



Volume IX, No. 10

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October 2011



The Key to Customer Satisfaction
- Grievance Redressal

बीमा विनियामक और विकास प्राधिकरण

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From the Publisher



Management of grievances, as the name suggests, goes beyond a mere identification of the reason for a grievance and attending to it. It is more of a comprehensive look at the incidence of the grievances; and to put in place measures to ensure that the customer is treated fairly and his grievance is redressed properly. In order that this becomes a part of the organizational culture, managements should take up the task of a proper analysis, a regular follow-up and a wholesome settlement of the issue rather than finding a one-off solution to the problem at hand. This would also enable the corporate entities to have a total control on the type of grievances that their clients normally have; and to a great extent, the means to face such situations, as and when they arise.

Insurance business itself has the dubious distinction of having to face a large number of customer grievances, globally. The contributory factors for such a scenario may be the intangibility of the service on offer, the lack of clarity on the 'give-and-take', and the complexity of the wording in insurance contracts. The Indian insurance domain has been no exception to the world-wide phenomenon. Insurers would appreciate that a total objectivity at the time of soliciting the business would go a long way in arresting the trend. While much has been done to put the tag of mis-selling behind us, the malady still haunts us; and is a significant factor in consumer grievances.

Ideally, in a competitive market, as the consumer would tend to wean away from a less-reputed player to the better ones; eventually there should be a better balance of several highly reputed players. But consumer grievances present a case for intense introspection and problem-solving. There should also be systems to identify the areas that frequently indicate customer dissatisfaction; and there should be attempts at dealing with the problem - not merely in number but in a qualitative manner so that a repeat of the earlier pitfalls is not experienced. The quality of business will certainly be a major factor in overcoming this problem, rather than a chase for top-line supremacy; as has been reiterated time and again.

'Grievance Management' is the focus of this issue of the **Journal**; and considering the huge importance of the topic, the next issue will also focus on 'Grievance Management'.

J. Hari Narayan

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Dealing Positively with Grievances

- First Step to Success

It is now more than a decade since the insurance industry in India has been opened up for private participation. The competitive regime must have rung in the hope that several of the misconceptions associated with customer service in the industry would be brought to naught; apart from registering a steep rise in the quantum of business. While there is absolutely no doubt that the second aspect has been achieved as is evidenced by the phenomenal growth across all classes of business, it is unfortunate that we have been witnessing a great deal of consumer dissatisfaction and the resultant grievances. It calls for a closer analysis of the reasons for such a high incidence of customer grievances; and the ways to redress them.

First and foremost, several customer grievances point towards one reason – that there has been either an insufficient or improper explanation of the product features, thereby leading to a mis-selling. The problem is much more severe in long-term contracts as the policyholder is caught between the two evils of either having to persist with it unwillingly, or to go for an early lapsation – a tough call in either case. The introduction of product literature, salient features document etc. does not seem to have addressed this problem sufficiently. Insurers should put in place measures to tackle this bothersome issue so that the quality of their business registers worthwhile improvement.

In the case of non-life insurance, the limitations associated with the acceptance of the risk must clearly be explained upfront so that the policyholders understand the coverage clearly. The important features like deductibles, exclusions etc. must specifically be made known to the client – especially the retail policyholder – well in advance, in order to obviate the possibility of their disillusionment later. There must also be visible urgency in attending to the contractual

requirements so that the policyholder is given to understand the insurer's sincerity, rather than acting at one's leisurely pace.

'Grievance Management in Insurance' is the focus of this issue of the **Journal**. Mr. P.C. James opens the debate with his article 'Managing the Pain Points for the Customer' in which he identifies the various issues that could lead to customer grievances and the ways in which to deal with them. In the next article, Mr. Bhargav Dasgupta exhorts the nature of consumer philosophy with regard to non-life contracts; and the importance of creating an environment that could lead to an overall consumer satisfaction. Health insurance has always been in limelight for providing a platform for debatable issues. Ms. Anjana Agarwal takes up a discussion on various grievances that could arise in the domain. In order that there is appeasement of the consumer's plight, the regulator has taken up several measures lately. Ms. Yegnapriya Bharat gives a vivid account of the working of these initiatives; and how considerable progress has been achieved in its light.

In the 'follow through' section, Mr. Avinash Singaraju throws light on the fraudulent tendencies that have been associated with the insurance industry globally; and on how they have come to be treated by insurers and supervisors. In the last article, Mr. Som Majumdar talks about the importance of Knowledge Process Outsourcing and its applicability in the insurance industry in a modern economy – in the 'thinking cap' section.

As has been the trend of late, the response to 'Grievance Management in Insurance' has been great; prompting us to focus once again in the next issue of the **Journal** on this very vital aspect of insurance business.

U. Jawaharlal

Report Card: LIFE

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

Sl No.	Insurer	Premium u/w (₹ in Crores)		No. of Policies / Schemes		No. of lives covered under Group Schemes			
		August 11	Upto August, 11	August, 11	Upto August, 11	August, 11	Upto August, 11	Upto August, 10	
1	Bajaj Allianz	37.30	144.63	312.29	4101	39160	13968	75107	42696
	Individual Single Premium	89.59	354.82	769.25	80585	578137	15	4052622	7718061
	Individual Non-Single Premium	18.43	75.84	30.47	76	632	790136		
	Group Non-Single Premium	28.86	142.19	121.31					
2	ING Vysya	1.74	9.40	0.03	206	3			
	Individual Single Premium	50.64	179.37	208.70	19342	88811	7	192	806
	Individual Non-Single Premium	0.08	0.90	4.23	0	0	0	0	138
	Group Non-Single Premium	0.00	0.00	0.21	0	0			
3	Reliance Life	36.89	87.72	97.80	4285	17221	50485	698087	398113
	Individual Single Premium	72.61	352.06	1021.13	66772	981755	14971	117502	57923
	Individual Non-Single Premium	4.52	20.12	17.05	20	97			
	Group Non-Single Premium	9.91	49.51	70.14	15	66			
4	SBI Life	134.77	480.68	340.95	11483	34424	33065	97852	166874
	Individual Single Premium	149.58	502.54	1006.22	67358	214734	137866	302812	249884
	Individual Non-Single Premium	147.84	1019.41	887.55	11	52			
	Group Non-Single Premium	17.05	46.02	155.37	26	22			
5	Tata AIG	10.61	59.15	88.65	841	11724	10737	46781	22132
	Individual Single Premium	46.73	236.09	351.70	22912	218959	47702	237969	100770
	Individual Non-Single Premium	5.11	22.83	11.98	0	6			
	Group Non-Single Premium	16.99	50.62	49.92	18	42			
6	HDFC Standard	18.49	93.27	49.58	6298	14303	135370	357836	78736
	Individual Single Premium	195.78	774.60	1162.09	44968	190088	84	1268	94688
	Individual Non-Single Premium	72.21	163.54	3.23	33	76			
	Group Non-Single Premium	19.34	101.90	156.63	0	43			
7	ICICI Prudential	21.15	129.07	6.93	993	8612	72637	743887	1070209
	Individual Single Premium	207.29	776.95	2082.45	91558	484255	47873	396646	319465
	Individual Non-Single Premium	101.94	241.41	86.93	16	77			
	Group Non-Single Premium	51.33	355.05	414.82	0	15			
8	Birla Sunlife	13.36	38.45	8.84	285	840	62	382	541
	Individual Single Premium	103.61	424.30	757.13	64846	286138	32861	328512	277890
	Individual Non-Single Premium	0.38	2.02	2.14	0	1			
	Group Non-Single Premium	21.82	102.88	139.53	23	100			
9	Aviva	2.37	17.12	16.60	747	3181	235	1541	1318
	Individual Single Premium	29.55	140.98	255.82	11016	47768	-47109	-342372	889155
	Individual Non-Single Premium	0.11	0.44	0.22	0	1			
	Group Non-Single Premium	1.340	96.71	20.08	11	53			
10	Kotak Mahindra Old Mutual	23.83	86.75	26.67	1293	5868	105610	337561	147727
	Individual Single Premium	26.25	121.69	317.74	12176	51006	163800	694568	655452
	Individual Non-Single Premium	10.53	47.06	39.16	8	21			
	Group Non-Single Premium	9.60	76.40	57.96	48	313			
11	Max New York	18.07	88.68	84.29	-13	370	2137	30440	1069348
	Individual Single Premium	93.63	528.33	635.14	35678	212202	485476	2279328	5925154
	Individual Non-Single Premium	7.83	35.24	9.04	0	13			
	Group Non-Single Premium	4.38	22.92	42.21	58	453			
12	Met Life	28.20	55.88	45.55	2191	4256	1466	6703	3603
	Individual Single Premium	28.20	122.31	190.86	9122	55171	138718	447629	1027765
	Individual Non-Single Premium	0.78	3.64	6.82	0	4			
	Group Non-Single Premium	3.40	22.14	13.61	162	262			

13	Sahara Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	2.14 2.98 0.00 0.00	7.58 12.34 0.00 0.00	17.23 20.34 0.00 0.00	462 4162 0 0	1685 16739 0 0	4210 23265 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
14	Shriram Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	23.83 8.71 6.46 0.75	80.32 39.96 33.60 2.20	87.27 85.90 22.91 2.50	3160 7627 0 1	9950 33486 4 4	10148 37796 4 4	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
15	Bharti Axa Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.02 12.86 2.11 0.00	0.61 63.20 10.08 0.00	2.96 169.79 7.52 0.00	5 8839 0 0	109 39056 1 0	1872 67054 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
16	Future Generali Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	2.42 17.75 0.00 3.65	10.55 86.93 0.17 8.57	4.08 129.20 0.10 11.65	343 11770 0 15	1501 50546 1 50	442 106602 39 39	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
17	IDBI Federal Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	10.38 14.63 0.00 1.44	46.34 51.27 0.00 6.22	36.56 97.87 0.00 0.59	618 5785 0 0	2740 21044 0 15	5716 34223 0 8	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
18	Canara HSBC OBC Life Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	0.01 41.87 0.21 44.65	0.04 184.86 1.88 76.72	4.88 299.67 9.91 0.00	0 5569 0 2	1 25222 1 4	230 47271 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
19	Aegon Religare Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	1.06 14.22 0.03 0.00	9.85 56.86 0.27 0.00	4.01 81.50 0.28 0.00	103 5433 0 0	513 21609 0 0	280 24670 0 0	0 0 0 0	0 0 0 0	0 0 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	0.56 5.20 0.00 0.00	5.12 28.84 0.00 0.00	0.74 27.58 0.00 0.00	94 4209 0 0	566 19759 0 0	102 11647 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
21	Star Union Dai-ichi Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	21.46 19.57 3.91 0.06	100.65 66.92 23.24 3.17	92.53 80.28 16.21 2.64	1535 11593 0 0	6889 32280 8 8	6035 25359 22 22	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
22	IndiaFirst Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	13.77 6.42 1.35 61.51	109.25 36.20 8.45 64.65	65.21 103.42 2.08 0.38	1041 4035 1 6	8622 17383 25 25	4543 35928 3 3	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
22	Edelweiss Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium Private Total	0.00 0.18 0.01 0.00 0.00	0.00 0.32 0.01 0.00 0.00	0 0 0 0 0	0 97 1 0	0 164 1 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
22	Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	422.42 1237.86 383.84 308.14	1661.10 5141.74 1710.14 1227.89	1393.65 9853.81 1157.83 1259.56	40071 595452 100 461	144086 2698950 451 1817	189195 4535417 333 1949	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
23	LIC Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium Grand Total	786.40 1802.08 7440.28 1476.87	4804.97 8048.93 12525.53 5532.88	15827.61 8633.64 6970.34 7652.96	124897 2403674 1977 454	791307 9753663 7097 2152	2564791 9675658 8312 248	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0
	Individual Single Premium Individual Non-Single Premium Group Single Premium Group Non-Single Premium	1208.82 3039.94 7824.12 1785.01	6466.07 13190.67 14235.67 6760.77	17221.25 18487.45 8128.17 8912.52	164968 2999126 2077 915	935393 12452613 7548 3969	2753976 14211075 8645 2197	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0	0 0 0 0

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

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

Circular

Ref:IRDA/NL/CIR/HLTH/207/09/2011

Date: 06.09.2011

Servicing of Health Insurance Schemes offered by Bodies other than Insurance Companies

1. With a view to enhancing policyholders' services for health insurance, the IRDA had conceptualized the Third Party Administrator (TPA), as an intermediary. The IRDA thought it appropriate to define such an intermediary and permit them to operate as an insurance intermediary on a strength of a license to operate issued by the IRDA. The TPAs play an important role in delivering health insurance in a seamless manner to a policyholder.
2. In order to effectively regulate the functioning of a TPA, the IRDA has brought out the Third Party Administrator Health Services Regulations, 2001.
3. Under Regulation 2(d) "Health Services" means all the services to be rendered by a TPA under an agreement with an insurance company in connection with "health insurance business" or 'health cover' as defined in regulation 2(f) of the IRDA (Registration of Indian Insurance Companies) Regulations, 2000, but does not include the business of an insurance company or the soliciting, directly or through an insurance intermediary including an insurance agent, of insurance business.
4. Under Regulation 2 (e) "TPA" means a Third Party Administrator who, for the time being, is licensed by the Authority, and is engaged, for a fee or remuneration, by whatever name called as may be specified in the agreement with an insurance company, for the provision of health services;
5. Under Regulation 3 (2) the main or primary object of the company shall be to carry on business in India as a TPA in the health services, and on being licensed by the

Authority, the company shall not engage itself in any other business.

6. Under Regulation 4 (1) The TPA shall obtain from the Authority a licence to function as a TPA for rendering health services.
7. From the above, it is clear that a TPA can offer its services only to an insurance company and to no other body.
8. In 2005, some of the TPAs represented to IRDA to permit them to offer these services to bodies other than insurance companies such as Central and State Governments. Even though, such permission was not entirely on all force with the provisions of the Regulations, the IRDA considered that the number of such schemes being extended by Central and State Governments was very small and consequently the IRDA in December 2005, had issued a circular conveying that it has no objection to TPAs undertaking the servicing of non insurance healthcare schemes promoted, sponsored and approved by Central or State Governments.
9. Since the issuance of the circular dated 16 December 2005, the gross written premium of health insurance in India has increased from ₹1535 crores to ₹11145 crores (provisional) as at the end of 31st March 2011. The Central Government and several State Governments have also introduced large insurance based health schemes such as the RSBY of Central Government, the Arogyashri scheme of the Government of Andhra Pradesh etc. In all these schemes the risk bearer is the insurance company which has been awarded the contract after following appropriate and transparent system as decided by the respective governments. Given the growth of the health insurance sector it is important that the systems in place for servicing the health insurance should be dynamic and effective

- in order to ensure the orderly growth of the health insurance business in India.
10. Lately, some Governments have issued tenders calling for the direct servicing by TPAs of health schemes promoted by them. Such schemes would not fall within the regulatory regime of the IRDA, as the risk carrier namely the Government is not subject to regulatory oversight of the IRDA.
 11. Given the growth and likely future growth of the health insurance industry, there would be a regulatory burden with considerable reputation risk to the institutions and the industry, in the event of any act of omission and commission by any intermediary if acting directly as agent of the Government.
 12. In the above circumstances, the circular dated 16th December, 2005 is withdrawn with immediate effect. It is hereby notified that the Licensed TPAs cannot enter into arrangements for servicing health schemes promoted, sponsored or approved by any non-insurance body including Central, State, Local Governments, Firms, Corporates etc. during the subsistence of the TPA license granted by the IRDA.
 13. If anybody currently licensed to operate as a TPA in India is desirous of offering such services to schemes promoted, sponsored or approved by any body other than insurance companies, then such a TPA shall first surrender its TPA license and remove itself from the regulatory purview of the IRDA and thereafter may pursue such course of action as it deem appropriate. It may be noted that on surrender of license, the body shall not carry the word TPA in its name.
 14. With respect to existing contracts, if any, that a TPA may have entered into on the basis of no objection issued in 16th December 2005, it is clarified that such contracts may continue to be serviced till the expiry of the contract period only without any further renewal.
 15. Where the TPA is desirous of offering such services to schemes promoted, sponsored or approved by anybody other than insurance companies, then before they surrender license, they shall service the remaining period mentioned in the agreement or honor the period given under the Termination clause or three months, whichever is higher.
 16. The insurers shall obtain a specific undertaking in the agreements/ endorsement to the existing agreements with appropriate clause that the TPA has not entered into any arrangement for servicing health schemes promoted, sponsored or approved by any non-insurance body prior to engaging or continuing to engage their service.
 17. The TPAs shall report to the IRDA the details of such contracts as might exist, within 15 days from the date of issuance of this circular. Further, if the TPA does not report existing contracts, if any, within the time prescribed, then it will be deemed that it has no such contracts. If at a later date, such contract is found to be in operation then the license of the TPA will be cancelled forthwith.
 18. The Insurance Companies shall not renew contracts with TPAs who are in breach of the above directions. All Insurance Companies are directed to ensure that the TPA with whom they seek to enter or have entered into an agreement to render "Health Service" do not have any similar arrangement after the issuance of this Circular for servicing parties other than insurance companies and shall obtain a specific undertaking as stated in # 16, prior to engaging or continuing to engage their services.

Sd/-
(J. Hari Narayan)
Chairman

To All Non Life Insurers

Ref:IRDA/HLT/MISC/CIR/209/09/2011

Date: 09.09.2011

Health Insurance Portability

The IRDA, vide circular dated February 10, 2011, had issued guidelines on portability of health insurance policies which was to be introduced from 1st July 2011. Subsequently, on 24th June 2011, it was felt necessary to put in place a system to enable collection of data on the history of health insurance and monitoring the transfer of records of the porting policy holder. In that context, it was decided that the implementation of portability of health insurance policies would be mandated to commence no later than 1st October 2011. In continuation of the above guidelines, the detailed procedure on health insurance portability shall be as set out in these guidelines.

1. In these guidelines, the following terms shall carry the meanings as assigned to them.
 - 1.1 **Portability:** Portability means the right accorded to an individual health insurance policyholder (including family cover) to transfer the credit gained by the insured for pre-existing conditions and time bound exclusions if the policyholder chooses to switch from one insurer to another insurer or from one plan to another plan of the same insurer, provided the previous policy has been maintained without any break.
 - 1.2 **Break in policy:** A break in policy occurs when the premium due on a given policy is not paid on or before the premium renewal date or within 30 days thereof.
2. All policyholders are hereby vested with the right of portability, i.e., policyholders have the right to purchase a Health Insurance Policy from another insurer from amongst the products such insurer is marketing and the right will be limited to transfer of the period gained in the existing policy (ies) which would account towards PEDs and the time-bound exclusions of the new policy.
 3. A policyholder desirous of porting his policy to another insurance company shall apply to such insurance company at least 45 days before the premium renewal date of his/her existing policy.
 - 3.1. The Insurer may not be liable to offer portability if policyholder fails to approach the new insurer at least 45 days before the premium renewal date.
 - 3.2. The insurer may consider a proposal for portability even if the policyholder fails to approach the insurer at least 45 days before the renewal date, it may be free to do so.
 - 3.3. Where the outcome of acceptance of portability is still waiting from the new insurer on the date of renewal:
 - 3.3.1 the existing policy shall be allowed to extend, if requested by the policyholder, for the short period by accepting a pro-rate premium for such short period, which shall be of at least one month and
 - 3.3.2 shall not cancel existing policy until such time a confirmed policy from new insurer is received or at the specific written request of the insured
 - 3.3.3 the new insurer, in all such cases, shall reckon the date of the commencement of risk to match with date of expiry of the short period, wherever relevant.
 - 3.3.4 if for any reason the insured intends to continue the policy further with the existing insurer, it shall be allowed to continue by charging a regular premium and without imposing any new condition.
 4. On receipt of an application for porting, the insurance company shall furnish the applicant, the Portability Form as set out in Annexure 'A' to these guidelines together with a proposal form and relevant product literature on the various health insurance products which could be offered.
 5. The policyholder shall fill in the portability

form along with proposal form and submit the same to the insurance company.

6. On receipt of the Portability Form, the insurance company shall address the existing insurance company seeking necessary details of medical history and claim history of the concerned policyholder. This shall be done through the web portal of the IRDA within 7 working days of the receipt of the Portability form.
7. The insurance company receiving from another insurance company a request for relevant data shall furnish the requisite data in the data format for porting insurance policies prescribed in the web portal of IRDA within 7 working days of the receipt of the request.
8. On receipt of the data from the existing insurance company, the new insurance company may underwrite the proposal in accordance with its underwriting policy as filed by the company with the Authority in accordance with clause 6 of IRDA Form R2 of IRDA (Registration of Indian Insurance Companies) Regulations, 2000 and clause 14-15 of F&U Guidelines (circular no. 021/IRDA/F&U/Sep. 06 dated 28th September 2006), and convey its decision to the policyholder in accordance with the Regulation 4 (6) of the IRDA (Protection of Policyholders' interest) Regulations, 2002.
9. If on receipt of complete information and data within the above time frame, the insurance company does not communicate its decision to the requesting policyholder within 15 days then the insurance company shall not retain the right to reject such proposal and shall have to accept the proposal.
10. Portability shall be allowed in the following cases:
 - 10.1 All individual health insurance policies issued by non-life insurance companies including family floater policies
 - 10.2 Individual members, including the family members covered under any group health insurance policy of a non-life insurance company shall have the right to migrate from such a group policy to an individual health insurance policy or a family floater policy with the same insurer. One year thereafter, he/she shall be accorded the right mentioned in 10.1 above.
11. For any health insurance policy, waiting period with respect to pre-existing diseases and time bound exclusions shall be taken into account as follows:-

S. No	No of years of continuous insurance cover with previous insurer (s)	Waiting period to be served with new insurer in number of days/years				
		YY Days	1 Year	2 years	3 years	4 years
I.	XX Days at inception (XX-no of days as per the policy document)	(YY-XX) Days	N/A	N/A	N/A	N/A
II.	For 1 year period exclusion:					
	1 year	N/A	Nil	1 Year	2 Years	3 Years
III.	For 2 year period exclusion:					
	1 year	N/A	Nil	1 Year	2 Years	3 Years
	2 years	N/A	Nil	Nil	1 Year	2 Years
IV.	For 3 year period exclusion:					
	1 year	N/A	Nil	1 Year	2 Years	3 Years
	2 years	N/A	Nil	Nil	1 Year	2 Years
	3 years	N/A	Nil	Nil	Nil	1 Year
V.	For 4 year period exclusion:					
	1 year	N/A	Nil	1 Year	2 Years	3 Years
	2 years	N/A	Nil	Nil	1 Year	2 Years
	3 years	N/A	Nil	Nil	Nil	1 Year
	4 years	N/A	Nil	Nil	Nil	Nil

Note 1: In case the waiting period for a certain disease or treatment in the new policy is longer than that in the earlier policy for the same disease or treatment, the additional waiting period should be clearly explained to the incoming policy holder in the portability form to be submitted by the porting policyholder.

requested by the insured, to the extent of cumulative bonus acquired from the previous insurer(s) under the previous policies.

For e.g. - If a person had a SI of ₹2lakhs and accrued bonus of ₹50, 000 with insurer A; when he shifts to insurer B and the proposal is accepted, insurer B has to offer him SI of ₹2.50lakhs by charging the premium applicable for ₹2.50 lakhs. If insurer B has no product for ₹2.50 lakhs, insurer B would offer the nearest higher slab say ₹3 lakhs to insured by charging premium applicable for ₹3 lakhs SI. However, portability would be available only up to ₹2.50lakhs.

12. The portability shall be applicable to the sum insured under the previous policy and also to an enhanced sum insured, if

Sd/-
(J. Hari Narayan)
Chairman

Portability Form

Part-I	
1)	Name of the Policyholder / insured (s)
2)	Date of Birth/Age
3)	Address of the policyholder/insured
4)	Details of existing insurer i. Name of the product ii. Sum Insured iii. Cumulative Bonus iv. Add-ons/riders taken v. Policy number
5)	Details of the proposed insurance i. Name of the product proposed/intend to take ii. Sum Insured Proposed iii. Whether Cumulative Bonus to be converted to an enhanced sum insured
6)	Reason(s) for Portability
7)	No. of family members to be included in the policy to be ported:
Enclosure: Photocopy of the existing policy documents	
Date: Signature of the policyholder	

Part - II

- Whether the PED exclusions / time bound exclusion have longer exclusion period than the existing policy: (Please indicate Yes / NO):
- If yes, please give written consent to the declaration below:

"I am aware that the waiting period for the following disease(s)/treatment(s) is days/years more than the previous policy terms. I hereby agree to observe the additional waiting period for the following disease(s)/treatment(s)



Signature of the policyholder

Address

Date: 14.09.2011

Contact information:

To enable effective monitoring of Policyholder protection Regulations and Grievance Guidelines and Turn around times thereby mandated, as well as to create a central repository of industry-wide insurance grievances' data, IRDA has implemented the **Integrated Grievance Management System (IGMS)**. IGMS provides a gateway for policyholders to register complaints with insurance companies first and if need be escalate them to the IRDA Grievance Cells. IGMS is a comprehensive solution which not only has the ability to provide a centralized and online access to the policyholder but complete access and control to IRDA for monitoring market conduct issues of which policyholder grievances are the main indicators. It uses Web interface to ensure that it is accessible at all places and is on real time. It has also a mechanism to capture complaints received in physical as well as email form or voice calls received by IRDA Grievance Call centre (IGCC).

IRDA Grievance Call Centre (IGCC) can be accessed through toll free number 155255 for voice calls complaints@irda.gov.in

The IGCC also provides details of the redressal systems of insurance companies whenever policyholders require them. Further, the IGCC also educates policyholders about the

Insurance Ombudsman who provides a channel for fair disposal of complaints falling within the jurisdiction laid down.

How IGMS works: Policy holder needs to login in to www.igms.irda.gov.in and create a profile for registering a complaint. Policy holders can register one or more complaints. Once the policy holder registers in to IGMS then details of complaint are passed on to respective insurance companies. Policy holder can see the details of the branch offices of the insurance company while registering the complaint. Policy holder receives the confirmation email after registering the complaint along with IRDA token no which will be used by IRDA and Insurance Company for tracking of the complaint through IGMS. A complaint registered through IGMS flows to the insurer's system as well as the IRDA repository. If the complainant is not satisfied with the resolution provided by Insurer, he/she can escalate the complaint for a review by IRDA for a potential violation of Regulations. All the transactions between the Insurer, Insured and Remarks by IRDA are visible to the complainant.

Address for communication for complaints by paper/fax: Consumer affairs Department, Insurance Regulatory and Development Authority, 9th Floor, United Towers, Basheer bagh, Hyderabad-500 029 Fax 91-40- 66789768

Address

Ref:IRDA/Life/GDL/GLD/217/09/2011

Date: 20.09.2011

Modification of Guidelines for Individual Agents for Persistency of Life Insurance Policies - IRDA Circular Ref: IRDA/CAD/GDL/AGN/016/02/2011 dated 11th February, 2011.

Reference is invited to the captioned circular issued by the Authority. The Authority is in receipt of representations from the Industry seeking revisiting of certain provisions of the said circular. Accordingly, keeping in view the objective of ensuring higher levels of persistency of life insurance policies as also conserving the agency force, the Authority issues the following modifications.

1. Requirements on Persistency: The Average persistency rate is uniformly set as 50% which is to be reckoned only on number of policies.
2. Policies to be exempted: While arriving at the persistency rate, Policies with 'Auto Cover' feature embedded as per File & Use approval may be treated as in force during the said 'Auto Cover period'. Further all the policy exits by way of death, maturity and in-force surrenders may also be exempted in determining the exposure to persistency calculation.
 - a. Explanation: 'Auto Cover Period' for the purpose of these guidelines is the period during which the policy feature, that continues the life insurance coverage of the life assured for a pre-determined period despite non receipt of renewal premium that is due, becomes operative.
3. Transfer of Agent from one insurer to another: The request for transfer of insurance agency from one Life Insurance Company to the other shall be considered only if the average persistency rate of the agent is at least 50% on the date of

application of such transfer. The Persistency Rate shall be on a pro-rata basis and rounded off to the nearest decimal where the financial year is not covered in full. On effecting the transfer, the average persistency rate of 50% shall be reckoned on the policies sold with the new insurer (transferor).

4. Deferred Commission and Servicing of Orphan Policies: The payment of deferred commission pertaining to the original agent is not allowed to the new agent to whom the servicing of policies is transferred. The payment of 50% of eligible commission to the new agent on the premiums procured by him in respect of such policies transferred shall be strictly in accordance with the provisions of Section 40 (2A) of Insurance Act, 1938.
5. Relatives of the employees of Insurers: For the purpose of the Guidelines under reference, the term relatives is re defined as "spouse, dependent children or dependent step children, whether residing with the employee or not". This clause is applicable only in respect of agents who are licensed or whose agency is transferred to another insurer on or after 01st July, 2011.
6. Effective Date: The persistency rate requirements will be effective for all agency renewals that are due from 01st July, 2014.

All other provisions of the captioned circular are 'mutatis mutandis' applicable as outlined therein.

