.11	5170	37054	270.61	1192.03	15207	114819		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
206.29	1000.57	6423	44605	297.66	1368.40	34287	188056	0	0
178.04	816.11	5170	37054	270.61	1192.03	15207	114819	0	0
0.00		0		0.00		0			
0.00		0		0.00		0			
0.00		0		0.00		0			
0.00		0		0.00		0			
763.36	2954.56	35412	199075	261.38	2359.03	5649	58243		
691.01	2623.44	30197	180190	231.07	2235.09	3418	22982		
2562.58	15107.25	152173	729448	1189.25	8736.23	48101	411311	0	0
2420.55	14084.35	116880	669083	1106.49	8305.25	25549	255746	0	0

Name of the Insurer: Raheja QBE General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	0.01	1.81	1	18	0.01	1.81	10.00	3351.27
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine Cargo	0.04	0.46	4	14	0.04	0.46	25.38	698.99
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine Hull (including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.04	0.46	4	14	0.04	0.46	25.38	698.99
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	0.99	7.23	11	69	0.99	7.23	160.68	1130.12
Previous year								
Motor Third party	0.18	0.72			0.18	0.72		
Previous year								
Motor (Total)	1.18	7.95	11	69	1.18	7.95	160.68	1130.12
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability	0.18	1.47	1	3	0.18	1.47	0	0
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Public Liability	0.71	1.54	1	2	0.71	1.54	500	1000
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Product Liability								
Previous year								
Other Liability Covers	14.49	36.43	4	10	14.49	36.43	12050	18180
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Liability (Total)	15.38	39.44	6	15	15.38	39.44	12550.00	19180.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident	0.60	0.77	1	10	0.60	0.77	1260.00	1378.50
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Medical Insurance								
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	0.01	0.07	1	4	0.01	0.07	10.00	45.25
Previous year			0	0	0.00	0.00	0.00	0.00
Grand Total	17.22	50.50	24	130	17.22	50.50	14016.07	25784.12
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00

* Wherever applicable

New Products introduced during the month: 1. Public liability

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0.00	0.00	0.00	0.00	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0

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 Asured	
	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	427.00	8858.19	2756	22238	-555.09	955.41	521355.60	16498031.26
Previous year	982.09	7902.78	2374	20858	-88.91	-1818.85	969151.54	14069659.47
Marine Cargo	228.98	1985.87	2342	13585	-54.00	-224.50	551667.96	8727837.85
Previous year	282.98	2210.37	1277	14331	50.24	140.42	697803.68	6022159.11
Marine Hull (including Onshore & Offshore oil energy)	44.15	404.42	4	99	-225.39	-380.01	2648.18	154626.93
Previous year	269.54	784.43	6	59	234.71	368.57	13823.81	91062.12
Marine (Total)	273.12	2390.29	2346	13684	-279.39	-604.50	554316.13	8882464.78
Previous year (Total)	552.52	2994.80	1283	14390	284.96	508.99	711627.49	6113221.23
Aviation	10.58	1489.61	2	79	-131.32	706.96	34590.00	3238155.34
Previous year	141.90	782.65	0	54	11.12	249.25	198181.16	325108.22
Engineering	356.11	4969.30	348	3291	-445.74	-1182.08	142147.15	4180237.66
Previous year	801.85	6151.38	401	3506	103.04	251.96	672562.23	8430397.94
Motor Own Damage	8838.52	56402.29	200310	1214100	1645.97	10481.93	533494.54	3436519.79
Previous year	7192.55	45920.35	131438	983504	-2242.16	-4974.90	391901.46	2485642.62
Motor Third party	3867.94	25328.04	210576	1288191	1190.19	7502.44		
Previous year	2677.75	17825.61	135010	1016974	-919.88	-819.43		
Motor (Total)	12706.46	81730.33	210576	1288191	2836.15	17984.37	533494.54	3436519.79
Previous year (Total)	9870.30	63745.96	135010	1016974	-3162.04	-5794.33	391901.46	2485642.62
Workmen's compensation / Employer's liability	17.93	507.79	257	2674	-43.71	-27.96	3859.05	55328.09
Previous year	61.64	535.75	291	2699	-1.59	13.41	5376.43	64579.04
Public Liability	4.17	114.28	47	300	-3.42	-35.56	2722.10	25067243.62
Previous year	7.59	149.84	31	328	-9.96	1.73	14803.29	135036.62
Product Liability	4.37	51.23	1	67	4.27	0.61	485.00	7960.00
Previous year	0.10	50.63	1	11	0.00	29.14	50.00	24660.00
Other Liability Covers	9.80	742.26	18	194	5.04	-329.97	1343.50	255922.36
Previous year	4.76	1072.23	33	170	-1.26	885.32	4570.50	90461.05
Liability (Total)	36.26	1415.56	323	3235	-37.83	-392.89	8409.65	25386454.06
Previous year (Total)	74.09	1808.44	356	3208	-12.81	929.59	24800.22	314736.70
Personal Accident	517.94	3382.10	2774	36603	-114.49	-629.43	2532382.08	9749672.71
Previous year	632.43	4011.53	2689	23025	262.77	1047.37	6572609.79	13643193.46
Medical Insurance	1850.96	12427.47	23594	249156	511.35	-7952.99	45550.06	1590859.79
Previous year	1339.62	20380.45	36421	177238	-553.16	5209.26	101219.32	1437349.86
Overseas Medical Insurance	273.48	2104.61	47792	294161	85.23	143.92	17776179.91	114945479.15
Previous year	188.26	1960.69	22910	187317	-163.31	95.94	383691.93	4212432.32
Health (Total)	2124.44	14532.08	71386	543317	596.57	-7809.07	17821729.97	116536338.95
Previous year (Total)	1527.87	22341.14	59331	364555	-716.48	5305.20	484911.25	5649782.18
Crop Insurance	0	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Credit Guarantee	0	0.00	0	0	0.00	0.00	0	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
All Other Miscellaneous	589.69	2829.59	5301	45161	319.81	-906.82	344529.16	3643549.63
Previous year	269.88	3736.41	2686	23013	-53.26	-72.26	227274.59	6961738.38
Grand Total	17041.62	121597.05	295812	1955799	2188.67	8121.95	22492954.28	191551424.18
Previous year (Total)	14852.94	113475.10	204130	1469583	-3371.62	606.92	10253019.71	57993480.20

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
4.49	616.95	54	1029	0.00	0.00	0	0		
55.52	398.38	89	848	0.00	0.00	0	0		
1.80	19.62	6	85	0.00	0.00	0	0		
5.16	5.16	23	23	0.00	0.00	0	0		
0.00	0.60	0	2	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
1.80	20.22	6	87	0.00	0.00	0	0	0	0
5.16	5.16	23	23	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
3.26	118.06	18	151	0.00	0.00	0	0		
5.05	685.41	22	165	0.00	0.00	0	0		
825.44	6645.75	18463	116565	0.00	0.00	0	0		
517.18	3455.64	9395	72891	0.00	0.00	0	0		
424.32	2093.01	662	4221	0.00	0.00	0	0		
245.89	1504.53	176	5383	0.00	0.00	0	0		
1249.76	8738.75	18463	116565	0.00	0.00	0	0	0	0
763.07	4960.18	9395	72891	0.00	0.00	0	0	0	0
0.38	12.89	5	99	0.00	0.00	0	0		
1.91	1.91	10	10	0.00	0.00	0	0		
0.00	2.87	0	2	0.00	0.00	0	0		
0.64	0.64	1	1	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	4.00	0	2	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.38	19.75	5	103	0.00	0.00	0	0	0	0
2.55	2.55	11	11	0.00	0.00	0	0	0	0
-0.69	100.12	138	1554	185.81	705.71	217493	5508661		
3.92	861.34	88	1427	269.38	752.84	10826	39138461		
12.42	207.69	531	6805	0.00	0.00	0	0		
100.25	1681.62	1257	4953	0.00	0.00	0	0		
9.78	70.07	2496	13207	0.00	0.00	0	0		
6.47	6.47	1257	1257	0.00	0.00	0	0		
22.20	277.76	3027	20012	0.00	0.00	0	0	0	0
106.72	1688.10	2514	6210	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0	0.00	0	0	0	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
8.04	75.39	423	3063	15.93	69.18	26009	32579		
6.63	94.53	121	4377	0.10	24.25	0	8443		
1289.24	9967.01	22134	142564	201.74	774.89	243502	5541241	0	0
948.61	8695.62	12263	85952	269.48	777.08	10826	39146904	0	0

Name of the Insurer: *Royal Sundaram Alliance Insurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	315.46	2815.22	904.00	13533.00	-61.12	-1095.18	447533.59	4259828.84
Previous year	376.58	3910.40	3177.00	24822.00	76.29	-750.05	764424.97	4931952.57
Marine Cargo	194.47	1307.26	3001.00	19797.00	-4.98	50.36	346764.85	3220956.07
Previous year	199.45	1256.90	3682.00	21826.00	60.25	209.11	303089.58	3151862.27
Marine Hull (including Onshore & Offshore oil energy)	2.04	6.60	0.00	0.00	2.04	6.60	0.00	0.00
Previous year	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marine (Total)	196.51	1313.87	3001	19797	-2.93	56.97	346764.85	3220956.07
Previous year (Total)	199.45	1256.90	3682	21826	60.25	209.11	303089.58	3151862.27
Aviation								
Previous year								
Engineering	325.40	2277.09	129.00	1249.00	44.30	-89.50	118820.03	757877.43
Previous year	281.10	2366.59	129.00	1529.00	-7.04	89.70	86039.85	1061536.76
Motor Own Damage	4526.03	26841.53	77990.00	409496.00	540.49	4063.72	213489.16	1434762.54
Previous year	3985.54	22777.81	64095.00	322006.00	854.34	5639.39	196525.48	1107551.52
Motor Third party	1317.94	7862.76	686.00	5333.00	389.81	2189.95		
Previous year	928.13	5672.81	282.00	2388.00	165.63	1730.76		
Motor (Total)	5843.97	34704.29	77990	409496	930.30	6253.67	213489.16	1434762.54
Previous year (Total)	4913.67	28450.62	64095	322006	1019.97	7370.16	196525.48	1107551.52
Workmen's compensation / Employer's liability	20.94	313.83	68.59	418.00	-26.99	56.99	11119.02	160857.35
Previous year	47.93	256.84	92.00	369.00	-0.61	111.74	9973.01	34153.88
Public Liability	57.44	224.42	62.84	232.00	31.13	45.15	3751.93	43200.65
Previous year	26.31	179.27	36.00	199.00	-5.98	60.05	17513.10	80841.76
Product Liability	50.36	250.48	299.57	648.00	46.18	195.29	43619.46	66330.28
Previous year	4.18	55.18	4.00	23.00	1.98	-31.05	6290.98	30030.55
Other Liability Covers								
Previous year								
Liability (Total)	128.74	788.74	431	1298	50.32	297.43	58490.41	270388.28
Previous year (Total)	78.42	491.30	132	591	-4.62	140.74	33777.09	145026.19
Personal Accident	211.34	1725.35	13925.00	77323.00	-39.72	8.39	423045.52	2052244.26
Previous year	251.06	1716.96	15025.00	84569.00	53.75	-136.18	211982.78	1858378.02
Medical Insurance	975.03	6998.74	20786.00	146259.00	-20.12	-37.98	137080.22	1168252.90
Previous year	995.15	7036.72	23967.00	142329.00	163.44	819.90	144653.96	1204045.57
Overseas Medical Insurance								
Previous year								
Health (Total)	975.03	6998.74	20786	146259	-20.12	-37.98	137080.22	1168252.90
Previous year (Total)	995.15	7036.72	23967	142329	163.44	819.90	144653.96	1204045.57
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	139.92	1343.20	2914.00	16159.00	11.77	449.85	653153.41	5039819.81
Previous year	128.15	893.35	3527.00	20093.00	18.20	448.73	433560.24	2539766.14
Grand Total	8136.38	51966.49	120080	685114	912.80	5843.65	2398377.20	18204130.13
Previous year (Total)	7223.58	46122.84	113734	617765	1380.24	8192.10	2174053.95	16000119.03