Sd/-
(G Prabhakara)
 Member (Life)

Need for Greater Progress

- Policyholder Grievances

'Although several bottlenecks in rendering efficient services have been overcome, the Indian insurance industry still suffers from a high incidence of grievances that needs a closer attention' mentions U. Jawaharlal.

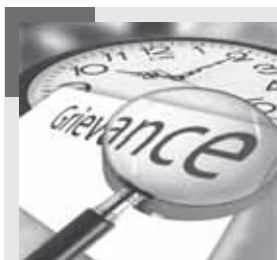
Continuing with our debate on grievances, there are different ways of looking at a consumer's grievance – ranging from a genuine grievance arising out of a deficiency of service, to the manifestation of one's frustration over an avoidable non-issue. While the grievances of the second kind can be managed by counselling, hand-holding etc., there is a dire need to take a serious look at the genuine grievances of customers. Ideally, if both the parties to the contract are totally at agreement with the reciprocal obligations and their fulfilment, there is hardly any space for deficiency of service. In the domain of financial services in general, and insurance in particular; this is one aspect that is hard to achieve. This compels us to analyse the various types of grievances, and take stock of the situation in ensuring that there is discernible progress over a period of time.

In insurance, rendering a service to the client commences at the stage of solicitation itself when the insurer offers to bring the prospect into its fold; and in this regard, the competitive market plays a very vital role. If one of the players holds an ill-reputation for disservice, it is unlikely that he would pose a challenge for the competitors in acquiring business. Especially in a world where communication is very fast, such negative trends of functioning would have a serious impact on the

business interests of the players. In order to obviate such a scenario, there must be continuous analysis of the reasons for customer grievances; and wherever necessary, put in place methods to ensure that such grievances do not recur.

Apart from mis-selling which continues to be a very commonly reported reason for customer grievances, some other frequently observed areas of operation where insurers need to concentrate are: Claims Management, Premium notices, Change of address and other administrative services etc. in the life sector; and surveyor-related issues, amount of claims, extent of coverage etc. in the non-life domain. Special attention must be paid to such of those areas where press reports, courts and other consumer bodies often comment about the poor service rendered. The adoption of technological support wherever possible and necessary, must be quickly accomplished as it would certainly add to the levels of efficiency in customer service. While there is no doubt that there has been great progress in this regard, the extent of customer dissatisfaction still existing in the insurance domain leaves a lot to be desired. Insurers must ensure a major turnaround in this area, sooner than later.

'Management of Grievances' will be the focus of the next issue of the **Journal** once again; and it would be our endeavour to explore new areas.



'Management of Grievances'

in the next issue...

Managing the Pain Points for the Customer

- The Insurance Value Chain

P. C. James observes that efficient grievance handling is one factor that certainly adds value to the insurer; and insurers should strive to achieve genuine redressal rather than merely fulfilling the formality.

Insurance is a service, where contract certainty (the promise made is adhered to), and financial indemnification (assured payment is made to the extent of covered loss), are essential in creating value. Given that even normal insurance purchase tends to produce

anxiety for the buyer, customer confidence building is possible only when insurers free the customer from the many potential pain points that can arise for the customer across the insurance value chain.

A non-life insurance value chain from the customer viewpoint may be as seen as shown below:



1. Advice and Sales

The advice and sales area is rife with pain points which ultimately results in misselling and loss of confidence in insurance services per se. The starting point is misleading, improper or ignorant advice. Therefore an insurance advisor or sales person, who may be an in-company employee, an external tied agent, a corporate agent or a broker, needs to be trained (not merely in mandated training), but in rendering trust building advice which needs perceptive product knowledge in the context of customer's life cycle moment – in terms of economic, demographic, social, life cycle, or other vulnerability contexts; keeping in mind the level of risk aversion that the customer has. The insurance advisor must be guided by the underwriter in assuring the contextualization of risk for the customer and offering a suitable product. Insurance is not to be hard sold today, but to be discussed in the risk milieu of the customer and the financial planning needed to meet the life situation of the customer. The context of insurance is primarily risk transfer for the customer, not investment or covering loan

'risks' and so on. However, many of the sales and advice teams do not see customer needs in terms of customer good only, but push products in terms of the urgencies of the insurer, the commission returns for the intermediary and the concerns of other stakeholders such as lenders and so on. So the concept of 'treating customers fairly', needs to become an active concept from the starting of the relationship itself.

The second aspect is the offer that the customer needs to make to the insurer and the disclosures on risk that needs to be elicited so that the insurer has all relevant information as disclosed by the customer to understand the real risk exposures, so as to fashion the right product and price point for the customer. The intermediary needs to play the lead role in preventing attempt at fraud, non-disclosure and misrepresentation so that genuine customers can be served better and wrong costs are not added to the insurer pool. Thus the intermediary service is vital in removing knowledge and service asymmetries for both the contracting parties as under:

Insurance is not to be hard sold today, but to be discussed in the risk milieu of the customer and the financial planning needed to meet the life situation of the customer.

VALUES THAT INTERMEDIARIES OFFER

To the Customer	To the Insurer
Consumers to be motivationally pushed as they may not enjoy buying insurance	Insurer aided to attract good risks by reducing the knowledge asymmetry between insurer and the insured.
Advises the right products and the methods to determine the best buy and remove the search costs for the insured	Makes pricing of risks far more accurate, by distinguishing the risks as per the risk categories made by the underwriters
Explains the complex language of insurance and reduces the uncertainty costs of the insured	Reduces the frictional costs that can arise out of asymmetric information
Intermediaries reduce the procedural hassles involved as also the complexity costs involved.	The intermediary brings to the table the behavioural aspects of the insured's risk
They help insured in additional services such as endorsements, renewals, refunds etc. to enhance the value of the coverage.	Intermediaries match buyer needs with insurer's products and also give feedback on customer demands and aspirations
In claims the insured needs all the hand holding he can get to speed assessment and settlement.	The intermediary helps to communicate insurer requirements in case of claim and to help in speedy settlement of the claim
They evaluate customer needs and help to sell the full line of products based on life cycle and occupational needs.	Intermediaries provide the full information required to help proper underwriting and rating.
They can make transparent the product and how it provides the security as needed by the customer.	They help to carry out research, test and develop new products, or new services.
The intermediary can offset the actuarial mind-set of an insurer who may treat insureds as a mere risks to be rated.	They help insurer competitiveness by collection of risk specific or general information.
They help customers to trade up to better products when made available	They assist in policy renewal and the lifelong retention of the customer
They offer relevant risk management, informational, and relational services to the insured	They give feedback on the quality of service rendered by the insurer.

An underwriter's aim is to prevent, reduce and transfer risk; and therefore take stock of the frequency and size of claims, and to tackle any unnecessary costs in the service of insurance.

2. Underwriting

Underwriting is the most important service that helps insured customers in analysing and understanding their risks; and good underwriters can help them to minimise their risks through better risk management based on compliance to warranties and conditions; and obtain a price based on the merit of the risk to be insured. Here the pain points can be many arising from numerous occasions for errors that significantly affect the validity and utility of the cover due to inaccuracies and omissions creeping in the underwriting assumptions made, the rating approach and the many limitations set in the policy. The type of cover given, the width and depth of coverage, the relevance of the exclusions, conditions and warranties make underwriting service very value oriented. An underwriter's aim is to prevent, reduce and transfer risk; and therefore take stock of the frequency and size of claims, and to tackle any unnecessary costs in the service of insurance. By doing this, insurers help to bring down the cost of insurance, grow markets, and improve customer experience in the mastery of risk. The underwriting process helps the underwriter to be familiar with the peculiarities of the risk to be accepted and how potential losses can arise; and to what extent the onus can be put on the insured to take steps to prevent the occurrence of a loss, so that the loss probability of the matter insured is equal to the risk premium charged.

Real service in underwriting is the possibility of introducing scientific risk rating factors based on IT platforms to ensure that more and more factors relevant to the risk are introduced so that the best merit rating possible can be offered to the insured using real time data bases. The practice of redlining or rejecting or improper loading of rates based on arbitrary reasons becomes serious pain points for customers and is against legal, regulatory and actuarial rulings and principles.

3. Policy Administration and Service

This is an area where the logistical services of the insurer need to be efficient and the process

flow error free. Scrutiny of the proposal, acceptance of the premium, issuance and checking of the policy with relevant clauses, conditions and exclusions, adding the names of nominees or others interested in the policy such as the bank, despatching the policy to the insured in time, sending a copy of the proposal form back to the insured, amendments to the policy, making available channels for the further guidance to the insured etc. form part of the policy administration and service.

Toll free call numbers, FAQs on websites, 'dos and don'ts' for the customer while the policy cover is running are some of the services that are given to ensure that customers can manage the tenure of the policy against any error or misunderstanding. In this regard the use of vernacular in policy language along with the original version in English is also a definite value addition. In the logistics of service insurers are injecting (and need to inject even more) technology and IT services to get services rendered hassle free and to the extent possible cost free. Anywhere, anytime service, past history of insurance coverage and claims, and benefit entitlements like no claim bonus or discounts, better hand holding during times of claims etc. are issues on which customers will seek instant services and relief. Similarly small customers will not get ignored or elbowed out if technology aids them in self-service, co-creation of relevant product packages and in reporting their requirements on electronic platforms so as to get instant service.

4. Renewal Service

In General insurance, renewal service is the most important service, as most policies are annual (because for very important reasons it is not possible to give long term policies) but the insured requires lifelong protection. Health insurance of the non-life variety, for instance, is always considered a lifetime protection, but given annually, because of the complexities of medical inflation, change in risk profiles, the rise of new conditions which need treatment and other factors. So also is Liability insurance, because such insurance is long tailed and

subject to legal and social inflation, sudden dramatic changes in court rulings etc. In all other insurances also there are many reasons as to why annual policies are preferable to long term policies.

In such circumstances, renewal service is of utmost importance and every effort must be taken to contact the insured by letter, email, over phone or by sms. It was expected that agents would personally hand over renewal notices and take the premium cheque but it is natural for the insurer to establish direct contact to avoid any service failure and especially so when the renewal terms may undergo change, such as increase in premium rates; changes in terms and conditions; other changes may be made by the company, by the industry or as directed by courts, the regulator and so on. Management of renewal can remove many pain points such as gaps in insurance, updating of insured details, changes in the risk details, revision of sum insured, upgrading the policy coverage, taking on new add ons and so on. Even though under policy terms and conditions there may be no obligation to renew or invite to renew, there are increasing moral and regulatory compulsions to ensure that proper renewal services are offered as foundational to ensure lifelong coverage service to the customer.

5. Claims Service

In the context of insurance, everyone is afraid of the failures in claim service as the focus of insurance is on protection in case of the unforeseen eventuality of claims. Even good customers, who try to avoid losses and not claim, if claims are within their tolerance, have nightmares about claim service. Insurers need to check as whether the body language of the company changes, when a claim arises. This need not be so, as good underwriting is supposed to forecast the claim frequency and severity to a large extent in a normal year. Insurance presupposes the fact that what may be uncertain to an individual is more certain when there are large numbers and this is how

claims are forecasted based on past experience tempered with current realities.

A bad perception about a company's claim service attitude can damage irreparably a company's brand equity and reputation. In claims there are two types of urgencies – time and correctness of the settlement. Insurers are fixated about reducing the claims outgo and in the process they let go the time urgencies felt by the insured and those others like banks that are waiting for the loss amount to restart the economic activity impaired. Where customers understand that the final amount to be paid may take time, they would be highly relieved if an 'on account' payment can be released because it makes it clear that liability has been admitted and the initial finance to restart operations can be had. A new claims service which is emerging as important is pre-authorisation in case of Health insurance and other insurances where repairs have to be undertaken. Pre-authorisation existed in the olden days for Motor, and this service needs to be enhanced because 'cashless' treatment for Health and repairs for Property is always desirable to customers. To compel insureds to make out of pocket payments when they are cash strapped is always considered to be against equity.

The important intermediaries in the claims arena are surveyors/loss adjusters and Third Party Administrators (for Health insurance) and their role and service capability are of utmost importance in customer assistance in times of shock and financial hardship. Accordingly they need to be monitored for their rectitude in assessments of liability as well as their service willingness to meet customer expectations of speed and timely indemnification. Code of conduct for these intermediaries is given in the regulations and their compliance is essential to bring to the fore the professionalism of the insurance service in times of distress to the purchaser of the service.

From the time of claim intimation to the final payment of the claim cheque, there are many

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Management of renewal can remove many pain points such as gaps in insurance, updating of insured details, changes in the risk details, revision of sum insured, upgrading the policy coverage, taking on new add ons and so on.

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Traditionally, insurers are blamed for not distinguishing between real and technical reasons for denying claims. This is where grievances have a real role for a merit based relook.

processes and requirements on the part of the insurer, intermediary and the insured. Any slackness from any side is bad for the outcome, but the driver of the service is the insurer; and insurer proactiveness is fundamental to this service and insurer commitments are to be made transparent in this area.

There are two types of claims from the perspective of service delivery. It is more or less simple to handle random claims from various customers at various time points. However, there are occasions of great disasters such as floods, earthquakes, etc. where the resources of insurers, surveyors, repairers and public authorities are stretched. Lack of access to the sites of loss, the non-availability of insureds who may have to leave their houses/localities, the lack of sufficient repairers, the higher costs of parts and other logistical problems, the difficulty in obtaining insured's documents and the inability of public authority to record losses for the purposes of claim processing are all part of the hurdles in service. Managing these extraordinary situations calls for insurers/reinsurers and all intermediaries and public authorities to act together and show the resolve to settle such claims quickly to demonstrate commitment to the underlying insurance concept of social solidarity and public good.

Grievance Management

Customer complaints are common in the financial services area. Hence Regulators, Ombudsmen, Consumer Forums and the Judiciary are hard on insurers who fail to honour their commitments by using interpretations that are one sided or rely on the fine print without the application of mind. Grievances can arise in all areas of insurance service, but some of them are routine and can be handled quickly by insurers if tight processes and timelines are maintained in service. However, in the area of claims, renewal service e.g. gap in renewal and in similar issues, there are areas of dispute where insurers may have been unable to take the right decision in

the first instance. However, when the insured comes up with a grievance, the insurer must utilise more experienced people to examine the grievance and take a decision based on the new inputs given by the customer. Traditionally, insurers are blamed for not distinguishing between real and technical reasons for denying claims. This is where grievances have a real role for a merit based relook. Technical reasons have validity when they touch the core areas of the claim but in some cases they are invoked ignorantly or owing poor interpretational capability.

After repeated grievances are reported regarding the same matter, insurers need to examine the root causes that create frequent grievances and take action to remove such causes to prevent the flow of repeating grievances. Grievances are also the feedback mechanism for insurers to sense the emerging pain points and take the opportunity to become proactive to plug them, and to move on from the corrective to the creative. In any industry, innovation and sensitiveness to customers' changing needs are rendered necessary for sustainability and success and is done by deepening, widening and sharpening service offerings. In the emerging area of risk management through insurance, there is still great scope in reaching assured risk mitigating services, and this service offers multi-tier benefits because losses impact individuals and families, the community and local society and the larger political economy. The flow of grievances and customer queries through the many channels of communication to the company should be sieved through for collecting the points for setting new directions for product offering and service standards. Therefore grievance management can emerge as a point for strategic approaches in customer engagement and better customer experiences.

In conclusion, business success is the result of actual customer experience and the resulting customer advocacy based on a day to day excellence in service, proving that the

insurer/intermediary delivers on promises enshrined in the vision and mission of the organisation. So there is a need for holistic investment in achieving positive customer experiences, using the right technology, knowledge power, systems and processes, the right attitude and service culture to power the organisation's service-speak. This must be even more so in case of service failures. The Indian

insurance sector is set to grow by leaps and bounds in the years to come, but its real mettle will be tested in the maturity of organisations to deliver real value and error free service.

The author is General Manager, United India Insurance Co. Ltd.

CORRECTION

In the September issue of the Journal, a printer's devil crept in on Page No.23 (of the printed version); and the article 'Persistency Challenge' by Ms. Shanai Ghosh ended up abruptly without a logical conclusion. We sincerely regret the error; and request our readers to append the following matter at the end of the last sentence. *-Editor*

- In a purely customer driven product such as sale over the net or direct sales where there is a disintermediation, the influencing factors have to be totally weighed towards customers. For other products, tight rope walking is essential while designing product features so that there is 'something in it' for an agent as well as for the customer. This is similar to designing good cricket pitches, which offer some assistance to both the bowlers and the batsmen; so that there is a fair balance.
- Performance Management: Persistency is a part of Key Performance Indicators – (KPI) of all the key functions of an insurance company. Persistency has become a key component for determining variable salary, performance linked bonus and promotion of employees of insurance companies. Persistency is a part of KPI of the actuary for designing an ideal product, a part of KPI of the risk management for initiating risk measures to strengthen persistency, a part of KPI of the sales force who need to adopt the right selling techniques and create adequate awareness amongst customers to ensure that the insurance company achieves the targeted persistency, KPI of the marketing function to create adequate awareness amongst the customers persistently, KPI of the customer service function which resolves the grievances of the customers and positively influences the customers and most importantly a pivotal part of KPI of the retention function whose main focus is to retain customers. Thus an insurance company and its functionaries are expected to think long term and ensure that the relationship with customers is a long term one.

In a nutshell

The persistency challenge though ominous has a fairly simplistic solution which requires hard-work, discipline and perseverance at the ground level. There is no magic wand. The insurers have to focus on educating their customers and agents, ensure that their systems and processes are aligned to the changing needs of customers, creating an ongoing engagement platform for customers and finally integrate persistency into all rewards, recognition and incentive programmes; and give it as much of a pride of place as is reserved for New Business premium. For a market such as India that has witnessed a decade of hyper growth in New Business premium, the new decade and its new challenges of managing growth along with profitability and capital efficiency is already ensuring that insurers are giving persistency the much deserved importance in their day to day operations. With growing customer awareness, we can hope that Life insurance will be bought for the correct reasons and that the post sales services will ensure that customers continue with their policy.

Grievance Redressal and Management in the Non-Life Industry

- The Indian experience

Bhargav Dasgupta asserts that while the non-life industry has grown over the period, the growth is not commensurate with the economic development around; and one possible reason for this imbalance could be the grievances galore in the domain.

Clearly, the numbers suggest that the private non-life insurance companies have widened and deepened the market in terms of reach and product offerings. But the level of insurance penetration at 0.7% of GDP remains a cause for some concern.

"Insurers, while carrying out the business of insurance, shall ensure that the rights and interests of the policyholders arising out of any contract of insurance are duly protected," Insurance Regulatory and Development Authority (Protection of Policyholders' Interests) Regulations, 2002.

Opening up of the Indian insurance sector in 1999 was a landmark event for the Indian consumer. After the successful experiment with new banks in the private sector, the government decided to open up the insurance sector to greater competition from the private sector. The entry of new players has not only brought about reduced prices, but also changed the level of consumer expectations. Consumers have every right to expect a scale improvement in service, quicker turnaround time in the handling of claims, and in general, a wider choice of products at different price points.

A decade down the road, it is time to take stock of the industry's progress. Clearly, the numbers suggest that the private non-life insurance companies have widened and deepened the market in terms of reach and product offerings. But the level of insurance penetration at 0.7% of GDP remains a cause for some concern.

With the Indian economy growing at an 8%-plus rate for the last five years, there is scope for

greater insurance coverage. To make this into a reality, the industry must ask itself if it has met the burden of higher expectations. The nature of the industry is such that the consumer sees the non-life insurance company only in the light of claim settlement, but sources of dissatisfaction/grievance can be traced to any point in the purchase and service cycle.

Industry statistics show that the major sources of consumer grievances arise from:

- Settlement proceeds not received
- Surveyors not reaching on time
- Dispute with Surveyor's assessment
- Dispute on total settlement amount
- Disputes on completion of case documentation
- General disputes on principles: why is the insurance company asking for so many details, paperwork etc.

Irrespective of the source, the industry works with the idea that any communication which expresses dissatisfaction about an action or lack thereof, about the standard of service/deficiency of service of an insurance company and/or any intermediary, needs remedial action. The onus is squarely on the insurance companies for all acts of its agents, intermediaries, employees and any other

person involved in the delivery and service chain. This approach prohibits insurance companies from avoiding liability in case a consumer is dissatisfied for any reason.

While regulations have been pro-active, industry needs to confront itself with the question: has it done enough on its customer service practices, and specifically in dealing with consumer grievances?

Evolution of the Indian model

To be fair, the level of satisfaction in the insurance industry, globally, tends to be low. According to academic studies by Wells & Stafford (1995), the Quality Insurance Congress (QIC), Risk and Insurance Management Society (RIMS) (Friedman, 2001a, 2001b) and the Chartered Property Casualty Underwriters (CPCU) longitudinal studies (Cooper & Frank, 2001), widespread customer dissatisfaction is confirmed in the insurance industry worldwide. The sources for this dissatisfaction arise from any of the following quarters: poor service design and delivery, ignorance of customers' insurance needs and inferior quality of services.

According to the General Insurance Business (Nationalisation) Act, 1972, one of the objectives behind setting up the four subsidiaries of the General Insurance Company (the holding company) was to "set up standards of conduct and sound practices in the general insurance business and rendering efficient customer service." However, reviewing the situation in 1994, the Malhotra Committee had to report that "the behavior of the general insurance employees were not customer friendly." In the public discussions post the Malhotra Committee report, customer service remained one of the key items on the discussion agenda. The Insurance Regulatory and Development Act (1999) set out the objective of the regulator as: "To protect the interest of and secure fair treatment to policyholders."

The regulator is taking this very seriously, given the historical evolution of the industry vis-à-vis consumers. It has constantly been reviewing the practices of individual players especially in the light of rising complaints. The grave need to protect policyholders and ensure effective and responsive redressal of their complaints led to the review of existing market conditions. The IRDA therefore set up a committee headed by Mr. V Kamesam, the Managing Director of the Institute of Insurance and Risk Management (IIRM), to look into the existing redressal systems of insurance companies, recommend their improvement and further also study the need for changes in the Regulations for Protection of Policyholders' Interests.

The Kamesam Committee made very important suggestions which were accepted and codified in the Insurance Regulatory and Development Authority (Protection of Policyholders' Interests) Regulations, 2002. This piece of legislation emphasizes that insurers, while carrying out the business of insurance, shall ensure that the rights and interests of the policyholders arising out of any contract of insurance are duly protected.

In accordance with the regulations, every insurer should have in place a grievance redressal system to address the complaints of policyholders. Over and above this, an aggrieved consumer may approach the Insurance Ombudsman for complaints relating to personal insurance claims for a value up to ₹20 lakhs. Obviously, access to the legal system, in the form of the hierarchy of consumer courts and civil courts is open to consumers as a basic right.

Greater transparency holds the key

It may be pertinent to note here that the IRDA model centers around empowering consumers through proper education and appropriate disclosures at the insurers' end. Different countries have adopted different models, and

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The grave need to protect policyholders and ensure effective and responsive redressal of their complaints led to the review of existing market conditions.

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“ The Indian regulator has taken a broader view of the subject, relying more on public disclosures and wider accessibility of data in the public domain than reliance of ratios or synthetic quality constructs. ”

thereby different metrics to measure levels of dis-satisfaction and redressal. For instance, the state of New York (insurance is regulated by individual states-in this case the New York State Department of Financial Services (DFS) (www.ins.state.ny.us)-uses metrics like "complaint ratios" and the "Quality Score Card", developed by the Quality Insurance Congress (QIC) and Risk and Insurance Management Society (RIMS).

It has been argued in the technical literature that such ratios only provide static snapshots of the business and therefore, should not be used to extrapolate to dynamic business situations, such as a company's responsiveness or complain redressal efficacy.

One strand of literature borrows from service quality studies in the retailing sector. In an important paper in the *Journal of Marketing* (1985), A Parasuraman, and co-authors presented a "conceptual model of service quality and its implications for future research." That service quality (SERVQUAL) model became a standard workhorse in the retailing industry as it defined a quality flaw or a gap as the difference between consumers' perceptions (P) of services of a specific firm and their expectations (E) of services in this particular industry. This P-E gap analysis was extended to the financial sector industry, as for many other industries in the service sector. The questionnaire-based model weighted five core items (and several items in each head): tangibles, reliability, responsiveness, assurance and empathy.

The Indian regulator has taken a broader view of the subject, relying more on public disclosures and wider accessibility of data in the public domain than reliance of ratios or synthetic quality constructs. For instance, IRDA has mandated all non-life insurance companies to include claims data, complaint redressal statistics etc in a public disclosure section of the insurer's website. The regulator has specified a

format for reporting of data, and the information on ageing of claims, claims data, and claims information can be accessed quite simply as NL-24 to 26, for all non-life insurers.

Being the sector regulator and not an adjudication body, IRDA does not get directly involved in the claims process. The IRDA's Grievance Redressal Cell plays a facilitative role by taking up complaints against insurers with the respective companies for speedy resolution. To further speed up the process, the insurance regulator has launched an online grievance redressal mechanism, called the Integrated Grievance Management System (IGMS). Not only can this newly set up facility be used to register complaints against insurers, brokers and other intermediaries; it can also be used to process proposals, serve a policy as well as meet claims. Policyholders can therefore register a grievance on the IGMS if they have not received a response from the concerned insurance company or if the response is unsatisfactory. The turnaround time is specified for each type of complaint and the site displays the date by which the complaint is expected to be addressed. Policyholders thus need to first register themselves on the website www.igms.irda.gov.in. They not only need to provide personal details and contact information, but also the complainant must select an identification number be it a PAN card, passport number or a voter ID. Thus a complainant can log in using the identification number provided at the time of registration, as well as his/her date of birth. After filing the complaint, a token number is generated for reference. The status of the complaint can be thereby monitored online based on the reference number. The complainant can also edit his grievance.

In order to avail of the IGMS facility, the aggrieved policyholder can file a complaint online provided he/she has registered with the concerned insurer's grievance redressal mechanism. It is the responsibility of the

complainant to provide the correct identification details and thereby ensure efficient registration and monitoring of the complaint.

Latest measures: ball squarely in insurers' court

Effective August 1, 2011, IRDA made it mandatory for insurance companies to set up infrastructure to comply with the grievance redressal norms. Insurance companies should also have a system and documented procedures for receiving, registering and disposing of grievances in their offices. They should also send a written acknowledgement to the complainant within three working days of receipt of the grievance. The insurer should resolve the grievance within two weeks of the receipt and send a letter of resolution. If the dispute is not resolved in two weeks, the company should send a written response to the complainant offering redress or rejecting the complaint, also giving reasons for doing so.

IRDA regulations require insurers to inform the complainant about how he or she may pursue the complaint, if dissatisfied in the first place, by the company's response. The complaint can be regarded as closed if the complainant does not respond to the insurer within eight weeks of the company's written response. The regulator also emphasized that it was necessary for insurers to have automated systems that would enable online registration and tracking of status of grievances. The system should be integrated seamlessly with the authority's system.

Clearly, the regulator expects the industry to bring greater robustness in its own respective grievance redressal systems. Repeated studies in the service industry have pointed out that there are problems of adverse selection when companies are faced with consumer complaints. The floor manager typically attempts to downplay the complaint so that it does not impact her own reputation within the

company. That delay in the first step leads to aggravation of the consumer dissatisfaction.

Indian insurers could make significant improvements if they document the grievance redressal metrics, and publicise it widely. A promise of a time-bound escalation of the problem, logged into the system, will take away the front-office manager's incentive to play down the issues. Given the certainty that pending issues will be escalated to the seniors within a specified time frame, the front manager may even be incentivised to find satisfactory resolution at her own level. Issues that cannot be resolved by the front-office managers need to be escalated to a specialized team to provide resolution to the case on priority.

Harnessing the power of Social media

As we all know, there has been a social media revolution in the last few years. Consumers have taken to FaceBook, Twitter etc. in a large way to air their views about the products/services offered by companies. Social media has become a very popular tool with the consumer to share grievances with their peer group. In line with the regulatory mandate, companies have started embracing social media to educate their customers and to hear their feedback. Some companies are, and all companies should be, utilizing the comments (negative or positive) as opportunities to enhance the service proposition to the customers. An online grievance redressal process increases the efficiency, transparency and accountability.

For instance, companies are increasingly using Twitter to "hear" clients 24X7. That comfort of accessibility assures consumers that they will eventually get the problem resolved. In our experience, consumers appreciate the fact that the brand listens to the customer. In terms of other online reputation management tools, non-life companies are tracking the chatter in



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the online space for mentions and experiences. This becomes an important feedback tool because other companies can quickly learn from examples of the possible defect points and take pre-emptive action. This can ensure that not all companies have to go through the same learning curve. All of us have been richer from the experience. The industry is maturing fast as regards customer grievance redressal and surely more can be done.