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
23.25	74.90	385.00	2683.00						
5.03	39.87	875.00	2369.00						
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		
412.81	3536.56	3823.00	48871.00						
264.22	3128.00	3682.00	41186.00						
412.81	3536.56	3823	48871	0.00	0.00	0	0		
264.22	3128.00	3682	41186	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		
14.62	135.68	957.00	5620.00	1.55	6.94	6137.00	25282.00		
6.82	51.54	302.00	2507.00	1.36	3.15	3186.00	9156.00		
201.75	1115.81	3502.00	19039.00	0.03	0.79	18.00	879.00	46150.00	396399.50
49.23	655.90	908.00	8883.00	0.28	0.98	112.00	834.00	63024.00	441993.00
201.75	1115.81	3502	19039	0.03	0.79	18	879	46150	396400
49.23	655.90	908	8883	0.28	0.98	112	834	63024	441993
30.82	469.88	331.00	8437.00						
40.84	370.17	1045.00	7596.00						
683.25	5332.82	8998	84650	1.58	7.72	6155	26161	46150	396400
366.14	4245.48	6812	62541	1.64	4.13	3298	9990	63024	441993

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 Asured	
	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	25.20	77.27	27	242	23.75	67.34	30089.20	82351.69
Previous year	1.45	9.93	13	92	1.45	9.93	2033.31	9468.83
Marine Cargo	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 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)	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	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	12.81	38.52	10	40	12.04	32.38	5543.96	37085.11
Previous year	0.77	6.14	4	21	0.77	6.14	190.45	1093.38
Motor Own Damage	1730.71	8401.69	49763	261553	1060.47	7349.77	130171.39	677191.70
Previous year	670.24	1051.92	18916	36402	670.24	1051.92	47584.55	73212.07
Motor Third party	1817.16	8748.55	51978	270889	1168.46	7780.09	0.00	0.00
Previous year	648.70	968.46	19401	37382	648.70	968.46	0.00	0.00
Motor (Total)	3547.87	17150.24	51978	270889	2228.93	15129.86	0.00	547020.31
Previous year (Total)	1318.94	2020.38	19401	37382	1318.94	2020.38	0.00	0.00
Workmen's compensation / Employer's liability	0.24	8.95	4	28	-0.48	7.36	7.20	97.24
Previous year	0.72	1.59	15	31	0.72	1.59	15.90	49.45
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	0.06	1.03	5	19	0.01	0.76	20.00	316.00
Previous year	0.05	0.27	2	16	0.05	0.27	60.00	221.00
Liability (Total)	0.30	9.98	9	47	-0.47	8.12	0.00	386.04
Previous year (Total)	0.77	1.86	17	47	0.77	1.86	0.00	194.55
Personal Accident	70.33	107.43	699	10510	70.33	107.43	76512.56	102343.23
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Medical Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Overseas Medical Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Health (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Credit Guarantee	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
All Other Miscellaneous	2.09	18.74	67	1326	2.09	18.46	1465.55	5848.25
Previous year	0.00	0.28	0	1	0.00	0.28	0.00	30.00
Grand Total	3658.60	17402.18	52790	283054	2336.67	15363.59	243809.86	905233.22
Previous year (Total)	1321.93	2038.59	19435	37543.00	1321.93	2038.59	49884.21	84074.73

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
47.21	180.59	1373	6138	0.00	0.00	0	0		
7.70	20.85	123	331	0.00	0.00	0	0		
38.79	150.34	1554	6745	0.00	44.91	0	45242		
5.23	13.73	123	331	0.00	0.00	0	0		
86.00	330.93	1554	6745	0.00	44.91	0	45242		
12.93	34.58	123	331	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	1.15	0	8		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	1.15	0	8		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	1		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
86.00	330.93	1554.00	6745.00	0.00	46.06	0	45251	0	0
12.93	34.58	123.00	331.00	0.00	0.00	0	0	0	0

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)	0.00	0.00			0.00	0.00		0.00
Previous year (Total)	0.00	0.00	0		0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident	55.82	380.62	10113	55580	-1178.41	-1055.11	78126.24	487659.33
Previous year	1234.23	1435.73	5282	32921	-93.79	-33.47	48407.66	295904.93
Medical Insurance	19474.94	61895.95	42191	262361	13514.77	32635.52	68332.70	21778496.81
Previous year	5960.17	29260.43	19415	130764	2449.07	15622.03	32700.74	16306085.35
Overseas Medical Insurance	55.19	507.64	2359	16076	31.49	251.99	239840.26	3054565.90
Previous year	23.70	255.65	1021	8640	6.64	87.37	74659.60	558321.70
Health (Total)	19530.13	62403.59	44550	278437	13546.26	32887.51	308172.96	24833062.71
Previous year (Total)	5983.87	29516.08	20436	139404	2455.71	15709.40	107360.34	16864407.05
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	40.93	229.51	14669	81502	9.42	12.87	146690	815020.00
Previous year	31.51	216.64	11343.00	77688.00	-22.66	95.56	113430.00	776880.00
Grand Total	19626.88	63013.72	#VALUE!	#VALUE!	12377.27	31845.27	#VALUE!	26135742.04
Previous year (Total)	7249.61	31168.45	37061	#VALUE!	2339.26	15771.49	269198.00	17937191.98

* Wherever applicable

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	702	11,439	11,288	86,212	-	-	9,633,052	198,893,918
Previous year	1,161	12,444	5,917	44,397	-	-	11,209,307	100,821,346
Marine Cargo	1,053	6,992	1,821	14,179	-	-	342,073	7,406,089
Previous year	822	7,484	1,254	9,744	-	-	390,831	2,734,970
Marine Hull (including Onshore & Offshore oil energy)	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Marine (Total)	1,053	6,992	1,821	14,179	-	-	342,073	7,406,089
Previous year (Total)	822	7,484	1,254	9,744	-	-	390,831	2,734,970
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	280	2,680	49	542	-	-	177,078	7,153,674
Previous year	277	2,330	7	142	-	-	791,704	4,722,030
Motor Own Damage	1,858	10,433	28,254	204,044	-	-	94,998	554,971
Previous year	1,616	11,804	27,167	215,123	-	-	69,054	549,837
Motor Third party	304	1,784	28,254	204,044	-	-	-	-
Previous year	176	1,935	27,167	215,123	-	-	-	-
Motor (Total)	2,162	12,217	28,254	204,044	-	-	94,998	554,971
Previous year (Total)	1,791	13,739	27,167	215,123	-	-	69,054	549,837
Workmen's compensation / Employer's liability	2	119	5	92	-	-	274	85,417
Previous year	37	375	129	1,186	-	-	14,505	199,292
Public Liability	224	1,650	31	241	-	-	118,809	852,956
Previous year	187	1,806	74	643	-	-	93,205	1,281,727
Product Liability	48	335	18	197	-	-	124,384	2,761,816
Previous year	60	313	50	350	-	-	84,000	7,997,058
Other Liability Covers	583	5,797	416	2,279	-	-	331,002	2,410,680
Previous year	350	4,024	68	847	-	-	118,074	1,198,267
Liability (Total)	857	7,901	470	2,809	-	-	574,469	6,110,870
Previous year (Total)	633	6,518	321	3,026	-	-	309,784	10,676,343
Personal Accident	945	5,914	3,718	54,506	-	-	93,159	3,572,666
Previous year	822	7,638	7,732	74,808	-	-	613,021	5,049,090
Medical Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Overseas Medical Insurance	634	4,312	26,782	162,622	-	-	3,150,141	19,498,384
Previous year	430	5,076	18,465	222,278	-	-	2,329,479	21,159,365
Health (Total)	634	4,312	26,782	162,622	-	-	3,150,141	19,498,384
Previous year (Total)	430	5,076	18,465	222,278	-	-	2,329,479	21,159,365
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	216	911	381	1,342	-	-	7,125	118,460
Previous year	28	462	235	3,957	-	-	8,529	221,349
Grand Total	6,849	52,367	72,763	526,256	-	-	14,072,094	243,309,032
Previous year (Total)	5,964	55,691	61,098	573,475	-	-	15,721,708	145,934,330