Conclusion

The non-life private insurance industry in India has made significant progress since the sector was opened up in 1999-2000. However, the level of non-life insurance penetration in the country is not commensurate with the demographic profile, the investments in the economy and the overall economic growth. The industry will do well to reflect on this issue. One possible cause, identified in insurance companies across the world, is consumer dis-satisfaction with the services offered by the industry. This dis-satisfaction with the quality of service can arise during the pre-sales process, at the point of sale, or during after-sales service. In the circumstances, building a solid foundation of a customer grievance mechanism becomes paramount to give consumers the protective umbrella that they will be served well by the industry. The Indian insurance regulator, IRDA, has done a great service to the nation by empowering consumers through widespread availability of information and easy access to a redressal mechanism. The Indian system has worked well for Indian consumers, but the industry could do well to devise additional ways to (i) understand the source of dis-satisfaction (ii) take effective measures in training and education to prevent such lapses and (iii) refine their in-house redressal mechanisms to provide satisfactory resolution to dis-satisfied consumers in the quickest possible time.

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Emphasis on Trust

- Grievance Management in Insurance

Anjana Agarwal opines that dealing with customer grievances in the domain of Health insurance is more complicated, owing to several complexities that are inherent to it; and thus calls for even a greater level of dexterity.

The insurance industry across the world primarily relies on the "trust" between the insurer and the insured. Unlike any other industry, literally nothing gets delivered either in the terms of tangible goods (FMCG industry) and/or experience (tourism industry). The sales transaction gets closed with a delivery of policy certificate and "assurance" to the policyholder from the insurance company that in case of crisis, we are there to support you against this certificate. As a human tendency, the policyholder starts ranking "trust" based on their experience during the sales process and accordingly develops an opinion about the insurance organization regarding their capability or ability to fulfill the promises. To protect the policyholder's right to avail the benefits and ensure that the policyholder is not taking an undue advantage of the same, the regulators play a key role in defining the guideline of the grievance management system.

Over the past decade, grievance management guidelines have evolved substantially to ensure that grievances are not only recorded but also appropriately handled for logical settlement within the defined TAT and agreed SLA's.

Policyholder grievance normally falls under the following major categories listed below:

- Transparency (e.g. sharing of information like premium details, process for risk assessment along with impact of the assessed risk and minimal fine print)
- Feedback on sales (e.g. mis-selling related to product benefits and services offered)
- Feedback on services (e.g. services not provided as per defined TAT/SLA or Quality of the service)
- Policy Administration which is nothing but accuracy of the data captured and quality of the information shared
- Benefits payout (e.g. payment of claims - 'moment of truth')

These categories are common for both life and non-life insurance, however the frequency and impact could depend on the type of benefit being availed/offered e.g. A Health insurance policy can have multiple episodes of benefits payout whereas in case of life insurance policy benefit is only paid out once. Thanks to the growth and revolution of general insurance organizations (both private and public) which provide risk coverage for physicals assets, awareness levels related to available benefits and how the same can be availed have risen among policyholders. However, since Health

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insurance is still fairly new, the policyholders still continue to be apprehensive about the delivery of promise.

Thus in this tough arena, it is important for any Health insurance organization to offer customer services that are true reflection of the funds invested by the customers. The key to success is "PRICE" i.e. Proactive Services, Relationship and not just transaction services, Innovation, Care (reflected in attitude) and everlasting Experience.

PRICE is feasible if Health insurance organizations ensure that the data is captured only once at the point of policy generation and is made accessible to both the policyholder and other stakeholders, through various channels involved in grievances management. Equally important is the timely availability of information. This is further aided by the ability to develop a predictability model, to ensure design and development of proactive services for enhancing customer experience. This is feasible only when technology is embraced at all stages with a provision to support process innovation in an unstructured environment, guided by the policyholder requirement.

It is pivotal for insurance companies to be transparent at the time of selling. The policy documents should be as simplified as possible with minimal fine print. The premium and the risk assessment details should also be clearly communicated at the point of purchase. These steps will help in re-instilling customer's trust on the insurer and make the claim process hassle free.

Proactive outreach by insurance companies to the customer for feedback on sales and services will also go a long way in ensuring customer satisfaction. Since the sales team is the face of

the insurer, it is important to determine if they are clearly communicating the policy terms and conditions to the policyholder. At the same time, doing a quality audit at regular intervals will help the insurer determine the gaps that need to be addressed.

In today's market wherein insurance is visualized and sold like a commodity, it is really important to differentiate through "customer experience" which is being adopted by many insurance companies as a strategic objective. Policy administration systems are developed to ensure data is captured only at the time of generation and the same data flows into various transactional processes which are automated and integrated to ensure minimal manual intervention. These systems and processes are being reviewed at a regular interval to ensure adoption of latest technology trends to develop differentiated customer service models specifically at the "moment of truth" i.e. enhanced claim experience like minimal documentation requirement at the time of pre-auth as details are readily available with the insurer, instant approval of pre-authorization and instant discharge for a real "cashless" experience accompanied with timely and appropriate adjudication of claims for logical settlement within defined TAT.

Most of the insurance organizations in today's world provide many access points to the policyholder like via phone, email, web site along with escalation matrix, correspondence either via fax or letter or walk-in to any of their location, customer service contact centre with a toll free number or SMS. Key objective for multiple access point is to provide options to the policyholder to reach out at any point of time.



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IRDA is taking many heartening steps to conserve the rights of the consumers; and to upgrade and automate the existing system to make it more user-friendly. One such initiative is the establishment of the "Consumer Affairs Department" to give a special focus to administer the compliance by insurers of the IRDA Regulations so as to protect the policyholders' interests. It also assists to empower consumers by imparting them the knowledge of procedures and mechanisms that are available for grievance redressal through various campaigns.

Another important aspect in grievance management is to keep the policyholder informed about the status of various transactions and allow a policyholder to control the data flow along with an option to appropriately escalate to the right authorities in case resolution is not provided as per expectation. IRDA has developed an IGMS (Integrated Grievance Management system) which can be accessed by any insured to post their grievances. IGMS is integrated with every insurer complaint management system keeping in mind the customer centricity wherein transparency is maintained with every policyholder and at the same time they are being kept well informed about the status of their grievances.

Establishment of grievance redressal cell by IRDA is yet another initiative towards the protection of consumer right. This cell plays a facilitative role by taking up complaints with the respective insurers. There is a separate dealing with the complaints against Life and Non-life insurers. Every insurance organization has a grievance redressal cell which works very closely with IRDA to ensure appropriate and timely disposal of all grievances.

A recent introduction by IRDA for the facilitation of the policyholders is IRDA Grievance Call Centre (IGCC) which acts as an additional and easy accessible channel for policyholders to lodge their grievances and also seek their status over phone/e-mail. IGCC is well integrated with IGMS. The call centre carries out filling of grievance registration forms on the basis of the call and also provides a channel for tracking of grievances. Further, the IGCC also educates policyholders about the Insurance Ombudsman who provides a channel for fair disposal of complaints falling within the laid down authority.

Latest revolution in this area is availability of a "self service module" wherein the policy holders are provided with an option to endorse their policies and some of these changes are made effective immediately to ensure a required roll-out.

In a nutshell, as insurance industry is growing, on one hand all stakeholders (including policyholders) are raising the bar of expected service standards; and on the other hand, multiple partners are working on different innovative technological solutions to deliver the required services without much impacting the base delivery model. Gone are the days wherein policyholder was willing to wait for "day" to get a resolution, it's an age of "instant" resolution and it is mandatory for all insurance organizations to "run" and be part of the game.

The author is Head, Customer Support & Operations, Max Bupa Health Insurance.

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Grievance Management... and Beyond

- Top Priority for Insurers

Yegnapriya Bharat opines that a customer's grievance has to be treated meticulously and fairly; and for that to happen, there is need for an effective grievance handling mechanism.



When there is an omission or commission not consistent with expected or defined service levels, there is a deficiency in service giving scope for a complaint.

"When complaints are freely heard, deeply considered and speedily reformed, it is the utmost bound of civil liberty attained that wise men look for"

- John Milton

We have often heard of management mantras for converting complaints into compliments by fixing them; and about how complaints handling can offer a strategic tool for business organizations to grow, that they make the best business barometer and so on. But few really go beyond to tell us why it is important to analyse the underlying causes for the various types of complaints, why they surfaced at all, is there a need for a philosophy or culture change in the organization etc?



Time-frames for Servicing and Grievance Redressal

Insurance is a complicated business that makes promises. The policyholder expects insurance companies to make promises they can keep and make sure they keep them; and rightfully so. When there is an omission or commission not consistent with expected or defined service levels, there is a deficiency in service giving scope for a complaint. The Insurance Regulatory and Development Authority (IRDA) has, through regulations, prescribed time-frames for various policy servicing and claims servicing parameters which insurance

companies and intermediaries are bound by. When these are not adhered to, policyholders will want to complain; and they must not only be heard but also their complaints must be attended to speedily. IRDA regulations for Protection of Policyholders' Interests, 2002 require insurance companies to have in place effective grievance redress mechanisms. IRDA has also issued guidelines on grievance redress, which prescribe the minimum standards for the system apart from laying down the turnaround times. In terms of the guidelines, a grievance needs to be acknowledged within 3 days and attended to within 15 days of receipt of the same.

Effective Grievance Management Systems

An effective grievance management system enhances customer satisfaction by creating a customer focussed environment that receives and attends to complaints and is open to feedback. Such a system helps the organisation to improve its services. An effective system will recognise and address the needs and expectations of complainants by providing them with an open, effective and easy to use complaints process. Visibility about how and where to complain is a key component of an effective system. A grievance management system should be easily accessible to all complainants. Information should be made available about the details of complaints

received and resolution carried out. Receipt of each and every complaint should be acknowledged to the complainant. Not only do complainants need to be treated courteously but also objectivity in dealing with complaints is necessary. Each and every complaint should be handled in an equitable, objective and unbiased manner. A good grievance management system will have all possible channels to receive and attend to complaints – face to face, e-mail, web, letters and faxes, toll free call centre and so on. Every organisation should have, as its objective, the continual improvement of the grievance management process. Adequate resources such as personnel, training, procedures, documentation, materials and equipment, computer hardware, software etc. should be made available to carry out the complaints handling activity efficiently.

A grievance management system should go beyond redress of particular complaints. The organisation should record the performance of the grievance management process; establish and implement procedures for recording complaints and responses; and for using these records and managing them while protecting any personal information that may be there. It is important to classify records in a manner that they can be analysed meaningfully. A system can also improve only if there is continuous monitoring and evaluation. Suitable processes for monitoring and auditing are also essential elements of an effective system.

Integrated Grievance Management System

The Grievance Redress Guidelines of IRDA have made it necessary for insurers to have automated systems that enable online registration, tracking of status of grievances by complainants and periodical reports. The system should also be one which can integrate with the IRDA's system in the manner prescribed. The objective is to create the required industry level database and systems

that would enable speedy and effective redress of complaints. IRDA has implemented an online grievance management system called the Integrated Grievance Management System (IGMS). IGMS provides a gateway for policyholders to register complaints with insurance companies first; and if need be, escalate them to the IRDA Grievance Cells. IGMS is a comprehensive solution which not only has the ability to provide a centralized and online access to the policyholder but complete access and control to IRDA for monitoring market conduct issues of which policyholder grievances are the main indicators. It uses web interface to ensure that it is accessible at all places and on real time. It has also a mechanism to capture complaints received in physical as well as email form through interface with the IRDA Call Centre (IGCC) which provides complainants not having access to the web to register their grievances through a toll free number (155255).

A complaint registered through IGMS flows simultaneously to the insurer's system as well as the IRDA repository. Updation of status by the insurers gets automatically mirrored in the IRDA system. IGMS generates reports on all criteria like ageing, status, nature of complaint and any other parameter that is defined. It thus provides a standard platform to all insurers to resolve policyholder grievances and provides IRDA with a tool to monitor the effectiveness of the grievance redressal system of insurers. IGMS has been implemented from 1st April, 2011. From May, 2011 insurers moved to IGMS and from June, 2011, IGMS was launched for use by policyholders.

IGMS – One of its kind

It would not be an exaggeration to state that IGMS is one of its kind in any regulatory arena anywhere in the world. IGMS provides for mirroring of grievance data of an insurer's system into that of IRDA's system and creates a

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It is necessary for the top management to review the grievance handling process of the company on a regular basis to assess its continuing suitability, adequacy, effectiveness and efficiency.

central repository of grievance data across the life insurance and non-life insurance industry. Companies that are not yet integrated real time with IGMS are stipulated to carry out the batch upload/download process as an EOD (End of the Day) activity till such time they are. IGMS enables generation of various tables and graphical presentations of industry level data as well as enables drilling down into specific areas or parameters chosen. Uniform classification of grievances and a uniform input form has been prescribed for the life and non-life insurance companies respectively to enable extraction of meaningful data extraction and analysis.

The first port of call for a policyholder to lodge a complaint is the insurance company and this may also be carried out through IGMS (apart from directly accessing an insurer's system) which offers a gateway to the insurer's system. IGMS provides for escalation of a complaint to IRDA by the policyholder, apart from auto escalating a grievance that has exceeded the TAT laid down, for the attention of IRDA for purposes of monitoring and examining it from the regulatory perspective.

Step-change in handling of grievances

IRDA has, through the grievance redress guidelines, stipulated that insurance companies shall lay down their own Board approved grievance redress policies. Accordingly, insurance companies have formulated their internal guidelines approved by their Boards, which have to comply with the standards laid down by IRDA in the grievance redress guidelines, and file them with IRDA. It is, in a sense, an internal manifesto against which the performance of the company in the area of grievance redressal can be measured. The idea behind introducing this is to induce and spread the practice of a progressive vision for grievance handling across insurance companies.

IRDA has required insurance companies to publish the redress policies not only for information of policyholders but also with a view to instilling a spirit of competitiveness within the industry by comparison of the best practices followed. IRDA has itself also published these practices. The idea is to bring about improvements in organisational models for management and responsiveness to complaints. Integration with the Regulator's grievance management system IGMS has further helped in bringing about a step-change in handling of grievances by insurers. Apart from enabling the Regulator to monitor grievance management by insurance companies, IGMS provides insurance companies with their own dashboards where they can view data relating to industry averages and trends and compare their own data vis-à-vis the macro level data.

Involvement of the Board and Senior Management

The corporate governance guidelines issued by IRDA to all insurance companies have prescribed setting up a Board committee for policyholder protection as a mandatory committee. The committee has specific functions such as reviewing the grievance handling system of the company and analysis of the complaints received and attended to. With a view to involving the senior management of insurance companies, IRDA's grievance redressal guidelines require insurance companies to nominate either the CEO or the compliance officer as the Grievance Redressal Officer (GRO) of the company. It is necessary for the top management to review the grievance handling process of the company on a regular basis to assess its continuing suitability, adequacy, effectiveness and efficiency. Analysis of the data is also necessary to ensure that gaps or deficiencies in servicing are bridged or improved. The company should

set up a process whereby it receives internal inputs regarding the performance of the system in order to review for changes as a result of policy changes, modifications in objectives, changes in organisational structure, resources available and services offered. The review by senior management should result in the required data/analysis to be submitted to the Board and should also include decisions and actions related to improvement of the effectiveness of the grievance handling system as well as proposals relating to improvements in servicing and training. It is necessary to try and adopt best practices in grievance handling and it is with this intent that IRDA publishes best practices of the various insurance companies on an annual basis.

Creating a culture within the organization

Not only is the involvement of the Board and senior management important and necessary but also it requires a culture to be created within the organisation at all levels of lines and functions to deal with grievances. Creating this culture pre-supposes the imparting of necessary training with regard to the framework applicable and the governance guidelines, setting out roles and responsibilities clearly. Staff should be equipped and empowered to deal decisively with grievances. It is important for them to be customer focused at all levels and treat the customer impartially and provide prompt and appropriate remedies. Handling complaints fairly is not just about processes and time limits. It is about the culture within an organisation and about the behaviour and attitudes of staff when receiving a grievance and deciding what actions to take. It is important to remember that effective grievance handling does not mean that all grievances are upheld. It is about having fair, consistent and prompt investigation, decision making and redress

which should be embedded in well documented procedures.

RCA (Root Cause Analysis)

I came across this quote, the author of which I do not know. "When handling a customer's complaint, remember: If you can't fix it, don't drop it". Effective and prompt analysis of the root causes of complaints, and a commitment to remedying such causes is what ensures that customers get a fair deal and that the grievance management system has really been implemented to its fullest use. The primary aim of Root Cause Analysis (RCA) is to identify the factors that resulted in the nature, the magnitude etc of the problem resulting in a complaint and identifying what behaviors, actions, inactions, or conditions need to be changed to prevent recurrence of similar events. There may be more than one root cause for an event or a problem. The purpose of identifying all solutions to a problem is to prevent recurrence of the problem. The data that can be generated from a grievance management system can be of tremendous use to identify patterns and trends from identification of the problem to tracking the implementation of solutions.

All said and done, the most important thing to remember is that it is people and not companies or systems that resolve complaints. Behind that solid system that we are talking about should be solid people who lend that ear for a grievance and who reach out to deal with it fairly.

The author is Joint Director (Consumer Affairs), IRDA. The views expressed are personal.

Staff should be equipped and empowered to deal decisively with grievances. It is important for them to be customer focused at all levels and treat the customer impartially and provide prompt and appropriate remedies.

The Flip Side of Growth

- Frauds in General Insurance

Avinash Singaraju writes that the incidence of frauds – especially in the general insurance industry – is playing havoc with the bottom-lines of the players and hence needs to be treated with iron-handed discipline.

“ Though most of the frauds are attributed to false claimants, there have been instances where the insurers have taken the customers for a ride, necessitating stringent controls by the regulator.

It is a matter of fact that the Indian economy is briskly moving from the agricultural dominance to service prominence. The economic growth has been driven by the expansion of services that have been growing consistently faster than other sectors. It is a general opinion that the pattern of Indian economic development has been a specific one and that the country may be able to skip the intermediate industrialization-led phase in the transformation of its economic structure. This phenomenon can be attributed to the economic reforms in the financial sector and the robust growth of IT and ITES industries. Insurance industry is a subset of this macro economy and has evolved on similar lines. And like any other service sector set up, one of the primary corporate goals is to deliver the service that the customer desires.

Right from the year 1818 AD when the first life insurance company was established marking the advent of insurance business in India, the insurance industry has witnessed many ups and downs throughout its journey to this day. Several legal enactments, market pressures, global economic dynamics and above all, the socio-political developments of the nation have nurtured the insurance industry to a situation today wherein the market is now on the launch pad to create better and safer economic environment by insuring the variety and complexity of risks associated with rapid economic progress.

The nationalisation of insurance business owing to the socialistic pattern of Government policy has in a way created a monopolistic market over the years wherein the customer had no much choice either with the product or with the pricing. The game has entirely changed during the early twenty first century after the opening up of market and subsequent de-tariffing that led to aggressive competition in the industry. The customer is now at a better position and has a wider choice. It is now the buyer's market.

Any progressive phenomenon has inherent drawbacks and insurance industry is no exception. The business, by having direct financial implications has been a victim of fraudulent practices. Though most of the frauds are attributed to false claimants, there have been instances where the insurers have taken the customers for a ride, necessitating stringent controls by the regulator. There was, and is, plenty of evidence that skillful regulation and calculated intervention can help deter corporate fraud and protect the consumers' interests. It is a fact that the Global economic meltdown of 2008–09 was attributed to the poor regulation of financial institutions in the United States. Deregulation in the sense of abolishment of tariffs viz., prices and terms is good as it helps get the best deal for customer. As a result, there has been remarkable transition and innovation in the insurance industry driven by competition. So far, so good.

But on the other hand, deregulation has gone too far mainly in the form of drastically reduced premium rates which has made the insurers more vulnerable to financial meltdown in the face of large and unexpected shocks. There have been instances where both customers as well as the insurers have been resorting to various tactics to outsmart one another thereby blemishing the basic corporate ethics.

Insurance fraud has made its mark in the upcoming sector slowly but for sure. The industry has been expanding at a much rapid rate than anyone could envisage, yielding significant opportunities for the conduct of fraud. In reality, no one really knows the extent of insurance fraud because most frauds succeed without the insurer even suspecting that it is being defrauded. Insurers can only estimate the extent they lose to fraudulent claims. No one will ever place an exact number on the amount lost to insurance fraud but everyone who has experienced it is aware that the number is enormous and that when insurers put out efforts to reduce the amount of insurance fraud, the number of claims drops exponentially. Non life insurers per se are more susceptible to fraud mainly under Motor and Health lines in retail business; and Marine and Liability lines in commercial business.

The role of insurers or rather their distribution channel partners in committing malpractices in the conduct of business cannot be left understated. It would be fatal to rest on laurels and assume that everything is as rosy as can be. The ease of doing business in a deregulated market can jeopardize consumer's interests in the first place as also affect the bottom line of the insurer unless ethical code of conduct is strictly followed by the operating offices at all levels. Factors such as ever increasing competition, inability of the sales personnel to convince the customer about the product features, drastic fall of average ticket size, higher commission earnings on certain products can be considered as predominant for the insurer's representatives resorting to

fraudulent practices. The competitive market does not make the information available in a form which consumers could understand. Furthermore, where insurance is compulsory, to the extent that the requirement forces consumers to purchase insurance that they otherwise would not have purchased, consumers face little incentive to observe and monitor the financial health of their insurer. A second lesser regulatory concern relates to concerns over the ability of consumers to understand and compare the various terms and conditions in insurance contracts. Competition between insurers, it is argued, will therefore be ineffective and will lead to adverse surprises for consumers. These concerns are nonetheless not as strong for those lines of insurance which are purchased primarily by corporate houses as a part of their risk management strategy. The danger of deregulation lies in going to the other extreme of 'laissez faire' – whereby customers get a 'cheap' deal and have to endure 'cheap' service too! It has to be borne in mind that as customers become more and more sophisticated; they would tend to move away from "least price" syndrome towards effective service.

The concept of mis-selling is now being highlighted with the regulator taking special interest in sorting out customer grievances. Tightening of KYC norms and setting up a dedicated Grievance Redressal Cell can be stated as recent developments in this direction. As the Indian insurance industry has just begun to enjoy the fruits of deregulation, it is appropriate at this juncture to identify the areas of concern and work towards addressing the issues in order to avoid the market from tumbling into a whirlpool. The industry has to evolve and become more transparent to the customers. It being an emerging market, it may sound a tough task to set benchmarks in various fields, but analyzing the well developed markets and adapting their practices to suit the local requirements, mainly with the experience and expertise of the foreign players and the reinsurers may not be a bad idea at all.

“ Insurance fraud has made its mark in the upcoming sector slowly but for sure. The industry has been expanding at a much rapid rate than anyone could envisage, yielding significant opportunities for the conduct of fraud. ”

“ Lack of service would mean loss of customer. And in a competitive environment, a customer once lost is lost for ever. Customer lost is also bad publicity, for adverse news spreads extra fast.

Better service levels start right from the stage of creating awareness among the customers. Since insurance is an intangible product and the satisfaction is derived mainly by receiving proper service, it is all the more essential that the various transactional issues such as advisory services, policy issuance, claims handling etc., be handled with due diligence. Lack of service would mean loss of customer. And in a competitive environment, a customer once lost is lost for ever. Customer lost is also bad publicity, for adverse news spreads extra fast.

Needless to say, the distribution channels established and the marketing strategies employed by insurers perform their core business function. In addition to the traditional distribution channels such as corporate brokers and tied agents, various new forms of distribution channels viz., bancassurance, mallassurance, dealer tie-ups, e-commerce etc., have emerged in the recent times. It is now a challenge for the insurance companies to inculcate the ethical code of conduct amongst the various channel partners. Since the ultimate responsibility lies with the insurer and that the reputation of the insurer is at stake, this aspect has to be properly addressed even if it necessitates systematic procedures such as regular training programmes and weeding out the unscrupulous elements thereby sending clear message to the entire market.

Looking at the product mix, the Indian industry in the recent past has been witnessing innovative approaches by the insurers both in life and non-life domains. The introduction of zero depreciation covers in the Motor segment, combination of unit linked equity investments and health coverage along with life insurance policies, releasing various package policies for specific risks such as householders, shops, offices etc., are a few glaring examples of insurers coming forward to address the ever increasing requirements of the customers. Also, altering the basic policy conditions such as warranties and excess has become a very

common feature in the present scenario. At the same time, the aggression of the marketing channels to push their product without explaining the features in totality is leading to chaos amongst the ignorant customers in many instances. Concentrating on improvement of service levels as also reduction in the customer grievances would be the next level of accomplishment by the insurers to gear up for a full fledged deregulated insurance industry in India.

To sum up the entire discussion, it can be stated that consumer centric approach will be the key to success for any insurance firm operating in the deregulated market scenario. Transparency in operation, maintaining good business ethics and curbing the fraudulent practices should be the underlying operating principle of any organization. Risk based pricing, engaging professional and dedicated workforce at all levels of hierarchy and offering value based as also customized products to the customers through innovation and research are the key parameters that would drive the insurance company to success without any external regulation.

The pattern in India is no different from experience elsewhere. Deregulation initially results in frenzied rate war and weakening balance sheets. Window dressing can at best be short term pretence when the company's foundations themselves are rocked by the disproportionate and sudden pressure on the capital base. Once the market matures, only the prudent and professional players will survive the growing pains. The flashes in the pan (just like the cowboy operators) eventually walk into the sunset!

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A New Approach to Insurance Sector

- Knowledge Process Outsourcing

Dr Som Majumdar avers that outsourcing in services is akin to the erstwhile 'make or buy' decisions of large manufacturing units, to leverage on economies of scale.

Concept:

Knowledge Process Outsourcing (KPO) is sine qua non of knowledge based economy that characterizes insurance industry, life and non-life alike. Outsourcing is the contracting-out of a business function that was previously performed in-house, to an external provider that can go On-shore, Off-shore or Near-shore. Whereas "On-shore" mode of outsourcing is made within the nation, the "Off-shore" mode of contracting is done outside a company's country. By contrast, "Near-shore" outsourcing is the method of contracting out to a company's neighbouring (or nearby) country. The primary focus of this contracting out is to access lower cost economies called "labour arbitrage" in the document laden activities like insurance, usually generated by the wage gap between the developed nations and the developing countries. In his famous 1817 Book, "Law of Comparative Advantages", the great English classical economist, David Ricardo advocated arguments in favour of free trade amongst countries of specialization that has later culminated into current form of outsourcing activities. Of the biggest changes in recent origin is the use of on-line technologies to use outsourcing as a way to build a viable service delivery business that can be run from virtually anywhere in the world. The entire operations is done remotely where service delivery is done digitally thereby leveraging the economy of scale in a cost effective manner. This process is increasingly pursued by many organizations as a "quick-fix, cost cutting" maneuver designed to bolster competitive advantages.

Why Outsourcing

Originally, outsourcing the part of the original business activities was associated with large

manufacturing or engineering firms that used to sub-contract their large segments of the supply chain to various small firms instead of manufacturing them in their own factories to

have the benefits of economy of scale. These small firms sprang up around those factories as ancillary units formed with very low capital base producing various tools and machineries according to their line of specialization and supplied them to the large industries and factories. Likewise, in current economic environment, customized offshore outsourcing solutions have created the need for establishing various methodologies of business process outsourcing channels to facilitate optimal performance. An advantage of BPO is the way in which it generates operational flexibility depending on how the organizational flexibility is perceived. Following are some of the reasons to advocate the needs of outsourcing the business:

- It contributes to company's flexibility as an aid to focus its core competence.
- It provides increased efficiency when there is a lack of in-house resources.
- It helps lower ongoing investment in internal infrastructure.
- It helps transforming fixed into a measurable variable cost thus providing a higher flexibility in its resource management and reduces response times to major environmental changes or changes in business or commercial conditions.
- It helps gain access to innovation and thought leadership including specific IT skills.
- It helps avoid a premature internal transition from its informal entrepreneurial phase as it

Of the biggest changes in recent origin is the use of on-line technologies to use outsourcing as a way to build a viable service delivery business that can be run from virtually anywhere in the world.

Fully integrated support of underwriting, policy servicing, premium billing, agent advances and agency commission, claims processing including preliminary loss information, document storage and retrieval, etc. are some of the routine work that provides enormous cost saving when it is done by the third party service providers.

allows retaining their entrepreneurial speed and agility that would have been sacrificed in order to become more efficient as they expanded.

- It may allow the contracting companies to grow faster by BPO as it will be less constrained by large capital expenditure for people or equipment that may take years to amortize or may be considered as poor match for the company overtime.

Market Evolution

The KPO business is the by-product of traditional system of business process outsourcing that is inclined to provide better customer satisfaction; and thereby ensures client retention to the contracting companies. Leveraging BPO units' proven delivery model and highly skilled globally positioned workforce, the contracting companies are able to obtain a tailor made cost-effective service that matches their exact needs. Typically, the BPO activities are categorized as "back office outsourcing" or "front office outsourcing". Whereas the former relates to internal business functions such as HR, banking, insurance or accounting etc; the latter takes the form of call centre operations to provide customer related services which is otherwise known as "Customer Relationship Management (CRM)". Often these processing activities are intertwined with various forms of information technologies and hence are referred to as ITES (Information Technology Enabled Services).