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
21	422	49	533		-		-		
32	461	50	259	-	-	-	-		
20	163	10	148		-		-		
24	63	7	38	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
20	163	10	148	-	-	-	-	-	-
24	63	7	38	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
4	20	-	14		-		-		
5	72	3	18	-	-	-	-		
97	533	1,737	10,992		-		-		
31	191	849	4,615	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
97	533	1,737	10,992	-	-	-	-	-	-
31	191	849	4,615	-	-	-	-	-	-
0	2	-	1		-		-		
2	6	2	8	-	-	-	-		
3	102	10	107		-		-		
-	68	2	30	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
3	104	10	108	-	-	-	-	-	-
2	74	4	38	-	-	-	-	-	-
9	83	87	1,659	1	7	3,751	47,128		
6	27	261	1,514	-	3	-	8,439		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
2	11	39	312		-		-		
8	25	15	151	-	-	-	-		
2	11	39	312	-	-	-	-	-	-
8	25	15	151	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
14	91	411	2,340		-		-		
0	8	38	171	-	-	-	-		
171	1,426	2,343	16,106	1	7	3,751	47,128	-	-
109	922	1,227	6,804	-	3	-	8,439	-	-

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	7056.95	59701.04	95924	548803	2362.87	9628.22	945933446.88	1150993251.43
Previous year	4694.08	50072.82	90087	533645				
Marine Cargo	1527.96	11776.26	21964	162906	166.22	640.77	230732395.55	398859875.36
Previous year	1361.74	11135.49	24539	164935				
Marine Hull (including Onshore & Offshore oil energy)	1341.79	13356.51	904	7517	-1634.11	1722.81	-5308402.94	12812094.01
Previous year	2975.90	11633.70	545	8036				
Marine (Total)	2869.75	25132.77	22868	170423	-1467.89	2363.58	225423992.61	411671969.37
Previous year (Total)	4337.64	22769.19	25084	172971	0.00	0.00		
Aviation	391.85	3918.82	10	311	315.96	-26.37	-1267148.82	3271154.38
Previous year	75.89	3945.19	176	388				
Engineering	2514.00	17161.01	4458	39616	472.07	2821.99	140173152.77	197167278.31
Previous year	2041.93	14339.02	14338	56815				
Motor Own Damage	10470.44	66396.37	387371	2899432	888.03	4001.50	6140674.26	15358287.78
Previous year	9582.41	62394.87	470525	2874702				
Motor Third party	7333.91	50076.64	418279	1754663	-146.50	-961.47		
Previous year	7480.41	51038.11	195977	1421309				
Motor (Total)	17804.35	116473.01	418279	1754663	741.53	3040.03	6140674.26	15358287.78
Previous year (Total)	17062.82	113432.98	195977	1421309	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability	204	2070	11827	45087	-127.51	234.05	320556	551158
Previous year	332	1836	9117	36265			0	
Public Liability	-18	68	2437	3333	-18.45	-30.13	-3690535	601069
Previous year	0	98	0	1316			0	
Product Liability	120	368	36	143	117.71	211.35	47176	283003
Previous year	2	157	-1470	41			0	
Other Liability Covers	524	5232	3014	26052	12.26	962.39	1121116	1806434
Previous year	511	4270	2588	29515			0	
Liability (Total)	829.72	7738.60	17314	74615	-15.99	1377.66	-2201686.18	3241663.46
Previous year (Total)	845.71	6360.94	10235	67137	0.00	0.00	0.00	0.00
Personal Accident	906.96	6161.45	49872	308405	333.10	871.88	64493653304.58	64537280428.77
Previous year	573.86	5289.57	31926	271463			0.00	
Medical Insurance	11983.44	89582.27	21026	706610	-287.37	7514.12	34862978.46	85692983.60
Previous year	12270.81	82068.15	160561	891585			0.00	
Overseas Medical Insurance	77.09	993.89	1838	35282	30.56	-144.60	136089.56	1800962.58
Previous year	46.53	1138.49	1740	30528			0.00	
Health (Total)	12060.53	90576.16	22864	741892	-256.81	7369.52	34999068.02	87493946.18
Previous year (Total)	12317.34	83206.64	162301	922113	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
Credit Guarantee	-53.38	8.34	-1005	16	-65.38	-49.94	-6061.16	14269.90
Previous year	12.00	58.28	14	39			0.00	
All Other Miscellaneous	4032.53	24875.82	-66250	803718	1856.47	1204.24	21201327.19	185972988.49
Previous year	2176.06	23671.58	165736	1160770			0.00	
Grand Total	48413.26	351747.02	564334	4442462	4275.93	28600.81	65864050070.15	66592465238.07
Previous year (Total)	44137.33	323146.21	695874	4606650				