Another sub-segment of the outsourcing industry is related to "Knowledge Economy" which is often known as "Knowledge Process Outsourcing" (KPO). This segment of outsourcing activities is knowledge-driven. Knowledge is an information gathering process in such manner as to help taking decision for the way moving forward. It tends to generate knowledge trading, foster digital economy, create knowledge revolution. While most business process outsourcing involves execution of standardized process for a company, the system of KPO type of activities involves a process that demands advanced research and analytical decision making skills. Sample KPO work includes pharmaceutical research and development; data mining; patent and legal research; work involving lawyers and architects; medical and X-ray film analysis etc. Most importantly, the outsourcing is

predominant in the insurance sector because the outsourcing process in this sector tends to support a broad range of Life and Non-life insurance products. Fully integrated support of underwriting, policy servicing, premium billing, agent advances and agency commission, claims processing including preliminary loss information, document storage and retrieval, etc. are some of the routine work that provides enormous cost saving when it is done by the third party service providers. These forms of servicing may also be categorized as intellectual outsourcing that the contracting firms hope will reduce consumer costs. Firms are then beginning to realize the value of intellectual outsourcing as the economy dips.

By default, insurance industries are capital intensive because of expectancy of high value of claims arising from natural catastrophe or liability claims. However, the front line operations require a large amount of data processing in terms of gathering information which is risk specific to move towards decision making process that would ultimately lead to the enterprise efficiency in providing return to shareholders' equity. Sample insurance outsourcing services may include, but not limited to:

- Review and processing of proposal form
- Data collection and investigation including data aggregation and data mining
- Claim processing, administration and adjudication
- Policy issue and servicing
- Underwriting support
- Document imaging, indexing and archiving to facilitate paperless office
- Web site maintenance

Legal Process Outsourcing (IPO)

The emergence of a new form of knowledge processing activities has blossomed very lately into the area of insurance claims services that involve a considerable amount of desk work in order to arrive at a provisional conclusion towards admissibility of claims or otherwise. In such circumstances, the claims module for the purpose of outsourcing may comprise following processing functionality:

- Comprehensive procedures for opening and handling claims on-line

- Collection and assessment of data from "Preliminary Loss Advice" (PLA)
- Dynamic questionnaire for identification of damages
- Locating multiple claims in form of multiple damages or multiple claimants
- Point-in-time coverage verification
- Automated referral and lodgment of counter claims to third party.
- Detection of fraudulent claims and areas of further investigation

More often than not, a fair amount of litigation always arises in the field of insurance claims as a result of unsatisfactory dispute resolution. Litigation is arguably one of the pressing issues of corporate world that tends to eat away their overheads, regardless of the size of the enterprise, location or its nature, more importantly in the areas of medical negligence, workers' compensation, third party injury or death, public liability etc. There are always disputes diverting the precious resources of the business and hence entered the new branch in the arena styled as "Legal Process Outsourcing" or LPO services to offer a viable and effective cost control alternative in the event of protracted litigations. As against BPO that is in the market for many years, the advent of LPO began since 1997, when back office legal related work was being outsourced in countries like Canada, India, Israel, the Philippines, Latin America. They traditionally offered services in the area of contract drafting, document review, M&A due diligence, drafting of pleading and briefing, litigation support services through library research and so on.

"While the LPO model in the areas of insurance claims is fast becoming the modus operandi for organizations to outsource legal support work in the US and to a lesser degree in the UK, the industry is still in the nascent stage in Australia", as reported in the journal of "Australian Corporate Lawyer". The potential of LPO business is apparently very large. While a solicitor or attorney in major legal markets such as Australia and US may charge hourly rate of \$300 to \$500 depending on the nature of litigation, legal process outsourcing firms can often charge a fraction of this, providing a tool to limit costs. The pending Australian Competition & Consumer Commission (ACCC) prosecution of the price-

fixing allegations case in Australia brought by Amcor against Visy is a case in point where almost 5 million documents are expected to be potentially discovered, carefully reviewed and analyzed which can be a fit case for outsourcing work to minimize expenses. The legal outsourcing industry has grown about 60 percent a year in US in the last three years, the Washington Post writes. The LPO services now uniquely epitomize the case of globalization. India has emerged as most popular destination for outsourcing legal work because of its vast pool of qualified work force at less expensive rates besides having a legal system based on English common law, much like US, Australia and UK. The other major LPO hubs have also emerged recently in Japan, France, South Korea, China, and Argentina and to some degree in Australia. One of the largest insurance companies in Australia controlling billions of dollars of premium are now seriously considering to off shore their claims to Mumbai and Bangalore, India as reported in the Sydney Morning Herald. In light of advanced IT systems and highly talented available manpower at a considerably low cost, India has therefore presented a timely alternative for corporate legal departments to consider if the cost savings could provide them with more staying power in protracted litigation.

The LPO activities are rapidly gaining ground for some very obvious advantages. However, there are issues of confidentiality and attorney-client privilege that appear as setback to its growth, benefits notwithstanding. For instance, the American Bar Association this summer formally acknowledged the practice in an ethics opinion. It emphasized that a U.S. attorney must supervise any foreign lawyer, usatoday.com noted last month. The risk of breaching Privacy law, quality and confidentiality that so often accompany use of LPO services are the gambles that few are prepared to take. Only time will tell if the LPO service industry that acts as intellectual service provider will be the apple of the eye to the insurance companies of the twenty first century.

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“ In light of advanced IT systems and highly talented available manpower at a considerably low cost, India has therefore presented a timely alternative for corporate legal departments to consider if the cost savings could provide them with more staying power in protracted litigation. ”

प्रकाशक का संदेश



शिकायतों का प्रबंधन जैसा कि नाम दर्शाता है सिर्फ इसके कारणों की पहचान एवं निवारण तक सीमित नहीं है। शिकायतों के घटित होने का व्यापक दृष्टिकोण है और ऐसे उपायों को कारगर बनाना जिससे यह सुनिश्चित हो सके कि ग्राहक के साथ उचित व्यवहार हो एवं उनकी शिकायतों का निवारण भी उचित ढंग से हो पाये। इसके लिए यह संगठन की संस्कृति का एक भाग बने, प्रबंधन को उचित विश्लेषण का दायित्व अपने उपर लेना चाहिए, नियमित रूप से पूर्ण रूपेण निवारण हो बजाय कि एक बार में एक समस्या का निदान किया जाय। इस तरह निगमित इकाईयाँ भी शिकायतों पर पूर्ण रूप से नियंत्रण बना पाने में सक्षम हो पायेगी जोकि उनके ग्राहकों की तरफ से साधारण तय प्राप्त होती है। इस तरह से परिस्थितियों का सामना हो पायेगा जब कभी ये निर्मित होती हैं।

दुनियाभर में बीमा व्यवसाय स्वयं एक बड़ी संख्या में ग्राहक शिकायतों को लेकर अनिश्चिता में रहता है। इस स्थिति के लिए जो कारक अपना योगदान देते है वे हैं बीमा सेवा का अमूर्त रूप होना, लेने देन की अस्पष्टता एवं बीमा अनुबंध की शब्दावली। भारतीय बीमा क्षेत्र भी वैश्विक स्तर पर हो रही घटनाओं से अछूता नहीं है।

बीमाकर्ताओं को बीमा बेचते समय अधिकतम वस्तुनिष्टता को सराहना चाहिए क्योंकि ऐसे व्यवसाय ज्यादा लंबी दूरी तय कर पाते हैं।

जबकि छदम विक्रय को रोकने हेतु काफी कुछ किया जा चुका है,

पर यह बीमारी अभी भी पीछा कर रही है जो कि ग्राहकों की शिकायतों का प्रमुख कारण है।

आदर्श रूप में, प्रतिस्पर्धापूर्ण बाजार में, ग्राहक धीरे धीरे कम प्रतिष्ठित प्रतिभागी से अच्छे प्रतिभागी की ओर आते जायेंगे अंत में कई प्रतिष्ठित प्रतिभागियों के बेहतर संतुलन होना चाहिए। ग्राहकों की शिकायतें तीव्र आत्मनिरीक्षण और समस्या को सुलझाने के लिए एक गंभीर मामला है। एक ऐसी प्रणाली होनी चाहिए जो ऐसे क्षेत्रों की पहचान कर सके जहाँ पर अक्सर ग्राहकों को असंतोष रहता है एवं ऐसे प्रयास भी होने चाहिए जो उनकी समस्याओं से निपट सके न हि सिर्फ संख्याओं में बल्कि गुणात्मक तौर पर ताकि पूर्व में घटित नुकसानों का अनुभव न हो। निश्चित रूप से व्यवसाय की गुणवत्ता एक महत्वपूर्ण कारक होगा इन समस्याओं से निपटने में बजाय कि शीर्ष पंक्ति में प्रभुत्व पाने की दौड करने से जैसी कि बार बार दोहराया गया है।

शिकायतों का प्रबंधन इस अंक का केन्द्र बिन्दु है। इस विषय के अधिक महत्व का होने से, अपले अंक में इस विषय पर केन्द्रण किया जाएगा।

जे. हरि नारायण

जे. हरि नारायण
अध्यक्ष

दृष्टि कोण



उपभोक्ता संरक्षण और बीमा कंपनियों की ऋण शोध क्षमता पर प्रभावशाली निगरानी रखने में हमारी प्रणाली सफल रहा है। अमेरिका में बीमाक्षेत्र भयानक आर्थिक संकट को झेलने के बाद उतने ही नष्टकारी प्राकृतिक विपदा और नुकसान की मुकाबला करने के लिए तैयार है।

सुश्री थेरेस एम (टेरी) वान
मुख्य कार्यपालक, एन.ए.आई.सी.

यह लोकपाल का दायित्व बनता है कि निजी उपभोक्ताओं के लिए एक निष्पक्ष एवं सुलभ शिकायत निवृत्ति सेवा उपलब्ध कराएं। जब कोई संस्था आर्थिक रूप से असमर्थ होजाय तो एफ.एस.सी.एस. (आर्थिक सेवाओं की क्षतिपूर्ति योजना) का दायित्व बनता है वे शीघ्र क्षतिपूर्ति करें।

सुश्री मार्गरेट कोल
अस्थायी प्रबंध निदेशक, कंडक्ट बिसिनेस यूनिट, एफ.एस.ए.यू.के.

भूकंप बीमा को लोकप्रिय बनाने और मार्केट पेनिट्रेशन बनाने के रणनीति के साथ-साथ सक्षम और स्थिर बीमा प्रणाली की रूपकल्पना भी जरूरी है क्योंकि पिछले भूकंप के दावा भुगतान से कई बीमा कंपनियों के सुरक्षित राशि काफी घट गयी है।

श्री शुजो सुमी
अध्यक्ष, साधारण बीमा संघ, जापान (जी.आई.ए.जे)

एक बैंक, बीमा संस्था या एक सूपर फंड को सुरक्षा एक मुख्य एवं उपयोगी विशेषता है, लेकिन यही सबकुछ नहीं हो सकता। यहाँ आवश्यक संकल्पना संतुलन की है।

श्री चार्लेस लिटरेल
मुख्य महा प्रबंधक, आस्ट्रेलियन पुडेंशियल विनियामक प्राधिकरण।

एशियायी बीमा उद्योग के भविष्य के आसार आशाजनक दिख रहे हैं, परंतु संभावित जोखिमों के बारे में सतर्क रहना होगा।

श्री लिम हूँ कियांग
उपाध्यक्ष, वित्तीय प्राधिकरण, सिंगपूर।

बीमा कंपनियाँ ग्रामीण और सामाजिक दायित्वों को केवल अनिवार्य पूर्ति के दृष्टिकोण से नहीं देखना चाहिए, वे इन दायित्वों के सही उद्देश्य समझें।

श्री जे. हरि नारायण
अध्यक्ष, बीमा विनियामक और विकास प्राधिकरण, भारत



अबीमित वाहनों पर काबू पाना चुनौती

जगेन्द्र कुमार का मानना है कि बीमा रेग्युलेटर द्वारा तृतीय पक्ष प्रीमियम दरों में हाल ही में अच्छी वृद्धि की गई है।

किन्तु सबसे अहम सवाल यह है कि भारत में मोटर वाहन अधिनियम के तहत वाहनों का अनिवार्य बीमा होने के बावजूद लगभग एक तिहाई वाहन भारतीय सड़कों पर बीमित दौड़ रहे हैं जो कानून व्यवस्था, बीमा रेग्युलेटर तथा बीमाकर्ताओं के लिए चुनौती है।

अभी पृथ्वी पर 75 करोड़ मोटर वाहन है, इसमें 5 करोड़ नए वाहन प्रति वर्ष जुड़ जाते हैं। अगर इसी गति से सड़कों पर मोटर वाहनों की संख्या बढ़ती रही तो वर्ष 2025 तक धरती पर कारों की संख्या दोगुनी हो जायेगी। अगर इसी सन्दर्भ में भारत की बात करें तो साइंस एन्ड इन्वायरमेन्ट सैन्टर के मुताबिक केवल दिल्ली की सड़कों पर रोजाना 1,000 मोटर वाहन और जुड़ जाते हैं। इसमें से 550 दुपहिया वाहन, और 350 निजी कारें होती हैं। इसी तरह भारत के अन्य महानगरों में और शहरों में भी मोटर वाहनों का कारवा लागतार बढ़ता जा रहा है। दुनिया के कई शहरों में निजी वाहनों पर अंकुश लगाया गया है। सिंगापुर में 1990 में तय हुआ कि मोटर वाहनों के स्टॉक में सालाना 1.5 फीसदी से आधिक की बढ़ोत्तरी नहीं की जाएगी। यह भी तय किया गया कि एक निश्चित अवधि के बाद वाहनों को सेवा निवृत्ति दे दी जाएगी। सिंगापुर में वाहन खरीदने के लिए अधिकार प्रमाण पत्र लेना होता है जिसकी कीमत 23,000 सिंगापुर डालर है जो कई बार कार की कीमत से भी अधिक

होता है। उधर शंघाई में वाहन लाइसेन्स के लिए कोटा व्यवस्था तय है। हर महीने वाहनों के लाइसेन्स की नीलामी की जाती है। 2010 में एक लाइसेन्स की कीमत औसतन 6,187 अमेरिकी डालर (लगभग तीन लाख रुपए) थी। इधर भारत के शहरों में कारों पर कर काफी कम है। दिल्ली में पंजीकरण के समय 6 लाख तक की कारों पर 4% तथा 6 से 10 लाख की कीमत वाली कारों पर मात्र 7% कर लिया जाता है। किन्तु सबसे अहम सवाल यह है कि भारत में मोटर वाहन अधिनियम के तहत वाहनों का अनिवार्य बीमा होने के बावजूद लगभग एक तिहाई वाहन भारतीय सड़कों पर बीमित दौड़ रहे हैं जो कानून व्यवस्था, बीमा रेग्युलेटर तथा बीमाकर्ताओं के लिए चुनौती है।

मोटर वाहन अधिनियम, 1988

मोटर वाहन अधिनियम 1939 यथा संशोधित 1988 तथा 1994 के प्रावधानों के तहत भारत में सार्वजनिक स्थानों पर मोटर वाहनों के उपयोग से

तृतीय पक्षदायित्व का बीमा करवाना अनिवार्य है। कोई भी मोटर वाहन सार्वजनिक स्थानों पर तब तक नहीं चलाया जा सकता जब तक कि उसका तृतीय पक्षदायित्व बीमा नहीं कराया गया हो। मोटर वाहनों का क्षति बीमा अनिवार्य नहीं है। अनिवार्य बीमा के अन्तर्गत आने वाले दायित्व निम्न हैं :

क. किसी व्यक्ति की मृत्यु या शारीरिक चोट इसमें वाहन में ले जाए गए माल के मालिक या उसके अधिकृत प्रतिनिधि भी शामिल है।

ख. तृतीय पक्ष की सम्पत्ति को हुई क्षति।

ग. सार्वजनिक सेवा वाहन के किसी यात्री की मृत्यु या शारीरिक चोट।

घ. कर्मचारी क्षतिपूर्ति अधिनियम 1923 के तहत निम्न में से किसी की मृत्यु या शारीरिक चोट से उत्पन्न

दायित्व : 1 वाहन का वेतनमांगी चालक

2 संवाहक या टिकिट जांचकर्ता (सार्वजनिक वाहन)

3 मालवाहक वाहनों के कर्मचारी

बीमा पालिसी दुर्घटना के कारण उपगत निम्न दायित्वों को कवर करती है :

क. तृतीय पक्ष या सार्वजनिक सेवा वाहन के यात्री की मृत्यु या शारीरिक चोट के संबंध में असीमित दायित्व का प्रावधान है।

ख. तृतीय पक्ष की सम्पत्ति को हुए नुकसान के लिए दायित्व सीमा रु. 6,000/- है।

मोटर वाहन अधिनियम के प्रावधानों के तहत तृतीय पक्ष दायित्व असीमित है। किसी भी वाहन से किसी भी व्यक्ति की दुर्घटनाजन्य मृत्यु, अंगभंग तथा शारीरिक क्षति की असीमित क्षतिपूर्ति का प्रावधान है।

कैसे होता है वाहन बीमा:

मोटर वाहन की बीमा पालिसी में दो हिस्से होते हैं :

पहला - तृतीय पक्ष दायित्व जिसे एकट लाइबिलिटी भी कहा जाता है तथा दूसरा स्व क्षति बीमा। ये पालिसी सिर्फ तृतीय पक्ष दायित्व के लिए भी ली जा सकती है जो कि अनिवार्य है तथा स्व-क्षति कवर लेने पर कम्प्रिहेंसिव या पैकेज पालिसी के रूप में जानी जाती है। इस पालिसी के प्रीमियम निर्धारण के मौजूदा स्ट्रक्चर में चार कम्पोनेन्ट्स हैं जो वाहन का प्रीमियम तय करते हैं। जिसमें पहला- वाहन का घोषित मूल्य (आइ.डी.बी.), दूसरा - भौगोलिक क्षेत्र यानी जिस इलाके में वाहन का पंजीकरण हुआ है, तीसरा वाहन की क्षमता और चौथा वाहन की उम्र यानी पंजीकरण की तिथि। इन दिनों वाहन बीमा के क्षेत्र में काफी बदलाव हुए हैं। हालांकि मूल भूत संरचना में बदलाव नहीं हुआ है। पर बीमा नियामक व विकास प्राधिकरण की पहल पर कई सुविधाएं जरूर बढ़ गई हैं। इसकी वजह से मोटर इन्श्योरेंस में कई सुविधाएं बढ़ गई हैं जो एड ओन कवर के रूप में

”

मोटर वाहन की बीमा पालिसी में दो हिस्से होते हैं : पहला - तृतीय पक्ष दायित्व जिसे एकट लाइबिलिटी भी कहा जाता है तथा दूसरा स्व क्षति बीमा।

”

प्रीमियम की दृष्टि से जून 2011 तक वाहन बीमा का स्व क्षति प्रीमियम 3201 करोड़ था तथा तृतीय पक्ष प्रीमियम 2043 करोड़ जो कि क्रमश गत वर्ष की तुलना में 23.10% तथा 39.24% अधिक है।

अतिरिक्त प्रीमियम पर उपलब्ध हैं। इसके अतिरिक्त वाहन के बीमा पर कई प्रकार की छूट भी उपलब्ध हैं जैसे आटोमोबाइल ऐसोसियेशन की सदस्यता पर, चोरीसे सुरक्षा के उपकरणों पर, विन्टेज कार पर, शारिरिक रूप से अपंग व्यक्तियों के लिए बने स्पेशल वाहनों पर तथा दावा नहीं लेने पर प्रीति वर्ष होने वाले नवीनीकरण पर आदि आदि। ये पालिसियां किसी भी बीमा कम्पनी (गैर जीवन) के किसी भी कार्यालय से तथा किसी भी मध्यस्थ जैसे एजेन्ट, ब्रोकर, माइक्रो एजेन्ट यहां तक कि इन्टरनेट के माध्यम से खरीदी जा सकती हैं। मूल रूप से तीन प्रकार की पालिसियां वाहनों के लिए, जारी की जाती है। जिसमें दुपहिया वाहनों के लिए, निजी वाहनों के लिए तथा सभी प्रकार के वाणिज्यिक वाहनों के लिए।

अबीमित वाहनों की स्थिति:

बीमा सूचना ब्यूरो द्वारा जारी एक सूचना के अनुसार 2009-10 में भारत में केवल एक तिहाई वाहन ही बीमित थे। भारत में चलने वाले लगभग 12 करोड़ मोटर वाहनों में से चार करोड़ से भी कम वाहनों के पास बीमा पालिसी है शेष वाहन अबीमित ही सड़कों पर दौड़ रहे हैं। बीमा कम्पनियों का भी मानना है कि वाहनों की मूल्य वर्ष दर वर्ष कम होती जाती है इसलिए ग्राहक पुराने वाहनों का बीमा कराना पसन्द नहीं करते। यद्यपि वाहन बीमा के क्षेत्र में वाहनों की स्व क्षति का अनुपात तृतीय पक्ष दावों की राशि के

अनुपात में बहुत कम है जो कि सत्र 2009-10 में 55% था जब तक कि तृतीय पक्ष दावों में यह 98% है जो कि रु.4380 करोड़ था। प्रीमियम की दृष्टि से जून 2011 तक वाहन बीमा का स्व क्षति प्रीमियम 3201 करोड़ था तथा तृतीय पक्ष प्रीमियम 2043 करोड़ जो कि क्रमश गत वर्ष की तुलना में 23.10% तथा 39.24% अधिक है। वर्ष 2011-12 जून तक का 5244 करोड़ का यह प्रीमियम कुल आम बीमा व्यापार का 34.33% है जो कि गत वर्ष इसी माह में 35.44% था। वाहनों के बीमा का तृतीय पक्ष प्रीमियम अभी भी टैरिफदरों पर लिया जाता है तथा वाणिज्यिक वाहनों का सम्पूर्ण तृतीय पक्ष प्रीमियम सामान्य बीमा निगम द्वारा संचालित तृतीय पक्ष पूल को हस्तान्तरित कर दिया जाता है। बीमा रेग्युलेटर द्वारा तृतीय पक्ष प्रीमियम दरों में हाल ही में अच्छी वृद्धि की गई है। तृतीय पक्ष दावों का अत्याधिक दावानुपात होने का एक कारण यह भी है कि भारत में दो तिहाई वाहनों का बीमा ही नहीं है।

यातायात नियमों की अनदेखी:

भारत में यातायात नियमों का मखौल आम बात है सुरक्षित यातायात के लिए मोटर वाहन अधिनियम के तहत बने नियमों की आए दिन धज्जिया उड़ते देखी जा सकती है। जहाँ पुलिस प्रशासन लोगों से ट्रेफिक नियमों का पालन नहीं करवा पा रहा है वंही वाहन मालिक भी नियमों की अनदेखी करने में पीछे नहीं हैं। शहरों में जहां लोग कार पर ब्लैक शीशा

चढ़ाकर चलते देखे जा सकते हैं, वहीं पर आडे तिरछे और विशेष डिजाइन के नम्बर युवाओं का स्टेटस सिम्बल बना गया है। हालांकि यातायात व्यवस्था को पटरी पर लाने के लिए ट्रेफिक पुलिस ने ऐसे वाहनों के खिलाफ अभियान भी चलाये हैं लेकिन वाहनों के पंजीकरण से जुड़े नियमों पर अभी भी ध्यान नहीं दिया जा रहा है। जिसमें सर्वाधिक महत्वपूर्ण है बीमा के बिना वाहनों का पंजीकरण करना है। 2009 में साधारण बीमा निगम ने क्षेत्रीय यातायात कार्यालयों के माध्यम से अभी तक वाहनों को पकड़ने की एक मुहिम चलाई थी क्यों कि सामान्य बीमा काउन्सिल की एक रिपोर्ट के मुताबिक 70% दुपहिया वाहन तथा 40% चौपाहिया वाहन देश में अभीमित हैं। भारत में लगभग 4 लाख दुपहिया वाहन प्रति वर्ष निर्मित होते हैं। परेशानी ज्यादा नए वाहनों के बीमें की नहीं हैं मुख्य मुद्दा है कि वाहनों के बीमें का नियमित नवीनीकरण नहीं होता। विशेषज्ञों का मानना है कि व्यक्तिगत बीमा पालिसियों की बात छोड़िए, प्रत्येक तीन में से एक वाहन का जो सड़कों पर चलते हैं अनिवार्य तृतीय पक्ष बीमा भी नहीं होती। जो कि न केवल यातायात नियमों का उल्लंघन है बल्कि कानूनी रूप से भी एक अपराध है।

वाहन चोरी का डर पर बीमा नहीं:

उन वाहन मालिकों के लिए जो अपने नए वाहन को भी बिना बीमा के चलाते हैं, वाहन चोरी का डर सदैव

सताता रहता है। कुछ क्षेत्रों में नए वाहनों की चोरी की बारदाते बहुत बढ़ गई हैं। वाहन चोरों के लिए उन वाहनों की अच्छी कीमत मिलती है जिनका तोपजीयन है, ना बीमा हो। ऐसे वाहनों का न तो कोई सुराग मिलता है न पुलिस खोजने में कामयाब हो पाती है। वाहन विक्रेताओं के लिए नए वाहनों की बिना बीमा के सुपूर्दगी देना भी गैर कानूनी है। बिना पंजीयन और बिना बीमा के जो लोग गाडी चलाते हैं कानूनी रूप से दोषी है। जो भी अभीमित वाहन को चलाते हैं या चलाने के लिए अधिकृत करते हैं वह मोटर वाहन अधिनियम की धारा 146 का उल्लंघन करते हैं जो कि तीन माह के कारावास तथा 1000 रुपए के जुर्माने या दोनों से दण्डनीय है। धारा 146 जिसे धारा 196 के साथ पठा जाए तो दोनों ही सजा सुनाई जा सकती हैं। बीमा रेग्युलेटर का मानना है कि अभीमित वाहनों के लिए सख्त दण्डनीय तन्त्र होने की जरूरत है क्योंकि वर्तमान में अभीमित वाहनों की संख्या सड़कों पर बढ़ती जा रही है। यही नहीं इसके कारण बीमा फ्राड तथा इन्कर्ड दावानुपात भी बढ़ रहा है। मोटर वाहन अधिनियम के प्रावधानों का सख्ती से पालन नहीं होने के कारण अकेली बीमा कम्पनियां ही नुकसान नहीं उठा रही हैं इसका खामियाजा, सरकार पुलिस तथा न्याय व्यवस्था तथा आमजन (तृतीय पक्ष) को भी भुगतना पड़ रहा है।

वाहन बीमा की उपयोगिता:

अगर कानूनी अनिवार्यता पर गौर न करें तो भी वाहन

विशेषज्ञों का मानना है कि व्यक्तिगत बीमा पालिसियों की बात छोड़िए, प्रत्येक तीन में से एक वाहन का जो सड़कों पर चलते हैं अनिवार्य तृतीय पक्ष बीमा भी नहीं होती। जो कि न केवल यातायात नियमों का उल्लंघन है बल्कि कानूनी रूप से भी एक अपराध है।

हाल ही में बीमा रेग्युलेटर द्वारा बीमा को तृतीय पक्ष प्रीमियम दरों में अच्छी वृद्धि की गई है। किन्तु अन्य देशों की तुलना में भारत में वाहन बीमा अभी भी बहुत सस्ता है।

बीमा की समाज के सभी वर्गों को अत्याधिक उपयोगी है। वाहन बीमा से न केवल वाहन की हानि की क्षतिपूर्ति हो सकती है बल्कि तृतीय पक्ष की मृत्यु, शारीरिक क्षति, सम्पत्ति की क्षति एवं मालिक व ड्राइवर की व्यक्तिगत दुर्घटना की क्षति भी शामिल है। मोटर वाहन बीमा पालिसी इतनी व्यापक है कि इसमें केवल एक्सक्लूजन्स (कवर के बाहर जोखिमों) को छोड़ दे तो लगभग हर नुकसान की स्थिति में बीमा कम्पनी की क्षतिपूर्ति करने की जिम्मेदारी होती है। यही नहीं क्षतिग्रस्त वाहन के टोचन का खर्चा, स्पॉट पर मरम्मत का खर्चा तथा निजी वाहन में सफर कर रहे परिवारजनों की शारीरिक क्षति भी कवर होती है। अगर वर्तमान में उपलब्ध सुविधाओं पर नजर डाली जाए तो सबसे बड़ी सहायता है नकद विहिन (कैशलैस) सैटलमेंट। जिसमें बीमा कम्पनी द्वारा अपने टाइ-अप के तहत निर्धारित वर्कशाप के माध्यम से पालिसी के तहत दावे का सीधा भुगतान कर दिया जाता है। पालिसीधारक को केवल पालिसी क्लाइमेट के तहत कटौतियां ही भुगतनी होती है। इसके अतिरिक्त एड आन कवर लेने पर हास का न कटना, साल्वेज कटौती न करना, वाहन दुर्घटना ग्रस्त होने पर वैकाल्पिक वाहन की व्यवस्था तथा वाहन में रखे बैगेज की अति की भी पूर्ति की जाती है। वाणिज्यिक वाहनों में वाहन से जुड़े व्यक्तियों क्रमशः चालक, परिचालक, माल चढ़ाने उतारने वाले आदि व्यक्तिको की भी मृत्यु, विकलांगता या शारिरिक

क्षति की जोखिम बीमा कम्पनी द्वारा देय है। किन्तु सर्वाधिक महत्वपूर्ण बात यह है कि वाहन का बीमा हो जो वर्ष दर वर्ष नवीनीकृत हो जिससे दुर्घटना के दिन पालिसी समाप्त न हो गई हो।

हाल ही में बीमा रेग्युलेटर द्वारा बीमा को तृतीय पक्ष प्रीमियम दरों में अच्छी वृद्धि की गई है। किन्तु अन्य देशों की तुलना में भारत में वाहन बीमा अभी भी बहुत सस्ता है। वाहनों का बीमा न कराने का कारण प्रीमियम दरें नहीं है बल्कि मोटर वाहन अधिनियम के उपवाधों का शक्ति से पालन नहीं होना है। ग्रामीण क्षेत्रों में यातायात सम्बन्धी नियमों से कोई सरोकार नहीं है। न ही इन क्षेत्रों में ट्रैफिक पुलिस की सम्पूर्ण व्यवस्था है। वाहनों का बीमा न होना सामूहिक रूप से भारतीय अर्थ व्यवस्था पर बहुत ही ज्यादा प्रभाव डालता है। इस सन्दर्भ में 2009 में डेहली हाई कोर्ट ने मामले को गम्भीरता से लेते हुए कानून की अनुपालना में लापरवाही बरतने पर दिल्ली के पुलिस कमिशनर से जबाब तलब किया कि क्यों नहीं धारा 196 के तहत बिना बीमा के वाहन चलाने वालों पर कार्यवाही की जा रही है ? कार्यवाही का आधार था कि एक वाणिज्यिक वाहन के लापरवाही से चलाने पर एक 18 व्यक्ति बालक की मृत्यु हो गई किन्तु वाहन की बीमा ही नहीं था तथा वाहन मालिक क्षतिपूर्ति का भुगतान करने की स्थिति में नहीं था। ऐसी कार्यवाही समय समय पर सुधार नहीं है। प्रश्न है जागरूकता लाने का जिस दिशा में बीमा

कम्पनियाँ, पुलिस प्रशासन यहां तक कि बीमा रेग्युलेटर भी सफल नहीं हो पाए। समय समय पर मोटर वाहन अधिनियम में सजा एवं दण्ड के प्रावधानों में और बढ़ोत्तरी की मांग उठी है तथा उस पर संशोधन अभी बाकी है। अब समय आ गया है कि अबीमित वाहनों पर सख्त कार्यवाही की जाए तथा कानूनी प्रावधानों की अनुपालना के साथ साथ वाहन मालिकों को वाहन बीमा की अनिवार्यता, उपयोगिता एवं उपलब्धता से भी परिचित कराया जाए।

हाल ही में सामान्य बीमा काउन्सिल ने मोटर बीमा ब्यूरो स्थापित करने की दिशा में अच्छी पहल की है। यह ब्यूरो उन वाहनों की जांच करेगा जिन की बीमा पालिसी का नवीनीकरण नहीं हुआ है। इस तरह संग्रहित डाटा सभी सामान्य बीमा कम्पनियों से शेयर किया जाएगा जिससे कि उन वाहन मालिकों से सम्पर्क कर उनके वाहनों का बीमा नवीनीकृत किया जा सके। मोटर वाहन बीमा ब्यूरो सभी प्रकार के पंजीकृत वाहनों का डाटा संग्रहित करेगा तथा बीमा कम्पनियों के उपलब्ध आकड़ों से प्रति वर्ष उन पर नियन्त्रण रखा जाएगा। यह भी सम्भव है कि ऐसे वाहन जिनका कभी भी बीमा न हुआ हो इन आकड़ों में शामिल न हो सके। ब्यूरो ऐसे वाहनों के लिए वाहन निर्माताओं से भी सम्पर्क करेगा। इसके अतिरिक्त डाटा संग्रहण के लिए कुछ एजेन्सियों की भी मदद ली जाएगी। आज की स्थिति में भारतीय

सड़कों पर चलने वाले वाहनों में कौन बीमित है कौन अबीमित यह पता लगाना बिल्कुल सम्भव नहीं है। यद्यपि इंग्लैंड में भी इसी तरह का वाहन बीमा ब्यूरो सक्रिय है जो वाहनों के बीमा कराने में महत्वपूर्ण भूमिका निभा रहा है। इंग्लैंड के ब्यूरो के अनुसार वहां लगभग 9 लाख ड्राइवर जो 30 वर्ष से कम आयु के हैं अपने वाहनों को बिना बीमा के चला रहे हैं। उन में से 60% ऐसे हैं जो सोचते हैं कि वो कभी भी पकड़े जा सकते हैं किन्तु उनमें से केवल 7% ही ऐसे हैं जिन्हें यह पता है कि बिना बीमा के वाहन चलाने पर पकड़े जाने पर परिणाम क्या होंगे। इस ब्यूरो की मदद से इंग्लैंड में लगभग 500 वाहन बिना बीमा वाले प्रति दिन पकड़े जाते हैं। इस प्रकार की संस्था का भारत में होने तथा सक्रिय भूमिका अदा करने से वाहनों के बीमा की स्थिति में आश्चर्यजनक सुधार होगा।

लेखक कॉर्पोरेट हेड (ट्रेनिंग), श्रीराम जनरल इन्श्योरेंस, जयपुर
इस निबंध में व्यक्त विचार लेखक के व्यक्तिगत विचार हैं।

हाल ही में सामान्य बीमा काउन्सिल ने मोटर बीमा ब्यूरो स्थापित करने की दिशा में अच्छी पहल की है। यह ब्यूरो उन वाहनों की जांच करेगा जिन की बीमा पालिसी का नवीनीकरण नहीं हुआ है।

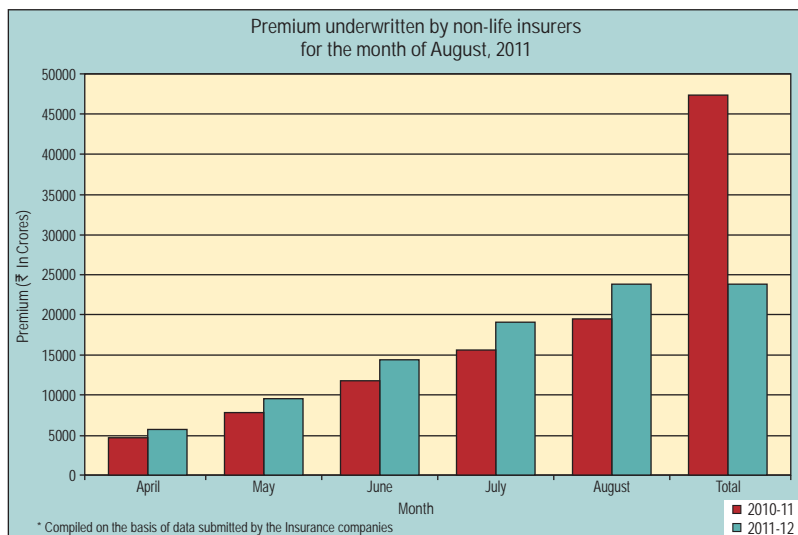
Report Card: General

GROSS PREMIUM UNDERWRITTEN FOR AND UP TO THE MONTH OF AUGUST, 2011

(₹ in Crores)

INSURER	AUGUST		APRIL-AUGUST		GROWTH OVER THE CORRESPONDING PREVIOUS YEAR
	2011-12	2010-11*	2011-12	2010-11*	
Royal Sundaram	117.87	88.10	591.92	442.73	33.70
Tata-AIG	127.04	88.70	730.42	528.78	38.13
Reliance General	122.08	125.31	782.50	689.66	13.46
IFFCO-Tokio	158.49	128.36	853.29	769.42	10.90
ICICI-lombard	466.17	358.09	2125.91	1755.00	21.13
Bajaj Allianz	272.15	230.00	1358.16	1198.44	13.33
HDFC ERGO General	163.84	111.08	772.38	544.20	41.93
Cholamandalam	98.36	73.18	546.17	398.81	36.95
Future Generali	79.53	55.11	384.16	261.39	46.97
Universal Sampo	28.34	22.79	139.56	126.96	9.92
Shriram General	90.15	56.05	415.82	253.98	63.72
Bharti AXA General	60.71	39.77	324.11	219.57	47.61
Raheja QBE	3.31	1.03	7.92	3.08	157.46
SBI General	17.19	0.32	75.38	6.94	985.63
L&T General	10.83	0.00	49.64	0.00	
Star Health & Allied Insurance	30.74	26.54	542.80	555.15	-2.23
Apollo MUNICH	28.06	12.55	130.13	68.53	89.88
Max BUPA	10.43	1.91	31.01	5.80	434.94
New India	613.59	462.63	3636.86	3058.05	18.93
National	558.93	441.65	3001.04	2379.23	26.13
United India	642.09	511.78	3245.26	2571.34	26.21
Oriental	451.06	416.26	2455.51	2228.77	10.17
ECGC	64.70	70.18	374.05	338.29	10.57
AIC	849.93	431.55	1138.75	709.94	60.40
PRIVATE TOTAL	1885.28	1418.88	9861.28	7828.45	25.97
PUBLIC TOTAL	3180.30	2334.05	13851.47	11285.61	22.74
GRAND TOTAL	5065.58	3752.93	23712.75	19114.06	24.06

Note: Compiled on the basis of data submitted by the Insurance companies
 * Figures revised by insurance companies



The 5th Health Insurance Summit 2011 "Health Insurance: Vision 2020" was held on 15th September 2011, at New Delhi.

In a rapidly evolving environment, it may be hard to envision the future of Health insurance but the 5th CII Health Insurance Summit certainly strived to predict what Health insurance will look like in 2020; and discussed what systematic enhancements are required to reach an optimum level which delivers high quality care at reasonable premiums. In addition, the work of the various CII sub-groups which focus on critical issues was presented. These working groups strive to help all the stakeholders to prepare for significant, sustainable and inclusive growth. With the ultimate focus on consumers, the findings of the sub-groups help payers and providers to work together, to help deliver better choices and services to the consumers.

The event presented a vision of what is possible; and offered a unique perspective of the steps we can take to achieve the full potential.



Seen in the photograph of the inaugural session are: (L to R) Mr Bhargav Dasgupta, MD & CEO, ICICI Lombard General Insurance Co Ltd; Mr A Vaidheesh, MD, Johnson & Johnson Medical India; Mr J Hari Narayan, Chairman, Insurance Regulatory and Development Authority; Dr Naresh Trehan, Chairman, Medanta – The Medicity; and Mr Chandrajit Banerjee, Director General, Confederation of Indian Industry.



Mr. J. Hari Narayan delivering the keynote address. Also seen in the picture are (L to R): Mr Bhargav Dasgupta, Mr A Vaidheesh, Dr Naresh Trehan and Mr Chandrajit Banerjee.



Mr. G. Srinivasan, CMD, United India Insurance Co Ltd and In-charge CMD, New India Assurance Co Ltd sharing a thought with Mr. J. Hari Narayan. In the background, Mr. Hemant Kaul, CEO and MD, Bajaj Allianz General Insurance Co Ltd; and Mr. Bhargav Dasgupta can also be seen.

Statistical Supplement

(Monthly - July, 2011)

Name of the Insurer: Bajaz Allianz General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	2628.57	11357.33	35491	137347	-85.16	1046.26	41597122.00	148146577.00
Previous year	2713.73	10311.07	32198	120881	-249.49	1378.24	27323476.00	132005866.00
Marine Cargo	617.35	3217.88	13566	55027	116.59	523.09	6041539.00	32940874.00
Previous year	500.77	2694.79	14644	57018	-163.65	381.54	5289224.00	55448111.00
Marine Hull (Including Onshore & Offshore oil energy)	7.41	43.31	15	44	-9.94	-206.68	194086.00	955372.00
Previous year	17.35	249.99	31	160	-28.68	10.63	168974.00	2202377.00
Marine (Total)	624.76	3261.19	13581	55071	106.65	316.41	6235625.00	33896246.00
Previous year (Total)	518.11	2944.78	14675	57178	-192.34	392.17	5458198.00	57650488.00
Aviation	179.73	838.67	28	123	-384.84	-194.22	4393377.00	9440253.00
Previous year	564.58	1032.88	36	98	200.59	-151.05	9915556.00	15099765.00
Engineering	1329.85	4102.11	1373	5679	469.71	845.22	11502944.00	54889150.00
Previous year	860.14	3256.89	1525	5561	-49.03	-297.29	19630795.00	69107352.00
Motor Own Damage	11312.50	44077.93	323228	1318235	1545.98	3746.75	806594.00	3206375.00
Previous year	9766.52	40331.18	335670	1320488	2084.57	8087.17	758382.00	2991307.00
Motor Third party	4631.79	16629.61	323228	1318254	1270.89	2697.16		
Previous year	3360.91	13932.45	336229	1340226	289.92	1019.32		
Motor (Total)	15944.29	60707.54	323228	1318254	2816.86	6443.91	806594.00	3206375.00
Previous year (Total)	13127.43	54263.63	336229	1340226	2374.49	9106.49	758382.00	2991307.00
Workmen's compensation / Employer's liability	269.30	1082.77	1812	7537	64.91	279.72	40265.00	174535.00
Previous year	204.40	803.05	1847	7003	51.41	195.18	26142.00	107734.00
Public Liability	0.89	33.06	5	80	-0.68	3.41	6598.00	156246.00
Previous year	1.57	29.65	6	69	-0.02	1.31	7800.00	76094.00
Product Liability	151.02	714.20	58	241	29.36	159.12	89491.00	313144.00
Previous year	121.66	555.08	38	185	-1.65	199.86	69179.00	226086.00
Other Liability Covers	2521.59	4303.97	304	1206	239.30	774.04	369112.00	1177086.00
Previous year	2282.30	3529.93	307	1192	1225.67	1412.95	241272.00	933232.00
Liability (Total)	2942.81	6134.01	2179	9064	332.89	1216.30	505466.00	1821011.00
Previous year (Total)	2609.93	4917.71	2198	8449	1275.41	1809.30	344393.00	1343146.00
Personal Accident	411.13	1599.14	7667	25950	-24.15	-136.09	1223289.00	7208545.00
Previous year	435.28	1735.23	10795	32934	-61.02	-454.53	5437715.00	23888952.00
Medical Insurance	2695.69	11655.11	76548	256348	669.81	2555.97	2755486.00	13153953.00
Previous year	2025.89	9099.13	109993	305883	-199.27	-1108.55	2500554.00	10367474.00
Overseas Medical Insurance	624.57	2649.50	40889	205005	256.59	359.68	1460868.00	5677864.00
Previous year	367.98	2289.83	46101	204804	-21.39	156.53	262305.00	486454.00
Health (Total)	3320.26	14304.61	117437	461353	926.39	2915.65	4216354.00	18831817.00
Previous year (Total)	2393.87	11388.96	156094	510687	-220.66	-952.02	2762859.00	10853928.00
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	112.10	394.51	20	74	-465.53	-610.27	307120.00	1922238.00
Previous year	577.63	1004.78	30	79	439.21	670.42	480396.00	1331414.00
All Other Miscellaneous	1526.62	5902.11	59000	207304	289.57	-86.63	2685639.00	10234066.00
Previous year	1237.05	5988.74	70861	208310	19.12	374.11	2603716.00	53503394.00
Grand Total	29020.14	108601.22	560004	2220219	3982.38	11756.53	73473530.00	289596278.00
Previous year (Total)	25037.75	96844.68	624641	2284403	3536.28	11875.85	74715486.00	367775612.00

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
227.74	592.23	2392	10350	0.00	0.00	0.00	0.00		
117.57	796.18	4150	15974	0.00	0.00	0.00	0.00		
20.37	108.05	769	2764	0.00	0.00	0.00	0.00		
15.46	85.29	772	2846	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
20.37	108.05	769	2764	0.00	0.00	0	0	0	0
15.46	85.29	772	2846	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
69.58	391.58	142	552	0.00	0.00	0.00	0.00		
124.01	528.76	275	927	0.00	0.00	0.00	0.00		
739.63	3692.08	3982	66574	0.00	0.00	0.00	0.00		
91.77	379.49	2504	10045	0.00	0.00	0.00	0.00		
370.45	1529.46	3982	38266	0.00	0.00	0.00	0.00		
1173.86	4582.76	33859	130536	0.00	0.00	0.00	0.00		
1110.08	5221.54	3982	66574	0.00	0.00	0	0	0	0
1265.64	4962.26	33859	130536	0.00	0.00	0	0	0	0
27.26	164.30	229	1203	0.00	0.00	0.00	0.00		
26.90	134.10	274	1217	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.11	205.57	7	2543	0.00	0.00	0.00	0.00		
0.70	145.06	10	45	0.00	0.00	0.00	0.00		
27.37	369.87	236	3746	0.00	0.00	0	0	0	0
27.60	279.16	284	1262	0.00	0.00	0	0	0	0
43.71	183.96	5264	15114	2.03	12.00	5050.00	27226.00		
55.14	397.60	5911	7459	3.15	4.83	12100.00	15300.00		
127.39	422.99	2454	7610	0.00	0.00	0.00	0.00	81827.00	340921.00
113.34	293.16	2743	6378	0.00	0.00	0.00	0.00	75469.00	325320.00
0.00	0.00	0	0	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0	0	0.00	0.00	0.00	0.00	0.00	0.00
127.39	422.99	2454	7610	0.00	0.00	0	0	81827	340921
113.34	293.16	2743	6378	0.00	0.00	0	0	75469	325320
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
301.94	1254.63	11010	38533	0.00	0.00	0.00	0.00		
272.50	1011.43	12552	49781	0.00	0.00	0.00	0.00		
1928.18	8544.85	26249	145243	2.03	12.00	5050	27226	81827	340921
1991.25	8353.83	60546	215163	3.15	4.83	12100	15300	75469	325320

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	308.01	2530.27	1886	5391	308.01	2222.26	588146.85	5179402.62
Previous year	297.10	2136.98	1435	3832	297.10	1839.88	11316448.78	26966117.70
Marine Cargo	130.33	934.82	201	668	130.33	804.49	206086.66	1779376.14
Previous year	78.83	476.04	179	652	78.83	397.21	4332376.31	9964892.58
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	130.33	934.82	201	668	130.33	804.49	206086.66	1779376.14
Previous year (Total)	78.83	476.04	179	652	78.83	397.21	4332376.31	9964892.58
Aviation								
Previous year								
Engineering	128.04	503.60	144	443	128.04	375.57	105096.31	411116.02
Previous year	149.25	384.36	140	508	149.25	235.10	3326066.91	7606246.44
Motor Own Damage	2937.07	11405.51	42882	169854	2937.07	8468.44	174110.27	679739.59
Previous year	2306.06	8782.59	38994	141403	2306.06	6476.53	2048998.69	4236404.32
Motor Third party	1222.19	4186.48	42882	169854	1222.19	2964.29		
Previous year	752.21	2513.29	38994	141403	752.21	1761.08		
Motor (Total)	4159.26	15591.98	42882	169854	4159.26	11432.72	174110.27	679739.59
Previous year (Total)	3058.27	11295.88	38994	141403	3058.27	8237.61	2048998.69	4236404.32
Workmen's compensation / Employer's liability	16.68	69	55	204	16.68	52.55	2370.94	11947
Previous year	14.70	53	112	392	14.70	38.76	35658.97	76006
Public Liability	0.00		0		0.00		0.00	
Previous year	0.00		0		0.00		0.00	
Product Liability	0.00		0		0.00		0.00	
Previous year	0.00		0		0.00		0.00	
Other Liability Covers	23.91	109	19	60	23.91	85.53	13845.48	40780
Previous year	2.01	29	5	67	2.01	27.00	80073.52	140832
Liability (Total)	40.59	178.68	74	264	40.59	138.09	16216.41	52727.25
Previous year (Total)	16.71	82.48	117	459	16.71	65.77	115732.49	216837.35
Personal Accident	160.88	954.63	1634	4726	160.88	793.75	295409.26	2413494.73
Previous year	162.10	752.76	1819	4802	162.10	590.66	16488795.49	35605855.92
Medical Insurance	1432.44	5365.76	1983	7250	1432.44	3933.32	10475.55	17306.31
Previous year	1296.02	2738.72	2572	5356	1296.02	1442.70	53851.55	105703.94
Overseas Medical Insurance								
Previous year								
Health (Total)	1432.44	5365.76	1983	7250	1432.44	3933.32	10475.55	17306.31
Previous year (Total)	1296.02	2738.72	2572	5356	1296.02	1442.70	53851.55	105703.94
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	67.34	280.60	1829	5228	67.34	213.26	54228.25	312761.67
Previous year	22.38	113.00	1212	2850	22.38	90.63	821103.22	1785189.06
Grand Total	6426.90	26340.35	50633	193824	6426.90	19913.45	1449769.56	10845924.34
Previous year (Total)	5080.66	17980.22	46468	159862	5080.66	12899.56	38503373.45	86487247.31

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
13.21	36.97	1730	4265						
	0.22		16						
0.06	0.35	2	9						
0.06	0.35	2	9	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
2.23	7.01	9	27						
119.27	405.40	2367	9319						
	64.74		1945						
58.36	187.31	0	0						
	11.64								
177.63	592.71	2367	9319	0.00	0.00	0	0	0	0
0.00	76.39	0	1945	0.00	0.00	0	0	0	0
1.58	2	4	7						
			0						
1.58	1.81	4	7	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
18.74	125.25	107	443						
	25.92		52						
10.46	28.01	78	275						
457.28	460.78	1	13	190.53					
10.46	28.01	78	275	0.00	0.00	0	0	0	0
457.28	460.78	1	13	190.53	0.00	0	0	0	0
9.41	25.95	1641	4232						
	1.54		72						
233.31	818.06	5938	18577	0.00	0.00	0	0	0	0
457.28	564.85	1	2098	190.53	0.00	0	0	0	0

Name of the Insurer: Cholamandalam Ms General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	546.1	3,329.1	11,655	50,400	149.8	671.7	2,628,276	12,445,370
Previous year	396.3	2,657.4	7,630	25,306	309.4	(339.7)	859,583	7,850,788
Marine Cargo	577.8	1,779.1	724	2,741	164.7	239.5	3,387,555	13,118,557
Previous year	413.1	1,539.6	938	3,487	3.8	(1.3)	1,968,571	7,701,231
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-	-	(1.1)	-	0
Previous year	-	1.1	-	-	(4.9)	(9.2)	-	104
Marine (Total)	577.8	1,779.1	724	2,741	164.7	238.5	3,387,555.0	13,118,556.9
Previous year (Total)	413.1	1,540.7	938	3,487	(1.1)	(10.5)	1,968,571	7,701,335
Aviation	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	218.8	873.7	802	3,414	40.5	16.9	364,525	1,502,440
Previous year	178.2	856.8	1,384	3,171	(78.0)	(63.0)	306,454	1,417,774
Motor Own Damage	3,109.7	17,165.5	69,352	250,280	(144.2)	4,137.1	299,217	1,080,999
Previous year	3,254.0	13,028.5	52,979	197,047	491.7	2,113.0	212,386	803,264
Motor Third party	4,623.0	10,791.4	69,591	250,961	3,195.0	5,073.8	-	-
Previous year	1,428.0	5,717.5	53,107	197,548	568.3	2,359.0	-	-
Motor (Total)	7,732.7	27,956.9	69,591	250,961	3,050.7	9,210.9	299,217	1,080,999
Previous year (Total)	4,682.0	18,746.0	53,107	197,548	1,060.1	4,472.0	212,386	803,264
Workmen's compensation / Employer's liability	(1.2)	140.3	363	1,409	(37.2)	8.5	9,641	35,616
Previous year	35.9	131.7	220	520	(1.3)	(36.6)	4,500	19,977
Public Liability	113.0	401.6	69	397	71.7	92.9	11,275	79,808
Previous year	41.3	308.7	291	1,318	(45.0)	(43.3)	15,079	146,769
Product Liability	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Other Liability Covers	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Liability (Total)	111.8	541.9	432	1,806	34.5	101.5	20,916	115,423
Previous year (Total)	77.3	440.4	511	1,838	(46.3)	(79.9)	19,579	166,746
Personal Accident	174.3	1,223.5	1,789	8,141	(171.9)	69.7	1,892,296	9,726,156
Previous year	346.2	1,153.8	2,985	7,639	99.9	95.7	425,241	1,314,903
Medical Insurance	3,210.1	8,380.9	2,345	8,409	1,491.5	2,365.7	295,623	1,118,466
Previous year	1,718.6	6,015.2	2,813	9,158	489.6	(917.7)	91,545	301,607
Overseas Medical Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Health (Total)	3,210.1	8,380.9	2,345	8,409	1,491.5	2,365.7	295,623	1,118,466
Previous year (Total)	1,718.6	6,015.2	2,813	9,158	489.6	(917.7)	91,545	301,607
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	79.6	695.3	5,177	28,240	(210.1)	(457.9)	344,118	1,644,750
Previous year	289.7	1,153.2	8,670	35,656	(63.8)	(202.3)	323,272	2,067,473
Grand Total	12,651.2	44,780.4	92,515	354,112	4,549.8	12,217.0	9,232,527	40,752,161
Previous year (Total)	8,101.4	32,563.5	78,038.0	283,803.0	1,769.7	2,954.6	4,206,631	21,623,890

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
-	-	-	-	109	269	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	16.3	47.7	-	-	-	-
328.9	1,064.0	7,634	24,502	-	-	-	-	-	-
151.8	547.6	3,331	11,243	-	-	-	-	-	-
169.9	519.2	7,668	24,596	-	-	-	-	-	-
54.5	197.5	3,339	11,294	-	-	-	-	-	-
498.8	1,583.3	7,668	24,596	-	-	-	-	-	-
206.3	745.1	3,339	11,294	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
1,669.4	4,951.4	-	-	-	-	1,045,131.0	3,355,716.0	-	-
1,090.3	3,241.1	-	-	-	-	635,421.0	2,069,223.0	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
1,669.4	4,951.4	-	-	-	-	1,045,131.0	3,355,716.0	-	-
1,090.3	3,241.1	-	-	-	-	635,421.0	2,069,223.0	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
-	-	-	-	-	-	-	-	-	-
32.5	118.2	1,600	5,824	-	-	-	-	-	-
-	-	-	-	7.1	75.7	-	-	-	-
2,200.7	6,652.9	9,268	30,420	-	-	1,045,131.0	3,355,716.0	-	-
1,296.6	3,986.2	3,339	11,294	132.41	392.31	635,421.0	2,069,223.0	-	-

Name of the Insurer: Future General India Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	877.66	4087.59	1886	8055	335.47	1092.00	1460852.07	5176718.06
Previous year	542.19	2995.59	1045	3913	366.37	1828.10	771835.02	1641733.14
Marine Cargo	217.12	1571.93	786	2996	14.83	328.76	338917.25	2686473.80
Previous year	202.29	1243.17	2911	12650	117.37	838.31	403935.52	2432656.07
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)	217.12	1571.93	786	2996	14.83	328.76	338917.25	2686473.80
Previous year (Total)	202.29	1243.17	2911	12650	117.37	838.31	403935.52	2432656.07
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	226.67	945.49	495	1761	-34.34	-12.20	252811.01	524122.78
Previous year	261.01	957.70	287	1073	131.97	464.64	189212.01	437504.48
Motor Own Damage	2542.74	10501.06	42766	178375	833.71	3623.91	235453.64	922937.80
Previous year	1709.03	6877.15	41073	160728	528.28	2596.21	150677.09	290830.82
Motor Third party	1445.87	5385.09	41	173	751.36	2683.35		
Previous year	694.51	2701.74	41073	160728	216.67	1038.94		
Motor (Total)	3988.61	15886.15	42766	178375	1585.07	6307.26	235453.64	922937.80
Previous year (Total)	2403.54	9578.89	41073	160728	744.95	3635.15	150677.09	290830.82
Workmen's compensation / Employer's liability	114.83	423.06	546	1906	66.25	237.32	11342.47	61289.12
Previous year	48.58	185.75	357	1144	26	94	4396.20	16810.09
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	-2	0.00	0.00
Product Liability	101.98	397.01	71	416	39.95	154.19	33050.51	82587.29
Previous year	62.03	242.82	61	321	34	101	10659.02	46527.06
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
Liability (Total)	216.81	820.07	617	2322	106.19	391.51	44392.98	143876.42
Previous year (Total)	110.61	428.56	418	1465	60.72	192.82	15055.22	63337.16
Personal Accident	213.15	1326.95	4106	14488	75.10	670.45	196788.98	1024334.72
Previous year	138.04	656.50	3151	9744	27.92	191.71	139808.45	451200.16
Medical Insurance	1033.22	4409.23	1593	5318	240.79	621.27	31185.30	70824.27
Previous year	792.43	3787.96	1090	3773	343.17	1125.41	12920.06	35215.91
Overseas Medical Insurance	77.41	431.84	4596	26042	7.49	63.98	6114.60	38750.23
Previous year	69.92	367.86	3919	21704	69.92	367.86	7189.35	31484.92
Health (Total)	1110.63	4841.08	6189	31360	248.27	685.25	37299.90	109574.50
Previous year (Total)	862.35	4155.82	5009	25477	413.09	1493.28	20109.41	66700.83
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	258.71	984.11	2175	9258	123.34	372.82	294087.74	988887.84
Previous year	135.37	611.30	1453	15951	37.27	73.21	142648.13	986424.28
Grand Total	7109.35	30463.37	59020	248615	2453.93	9835.85	2860603.56	11576925.91
Previous year (Total)	4655.41	20627.53	55347	231001	1899.66	8717.22	1833280.86	6370386.94