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
578.17	3297.25	11730	52093	297.72	1422.20				
312.80	2499.34	10874	72799	98.15	1082.80				
149.18	435.64	726	4589	101.44	375.86				
0.00	256.57	429	4630	11.81	206.21				
3.51	16.37	14	123	7.33	17.27				
3.47	6.41	306	2476	1.57	12.59				
152.69	452.01	740	4712	108.77	393.13	0	0		
3.47	262.98	735	7106	13.38	218.80	0	0		
0.00	0.00	0	0	0.00	0.00				
0.00	0.00	0	0	0.00	0.00				
118.35	699.87	619	3257	10.45	374.34				
32.99	408.88	728	3132	29.17	299.51				
1722.74	5173.63	22286	212246	350.15	3013.15	1028	9563		
0.00	4915.00	28522	234271	615.94	4888.77	1951	13471		
360.92	2743.89	9525.00	94584	54.38	1967.15	9971	22505		
277.19	3018.69	21052	212047	284.48	1815.50	3499	12288		
2083.66	7917.52	9525	94584	404.53	4980.30	10999	32068		
277.19	7933.69	21052	212047	900.42	6704.27	5450	25759		
11	207	367	2496	12	141	2007	9944		
237	537	168	1300	19	207	2113	26529		
0	3	137	148	1	2	261	261		
7	7	2	5	0	0	0	0		
-17	3	-3	1	-24	0	121	121		
0	0	0	0	0	0	0	0		
-3	174	209	3146	0	77	11	68		
-7	41	200	638	20	56	8	59		
-7.97	386.79	710	5791	-11.62	220.29	2400	10394		
236.82	585.49	370	1943	39.45	263.39	2121	26588		
54.70	937.95	3447	20263	714.91	877.24	178148	426018		
33.54	249.69	1727	15668	35.31	154.57	167642	386752		
168.98	1380.56	3226	41168	-687.12	884.56	91286	10495610	390179	2258720
334.22	2328.56	5252	52488	187.51	954.21	154685	355359		
-5.07	23.78	65	901	-12.52	18.37	-4752	12223	738	24908
1.38	22.52	45	645	0.70	12.59	43	639		
163.91	1404.34	3291	42069	-699.64	902.93	86534	10507833	390917	2283628
335.60	2351.08	5297	53133	188.21	966.80	154728	355998	0	0
0.00	0.00	0	0	0.00	0	0	0		
0.00	0.00	0	0	0.00	0	0	0		
0.00	0.00	0	0	0.00	0.0	0	0		
0.00	0.00	0	0	0.00	0	0	0		
654.33	3942.21	49447	219696	84.49	1477.52	14397	5270498		
937.19	4498.93	34099	175066	-1.50	1151.42	26054	5312290		
3797.84	19037.94	79509	442465	909.61	10647.95	292478	16246811		
2169.60	18790.08	74882	540894	1302.59	10841.56	355995	6107387		

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 Asured	
	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	3453.29	38031.58	38926	284442			6816564.00	95349324.03
Previous year	3206.28	32106.49	26117	246065			42.74	841.11
Marine Cargo	1495.51	10370.50	18266	134774			6328033.08	47623070.59
Previous year	1378.53	10576.92	7344	102224			0.00	0.00
Marine Hull (including Onshore & Offshore oil energy)	940.74	11276.64	301	3113			92644.55	5496785.87
Previous year	1439.61	7862.02	411	3676			0.00	0.00
Marine (Total)	2436.25	21647.14	18567	137887	0.00	0.00	6420677.63	53119856.46
Previous year (Total)	2818.14	18438.94	7755	105900	0.00	0.00	0.00	0.00
Aviation	1682.47	6511.28	40	234			88963.29	6440197.85
Previous year	1225.79	5355.77	0	1047			0.00	0.00
Engineering	1719.22	13800.15	3088	24340			1502104.99	15051655.87
Previous year	3395.47	14891.18	4239	28631			0.00	0.00
Motor Own Damage	7831.60	48669.78	439248	2609867			516136.14	3304459.44
Previous year	7750.21	50623.46	249464	2062979			0.00	0.00
Motor Third party	6277.67	41243.65	572489	3562097				
Previous year	5109.25	35897.28	67119	1030404				
Motor (Total)	14109.27	89913.43	572489	3562097	0.00	0.00	516136.14	3304459.44
Previous year (Total)	12859.46	86520.74	249464	2062979	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability	385.41	3300.74	4475	33767			20947.57	67489.99
Previous year	349.45	2803.04	3877	31796			0.00	0.00
Public Liability	6.90	55.94	31	268			2173164.00	36739399.51
Previous year	93.57	746.86	691	5215			0.00	0.00
Product Liability	14.95	384.86	9	87			84849.16	1963755.81
Previous year	23.39	186.72	173	1304			0.00	0.00
Other Liability Covers	756.39	3264.60	1991	16611			391130.89	6568949.93
Previous year	116.96	933.58	863	6519			0.00	0.00
Liability (Total)	1163.65	7006.14	6506	50733	0.00	0.00	2670091.62	45339595.24
Previous year (Total)	583.37	4670.20	5604	44834	0.00	0.00	0.00	0.00
Personal Accident	887.08	7233.88	85091	619763			2071592.00	15967287.32
Previous year	757.56	5795.71	21289	238837			0.00	0.00
Medical Insurance	10370.17	57491.56	49512	386449			292139.96	2166648.69
Previous year	6756.92	38947.37	41395	339360			0.00	0.00
Overseas Medical Insurance	47.17	570.28	1710	16660			155291.16	1642461.33
Previous year	101.50	1125.78	1179	71147			0.00	0.00
Health (Total)	10417.34	58061.84	51222	403109	0.00	0.00	447431.12	3809110.02
Previous year (Total)	6858.42	40073.15	42574	410507	0.00	0.00	0.00	0.00
Crop Insurance	0.00	0.00	0	0			0.00	0.00
Previous year	0.00	0.00	0	0			0.00	0.00
Credit Guarantee	0.00	0.00	0	0			0.00	0.00
Previous year	0.00	0.00	0	0			0.00	0.00
All Other Miscellaneous	3019.27	27451.41	88473	628272			3659177.48	36290549.75
Previous year	4031.44	28792.02	95529	982832			0.00	0.00
Grand Total	38887.84	269656.85	864402	5710877	0.00	0.00	24192738.27	274672035.98
Previous year (Total)	35735.93	236644.20	452571	4121632	0.00	0.00	42.74	841.11

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
196.48	1453.51	4543	32365	20.85	1453.51	0.00	0.00		
42.74	841.11	1254	11160	9.96	95.75	0.00	0.00		
34.57	220.15	570	4930	34.47	220.15	0.00	0.00		
9.39	84.04	175	1370	0.92	11.64	0.00	0.00		
2.40	18.83	94	901	2.82	1.83	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
36.97	238.98	664	5831	37.29	221.98	0	0		
9.39	84.04	175	1370	0.92	11.64	0	0		
0.00	0.00	0	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
68.48	411.17	273	2336	5	411	0	0		
73.40	236.98	362	2550	2	5	0	0		
977.64	5569.91	52453	289444	160	5570	0	0		
500.84	3448.19	17965	134795	33	333	0	0		
836.03	5020.66	68396	397137	155	5021	0	0		
291.02	1825.50	10352	80529	30	118	0	0		
1813.67	10590.57	68396	397137	314.14	10590.57	0	0		
791.86	5273.69	17965	134795	62.81	450.39	0	0		
32.35	245.63	548	3769	7	246	0	0		
3.67	31.46	94	643	5	51	394	3166		
0.19	0.65	4	9	0	1	0	0		
0.85	8.46	16	109	3	3	387	801		
0.00	9.38	0	4	0	9	0	0		
0.00	0.11	0	4	0	0	0	0		
5.05	63.83	85	717	0	64	0	0		
0.43	2.64	13	99	0	4	9	61		
37.59	319.49	637	4499	7.60	319.49	0	0		
4.95	42.67	123	855	8.01	58.79	790	4028		
81.82	423.20	11582	79829	8	423	0	0		
32.53	295.56	2012	25454	11	292	10739	325501		
98.63	865.81	1562	11294	43	866	0	0		
52.81	529.30	2820	16103	81	735	9907	112155		
0.91	7.57	29	167	0	8	0	0		
0.00	0.00	0	0	0	0	0	0		
99.54	873.38	1591	11461	43.25	873.38	0	0	0	0
52.81	529.30	2820	16103	80.63	734.88	9907	112155	0	0
0.00	0.00	0	0	0	0	0	0		
0.00	9.29	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		
263.15	3828.41	20236	135941	65	3828	2885	15335		
1164.68	6224.79	25028583	25430522	709	5157	136054	8273548		
2597.70	18138.71	107922	669399	501.41	18121.71	2885	15335	0	0
2172.36	13537.43	25053294	25622809	884.94	6804.83	157490	8715232	0	0

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	5131.64	40337.64	60107	460857	1721.63	73495.57		
Previous year	3410.01	32988.07	53954	393313	587.92	-10872.06		
Marine Cargo	1433.16	13222.16	20328	171225	304.66	-8.29		
Previous year	1128.50	13230.45	18771	165579		7264.73		
Marine Hull (including Onshore & Offshore oil energy)	816.96	8781.96	1105	7734	532.07	3721.32		
Previous year	284.89	5060.64	961	5966	32.15	-1752.37		
Marine (Total)	2250.12	22004.12	21432	178959	836.73	3713.03		
Previous year (Total)	1413.39	18291.09	19731	171545		5512.36		
Aviation	142.66	347.48	105	225	-73.44	45.26		
Previous year	216.10	302.22	2978	3135	-1.20	-53.61		
Engineering	2306.68	15374.68	18370	77223	828.21	2408.69		
Previous year	1478.47	12965.99	22751	82142	-643.24	9232.43		
Motor Own Damage	9167.85	58043.85	404042	2863552	1432.46	13216.69		
Previous year	7735.39	44827.16	339345	2234455	2791.23	-3452.54		
Motor Third party	6448.60	41604.60	164592	3809972	2069.06	13202.78		
Previous year	4379.54	28401.82	145906	978850	2441.15	21517.88		
Motor (Total)	15616.45	99648.45	568634	6673524	3501.52	26419.47		
Previous year (Total)	12114.93	73228.98	485252	3213306	5232.38	18065.34		
Workmen's compensation / Employer's liability	396.63	2605.10	4980	36574	80.78	67.43		
Previous year	315.85	2537.67	4254	31565	1.79	227.96		
Public Liability	-9.93	462.46	460	3667	-8.42	-3.52		
Previous year	-1.54	465.98	437	3072	-52.96	0.04		
Product Liability	12.86	226.01	150	1423	-13.65	-101.89		
Previous year	26.51	327.90	160	1339				
Other Liability Covers	251.52	1307.48	2841	18619	-44.95	50.25		
Previous year	296.47	1257.23	3447	15777				
Liability (Total)	651.08	4601.05	8431	60282	13.79	12.27		
Previous year (Total)	637.29	4588.78	8298	51754				
Personal Accident	624.10	5859.28	29879	350293	44.15	1870.50		
Previous year	582.95	3988.78	32356	223806	99.79	1486.67		
Medical Insurance	8388.58	63612.87	121334	752738	2904.88	21639.88		
Previous year	5483.70	41972.99	87654	611329				
Overseas Medical Insurance	833.00	4572.71	21540	84071	309.02	927.78		
Previous year	523.98	3644.93	14154	74225				
Health (Total)	9221.58	68185.58	142874	836809	3213.90	22567.66		
Previous year (Total)	6007.68	45617.92	101808	685554				
Crop Insurance	0.00	0.00	0	0	0.00	0.00		
Previous year	0.20	1.32	0	0	0.00	0.00		
Credit Guarantee	0.00	0.00	0	0	0.00	0.00		
Previous year	0.30	0.00	0	0	0.00	0.00		
All Other Miscellaneous	4255.00	30206.72	143651	1067252	380.73	3130.55		
Previous year	3874.27	27076.17	141984	862557	4371.79	-26678.47		
Grand Total	40201.21	286565.00	993483	17454999	10465.62	67515.68		
Previous year (Total)	29735.59	219049.32	869112	5687112				