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
25.92	349.90	216	853						
30.21	244.86	105	404						
25.85	193.34	55	203						
15.86	145.39	212	1370						
25.85	193.34	55	203	0.00	0.00	0	0		
15.86	145.39	212	1370	0.00	0.00	0	0		
12.47	63.30	40	137						
27.55	73.73	20	77						
251.78	1,012.89	3982	17826						
118.33	503.29	3218	14842						
165.64	598.47								
78.89	238.60	-	-						
417.42	1,611.36	3982	17826	0.00	0.00	0	0		
197.22	741.89	3218	14842	0.00	0.00	0	0		
5.58	52.05	19	100						
	33.19		54						
5.02	8.48	-	7						
4.41	4.41	32	32						
10.61	60.54	19	107	0.00	0.00	0	0		
4.41	37.60	32	86	0.00	0.00	0	0		
3.16	50.88	286	1214						
2.16	42.41	174	528						
2.87	98.72	72	308					461	4719
2.38	58.06	53	191						
3.78	20.50	209	1251						
3.03	7.40	187	436						
6.66	119.23	281	1559	0.00	0.00	0	0	461	4719
5.41	65.46	240	627	0.00	0.00	0	0	0	0
27.61	137.61	863	3556						
25.08	132.00	393	12537						
529.68	2586.14	5742	25455	0.00	0.00	0	0	461	4719
307.90	1483.34	4394	30471	0.00	0.00	0	0	0	0

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	1,878.18	10,678.00	3,829	15,043	749.11	3,574.82	4,022,163	29,094,582
Previous year	1,129.07	7,103.18	3,099	11,043	887.56	4,275.05	(8,359,701)	17,402,667
Marine Cargo	400.48	1,874.56	230	754	138.60	786.23	1,295,488	7,772,766
Previous year	261.88	1,088.33	170	605	177.08	652.62	639,347	3,780,416
Marine Hull (Including Onshore & Offshore oil energy)	113.57	654.82	13	183	60.90	268.27	5,743	109,468
Previous year	52.67	386.56	14	162	33.67	(36.10)	12,621	79,436
Marine (Total)	514.06	2,529.38	243	937	199.51	1,054.49	1,301,231	7,882,234
Previous year (Total)	314.55	1,474.89	184	767	210.74	616.52	651,968	3,859,853
Aviation	373.65	967.11	4	18	(439.27)	(969.36)	44,021	1,404,852
Previous year	812.92	1,936.48	2	15	724.13	1,657.24	17,100	1,205,797
Engineering	430.84	2,882.17	366	1,387	152.16	914.91	343,390	2,228,134
Previous year	278.69	1,967.26	270	877	78.45	1,098.79	416,703	2,328,251
Motor Own Damage	3,393.70	11,814.75	50,309	177,477	1,098.52	3,500.90	231,317	797,940
Previous year	2,295.17	8,313.85	36,526	129,471	942.68	3,447.93	157,980	562,775
Motor Third party	1,911.11	6,296.72	87,723	314,717	1,057.63	3,085.60		
Previous year	853.48	3,211.12	46,268	171,445	152.75	745.20		
Motor (Total)	5,304.80	18,111.47	87,723	314,717	2,156.15	6,586.50	231,317	797,940
Previous year (Total)	3,148.65	11,524.97	46,268	171,445	1,095.43	4,193.13	157,980	562,775
Workmen's compensation / Employer's liability	47.04	185.43	57	216	14.68	98.26	43,621	215,642
Previous year	32.36	87.16	44	129	23.41	22.67	25,853	63,218
Public Liability	41.89	141.39	30	100	28.23	92.37	16,481	72,048
Previous year	13.66	49.02	21	69	9.88	12.88	7,240	43,082
Product Liability	140.55	162.52	5	16	116.59	50.73	7,850	15,133
Previous year	23.96	111.79	5	14	17.39	97.79	26,735	37,305
Other Liability Covers	1,163.04	3,759.02	140	459	240.41	597.76	297,859	891,068
Previous year	922.63	3,161.26	119	327	133.99	592.49	208,797	659,417
Liability (Total)	1,392.53	4,248.35	232	791	399.92	839.12	365,811	1,193,890
Previous year (Total)	992.61	3,409.23	189	539	184.67	725.84	268,625	803,021
Personal Accident	1,331.53	5,607.05	92,406	342,446	264.00	1,799.98	1,093,542	8,086,755
Previous year	1,067.53	3,807.07	67,609	235,762	942.17	3,079.70	151,265	529,444
Medical Insurance	2,944.70	14,917.36	39,408	141,627	(506.69)	3,372.45	129,284	539,455
Previous year	3,451.39	11,544.91	27,458	98,839	(3,051.24)	693.68	102,742	384,946
Overseas Medical Insurance	228.48	595.86	594	2,661	146.12	293.97	1,640,842	5,689,582
Previous year	82.36	301.90	507	2,446	17.35	72.47	1,612,711	4,743,042
Health (Total)	3,173.19	15,513.22	40,002	144,288	(360.57)	3,666.42	1,770,126	6,229,037
Previous year (Total)	3,533.76	11,846.81	27,965	101,285	(3,033.89)	766.15	1,715,454	5,127,988
Crop Insurance	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-	-	-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	126.20	317.08	187	608	80.42	74.85	156,030	1,364,073
Previous year	45.77	242.23	2,172	6,091	(752.60)	(2,224.79)	17,233	110,657
Grand Total	14,524.97	60,853.84	224,992	820,235	3,201.42	17,541.72	9,327,631	58,281,497
Previous year (Total)	11,323.55	43,312.12	147,758	527,824	336.66	14,187.62	(4,963,375)	31,930,453

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
290.49	577.97	214	790		-		-		
33.54	450.90	170	716	-	-	-	-		
1.09	59.48	20	80		-		-		
7.77	53.43	7	44	-	-	-	-		
-	0.51	-	1		-		-		
-	-	-	-	-	-	-	-		
1.09	59.99	20	81	-	-	-	-	-	-
7.77	53.43	7	44	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
8.43	86.71	37	151		-		-		
13.70	55.57	24	93	-	-	-	-		
376.53	1,273.79	6,354	19,128	-	-	-	-		
219.03	727.56	4,283	12,787	-	-	-	-		
319.97	834.73	13,783	44,064		-		-		
105.81	385.49	5,606	20,554	-	-	-	-		
696.50	2,108.52	13,783	44,064	-	-	-	-	-	-
324.83	1,113.05	5,606	20,554	-	-	-	-	-	-
6.16	7.85	6	13		-		-		
4.30	9.18	4	14	-	-	-	-		
-	-	-	-		-		-		
-	0.14	-	1	-	-	-	-		
-	-	-	-		-		-		
-	3.26	-	-	-	-	-	-		
19.61	70.62	5	14		-		-		
26.64	36.95	7	10	-	-	-	-		
25.77	78.48	11	27	-	-	-	-	-	-
30.93	49.52	11	25	-	-	-	-	-	-
109.64	449.33	8,204	31,651	62.29	62.29	130,833	130,833		
95.22	287.52	7,070	20,735	-	-	-	-		
39.32	1,242.46	2,019	7,863	7.81	7.81	5,683	5,683	79,139	422,630
1,174.45	2,387.94	1,648	4,749	(2.28)	15.89	(1,286)	12,154	138,525	385,037
4.21	8.34	27	84		-		-	22,340	57,066
1.26	4.52	15	57	-	-	-	-	60,891	90,040
43.53	1,250.80	2,046	7,947	7.81	7.81	5,683	5,683	101,479	479,696
1,175.71	2,392.46	1,663	4,806	(2.28)	15.89	(1,286)	12,154	199,416	475,077
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
93.31	103.51	6	30		-		-		
2.83	15.09	152	1,002	-	-	-	-		
1,268.75	4,715.31	24,321	84,741	70.10	70.10	136,516	136,516	101,479	479,696
1,684.53	4,417.55	14,703	47,975	(2.28)	15.89	(1,286)	12,154	199,416	475,077

Name of the Insurer: ICICI Lombard General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	1,601.81	12,842.22	2,202	8,737	67.28	1,661.02	3,370,068	27,498,914
Previous year	1,534.53	11,181.20	2,004	8,632	(63.58)	(711.47)	3,092,843	24,763,130
Marine Cargo	955.31	5,844.93	1,129	4,712	73.21	1,456.80	2,344,862	23,417,046
Previous year	882.10	4,388.12	784	3,163	290.81	728.59	3,009,652	18,031,172
Marine Hull (Including Onshore & Offshore oil energy)	668.57	2,387.19	18	60	143.29	402.28	64,375	585,928
Previous year	525.28	1,984.90	140	297	(243.01)	(1,481.00)	805,238	1,673,890
Marine (Total)	1623.88	8232.11	1147	4772	216.50	1859.09	2409236.68	24002973.54
Previous year (Total)	1407.38	6373.03	924	3460	47.79	-752.40	3814889.65	19705062.29
Aviation	2,471.39	6,202.95	17	71	2,230.54	2,967.43	517,579	1,896,622
Previous year	240.85	3,235.52	8	66	(138.30)	335.00	291,368	11,001,358
Engineering	2,030.40	7,241.12	609	2,618	468.45	837.33	645,032	4,553,574
Previous year	1,561.94	6,403.79	495	2,226	258.86	(589.24)	1,085,318	5,941,430
Motor Own Damage	10,329.50	42,991.67	407,555	1,606,893	1,869.92	9,161.15	1,430,274	5,808,681
Previous year	8,459.59	33,830.52	337,623	1,194,889	1,087.52	5,459.70	1,161,235	4,372,997
Motor Third party	4,898.23	17,710.31	414,009	1,634,331	1,507.03	4,741.40		
Previous year	3,391.20	12,968.91	346,265	1,238,308	387.75	277.71		
Motor (Total)	15227.73	60701.99	414009	1634331	3376.95	13902.55	1430274.25	5808681.31
Previous year (Total)	11850.79	46799.43	346265	1238308	1475.27	5737.41	1161235.45	4372996.76
Workmen's compensation / Employer's liability	278.56	917.86	700	2,384	94.24	341.72	29,844	131,277
Previous year	184.33	576.14	558	1,873	74.06	192.77	22,127	86,942
Public Liability	5.90	28.10	14	67	1.57	(4.70)	6,839	38,199
Previous year	4.34	32.80	11	64	0.77	2.64	-225	7,952
Product Liability	23.24	89.82	5	24	(7.94)	5.07	5,067	14,306
Previous year	31.18	84.75	8	25	(22.18)	(31.99)	4,900	17,622
Other Liability Covers	877.43	3,949.82	205	651	283.35	416.22	745,740	1,096,939
Previous year	594.07	3,533.60	126	637	8.72	280.58	157,088	555,441
Liability (Total)	1185.13	4985.59	924	3126	371.22	758.31	787489.82	1280719.89
Previous year (Total)	813.91	4227.28	703	2599	61.36	443.99	183890.24	667957.45
Personal Accident	1,504.80	4,855.47	46,296	165,187	565.40	1,061.31	6,428,182	14,851,636
Previous year	939.40	3,794.16	27,605	80,722	389.36	(41.68)	1,978,914	9,535,700
Medical Insurance	11,593.30	51,816.43	31,668	114,231	1,021.02	3,262.58	532,430	2,294,842
Previous year	10,572.28	48,553.85	25,405	91,929	2,496.57	21,691.76	1,294,242	4,665,377
Overseas Medical Insurance	601.36	2,732.03	37,599	190,621	(6.28)	109.67	1,069,530	5,139,126
Previous year	607.64	2,622.37	36,819	170,496	(13.46)	204.74	987,752.31	4,469,484
Health (Total)	12194.66	54548.46	69267	304852	1014.74	3372.25	1601960.35	7433968.16
Previous year (Total)	11179.92	51176.21	62224	262425	2483.11	21896.50	2281993.93	9134860.87
Crop Insurance	-	0.00	-	-	-	0.00	-	-
Previous year	0.00	0.00	-	-	0.00	0.00	-	-
Credit Guarantee	196.68	643.26	3	12	(99.34)	(105.03)	414	12,790
Previous year	296.02	748.29	6	19	111.23	(177.17)	6,375	22,853
All Other Miscellaneous	1,772.39	5,720.77	5,002	23,650	(1,005.02)	(31.22)	335,986	2,979,549
Previous year	2,777.41	5,751.99	11,469	39,967	1,975.14	2,322.73	5,318,153	13,217,234
Grand Total	39808.88	165973.94	539476	2147356	7206.72	26283.05	17526222.04	90319428.22
Previous year (Total)	32602.16	139690.90	451703	1638424	6600.23	28463.68	19214980.67	98362582.21

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
-	0.00	-	-	-	0.00	-	-		
0.00	0.00	-	-	0.00	0.00	-	-		
0.00	0.72	-	11	-	0.00	-	-		
0.64	4.22	4	27	0.00	0.00	-	-		
1021.61	4,207.08	-	-	-	0.00	-	-		
582.27	3,405.05	-	-	0.00	0.00	-	-		
825.70	2,971.55	27,162	111,008	-	0.00	-	-		
347.02	2,058.32	23,402	107,820	0.00	0.00	-	-		
1847.31	7178.62	27162	111008	0.00	0.00	0	0	0	0
929.29	5463.37	23402	107820	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	-	-		
-	139.98	-	-	-	0.00	-	-		
0.00	600.00	-	-	0.00	0.00	-	-		
0.00	139.98	0	0	0.00	0.00	0	0	0	0
0.00	600.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	-	-	2	5.30	17,156	58,502		
0.00	0.00	-	-	0.00	0.00	-	-		
3254.23	13,617.10	272	1,084	0.00	109.45	-	47,561	1,299,621	7,084,988
3,233.76	14,918.91	229	1,501	0.00	123.19	-	64,721	436,685	7,239,007
9.86	32.98	201	847	-	0.00	-	-	37,599	190,621
14.68	92.81	533	2,277	0.00	0.00	-	-	36,819	170,496
3264.09	13650.08	473	1931	0.00	109.45	0	47561	1337220	7275609
3248.44	15011.72	762	3778	0.00	123.19	0	64721	473504	7409503
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
773	779	92	170	-	-	-	-		
7	17	72	287	-	-	-	-		
5884.72	21748.79	27727	113120	1.56	114.75	17156	106063	1337220	7275609
4185.63	21096.68	24240	111912	0.00	123.19	0	64721	473504	7409503

Name of the Insurer: *Iffco Tokio General Insurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	882.13	11970.08	6387	26905	-419.35	882.13	936535.98	12708349.12
Previous year	1435.40	12465.92	7858	29632	-485.86	1435.40	7593189.59	65943879.84
Marine Cargo	680.65	3837.52	764	3232	-323.06	680.65	1049132.01	5915057.03
Previous year	846.91	3292.09	967	3750	16.43	846.91	6145806.37	23889803.11
Marine Hull (Including Onshore & Offshore oil energy)	644.25	1675.66	21	125	-262.21	644.25	7142609.88	18577529.16
Previous year	78.64	1835.87	26	142	-11.39	78.64	510321.13	11913075.56
Marine (Total)	1324.90	5513.18	785	3357	-585.27	1324.90	8191741.89	24492586.18
Previous year (Total)	925.55	5127.96	993	3892	5.05	925.55	6656127.50	35802878.67
Aviation	209.00	780.14	10	120	-41.86	209.00	1158957.74	4326106.62
Previous year	763.89	1922.63	23	122	411.52	763.89	5050061.98	12710537.21
Engineering	783.15	2354.47	416	1676	179.39	783.15	61966.70	186296.89
Previous year	671.64	2285.38	468	1944	209.57	671.64	55454.57	188694.34
Motor Own Damage	5433.74	21439.66	286062	1204866	-470.35	5433.74	32980665.20	130130218.06
Previous year	4979.76	19116.57	291153	1129356	-186.41	4979.76	202648.27	777937.09
Motor Third party	2925.53	11361.26	2919	18579	-89.19	2925.53		
Previous year	2153.07	8606.17	4639	20906	-36.05	2153.07		
Motor (Total)	8359.27	32800.92	286062	1204866	-559.54	8359.27	32980665.20	130130218.06
Previous year (Total)	7132.83	27722.74	291153	1129356	-222.45	7132.83	202648.27	777937.09
Workmen's compensation / Employer's liability	109.76	492.50	997	3884	-25.04	109.76	64420.22	289064.88
Previous year	107	368	777	3000	21	107.36	6693	22949
Public Liability	110.36	389.18	10	69	41.45	110.36	25034.06	88279.73
Previous year	40	359	12	89	10	39.79	189190	1706420
Product Liability	15.44	66.30	15	57	12.53	15.44	7163.02	30753.37
Previous year	14	116	20	59	-26	14.12	7657	63155
Other Liability Covers	14.44	1155.59	242	933	-853.55	14.44	6663.82	533269.86
Previous year	598	2431	287	1114	-158	597.88	578280	2351661
Liability (Total)	250.00	2103.57	1264	4943	-824.61	250.00	103281.12	941367.84
Previous year (Total)	759.14	3274.79	1096	4262	-153.95	759.14	781820.51	4144184.81
Personal Accident	355.66	1055.09	2454	9090	48.05	355.66	8282512.47	24570480.22
Previous year	197.77	757.90	2548	12846	-49.68	197.77	424015.51	1624905.31
Medical Insurance	1609.88	7339.63	2842	10507	544.02	1609.88	10633.23	48478.05
Previous year	2930.75	6195.71	2717	9698	1873.46	2930.75	123667.48	261437.16
Overseas Medical Insurance	22.69	116.37	2630	15735	-7.31	22.69	355168.90	1821444.93
Previous year	19.60	98.36	2548	10906	-12.03	19.60	3260.60	16366.03
Health (Total)	1632.57	7456.00	5472	26242	536.71	1632.57	365802.13	1869922.98
Previous year (Total)	2950.35	6294.07	5265	20604	1861.43	2950.35	126928.08	277803.19
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	2468.30	5446.43	7489	34317	1182.78	2468.30	94061931.72	207552013.69
Previous year	1006.99	4255.08	6729	30805	-658.11	1006.99	747628.34	3159133.98
Grand Total	16264.99	69479.87	310339	1311516	-483.69	16264.99	146143394.96	406777341.60
Previous year (Total)	15843.57	64106.46	316133	1233463	917.50	15843.57	21637874.35	124629954.43

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
29.44	118.77	1418	4927						
39.29	125.84	1043	3288						
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						
1.43	12.01	10	22						
6.60	25.89	20	83						
456.57	1962.21	22286	85573						
459.96	2331.12	30846	140582						
289.99	926.70	0	0						
225.00	1134.03	0	0						
746.56	2888.91	22286	85573	0.00	0.00	0	0		
684.96	3465.15	30846	140582	0.00	0.00	0	0		
0	3	2	15						
3	7	22	87						
0	0	0	2						
2	2	3	6						
0	0	0	0						
0	0	0	0						
1	1	2	14						
0	1	15	65						
0.54	4.08	4	31	0.00	0.00	0	0		
5.76	9.60	40	158	0.00	0.00	0	0		
154.58	311.43	330	1690	9.07	17.80	181424	355071		
98.64	247.78	362	3454	5.86	15.65	119326	292264		
208.60	2598.11	109	299	278.93	278.94	141218	141238		
2110.31	3907.10	36	126						
0.00	0.00	0	0						
0.00	0.00	0	0						
208.60	2598.11	109	299	278.93	278.94	141218	141238	0	0
2110.31	3907.10	36	126	0.00	0.00	0	0	0	0
98.71	310.86	2440	12171	1.82	31.14	976	7794		
108.04	674.67	2082	9370	34.84	297.63	3732	43889		
1239.86	6244.17	26597	104713	289.82	327.88	323618	504103	0	0
3053.60	8456.03	34429	157061	40.70	313.28	123058	336153	0	0

Name of the Insurer: National Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	5897.93	25359.22	44824	190496	-971.18	2582.32	121947286	233527995
Previous year	6869.11	22776.90	47167	193279	3284.50	6853.14	1050694217	1105076966
Marine Cargo	1332.49	6267.02	12919	52094	131.45	608.56	5520154	31075509
Previous year	1201.04	5658.46	8795	36166	119.76	813.18	3763393	34812079
Marine Hull (Including Onshore & Offshore oil energy)	1179.58	5324.01	284	788	449.13	2223.98	500970	128764559
Previous year	730.45	3100.03	268	706	-40.15	-124.57	304211	101282200
Marine (Total)	2512.08	11591.03	13203	52882	580.59	2832.54	6021124	159840068
Previous year (Total)	1931.49	8758.49	9063	36872	79.61	688.62	4067605	136094279
Aviation	148.35	1308.45	12	73	175.48	412.77	471506	4411322
Previous year	-27.13	895.68	20	121	-420.53	-746.57	3845	1991134
Engineering	2139.33	8674.86	2950	12154	769.58	2654.27	8085700	29177198
Previous year	1369.75	6020.59	2827	11299	127.17	1125.46	1002601545	1010538572
Motor Own Damage	14784.56	59779.80	401559	1617803	3889.81	9984.98	561383	2331831
Previous year	10894.75	49794.82	362454	1429857	9444.43	4146.62	471937	1914495
Motor Third party	12392.50	47346.57	593832	2418582	4458.04	13163.58	560703	2328518
Previous year	7934.46	34182.99	539939	2125498	5984.04	23899.51	470918	1910729
Motor (Total)	27177.06	107126.37	593832	2418582	8347.85	23148.56	1122086	4660349
Previous year (Total)	18829.21	83977.81	539939	2125498	15300.99	6861.64	942855	3825223
Workmen's compensation / Employer's liability	522.89	2268.98	4654	18816	72.78	569.65	39802	193052
Previous year	450.11	1699.33	4552	18140	114.16	393.51	36780	133306
Public Liability	3.97	31.40	58	313	-0.57	1.23	1500	7010
Previous year	4.54	30.17	72	352	-0.05	2.21	0	13035
Product Liability	7.06	104.57	4	46	-6.87	44.31	675	50158
Previous year	13.93	60.26	9	42	-17.29	-24.65	18981	63865
Other Liability Covers	176.34	758.10	508	2226	104.21	199.44	278067	691591
Previous year	72.13	558.66	427	1799	19.53	186.68	28728	365847
Liability (Total)	710.26	3163.05	5224	21401	169.55	814.63	320044	941811
Previous year (Total)	540.71	2348.42	5060	20333	116.35	557.75	84488	576054
Personal Accident	1839.81	4944.74	33663	122253	755.59	867.65	2956537	17260072
Previous year	1084.22	4077.09	33409	120141	417.92	1075.13	24263445	35541173
Medical Insurance	14409.94	65467.22	123844	440740	1493.09	13882.27	1651604	6808999
Previous year	12916.85	51584.95	116458	410207	4822.68	19015.70	101906307	114732030
Overseas Medical Insurance	57.38	298.38	1579	8928	-2.96	-30.25	484	5431
Previous year	60.34	328.63	1695	10187	-8.95	3.41	0	10
Health (Total)	14467.32	65765.60	125423	449668	1490.12	13852.01	1652088	6814429
Previous year (Total)	12977.20	51913.59	118153	420394	4813.74	19019.12	101906307	114732040
Crop Insurance								
Previous year								
Credit Guarantee	0.00	0.00	0	0	0.00	-21.96	0	0
Previous year	0.00	21.96	0	4	0.00	7.55	0	1975
All Other Miscellaneous	4307.86	16277.68	82222	321559	1094.42	3310.21	17750019	108611046
Previous year	3213.44	12967.47	94615	356137	790.56	2431.68	22418142	113939359
Grand Total	59200.00	244211.00	901353	3589068	12412.00	50453.00	160326389.05	565244290.60
Previous year (Total)	46788.00	193758.00	850253	3284078	24510.31	37873.52	2206982447.25	2522316775.33

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
254.23	1772.96	6754	29716	636.19	2247.63	0	0	0	0
206.02	1701.56	7320	29005	403.51	2108.45	0	0	0	0
49.60	286.51	496	2251	227.08	517.26	0	0	0	0
53.55	233.56	376	1698	76.43	357.87	0	0	0	0
15.64	73.39	75	200	9.63	117.26	0	0	0	0
19.25	60.14	115	264	16.91	85.08	0	0	0	0
65.24	359.90	571	2451	236.71	634.52	0	0	0	0
72.80	293.70	491	1962	93.34	442.95	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
60.56	891.55	288	1494	317.06	1261.21	0	0	0	0
25.95	613.53	300	1428	69.36	716.22	0	0	0	0
1173.51	4788.37	70584	284822	570.17	2342.07	0	0	0	0
947.43	3743.93	58227	229733	508.46	2060.90	0	0	0	0
1665.23	6310.78	106759	440028	766.19	2859.98	0	0	0	0
969.32	3877.84	87273	346356	502.26	1980.11	0	0	0	0
2838.75	11099.15	106759	440028	1336.37	5202.05	0	0	0	0
1916.75	7621.77	87273	346356	1010.72	4041.01	0	0	0	0
37.05	255.76	673	3030	46.14	209.83	0	0	0	0
36.03	173.09	795	3135	44.47	154.97	0	0	0	0
0.14	0.49	3	22	0.18	0.99	0	0	0	0
0.24	0.59	5	19	0.00	0.64	0	0	0	0
0.11	5.93	1	2	0.00	0.00	0	0	0	0
0.11	5.93	1	2	0.00	3.71	0	0	0	0
2.90	8.42	15	98	17.81	50.00	0	0	0	0
2.58	6.19	17	86	6.94	34.33	0	0	0	0
40.20	270.60	692	3152	64.13	260.82	0	0	0	0
38.96	185.80	818	3242	51.41	193.64	0	0	0	0
39.74	180.27	4842	18138	53.32	351.87	18166	66243	180650	743512
47.46	164.67	4784	17027	69.18	362.38	18818	77859	201523	717439
453.32	2760.44	10442	36003	1028.50	5370.63	38977	128267	338816	1203234
513.29	3213.09	11484	39371	1934.68	6057.73	33324	117604	329344	1139599
4.06	11.90	83	312					1647	9126
1.61	11.28	44	345					1830	10526
457.38	2772.35	10525	36315	1028.50	5370.63	38977	128267	340463	1212360
514.90	3224.38	11528	39716	1934.68	6057.73	33324	117604	331174	1150125
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
397.12	1683.61	21164	81035	234.92	1078.78	13659	38600	52637	229941
375.29	1815.14	24044	93617	234.97	1193.23	11405	36124	49837	194849
4153.22	19030.39	151595	612329	3907.20	16407.51	70802.00	233110.00	573750.00	2185813.00
3198.13	15620.55	136558	532353	3867.17	15115.61	63547.00	231587.00	582534.00	2062413.00

Name of the Insurer: Raheja QBE General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	19.34	97.44	3	24	19.34	97.44	25752.60	109445.45
Previous year	14.57	40.92	16	37	14.57	40.92	12060.96	40695.96
Marine Cargo	2.04	-0.76	2	5	2.04	-0.76	487.20	1098.52
Previous year	0.88	1.01	11	17	0.88	1.01	1122.97	1368.97
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	2.04	-0.76	2	5	2.04	-0.76	487.20	1098.52
Previous year (Total)	0.88	1.01	11	17	0.88	1.01	1122.97	1368.97
Aviation								
Previous year								
Engineering	0.07	4.41	1	11	0.07	4.41	54.14	9750.49
Previous year	0.07	0.55	3	4	0.07	0.55	26.68	891.54
Motor Own Damage	1.54	5.76	16	53	1.54	5.76	216.21	756.16
Previous year	1.32	4.34	14	49	1.32	4.34	218.95	695.27
Motor Third party	0.38	1.88	0	188	0.38	1.88	0.00	0.00
Previous year	0.12	1.21	0	42	0.12	1.21		
Motor (Total)	1.92	7.64	16	188	1.92	7.64	216.21	756.16
Previous year (Total)	1.44	5.55	14	49	1.44	5.55	218.95	695.27
Workmen's compensation / Employer's liability	0.08	2.45	1	6	0.08	2.45	2.16	753.22
Previous year	0.00	1.95	0	1	0.00	1.95	0.00	
Public Liability	0.83	1.54	1	2	0.83	1.54	500.00	1000
Previous year	0.83	1.54	1	2	0.83	1.54	500.00	1000
Product Liability								
Previous year								
Other Liability Covers	34.53	276.72	18	80	34.53	276.72	10959.20	118940
Previous year	44.24	133.98	8	19	44.24	133.98	12690	50405
Liability (Total)	35.44	280.71	20	88	35.44	280.71	11461.36	120693.42
Previous year (Total)	45.07	137.47	9	22	45.07	137.47	13190.00	51405.00
Personal Accident	1.25	14.94	24	50	1.25	14.94	2003.50	49733.60
Previous year	0.48	18.48	2	12	0.48	18.48	84.00	35456.00
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	54	57.15	4	15	54.12	57.15	537	5135.73
Previous year	0.31	1.18	10	16	0.31	1.18	293.24	695.24
Grand Total	114.18	461.52	70	381	114.18	461.52	40511.97	296613.38
Previous year (Total)	62.82	205.16	65	157	62.82	205.16	26996.80	131207.98

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
	0.00	0	0	0.00	0.00	0.00	0.00		
	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	2.21	0	5	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.10	0.10	0	0	1.16	8.15	942	4074		
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		
0.10	2.31	0	5	1.16	8.15	942	4074		
0.00	0.00	0	0	0.00	0.00	0	0		

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	1029.04	5518.42	3445	14221	261.59	625.51	979058.99	7698726.64
Previous year	767.45	4892.91	4065	15030	-849.10	-2430.70	1117586.87	6977678.90
Marine Cargo	143.28	2231.59	2290	9244	41.05	1176.07	609123.72	4904264.84
Previous year	102.23	1055.51	2403	8171	-203.30	-237.22	221885.55	2779941.21
Marine Hull (Including Onshore & Offshore oil energy)	0.31	26.89	1	4	6.91	-292.64	306.02	1056.02
Previous year	-6.60	319.53	1	5	-36.46	-84.28	301.13	176387.72
Marine (Total)	143.59	2258.48	2291	9248	47.96	883.44	609429.74	4905320.86
Previous year (Total)	95.63	1375.04	2404	8176	-239.76	-321.50	222186.67	2956328.93
Aviation	21.01	75.27	1	24	-28.02	-3381.09	47616.80	52569.40
Previous year	49.02	3456.36	6	23	32.42	3276.80	133796.29	135334.13
Engineering	1002.00	4235.40	341	1627	198.21	3528.44	354944.17	2972740.52
Previous year	803.78	706.96	542	1836	102.83	-2819.35	3958552.35	5710425.73
Motor Own Damage	5402.38	25429.23	124062	559293	-0.25	4499.27	348889.06	1628258.00
Previous year	5402.63	20929.96	133906	374774	-1598.95	-10880.33	347592.56	1331734.16
Motor Third party	3651.58	14779.14	129852	575028	1033.28	4721.27		
Previous year	2618.30	10057.87	138853	520675	-690.97	-4359.55		
Motor (Total)	9053.97	40208.38	129852	575028	1033.03	9220.55	348889.06	1628258.00
Previous year (Total)	8020.93	30987.83	138853	520675	-2289.92	-15239.88	347592.56	1331734.16
Workmen's compensation / Employer's liability	24.93	220.86	146	739	-21.61	22.11	2549.37	24722.54
Previous year	46.53	198.75	334	1101	-14.98	-71.35	4827.41	20394.16
Public Liability	8.55	61.28	38	313	-14.81	-10.85	4438.70	41562.19
Previous year	23.35	72.12	38	163	13.06	-20.47	121429.31	152546.65
Product Liability	0.35	6.55	1	8	-2.52	-4.15	60.00	2360.00
Previous year	2.87	10.70	2	8	-32.43	-31.15	160.00	2250.00
Other Liability Covers	13.97	819.79	657	2116	-75.23	28.15	6423.50	311558.50
Previous year	89.20	791.65	900	2175	34.37	85.67	19006.30	261750.74
Liability (Total)	47.80	1108.48	842	3176	-114.16	35.26	13471.57	380203.23
Previous year (Total)	161.96	1073.22	1274	3447	0.01	-37.30	145423.03	436941.55
Personal Accident	108.10	1140.82	1916	10177	-55.91	-1435.60	201134.94	2322815.77
Previous year	164.00	2576.43	3898	19459	-523.83	364.03	435918.83	4095787.22
Medical Insurance	1522.76	8387.06	5579	32872	-1332.98	-3.44	38294.42	293591.95
Previous year	2855.74	8390.51	7094	115735	276.30	784.50	47239.20	237653.97
Overseas Medical Insurance	310.04	1349.13	57040	226231	-67.94	-145.33	2100199.06	9669997.75
Previous year	377.98	1494.46	67367	253625	75.49	215.97	1932928.45	9106434.90
Health (Total)	1832.80	9736.19	62619	259103	-1400.92	-148.78	2138493.49	9963589.70
Previous year (Total)	3233.73	9884.97	74461	369360	351.80	1000.47	1980167.65	9344088.87
Crop Insurance					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		
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
All Other Miscellaneous	319.85	1760.98	4158	18244	115.85	279.53	163084.15	2640065.74
Previous year	204.00	1481.45	6531	24378	-131.81	-152.94	134005.28	1695930.00
Grand Total	13558.14	66042.42	205465	890848	57.64	9607.25	4856122.92	32564289.86
Previous year (Total)	13500.50	56435.16	232034	962384	-3547.35	-16360.37	8475229.54	32684249.49

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
97.86	656.81	233	1723	0.00	0.00	0.00	0.00		
6.47	345.10	154	534	0.00	0.00	0.00	0.00		
15.21	101.31	56	802	0.00	0.00	0.00	0.00		
1.75	19.25	17	71	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.30	0.30	1	1	0.00	0.00	0.00	0.00		
15.21	101.31	56	802	0.00	0.00	0	0	0	0
2.05	19.55	18	72	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	1	0.00	0.00	0.00	0.00		
21.03	277.78	45	221	0.00	0.00	0.00	0.00		
5.55	71.26	21	93	0.00	0.00	0.00	0.00		
319.74	2581.06	10251	59828	0.00	0.00	0.00	0.00		
461.99	1785.21	9937	39727	0.00	0.00	0.00	0.00		
395.73	1585.44	161	1150	0.00	0.00	0.00	0.00		
252.22	945.62	275	1222	0.00	0.00	0.00	0.00		
715.48	4166.51	10251	59828	0.00	0.00	0	0	0	0
714.21	2730.83	9937	39727	0.00	0.00	0	0	0	0
3.02	66.29	13	77	0.00	0.00	0.00	0.00		
2.27	10.08	10	37	0.00	0.00	0.00	0.00		
2.79	8.83	5	32	0.00	0.00	0.00	0.00		
0.58	1.09	1	3	0.00	0.00	0.00	0.00		
0.00	0.17	0	1	0.00	0.00	0.00	0.00		
0.00	0.27	0	1	0.00	0.00	0.00	0.00		
1.82	8.73	153	447	0.00	0.00	0.00	0.00		
0.31	0.67	30	72	0.00	0.00	0.00	0.00		
7.64	84.02	171	557	0.00	0.00	0	0	0	0
3.16	12.11	41	113	0.00	0.00	0	0	0	0
0.36	56.19	38	493	0.00	0.00	0.00	0.00		
21.59	39.77	347	2658	0.00	24.54	0.00	202572.00		
145.60	736.19	135	3712	0.00	0.00	0.00	0.00	47592	267448
9.60	1087.69	91	1595	0.00	0.00	0.00	0.00	0	0
19.69	119.82	4247	20903	0.00	0.00	0.00	0.00	13406	55047
21.40	73.22	5740	19897	0.00	0.00	0.00	0.00	0	0
165.29	856.01	4382	24615	0.00	0.00	0	0	60998	322495
31.00	1160.91	5831	21492	0.00	0.00	0	0	0	0
				0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
				0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
13.25	472.29	764	3267	6.42	75.11	848.00	187000.00		
10.91	46.81	466	1820	3.76	39.61	351.00	5437.00		
1036.11	6670.91	15940	91506	6.42	75.11	848	187000	60998	322495
794.95	4426.33	16815	66510	3.76	64.15	351	208009	0	0

Name of the Insurer: Royal Sundaram Alliance Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	677.94	2389.95	2327	9286	103.59	-62.59	1008239.94	4395571.71
Previous year	574.35	2452.54	2980	11834	95.93	510.55	608770.93	4042149.62
Marine Cargo	158.08	823.33	2631	9779	26.52	-12.82	564895.66	2519251.80
Previous year	131.56	836.16	3049	12359	-68.19	68.07	409313.62	2217758.00
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	-1.25	-1.25	0.00	0.00
Marine (Total)	158.08	823.33	2631	9779	26.52	-12.82	564895.66	2519251.80
Previous year (Total)	131.56	836.16	3049	12359	-69.44	66.82	409313.62	2217758.00
Aviation							0.00	
Previous year							0.00	
Engineering	233.08	1257.42	97	402	-32.39	144.86	36072.13	234495.31
Previous year	265.47	1112.56	133	543	64.55	-57.61	77631.95	459239.42
Motor Own Damage	5716.42	22642.24	75089	306978	1414.03	5693.40	306488.67	1189359.53
Previous year	4302.39	16948.84	56629	237302	459.45	2848.06	229718.66	913031.62
Motor Third party	2138.28	7551.93	535	2138	941.67	2855.01		
Previous year	1196.61	4696.92	397	1916	0.94	460.23		
Motor (Total)	7854.70	30194.18	75089	306978	2355.70	8548.42	306488.67	1189359.53
Previous year (Total)	5499.00	21645.76	56629	237302	460.40	3308.28	229718.66	913031.62
Workmen's compensation / Employer's liability	23.55	102.89	55	204	-0.46	17.62	4767.55	14698.74
Previous year	24.01	85.27	48	178	-8.19	-14.11	1446.00	7192.34
Public Liability	125.74	241.77	41	166	62.66	70.58	27458.50	74007.74
Previous year	63.08	171.18	31	157	14.45	57.09	15136.83	52055.68
Product Liability	0.00	15.36	9	18	-19.46	-26.62	8487.09	16409.58
Previous year	19.46	41.97	9	19	-1.19	4.50	9027.07	15973.24
Other Liability Covers								
Previous year								
Liability (Total)	149.29	360.01	105	388	42.73	61.58	40713.14	105116.06
Previous year (Total)	106.56	298.43	88	354	5.07	47.48	25609.89	75221.26
Personal Accident	339.86	1232.70	7922	37562	-291.43	-291.27	2120409.41	8492377.12
Previous year	631.30	1523.97	5383	24696	366.61	439.70	3222949.08	8108189.38
Medical Insurance	2003.14	9749.24	22272	82335	88.05	3080.44	1489334.53	9288636.50
Previous year	1915.09	6668.81	22141	81291	747.33	2518.82	176552.28	583259.01
Overseas Medical Insurance								
Previous year								
Health (Total)	2003.14	9749.24	22272	82335	88.05	3080.44	1489334.53	9288636.50
Previous year (Total)	1915.09	6668.81	22141	81291	747.33	2518.82	176552.28	583259.01
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	216.76	1398.86	513	3124	47.09	473.69	25083.04	602340.42
Previous year	169.66	925.17	16151	98679	-62.36	35.39	1111399.86	6212728.82
Grand Total	11632.84	47405.69	110956	449854	2339.85	11942.30	5591236.52	26827148.46
Previous year (Total)	9292.99	35463.39	106554	467058	1608.09	6869.43	5861946.28	22611577.13

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
3.59	17.54	182	800						
11.37	36.15	362	1245						
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		
0.43	0.85	3	9						
2.12	3.55	8	12						
274.71	1389.47	2609	14345						
412.88	1010.25	4294	10878						
274.71	1389.47	2609	14345	0.00	0.00	0	0		
412.88	1010.25	4294	10878	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		
14.17	60.00	2896	16794	0.18	1.25	707.00	4712.00		
36.13	144.41	22627	87259	0.24	2.70	788.00	6381.00		
894.18	5873.93	4611	20922	207.44	1607.62	51161.00	398005.00	305143.50	1224707.00
589.54	1615.96	7210	28175	326.42	709.50	58529.00	170954.00	57955.00	213580.50
894.18	5873.93	4611	20922	207.44	1607.62	51161	398005	305144	1224707
589.54	1615.96	7210	28175	326.42	709.50	58529	170954	57955	213581
214.35	654.89	3026	9424	0.00	0.00	0.00	0.00		
150.22	564.09	2290	8498	0.00	0.00	0.00	0.00		
1401.43	7996.69	13327	62294	207.62	1608.87	51868	402717	305144	1224707
1202.27	3374.41	36791	136067	326.66	712.20	59317	177335	57955	213581

Name of the Insurer: SBI General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	1083.47	3590.33	12385	37161	1068.08	3517.23	903779.87	2465805.24
Previous year	15.39	73.10	22	69	15.39	73.10	27609.93	126736.36
Marine Cargo	13.42	34.66	5	9	13.42	34.66	64800.00	108985.52
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine Hull (Including Onshore & Offshore oil energy)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Marine (Total)	13.42	34.66	5	9	13.42	34.66	64800.00	108985.52
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation	375.92	855.34	10	25	0.00	707.73	22310.00	73937.64
Previous year	54.32	147.61	10	14	54.32	147.61	35770.59	84120.55
Engineering	43.57	238.10	116	255	43.57	238.10	61027.03	200174.73
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Motor Own Damage	97.20	148.46	1556	2326	97.20	148.46	4420.45	6666.54
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Motor Third party	17.59	26.13	0	0	17.59	26.13		
Previous year	0.00	0.00	0	0	0.00	0.00		
Motor (Total)	114.79	174.59	1556	2326	114.79	174.59	4420.45	6666.54
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Public Liability	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Product Liability	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Other Liability Covers	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident	543.37	566.39	2	9	109.38	132.40	5714870.00	5788192.00
Previous year	433.99	433.99	1	1	433.99	433.99	37412.37	37412.37
Medical Insurance	5.06	150.38	1	9	5.06	150.38	130.00	3979.71
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)	5.06	150.38	1	9	5.06	150.38	130.00	3979.71
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	36.54	209.52	923	1798	35.96	202.27	203371.70	1350489.26
Previous year	0.58	7.25	10	16	0.58	7.25	4825.24	85395.82
Grand Total	2216.14	5819.32	14998	41592	1390.26	5157.37	6974709.05	9998230.64
Previous year (Total)	504.28	661.95	43	100	504.28	661.95	105618.13	333665.10

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
94.45	467.38	1119	7067	0.00	0.00	0.00	0.00		
0.00	6.99	0	11	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
15.42	24.58	24	63	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
19.66	25.66	294	409	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
3.41	4.57	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
23.07	30.23	294	409	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0	1176.00	3184.00
0.00	0.00	0	0	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0	0	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0	0	0.00	0.00	0.00	0.00	0.00	0.00
0.00	0.00	0	0	0.00	0.00	0	0	1176	3184
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
5.27	12.63	143	322	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0.00		
138.21	534.82	1580	7861	0.00	0.00	0	0	1176	3184
0.00	6.99	0	11	0.00	0.00	0	0	0	0

Name of the Insurer: Shriram General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	50.30	235.62	197	718	19.29	94.45	43272.86	290244.17
Previous year	31.01	141.17	77	405	28.44	104.21	45740.83	191148.43
Marine Cargo	48.87	71.16	92	353	48.20	60.03	46361.58	249098.98
Previous year	0.67	11.13	38	127	0.67	11.13	720.68	11849.24
Marine Hull (Including Onshore & Offshore oil energy)	0.0	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
Marine (Total)	48.87	71.16	92	353	48.20	60.03	46361.58	249098.98
Previous year (Total)	0.67	11.13	38	127	0.67	11.13	720.68	11849.24
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	50.15	117.03	57	226	33.82	71.85	23153.27	50469.51
Previous year	16.33	45.18	28	90	15.68	27.39	11564.69	31039.39
Motor Own Damage	3756.53	14148.63	127827	455296	791.21	4095.14	378804.45	1437421.81
Previous year	2965.32	10053.49	30533	238837	2102.75	6169.71	228066.93	787332.41
Motor Third party	5397.46	17915.48	127944	456088	2629.78	8431.30	0.00	0.00
Previous year	2767.68	9484.18	89575	307793	1898.66	5464.83	0.00	0.00
Motor (Total)	9153.99	32064.11	127944	456088	3420.99	12526.44	378804.45	1437421.81
Previous year (Total)	5733.00	19537.67	89575	307793	4001.41	11634.54	228066.93	787332.41
Workmen's compensation / Employer's liability	3.64	13.94	29	82	0.85	3.66	121.33	258.56
Previous year	2.79	10.28	29	46	1.13	6.66	28.29	67.46
Public Liability	0.00	0.00	0	0	0	0	0	0
Previous year	0.00	0.00	0	0	0	0	0	0
Product Liability	0.00	0.00	0	0	0	0	0	0
Previous year	0.00	0.00	0	0	0	0	0	0
Other Liability Covers	0.29	8.28	10	35	0.27	2.12	178.00	5426.41
Previous year	0.02	6.16	3	26	0.02	5.71	61.00	4130.31
Liability (Total)	3.93	22.22	39	117	1.12	5.78	299.33	5684.97
Previous year (Total)	2.81	16.44	32	72	1.15	12.37	89.29	4197.77
Personal Accident	6.82	28.93	836	3518	0.26	2.33	4101.66	21654.28
Previous year	6.56	26.60	1179	4461	-8.14	-1.44	7427.92	35755.01
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	8.11	28.14	157	544	4.77	14.00	21521.01	82308.85
Previous year	3.34	14.14	124	510	-0.38	0.97	13832.43	30825.34
Grand Total	9322.16	32567.21	129322	461564	3528.44	12774.88	517514.16	2136882.56
Previous year (Total)	5793.72	19792.33	91053	313458	4038.83	11789.17	307442.77	1092147.59

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0						
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0						
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	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		
225.94	841.99	9334	31436						
164.88	578.22	4939	17294	0.00	0.00	0	0		
244.59	849.63	9337	31464						
133.81	453.03	4983	17498	0.00	0.00	0	0		
470.52	1691.62	9337	31464						
298.69	1031.25	4983	17498	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	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
470.52	1691.62	9337	31464	0.00	0.00	0	0	0	0
298.69	1031.25	4983	17498	0.00	0.00	0	0	0	0

Name of the Insurer: Tata AIG General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	2,331	12,111	12,840	57,540		-	12,254,479	52,403,427
Previous year	2,310	10,818	12,641	40,324	-	-	3,891,009	86,233,611
Marine Cargo	1,944	7,288	2,335	9,427		-	422,509	1,679,566
Previous year	1,484	5,743	1,038	6,007	-	-	318,532	4,453,001
Marine Hull (Including Onshore & Offshore oil energy)	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Marine (Total)	1,944	7,288	2,335	9,427	-	-	422,509	1,679,566
Previous year (Total)	1,484	5,743	1,038	6,007	-	-	318,532	4,453,001
Aviation	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Engineering	857	2,833	119	365		-	1,413,420	4,357,651
Previous year	673	2,243	84	309	-	-	460,006	7,514,209
Motor Own Damage	5,386	18,504	127,963	479,715		-	283,810	1,049,631
Previous year	2,561	8,614	62,307	215,976	-	-	160,801	518,020
Motor Third party	920	3,268	127,963	377,976		-	-	-
Previous year	434	1,537	62,307	215,976	-	-	-	-
Motor (Total)	6,306	21,771	127,963	479,715	-	-	283,810	1,049,631
Previous year (Total)	2,995	10,151	62,307	215,976	-	-	160,801	518,020
Workmen's compensation / Employer's liability	112	550	30	117		-	10,215	237,708
Previous year	8	104	11	87	-	-	316	114,338
Public Liability	219	1,023	43	195		-	355,264	2,677,393
Previous year	320	1,204	27	204	-	-	117,476	657,432
Product Liability	54	272	11	43		-	94,614	602,955
Previous year	58	184	18	93	-	-	49,717	6,639,272
Other Liability Covers	1,161	4,174	717	2,560		-	593,556	1,487,440
Previous year	970	3,706	524	2,230	-	-	255,980	1,548,523
Liability (Total)	1,547	6,019	801	2,915	-	-	1,053,648	5,005,496
Previous year (Total)	1,357	5,198	580	2,614	-	-	423,490	8,959,565
Personal Accident	1,078	4,593	10,198	41,306		-	914,048	3,823,980
Previous year	1,355	4,710	7,841	35,514	-	-	735,219	3,450,041
Medical Insurance	3	475	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Overseas Medical Insurance	924	4,102	37,563	154,081		-	4,162,853	17,934,670
Previous year	1,131	4,580	31,956	123,644	-	-	3,694,819	13,743,244
Health (Total)	927	4,578	37,563	154,081	-	-	4,162,853	17,934,670
Previous year (Total)	1,131	4,580	31,956	123,644	-	-	3,694,819	13,743,244
Crop Insurance	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
Credit Guarantee	-	-	-	-		-	-	-
Previous year	-	-	-	-	-	-	-	-
All Other Miscellaneous	300	1,145	5,892	28,542		-	10,520	47,102
Previous year	265	564	3,926	6,419	-	-	13,400	23,648
Grand Total	15,292	60,338	197,711	773,891	-	-	20,515,287	86,301,522
Previous year (Total)	11,569	44,008	120,373	430,807	-	-	9,697,277	124,895,340

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
144	982	258	697		-		-		
19	575	61	284	-	-	-	-		
138	919	133	589		-		-		
49	406	35	180	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
138	919	133	589	-	-	-	-	-	-
49	406	35	180	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
8	35	7	24		-		-		
5	30	2	9	-	-	-	-		
942	3,111	28,812	94,459		-		-		
184	611	4,730	16,450	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
942	3,111	28,812	94,459	-	-	-	-	-	-
184	611	4,730	16,450	-	-	-	-	-	-
9	27	4	11		-		-		
0	2	-	2	-	-	-	-		
86	369	82	285		-		-		
45	167	24	79	-	-	-	-		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
96	396	86	296	-	-	-	-	-	-
45	169	24	81	-	-	-	-	-	-
98	346	2,627	9,054	-	472	-	372,245		
32	127	722	3,042	0	2	3,006	13,200		
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
3	479	-	207		-		-		
253	1,071	90	381	-	-	-	-		
3	479	-	207	-	-	-	-	-	-
253	1,071	90	381	-	-	-	-	-	-
-	-	-	-		-		-		
-	-	-	-	-	-	-	-		
-	-	-	-	-	-	-	-		
189	530	6,123	28,164		-		-		
63	202	3,428	5,903	-	-	-	-		
1,618	6,799	38,046	133,490	-	472	-	372,245	-	-
651	3,192	9,092	26,330	0	2	3,006	13,200	-	-

Name of the Insurer: *The New India Assurance Company Limited*

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	9946.23	49022.26	59297	271597	-73.73	1720.59	33458370.89	111108056.37
Previous year	10019.96	47301.67	82795	326138			-156334913.08	151617494.09
Marine Cargo	2588.66	9749.09	18621	83328	587.69	338.53	-16476883.77	29040834.86
Previous year	2000.97	9410.56	24240	101915			-114106056.31	44620973.14
Marine Hull (Including Onshore & Offshore oil energy)	2759.67	12435.47	603	1769	992.20	2057.17	1647099.83	12404780.53
Previous year	1767.47	10378.30	1059	3888			-3138864.61	11505300.82
Marine (Total)	5348.33	22184.56	19224	85097	1579.89	2395.70	-14829783.94	41445615.39
Previous year (Total)	3768.44	19788.86	25299	105803	0.00	0.00	-117244920.92	56126273.96
Aviation	3168.78	5226.11	-198	159	1499.72	2267.57	-41060584.06	2126452.33
Previous year	1669.06	2958.54	55	189			20883.03	975270.12
Engineering	3351.49	11422.11	7519	25391	1210.89	986.48	2204439.33	16136888.51
Previous year	2140.60	10435.63	5469	24796			-4418384.54	52279069.45
Motor Own Damage	11319.29	46749.46	342178	1747990	1156.12	6634.44	1057920.08	16570221.05
Previous year	10163.17	40115.02	438666	1635941			-4332874.46	10062265.71
Motor Third party	11430.88	41649.68	599810	1943658	3791.39	11709.89		
Previous year	7639.49	29939.79	354700	1383270				
Motor (Total)	22750.17	88399.14	599810	1943658	4947.51	18344.33	1057920.08	16570221.05
Previous year (Total)	17802.66	70054.81	438666	1635941	0.00	0.00	-4332874.46	10062265.71
Workmen's compensation / Employer's liability	484.82	1757	5636	18410	6.19	43.74	104767.55	940639
Previous year	478.63	1713	7971	27514			-970052.28	404181
Public Liability	20.36	45	-49	221	21.05	-92.29	5861.44	14423
Previous year	-0.69	137	-113	732			6167.03	510391
Product Liability	15.48	178	97	230	-20.95	-63.59	8949.21	12055
Previous year	36.43	241	70	102			-22045424.45	115312
Other Liability Covers	1550.67	4862	6172	28147	649.21	1237.02	168817.58	686030
Previous year	901.46	3625	-2506	14713			-9310778.33	413514
Liability (Total)	2071.33	6841.86	11856	47008	655.50	1124.88	288395.78	1653147.90
Previous year (Total)	1415.83	5716.98	5422	43061	0.00	0.00	-32320088.03	1443398.46
Personal Accident	1606.18	4902.13	49396	192974	-251.76	-232.84	-2595130.01	8115264.00
Previous year	1857.94	5134.97	55783	197701			16624860.71	36673772.41
Medical Insurance	19501.34	93355.72	133839	452901	2582.78	12441.56	2394298.98	10559338.26
Previous year	16918.56	80914.16	146359	421980			30637835.40	282417638.95
Overseas Medical Insurance	134.14	452.11	-743	13298	4.88	-171.99	25727.29	81156.47
Previous year	129.26	624.10	3897	24124			-65542250.95	440985.01
Health (Total)	19635.48	93807.83	133096	466199	2587.66	12269.57	2420026.27	10640494.73
Previous year (Total)	17047.82	81538.26	150256	446104	0.00	0.00	-34904415.55	282858623.96
Crop Insurance	0.00	0.00	0	0	0.00	0.00	-1095.54	0.00
Previous year	0.00	0.00	0	0			0.00	0.00
Credit Guarantee	0.00	0.55	0	15	0.00	0.03	0.00	3.05
Previous year	0.00	0.52	0	10			0.00	2.90
All Other Miscellaneous	2836.73	20520.12	109631	434211	-1271.09	3908.56	109915533.72	197830595.65
Previous year	4107.82	16611.56	114517	407898			-1117121018.61	235968670.67
Grand Total	70714.72	302326.67	989631	3466309	10884.59	42784.87	90858092.52	405626738.98
Previous year (Total)	59830.13	259541.80	794296	2934970	0.00	0.00	-1450030871.45	828004841.73

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
670.46	3185.04	11549	31167	236.94	1281.28	0.00	0.00		
296.59	1634.31	8432	36346	407.18	1303.09	0.00	0.00		
134.85	769.18	829	3385	26.37	330.54	0.00	0.00		
73.18	292.22	616	3235	86.18	264.32	0.00	0.00		
28.72	47.93	10	40	0.95	1.72	0.00	0.00		
1.53	16.08	23	109	22.37	62.14	0.00	0.00		
163.57	817.11	839	3425	27.32	332.26	0	0		
74.71	308.30	639	3344	108.55	326.46	0	0		
0.42	12.62	0	1	0.00	5.11	0.00	0.00		
2.65	2.65	5	5	0.00	0.00	0.00	0.00		
116.68	547.52	707	2275	191.38	439.77	0.00	0.00		
96.36	383.41	450	1591	90.25	326.75	0.00	0.00		
2370.22	8045.10	73163	196129	186.85	2580.33	25836.00	121630.00		
564.20	2238.15	18141	137938	569.31	2040.89	3555.00	7679.00		
2638.56	7947.70	85681	213285	238.66	2458.72	10760.00	58510.00		
558.12	1679.14	28595	111954	1759.65	2711.03	3631.00	11929.00		
5008.78	15992.80	85681	213285	425.51	5039.05	36596	180140		
1122.32	3917.29	28595	137938	2328.96	4751.92	7186	19608		
59.16	313	612	1528	9.89	171	2870.00	8932		
91.45	212	965	1783	44.46	100	1564.00	7249		
0.17	3	10	12	0.15	3	0.00	0		
1.68	2	12	23	1.28	12	0.00	0		
0.35	7	2	12	0.00	1	0.00	0		
-0.45	18	3	6	0.25	25	0.00	0		
431.80	888	-1052	2606	12.74	138	-1317.00	3838		
-87.68	165	189	2003	62.92	127	1.00	5		
491.48	1210.41	-428	4158	22.78	312.43	1553	12770		
5.00	396.69	1169	3815	108.91	264.99	1565	7254		
113.44	406.50	8885	21476	-2.64	217.18	35439.00	198664		
49.51	219.16	3484	19835	52.47	198.75	36192.00	150935		
1085.22	3644.22	19813	35457	-91.22	3834.17	64177.00	2220034	301618.00	3663810
305.81	1642.67	9317	59075	220.84	1622.35	116791.00	1092942	738266.00	2146969
-7.85	16.56	12	1055	2.69	14.45	5352.00	7782	6758.00	13057
4.22	38.27	97	1214	27.55	50.61	1040.00	3130	11124.00	17737
1077.37	3660.78	19825	36512	-88.53	3848.62	69529	2227816	308376	3676867
310.03	1680.94	9414	60289	248.39	1672.96	117831	1096072	749390	2164706
0.00	0.00	-5	0	0.00	0.00	0.00	0		
0.00	0.00	0	0	0.00	0.00	0.00	0		
0.00	0.00	0	0	0.00	0.00	0.00	0		
0.00	0.00	0	0	0.00	0.00	0.00	0		
743.10	3104.71	23610	68888	304.23	1404.49	72477.00	3049523		
935.50	3127.95	22287	90383	200.79	794.96	14388.00	69239		
8385.30	28937.49	150663	381187	1116.99	12880.19	215594	5668913		
2892.67	11670.70	74475	327562	3545.50	9639.88	177162	1343108		