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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
397.18	3186.62	8565	74214	164.48	1068.20		2418		
309.67	2356.35	7369	58050	100.66	933.51				
60.54	461.86	1250	13750	28.09	455.33		459		
47.14	581.71	1162	7745	20.42	396.20				
9.72	43.76	160	799	3.54	15.25		91		
8.44	42.31	163	722	0.92	2.37				
70.26	505.62	1411	14550	31.64	470.59		550		
55.58	624.02	1325	8467	21.34	398.56				
14.85	0.00	10	0	4.41	0.00		0		
33.76	36.94	1418	1410	2.01	1.46				
145.41	967.18	2889	8392	75.04	431.12		456		
114.21	640.27	5110	9999	60.32	321.39				
2477.38	15768.96	64026	427234	345.72	1933.34		10766		
1900.37	8428.46	54246	335169	331.35	1127.00				
856.55	8293.22	25961	527399	159.64	1204.61		7259		
568.77	3434.08	20491	122814	131.03	570.85				
3333.94	24062.18	89987	954633	505.35	3137.95		18025		
2469.14	11862.54	74737	457983	462.38	1697.85				
35.97	282.57	683	5013	6.90	77.06		725		
37.19	206.25	536	5616	6.28	70.87				
1.61	19.51	49	505	0.48	7.84		69		
1.28	14.29	33	326	3.19	51.10				
0.19	7.78	6	16	0.12	2.08	0	69		
0.36	1.17	6	10	3.17	3.55	1			
7.09	103.59	242	1622	1.43	12.88		1		
10.90	52.73	236	1435	1.71	9.67				
44.86	413.45	980	7156	8.93	99.87		865		
49.73	274.45	811	7387	14.35	135.19				
144.59	1720.82	3187	28708	8.58	1922.77	8544	52629		
102.36	672.51	4554	25004	11.73	89.90	3982	24947		
395.17	2603.88	6744	54447	102.02	4835.08	5869	538264		
431.42	8248.42	4953	38442	140.68	817.36	2290	227133		
14.55	187.84	398	3661	4.72	68.64	269	515		
22.04	123.55	1466	5416	8.97	26.75	227	1251		
409.72	2791.72	7142	58108	106.74	4903.72	6138	538779		
453.46	8371.97	6419	43858	149.66	844.11	2516	228383		
0.00	0.00	2	0	0.00	0.00	0	0		
0.00	9.00	0	11	0.00	0.00	1	0		
0.00	0.00	0	0	0.00	0.00	3	0		
0.00	0.00	0	0	0.00	0.00	3	0		
1066.75	9486.67	36945	435976	318.39	4043.96	2670	179003		
1609.64	7095.90	33364	219576		2679.29	1804	145942		
5627.56	70907.22	151117	2616183	1223.56	24690.27		792654		
5197.54	31943.94	135107	831744	#VALUE!	7101.26				

Name of the Insurer: *Universal Sampo*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Asured	
	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	261.45	2039.93	6589.00	49636.00	251.91	1984.66	316376.41	2368546.67
Previous year	9.54	55.27	29.00	68.00	9.54	55.27	7552.01	110895.11
Marine Cargo	69.73	262.75	64.00	510.00	65.31	240.63	373298.03	1432205.00
Previous year	4.42	22.12	16.00	25.00	4.42	22.12	4201.59	67830.14
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)	69.73	262.75	64	510	65.31	240.63	373298.03	1432205.00
Previous year (Total)	4.42	22.12	16	25	4.42	22.12	4201.59	67830.14
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	5.70	226.39	65.00	455.00	5.10	225.71	9499.92	225805.02
Previous year	0.60	0.68	1.00	3.00	0.60	0.68	145.89	154.57
Motor Own Damage	467.86	1971.52	18594.00	61790.00	464.19	1966.51	54076.15	203257.36
Previous year	3.67	5.01	30.00	39.00	3.67	5.01	152.75	332.42
Motor Third party	85.00	236.59	0.00	0.00	85.00	236.59		
Previous year	0.00	0.00	0.00	0.00	0.00	0.00		
Motor (Total)	552.86	2208.11	18594	61790	549.19	2203.10	54076.15	203257.36
Previous year (Total)	3.67	5.01	30	39	3.67	5.01	152.75	332.42
Workmen's compensation / Employer's liability	0.87	23	15	113	0.81	22.90	94	2966
Previous year	0.06	0.18	1.00	2.00	0.06	0.18	4.00	7.93
Public Liability	0.03	6.01	1.00	7.00	0.03	6.01	5	5005
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	11	3	30	0.64	10.85	183	5774
Previous year	0	0	0	0	0	0	0	0
Liability (Total)	1.54	39.95	19	150	1.48	39.76	281.98	13745.12
Previous year (Total)	0.06	0.18	1	2	0.06	0.18	4.00	7.93
Personal Accident	1.36	693.33	159	1218	0.82	645.27	1493.67	8232896.26
Previous year	0.54	48.06	992	3841	0.00	0.00	0.00	0.00
Medical Insurance	88.25	841.66	1312	10021	71.46	824.26	5351.20	65510.20
Previous year	16.79	17.40	600	679	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)	88.25	841.66	1312	10021	71.46	824.26	5351.20	65510.20
Previous year (Total)	16.79	17.40	600	679	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	212.30	1588.50	9018	71948	202.77	1578.51	87899.58	869105.08
Previous year	9.53	9.99	41753	44597	0.00	0.00	0.00	0.00
Grand Total	1193.19	7900.61	35820	195728	1148.05	7741.90	848276.94	13411070.71
Previous year (Total)	45.14	158.71	43421	49254	18.28	83.26	12056.24	179220.17

* Wherever applicable

FOR AND UP TO THE MONTH OF OCTOBER, 2009

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	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	0.00	0.00	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	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	1	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	1	0.00	0.00	0	0	0	0
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
0.00	0.00	0.00	0.00	0	0	0	0		
98.56	654.51	3069	23820	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
98.56	654.51	3069	23820	0.00	0.00	0	0	0	0
0.00	0.00	0	1	0.00	0.00	0	0	0	0



“ਦਾਅਵੇ ਦੇ ਕਾਗਜ਼-ਪੱਤਰ ਭੇਜੇ ਹੋਏ ਮੈਨੂੰ ਤਿੰਨ ਹਫ਼ਤੇ ਹੋ ਗਏ ਹਨ। ਆਸ ਹੈ ਉਹ ਛੇਤੀ ਹੀ ਪੈਸੇ ਭੇਜ ਦੇਣਗੇ।”

“ਜੀ ਹਾਂ, ਉਹ ਜ਼ਰੂਰ ਭੇਜਣਗੇ। ਜਦੋਂ ਸਾਰੇ ਕਾਗਜ਼-ਪੱਤਰ ਤਰਤੀਬ ਵਿਚ ਹੋਣ ਤਾਂ ਉਨ੍ਹਾਂ ਨੂੰ 30 ਦਿਨਾਂ ਦੇ ਅੰਦਰ ਅੰਦਰ ਹਿਸਾਬ ਚੁਕਦਾ ਕਰਨ ਪੈਂਦਾ ਹੈ। ਇਹ ਅਸੂਲ ਹੈ।”