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	6052.33	31684.85	41055	177293	-1131.27	3303.39	10711291.63	72191176.67
Previous year	7183.60	28381.46	42801	180298				
Marine Cargo	2521.42	9861.41	14496	58433	704.93	2017.86	7888709.92	31540051.43
Previous year	1816.49	7843.55	15713	60612				
Marine Hull (Including Onshore & Offshore oil energy)	1347.90	8689.02	528	1659	-579.40	-745.48	1167764.34	8131283.90
Previous year	1927.30	9434.50	337	1434				
Marine (Total)	3869.32	18550.43	15024	60092	125.53	1272.38	9056474.26	39671335.33
Previous year (Total)	3743.79	17278.05	16050	62046				
Aviation	1212.98	3142.16	17	143	104.95	591.82	45355.28	3417385.47
Previous year	1108.03	2550.34	14	121				
Engineering	2134.92	10165.01	3333	13852	241.63	591.09	2057427.14	8520183.65
Previous year	1893.29	9573.92	3425	14276				
Motor Own Damage	7684.12	32053.38	431334	1713957	483.37	1581.86	509520.61	2135483.94
Previous year	7200.75	30471.52	396693	1609115				
Motor Third party	8931.29	33926.50	593508	2360652	2696.10	8280.81	0.00	0.00
Previous year	6235.19	25645.69	559231	2251947				
Motor (Total)	16615.41	65979.88	593508	2360652	3179.47	9862.67	509520.61	2135483.94
Previous year (Total)	13435.94	56117.21	559231	2251947				
Workmen's compensation / Employer's liability	631.02	2622.03	5223	21869	-11.31	258.34	10218.30	40282.93
Previous year	642.33	2363.69	5275	21139				
Public Liability	2.87	47.76	28	165	-2.97	2.24	88834.09	7924557.00
Previous year	5.84	45.52	30	157				
Product Liability	7.25	111.37	7	38	-9.34	-17.96	34108.39	528453.52
Previous year	16.59	129.33	12	44				
Other Liability Covers	276.50	1204.42	2999	11525	50.62	180.29	1310561.84	8843212.28
Previous year	225.88	1024.13	2593	10135				
Liability (Total)	917.64	3985.58	8257	33597	27.00	422.91	1443722.62	17336505.73
Previous year (Total)	890.64	3562.67	7910	31475				
Personal Accident	1530.28	4814.89	81716	306161	554.51	272.12	2953659.02	20090217.09
Previous year	975.77	4542.77	94116	351926				
Medical Insurance	11917.17	43862.90	82376	287669	1832.72	4006.88	409149.41	1424995.78
Previous year	10084.45	39856.02	81214	267042				
Overseas Medical Insurance	73.38	330.20	1835	9674	11.64	-18.92	162970.98	980180.48
Previous year	61.74	349.12	1744	10343				
Health (Total)	11990.55	44193.10	84211	297343	1844.36	3987.96	572120.39	2405176.26
Previous year (Total)	10146.19	40205.14	82958	277385				
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0				
Credit Guarantee	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year	0.00	0.00	0	0				
All Other Miscellaneous	4121.63	17929.52	75696	308251	-248.69	-1109.65	4026447.02	31520030.87
Previous year	4370.32	19039.17	85827	362361				
Grand Total	48445.06	200445.42	902817	3557384	4697.49	19194.69	31376017.97	197287495.01
Previous year (Total)	43747.57	181250.73	892332	3531835				

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
356.17	1981.04	7933	32274	0.00	0.00	0	0	0	0
275.25	1406.31	7814	29748	4012.32	6002.03	0	0	0	0
80.95	300.78	625	2907	0.00	0.00	0	0	0	0
54.12	291.58	614	2544	370.71	1127.19	0	0	0	0
13.86	66.42	124	667	0.00	0.00	0	0	0	0
12.88	42.41	134	662	132.00	378.51	0	0	0	0
94.81	367.20	749	3574	0.00	0.00	0	0	0	0
67.00	333.99	748	3206	502.71	1505.69	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
69.26	425.99	604	1967	0.00	0.00	0	0	0	0
67.32	368.12	450	1866	451.38	1375.83	0	0	0	0
1498.35	6152.21	78874	315715	0.00	0.00	0	0	0	0
1206.90	5313.68	66815	275613	2141.31	7307.24	0	0	0	0
1923.09	7212.86	114035	455915	0.00	0.00	30147	1476506	454388	8474235
1160.74	4837.36	96783	391116	1782.60	5953.13	380386	2001497	1393863	3637226
3421.44	13365.07	114035	455915	0.00	0.00	30147	1476506	454388	8474235
2367.64	10151.04	96783	391116	3923.91	13260.37	380386	2001497	1393863	3637226
74.94	348.74	885	3723	170.89	659.44	4342	7901	4904	10093
89.71	303.18	953	3622	133.60	448.95	676	1722	3338	14421
0.01	1.79	1	8	0.00	0.00	0	0	0	0
0.03	1.82	3	7	0.68	1.61	0	0	0	0
0.00	0.50	0	1	0.00	0.00	0	0	0	0
0.00	0.50	0	1	1.49	5.27	0	0	0	0
18.17	99.08	193	1011	0.00	0.00	0	0	0	0
17.04	88.20	176	903	95.89	248.17	128	420	550	1994
93.12	450.11	1079	4743	170.89	659.44	4342	7901	4904	10093
106.78	393.70	1132	4533	231.66	704.00	804	2142	3888	16415
139.20	502.79	16586	62944	683.26	1473.52	9465	205336	66110	324103
155.30	454.57	20641	79001	284.46	1015.47	32083	182675	48752	576067
295.91	994.97	5617	18199	1665.09	7191.67	5293	191066	26450	263861
234.28	839.66	5238	15884	1653.01	3542.11	3006	221808	23044	320100
1.51	11.84	43	348	0.00	0.00	0	0	0	0
3.34	10.89	51	245	18.13	46.55	155	667	729	3843
297.42	1006.81	5660	18547	1665.09	7191.67	5293	191066	26450	263861
237.62	850.55	5289	16129	1671.14	3588.66	3161	222475	23773	323943
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
637.57	2888.38	24075	102428	811.44	3653.26	7694	517848	83800	1490122
849.10	13149.70	25782	107898	829.15	3915.95	21930	187138	389887	2305643
5108.99	20987.39	170721	682392	3330.68	12977.89	56941	2398657	635652	10562414
4126.01	27107.98	158639	633497	11906.73	31368.00	438364	2595927	1860163	6859294

Name of the Insurer: United India Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	7320.00	34964.00	77898	291893	680.00	4322.00	11702638	55897682
Previous year	6640.00	30642.00	76104	283403	913.00	5578.00	10615508	49060485
Marine Cargo	2324.00	11345.00	37841	108401	353.00	603.00	4928950	24061506
Previous year	1971.00	10742.00	29549	107475	-117.00	2863.00	4180276	22790622
Marine Hull (Including Onshore & Offshore oil energy)	2609.00	9429.00	5304	10351	1042.00	1783.00	938489	3391727
Previous year	1567.00	7646.00	3486	8018	780.00	649.00	563669	2748034
Marine (Total)	4933.00	20774.00	43145	118752	1395.00	2386.00	5867439	27453232
Previous year (Total)	3538.00	18388.00	33035	115493	663.00	3512.00	4743945	25538656
Aviation	16.00	161.00	121	368	3.18	16.00	2401	24156
Previous year	12.82	145.00	13	360	11.29	108.40	1923	21755
Engineering	2695.00	15294.00	7161	36569	209.00	2831.00	1161638	6592241
Previous year	2486.00	12463.00	6197	31536	1091.00	3950.00	1071552	5378303
Motor Own Damage	9034.00	39757.00	412182	1790416	418.00	5181.00	1281877	5641307
Previous year	8616.00	34576.00	402347	1673282	345.00	2194.00	1222565	4906151
Motor Third party	11591.00	42424.00	725667	3120430	3793.00	12733.00		0
Previous year	7798.00	29691.00	666124	2753767	1557.00	5932.00		0
Motor (Total)	20625.00	82181.00	725667	3120430	4211.00	17914.00	1281877	5641307
Previous year (Total)	16414.00	64267.00	666124	2753767	1902.00	8126.00	1222565	4906151
Workmen's compensation / Employer's liability	266.74	1834.95	8678	28230	-153.62	9.23		0
Previous year	420.36	1825.72	8298	26340	35.80	328.77	0	0
Public Liability	102.34	458.68	493	3130	4.35	56.88	17346	77742
Previous year	97.99	401.80	477	2626	8.01	1.51	16609	71811
Product Liability	63.83	215.87	141	687	4.18	-12.41	12700	42951
Previous year	59.65	228.28	128	729	2.76	80.09	11868	45423
Other Liability Covers	81.09	739.50	135	8325	4.85	65.30	24671	224984
Previous year	76.24	674.20	114	8103	-41.35	-23.75	23195	205121
Liability (Total)	514.00	3249.00	9447	40372	-140.24	119.00	54716	345677
Previous year (Total)	654.24	3130.00	9017	37798	5.22	386.62	51672	322354
Personal Accident	678.00	3911.00	41709	147570	56.76	414.64	2232466	12877840
Previous year	621.24	3496.36	38209	145984	83.97	977.75	2045571	11513820
Medical Insurance	19459.89	70476.42	169274	626296	5081.05	19312.56	2688099	9735287
Previous year	14378.84	51163.86	153800	529043	6757.02	16745.64	1986227	7067539
Overseas Medical Insurance	855.11	3898.58	16286	53255	132.95	817.44	251577	1146979
Previous year	722.16	3081.14	15456	43837	82.98	809.36	212462	906550
Health (Total)	20315.00	74375.00	185560	679551	5214.00	20130.00	2939676	10882265
Previous year (Total)	15101.00	54245.00	169256	572880	6840.00	17555.00	2198689	7974089
Crop Insurance	0.00	0.00	0	0	0.00	0.00	0	0
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
Credit Guarantee	0.00	0.00	0	0	0.00	0.00	0	0
Previous year	0.00	0.00	0	0	0.00	0.00	0	0
All Other Miscellaneous	6844.00	25408.00	142393	744047	1944.29	6228.37	1319325	4897928
Previous year	4899.70	19179.63	141960	643432	489.52	622.23	944521	3697256
Grand Total	63940.00	260317.00	1233101	5179552	13572.99	54361.00	26562176	124612329
Previous year (Total)	50367.00	205956.00	1139915	4584653	11999.00	40816.00	22895946	108412870

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
223.02	2254.38	8864	51823	0.00	0.00	0	0		
211.39	1966.97	7920	45514	0.00	0.00	0	0	0	0
12.25	244.46	1091	5891	0.00	0.00	0	0		
-13.01	194.21	1004	5464	0.00	0.00	0	0	0	0
2.90	22.90	219	635	0.00	0.00	0	0		
0.00	17.45	210	611	0.00	0.00	0	0	0	0
15.15	267.36	1310	6526	0.00	0.00	0	0		
-13.01	211.66	1214	6074	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
139.66	537.06	447	3193	0.00	0.00	0	0		
114.03	484.03	327	2780	0.00	0.00	0	0	0	0
1237.07	7662.18	65672	263176	0.00	0.00	0	0		
1183.99	6733.82	64688	242621	0.00	0.00	0	0	0	0
702.93	7531.19	105630	425076	0.00	0.00	0	0		
650.46	5657.59	98670	379655	0.00	0.00	0	0	0	0
1940.00	15193.37	105630	425076	0.00	0.00	0	0		
1834.45	12391.41	98670	379655	0.00	0.00	0	0		
20.82	165.66	387	3576	21.80	91.86	41	227		
19.78	136.26	360	3011	10.91	69.33	22	179	0	0
0.00	19.25	0	375	0.00	0.00	0	0		
0.00	16.60	0	339	0.00	0.00	0	0	0	0
0.00	3.05	0	21	0.00	0.00	0	0		
0.00	2.16	0	18	0.00	0.00	0	0	0	0
0.00	41.92	0	707	0.00	7.78	0	0		
0.00	37.56	0	643	0.00	0.00	0	0	0	0
20.82	229.88	387	4679	21.80	99.64	41	227		
19.78	192.57	360	4011	10.91	69.33	22	180		
223.22	1307.87	1556	13517	470.38	1191.23	18021	322311		
193.96	1097.08	1179	10795	435.79	1025.93	11025	52672	0	0
700.87	2436.79	15133	55575	2784.11	5961.92	2799825	12884795	1643218	15037858
529.07	1904.68	12126	44185	2777.49	5225.65	3217803	3296237	428204	548639
0.00	88.72	0	1580	0.00	0.00	0	109	1846	105559
0.00	89.49	0	1436	0.00	5.75	0	362	1761	2937
700.87	2525.51	15133	57155	2784.11	5961.92	2799825	12884904	1645064	15143417
529.07	1994.17	12126	45621	2777.49	5231.40	3217803	3296599	429965	551576
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		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
183.41	5997.95	28688	154472	801.54	4098.74	5952	23130		
146.56	5249.77	27133	147912	780.79	2906.40	5401	19826	0	0
3446.15	28313.39	162015	716440	4077.83	11351.53	2823839	13230572	1645064	15143417
3036.23	23587.66	148929	642362	4004.98	9233.06	3234251	3369277	429965	551576

Name of the Insurer: Universal Sampo General Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire	518.31	2397.72	9364	34314	146.57	704.45	931226.95	3551303.33
Previous year	371.74	1693.26	8440	30836	86.93	538.24	447385.20	2086583.43
Marine Cargo	72.38	332.40	128	515	28.07	75.57	650363.13	2919207.92
Previous year	44.31	256.84	156	437	-20.28	87.31	580246.35	1865158.55
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)	72.38	332.40	128	515	28.07	75.57	650363.13	2919207.92
Previous year (Total)	44.31	256.84	156	437	-20.28	87.31	580246.35	1865158.55
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	57.19	334.55	119	487	21.75	76.25	23721.06	270236.64
Previous year	35.44	258.30	87	359	13.73	88.60	11896.52	92992.61
Motor Own Damage	1046.63	3883.99	28942	107084	-336.22	-673.51	49510.85	190172.89
Previous year	1382.84	4557.50	45805	166082	1123.80	3803.74	86745.50	301305.62
Motor Third party	261.67	1024.19	0	0	-84.04	-443.17		
Previous year	345.71	1467.37	0	0	307.01	1362.96		
Motor (Total)	1308.30	4908.18	28942	107084	-420.26	-1116.68	49510.85	190172.89
Previous year (Total)	1728.56	6024.87	45805	166082	1430.82	5166.70	86745.50	301305.62
Workmen's compensation / Employer's liability	17.22	54	87	341	10.23	29.71	2403	7173
Previous year	6.99	24.20	75	229	0.36	9.61	1095.72	2645.64
Public Liability	0.49	5.98	1	10	0.49	1.71	500	4435
Previous year	0.00	4.27	0	4	0.00	-1.71	0.00	5900.00
Product Liability	0.45	1.17	1	3	0.45	1.17	200.00	443.75
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Other Liability Covers	3	42	7	46	-6.30	11.24	757	9461
Previous year	9	31	13	46	9	21	2732	8990
Liability (Total)	20.89	103.04	96	400	4.87	43.83	3859.84	21513.58
Previous year (Total)	16.02	59.21	88	279	9.39	29.30	3827.62	17535.14
Personal Accident	37.11	241.02	552	1958	19.93	66.25	73858.14	2641369.14
Previous year	17.18	174.77	452	1514	7.33	-491.58	49618.85	1228882.39
Medical Insurance	193.62	1412.76	3386	10841	63.27	516.26	9600.04	73770.29
Previous year	130.36	896.50	2737	7883	57.24	285.16	6300.35	58315.65
Overseas Medical Insurance	0.46	3.16	23	115	0.46	3.16	6365.29	34699.22
Previous year	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Health (Total)	194.08	1415.92	3409	10956	63.72	519.42	15965.33	108469.51
Previous year (Total)	130.36	896.50	2737	7883	57.24	285.16	6300.35	58315.65
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	384.60	1388.82	14250	50381	96.12	335.66	234163.33	971500.89
Previous year	288.49	1053.16	12582	45876	72.60	236.57	144315.99	565447.68
Grand Total	2592.85	11121.65	56860	206095	-39.24	704.74	1982668.62	10673773.90
Previous year (Total)	2632.09	10416.91	70347	253266	1657.75	5940.30	1330336.37	6216221.06

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0.00	0.00		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0	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	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0	0	0	0	0	0	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
0.00	0.00	0	0	0	0	0	0		
160.13	541.55	6017	18797	0	0.00	0	0		
131.92	441.60	4784	16521	0	0.00	0	0		
160.13	541.55	6017	18797	0.00	0.00	0	0	0	0
131.92	441.60	4784	16521	0.00	0.00	0	0	0	0

Name of the Insurer: Agriculture Insurance Company of India Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)								
Previous year (Total)								
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)								
Previous year (Total)								
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)								
Previous year (Total)								
Personal Accident								
Previous year								
Medical Insurance								
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)								
Previous year (Total)								
Crop Insurance	14431.85	28882.04	20397	87328	1444.25	1042.84	429619.96	927407.99
Previous year	12987.60	27839.20	24623	105383	2889.64	4571.49	364992.63	865946.83
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total	14431.85	28882.04	20397	87328	1444.25	1042.84	429619.96	927407.99
Previous year (Total)	12987.60	27839.20	24623	105383	2889.64	4571.49	364992.63	865946.83

* Wherever applicable

Name of the Insurer: Apollo Munich Health Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident	69.09	238.59	2645	9864	69.09	238.59	40324.38	138480.88
Previous year	57.87	161.38	2932	8852	57.87	161.38	35525.88	97097.38
Medical Insurance	2887.24	9495.46	15734	53658	2887.24	9495.46	54455.17	190234.70
Previous year	1254.09	5029.97	10516	31340	1254.09	5029.97	30957.00	95066.57
Overseas Medical Insurance	36.37	201.38	2042	9149	36.37	201.38	195496.44	951423.74
Previous year	39.05	201.64	2017	9173	39.05	201.64	186380.63	750993.85
Health (Total)	2923.61	9696.84	17776	62807	2923.61	9696.84	249951.61	1141658.44
Previous year (Total)	1293.13	5231.61	12533	40513	1293.13	5231.61	217337.63	846060.42
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	31.03	271.32	0	0	31.03	271.32	154520.00	1153575.00
Previous year	42.06	205.46	0	0	42.06	205.46	208875.00	891210.00
Grand Total	3023.73	10206.76	20421	72671	3023.73	10206.76	444795.98	2433714.31
Previous year (Total)	1393.06	5598.45	15465	49365	1393.06	5598.45	461738.50	1834367.80

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
4.96	17.51	403	2560	0.00	0.08	0	751		
0.36	0.61	3170	5258	0.56	2.26	3306	6378		
329.98	881.46	36391	70054	24.02	80.35	5995	20050	133201	404690
125.23	317.06	11500	16900	44.69	45.85	9247	9689	48981	155304
								2840	12112
								2723	11341
329.98	881.46	36391	70054	24.02	80.35	5995	20050	136041	416802
125.23	317.06	11500	16900	44.69	45.85	9247	9689	51704	166645
334.95	898.97	36794	72614	24.02	80.43	5995	20801	136041	416802
125.59	317.67	14670	22158	45.25	48.11	12553	16067	51704	166645

Name of the Insurer: Export Credit Guarantee Corporation of India Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident								
Previous year								
Medical Insurance								
Previous year								
Overseas Medical Insurance								
Previous year								
Health (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Crop Insurance								
Previous year								
Credit Guarantee	7811	30935	1068	3854	1805	4125	417491	1197022
Previous year	6006	26810	1095	3977	-971	862	43334	133514
All Other Miscellaneous								
Previous year								
Grand Total	7811.44	30935.05	1068	3854	1805.01	4124.60	417491.23	1197022.18
Previous year (Total)	6006.43	26810.00	1095	3977	-970.57	862.00	43334.00	133514.00

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF JULY, 2011

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

Name of the Insurer: Max Bupa Health Insurance Company Limited

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire								
Previous year								
Marine Cargo								
Previous year								
Marine Hull (Including Onshore & Offshore oil energy)								
Previous year								
Marine (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Aviation								
Previous year								
Engineering								
Previous year								
Motor Own Damage								
Previous year								
Motor Third party								
Previous year								
Motor (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Workmen's compensation / Employer's liability								
Previous year								
Public Liability								
Previous year								
Product Liability								
Previous year								
Other Liability Covers								
Previous year								
Liability (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Previous year (Total)	0.00	0.00	0	0	0.00	0.00	0.00	0.00
Personal Accident								
Previous year								
Medical Insurance	533.92	1938.29	4737	17135	523.61728	1896.69671	35457.2	82114.1
Previous year	169.67	400.48	1779	4326	164.19	388.46	6361.50	14758.50
Overseas Medical Insurance								
Previous year								
Health (Total)	533.92	1938.29	4737	17135	523.62	1896.70	35457.20	82114.10
Previous year (Total)	169.67	400.48	1779	4326	164.19	388.46	6361.50	14758.50
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous								
Previous year								
Grand Total	533.92	1938.29	4737	17135	523.62	1896.70	35457.20	82114.10
Previous year (Total)	169.67	400.48	1779	4326	164.19	388.46	6361.50	14758.50

* Wherever applicable

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
0.00	0.00	0	0	0.00	0.00	0	0		
5.01597	15.93019	61	167	0.59731	3.48986	498	505	9522	34703
0.20	0.77	5	12					2795	6772
5.02	15.93	61	167	0.60	3.49	498	505	9522	34703
0.20	0.77	5	12	0.00	0.00	0	0	2795	6772
5.02	15.93	61	167	0.60	3.49	498	505	9522	34703
0.20	0.77	5	12	0.00	0.00	0	0	2795	6772

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

BUSINESS FIGURES:

LINE OF BUSINESS	Total Premium u/w		Total No. of Policies Issued		Accretions during the month (premium)		Sum Assured	
	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
Fire			0	0			0.00	0.00
Previous year			0	0			0.00	0.00
Marine Cargo			0	0			0.00	0.00
Previous year			0	0			0.00	0.00
Marine Hull (Including Onshore & Offshore oil energy)			0	0			0.00	0.00
Previous year			0	0			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	0			0.00	0.00
Previous year			0	0			0.00	0.00
Engineering			0	0			0.00	0.00
Previous year			0	0			0.00	0.00
Motor Own Damage			0	0			0.00	0.00
Previous year			0	0			0.00	0.00
Motor Third party			0	0				
Previous year			0	0				
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			0	0				
Previous year			0	0				
Public Liability			0	0				
Previous year			0	0				
Product Liability			0	0				
Previous year			0	0				
Other Liability Covers			0	0				
Previous year			0	0				
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	109.95	366.38	11618	39812	-86.55	-57.46	137914.83	753498.67
Previous year	196.50	423.84	11633	41436	135.99	242.53	108902.51	471940.82
Medical Insurance	9943.54	50102.81	89724	307141	-10571.88	-1665.85	12822331.85	23730854.10
Previous year	20515.42	51768.66	70654	223607	2881.50	11983.24	11896711.05	22286958.55
Overseas Medical Insurance	126.06	579.46	4263	18836	9.69	61.70	436253.02	1983452.99
Previous year	116.37	517.76	3644	16842	42.01	190.31	318108.51	1519040.21
Health (Total)	10069.60	50682.27	93987	325977	-10562.19	-1604.15	13258584.87	25714307.09
Previous year (Total)	20631.79	52286.42	74298	240449	2923.51	12173.55	12214819.56	23805998.76
Crop Insurance								
Previous year								
Credit Guarantee								
Previous year								
All Other Miscellaneous	39.98	157.06	14349	56353	-2.92	5.66	143490	563530.00
Previous year	42.90	151.40	15692	54266	11.93	15.50	156920.00	542660.00
Grand Total	10219.53	51205.71	119954	422142	-10651.66	-1655.95	13539989.70	27031335.76
Previous year (Total)	20871.19	52861.66	101623	336151	3071.43	12431.58	12480642.07	24820599.58

* Wherever applicable

(Premium in ₹ Lakhs)

FOR AND UP TO THE MONTH OF JULY, 2011

Amount of Premium u/w in Rural Areas		No. of Policies in Rural Areas		Amount of Premium u/w in Social Sector		No. of Lives covered in Social Sector		No. of Lives covered *	
For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month	For the month	Up to the month
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
0.00	0.00	0	0	0.00	0.00	0	0	0	0
61.48	193.97	4794	16799	11.39	110.27	6979	44465.00		
135.66	185.06	4941	18211	22.61	154.35	12818	116147.00		
5791.78	29417.79	30772	104499	2670.92	16363.32	8906884	15804206.00	29722031	52647932.00
12673.16	14492.77	24878	77581	7484.08	36339.15	8496741	8585496.00	28277495	52743051.00
26.60	90.15	619	3132	41.93	265.86	1438	9078.00	4263	18820.00
25.87	110.01	735	2790	60.26	219.19	2077	7221.00	3644	16842.00
5818.38	29507.94	31391	107631	2712.85	16629.18	8908322	15813284	29726294	52666752
12699.03	14602.78	25613	80371	7544.34	36558.34	8498818	8592717	28281139	52759893
				0.00	0.00	0	0		
				0.00	108.50	0	38574		
5879.86	29701.91	36185	124430	2724.24	16739.45	8915301	15857749	29726294	52666752
12834.69	14787.84	30554	98582	7566.95	36821.19	8511636	8747438	28281139	52759893



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Avoid prolonged 'tu tu, mein mein' with your insurance company!

A harassed insurance policyholder can fight for his rights. Approach the Insurance Ombudsman within 12 months of your claim being rejected. There are 12 insurance ombudsmen in 12 cities across India, looking into personal complaints.

File a complaint with the Insurance Ombudsman, if:

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- There is a dispute regarding premium paid or payable
- There is delay in claim settlement
- Your claim is partially or totally rejected
- There is a dispute regarding the terms and conditions of the policy

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17 – 18 Oct 2011 Venue: Kuala Lumpur	1st Asian Captives Conference By Asia Insurance Review, Singapore
19 – 20 Oct 2011 Venue: Kuala Lumpur	7th Asian Conference on Pensions and Retirement Planning By Asia Insurance Review, Singapore
30 Oct – 02 Nov 2011 Venue: Singapore	Singapore International Reinsurance Conference By Singapore Reinsurers' Association.
31 Oct – 02 Nov 2011 Venue: NIA Pune	Management of Marine Cargo Insurance By National Insurance Academy.
06 – 08 Nov 2011 Venue: Chongqing, China	12th China Rendez-vous By China Re and Singapore Re.
07 – 09 Nov 2011 Venue: NIA Pune	Management of Motor Underwriting and Claims By National Insurance Academy.
08 – 09 Nov 2011 Venue: Seoul	7th Insurance Executives' Summit for Strategy, Operations & Technology 2011 By Asia Insurance Review, Singapore.
12 – 17 Nov 2011 Venue: NIA Pune	Management of Property Insurance (Fire & Engineering) By National Insurance Academy.
17 – 19 Nov 2011 Venue: NIA Pune	Management of Liability Risk By National Insurance Academy.
22 – 23 Nov 2011 Venue: Dubai, UAE	1st Middle East Conference on SRCC, Political Risks & Terrorism Insurance By MENA Insurance Club.

view point



Our system has a strong track record of protecting consumers and maintaining effective solvency oversight. The insurance sector in the U.S. weathered a devastating financial crisis and remains resilient in coping with equally devastating natural catastrophe losses across the country.

Ms. Therese M. (Terri) Vaughan
Chief Executive Officer, NAIC

It is the ombudsman's role to provide individual consumers with a fair and easily accessible complaint-handling service; and it is for the FSCS (Financial Services Compensation Scheme) to provide prompt compensation when a firm fails financially.

Ms. Margaret Cole
Interim Managing Director of the conduct business unit, FSA, UK

It is necessary, while promoting and improving the market penetration of Earthquake Insurance, to design and operate sustainable and stable system now that insurance reserves which had been accumulated by insurers in the past time, significantly decreased due to payouts following the last earthquake.

Mr. Shuzo Sumi
Chairman, General Insurance Association of Japan (GIAJ)

Safety is a remarkably useful characteristic attaching to a bank, insurance company, or super fund; but not the only important characteristic. The essential concept here is balance.

Mr. Charles Littrell
Executive General Manager, Australian Prudential Regulation Authority.

Though the prospects for the insurance industry in Asia appear promising, the industry should be alert to potential risks looming over the horizon.

Mr Lim Hng Kiang
Deputy Chairman, Monetary Authority of Singapore.

Insurers should not look merely at mandatory fulfilment of their rural and social obligations; there is need to appreciate the spirit behind the requirement.

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



If undelivered please return to:

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