ਭਾਰਤ ਵਿਚ ਬੀਮਾ ਕੰਪਨੀਆਂ ਦੀ ਨਿਗਰਾਨੀ ਕਰਨ ਵਾਲੀ ਸੰਸਥਾ ਬੀਮਾ ਵਿਨਯਮਕ ਅਤੇ ਵਿਕਾਸ ਪ੍ਰਾਧਿਕਰਣ (ਆਈਆਰਡੀਏ) ਪਾਲਸੀਧਾਰਕਾਂ ਦੇ ਹਿੱਤਾਂ ਦੀ ਰਖਵਾਲੀ ਕਰਦੀ ਹੈ। ਆਈਆਰਡੀਏ ਦੇ ਬਣਾਏ ਕੁਝ ਕਾਇਦੇ ਇਸ ਪ੍ਰਕਾਰ ਹਨ :

- ਬੀਮਾ ਕੰਪਨੀ ਨੂੰ ਸਾਰੇ ਸੰਬੰਧਿਤ ਕਾਗਜ਼-ਪੱਤਰ ਮਿਲਣ ਦੇ 30 ਦਿਨਾਂ ਦੇ ਅੰਦਰ ਅੰਦਰ ਦਾਅਵੇ ਦਾ ਭੁਗਤਾਨ ਕਰਨਾ ਪਵੇਗਾ ਜਾਂ ਕੋਈ ਢੁਕਵਾਂਕਾਰਣ ਦੇ ਕੇ ਇਸ ਨੂੰ ਵਿਵਾਦਗ੍ਰਸਤ ਕਰਨਾ ਪਵੇਗਾ।
- ਬੀਮਾ ਕੰਪਨੀ ਪ੍ਰਸਤਾਵ ਸਵੀਕਾਰ ਕਰਨ ਦੇ 30 ਦਿਨਾਂ ਦੇ ਅੰਦਰ ਅੰਦਰ ਭਾਵੀ ਪਾਲਸੀਧਾਰਕ ਨੂੰ, ਪ੍ਰਸਤਾਵ ਫ਼ਾਰਮ ਦੀ ਇਕ ਨਕਲ ਮੁਫ਼ਤ ਮੁਹਈਆ ਕਰਵਾਏਗੀ।
- ਬੀਮਾ ਕੰਪਨੀ ਦੁਆਰਾ ਪ੍ਰਸਤਾਵ ਪ੍ਰਾਪਤ ਕਰਨ ਦੇ 15 ਦਿਨਾਂ ਦੇ ਅੰਦਰ ਅੰਦਰ ਇਸ ਉੱਤੇ ਕਾਰਵਾਈ ਕਰਨੀ ਚਾਹੀਦੀ ਅਤੇ ਇਸ ਦੀ ਸੂਚਨਾ ਦੇਣੀ ਚਾਹੀਦੀ ਹੈ।
- ਸਾਰੇ ਜ਼ਰੂਰੀ ਕਾਗਜ਼-ਪੱਤਰ ਜਮ੍ਹਾਂ ਕਰਵਾਉਣ ਤੋਂ ਮਗਰੋਂ ਦਾਅਵੇ ਦੇ ਭੁਗਤਾਨ ਵਿਚ ਦੇਰੀ ਦੇ ਮਾਮਲੇ ਵਿਚ ਬੀਮਾ ਕੰਪਨੀ ਵਿਆਜ ਦੀ ਤਹਿਸ਼ੁਦਾ ਰਕਮ ਅਦਾ ਕਰਨ ਲਈ ਜ਼ਿੰਮੇਵਾਰ ਹੋਵੇਗੀ।
- ਜੀਵਨ ਬੀਮਾ ਦਾ ਪਾਲਸੀਧਾਰਕ ਪਾਲਸੀ ਰੱਦ ਕਰਨ ਲਈ 15 ਦਿਨਾਂ ਦੇ (ਪਾਲਸੀ ਮਿਲਣ ਦੀ ਤਾਰੀਖ ਤੋਂ) “ਫ਼ਰੀ ਲੁੱਕ ਪੀਰੀਅਡ” ਦਾ ਹੱਕਦਾਰ ਹੋਵੇਗਾ।
- ਬੀਮਾ ਕੰਪਨੀ ਨੂੰ ਆਪਣੇ ਪਾਲਸੀਧਾਰਕਾਂ ਦੇ ਕਿਸੇ ਵੀ ਚਿੱਠੀ-ਪੱਤਰ ਦਾ ਜਵਾਬ 10 ਦਿਨਾਂ ਦੇ ਅੰਦਰ ਅੰਦਰ ਦੇਣਾ ਚਾਹੀਦਾ ਹੈ।



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19 - 21 Jan 2010
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28 – 30 Jan 2010
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Reinsurance Management
By National Insurance Academy

01 - 02 Feb 2010
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6th Asian Conference on Pensions and Retirement Planning
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Key lessons learned from the financial crisis are essential to reinforcing insurance supervision in both developed and emerging markets while promoting financial inclusion and access to insurance globally.

Mr. Peter Braumuller

IAIS Executive Committee Chair

Better governance per se does not guarantee that there will never be a crisis, but it can minimise its probability and its impact if it does occur.

Mr. Heng Swee Keat

Managing Director, Monetary Authority of Singapore

A prolonged downturn would have put strong pressure on asset quality, profitability and capital; and could have penalized harshly those financial institutions slowest to adapt.

Mr. John F. Laker

Chairman, Australian Prudential Regulation Authority

We strive to continue to promote consumers' better understanding of the general insurance products and services as well as the important points which they need to keep in mind at the time of concluding an insurance contract and making insurance claims.

Mr. Masatoshi Sato

Chairman, General Insurance Association of Japan

Data sharing is a very important prerequisite for insurers to keep adverse selection at bay and also to fight the evil of moral hazard.

Mr. J. Hari Narayan

Chairman, Insurance Regulatory & Development Authority

The global financial crisis saw policy makers having to respond strongly and adopting a wide range of unorthodox policy measures. A prolonged recession was averted and now the global economy is recovering.

Mr. Dato' Ooi Sang Kuang

Deputy Governor, Bank Negara Malaysia.



view point