

26th ANNUAL REPORT

INCORPORATION SINCE 1997

HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.

CIN NO: U67200MH1997PTC105960

TPA LICENSE No: 022

An ISO 27001:2013 CERTIFIED COMPANY

1	PARTICULARS OF THE TPA:		
1.1	Name of the TPA :	HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.	
(A)	Address -	1114-Raheja Center, Free Press Journal Marg, Nariman Point, Mumbai.	
1.2	Registered Office:	Pin code : 400 021	Landline No : 022 - 66820300
		E-mail: mitulvora@healthindiatpa.com	Fax No: NA

1.3	Financial year	2022-2023
1.4	Board of Directors as on 31 March 2023, and changes in the board since the date of statement of the preceding year	1. Mitul Jayant Vora 2. Kamal Jeet Gupta 3. Dr. Narendra Kumar Sharma 4. Mugdha Milind Samant 5. Amin Yasin Badhra

Sr.	Name of Director and DIN No.	Age	Address with telephone no., Mobile no., e-mail	Qualifications	Details of Directorship in other Companies	Particulars of Change in Board (Cession / Appointment)	Date of Change in Board
1	Mitul Jayant Vora [DIN- 00381979]	53	Flat No.6A, 2nd Floor, Darbhanga Mansion, M.L.Dhanukar Road, Mumbai - 400 026. Phone No. 022 - 66820300 e-mail mitulvora@healthindiatpa.com	B.Sc	1. Chemspec Chemical Pvt. Ltd. 2. Exult IT Services Pvt. Ltd. 3. Bsideu Services Pvt. Ltd. 4. Graphitegtc Pvt Ltd	Appointment	01st Oct 2015
2	Kamal Jeet Gupta [DIN- 02770091]	62	Flat No.33, Bldg.11, Emerald Chs Ltd, Bandra Reclamation, Bandra (W), Mumbai - 400050. Phone No. 022 - 66867663 e-mail kamaljeetg@healthindiatpa.com	M.com, ACA, FIII Diploma in sales and Marketing	NIL	Appointment	09th Sep 2009
3	Dr. Narendra Kumar Sharma [DIN-08352919]	71	803-A, Raheja Greens, Kulupwadi, Raheja Estate, Borivali(East), Mumbai 400066 e-mail: drnarendra@narendrahospital.com	MBBS/MD	NIL	Appointment	06th Feb 2019
4	Mugdha Milind Samant[DIN- 08423697]	55	114-B, 4th Floor, Shri Sailyam CHS, Pokhran Road no 1, Shivai Nagar, Jekegram, Thane West - 400606	Bachelors Degree of Commerce/(EM BA) MBA in Finance Management/(E MBA) MBA in Healthcare and Hospital Management	NIL	Appointment	17th Apr 2019
5	Amin Yasin Badhra[DIN- 08567068]	46	B-702, Vali Apartment Co-op Housing Society, Rani Sati marg, Opp Noorani Masjid Pathanwadi, Malad East, Mumbai, Borivali Mumbai Suburban, Maharashtra - 400097	Certified Accountant	NIL	Appointment	20th Sep 2019


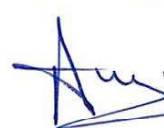



1.5 Details of Chief Executive Officer (CEO)						
Sr.	Name of CEO	Age	Address with telephone no., Mobile no., e-mail	Qualifications	Details of Directorship in other Companies	Date of joining with TPA Company as a CEO
1	Mitul Jayant Vora	53	Flat No.6A, 2nd Floor, Darbhanga Mansion, M.L.Dhanukar Road, Mumbai 400 026. Phone No. 022 - 66820300 e-mail mitulvora@healthindiatpa.com	B.Sc (Business Studies UK)	1. Chemspec Chemical Pvt. Ltd. 2. Exult IT Services Pvt. Ltd. 3. Bsideu Services Pvt. Ltd. 4. Graphitegtc Pvt Ltd	01/04/2018

1.6 Details of Chief Administrative Officer (CAO)						
Sr.	Name of CAO	Age	Address with telephone no., Mobile no., e-mail	Qualifications	Details of Directorship in other Companies	Date of joining with TPA Company as a CAO
1	Kamal Jeet Gupta [DIN- 02770091]	62	Flat No.33, Bldg.11, Emerald Chs Ltd, Bandra Reclamation, Bandra (W), Mumbai - 400050. Phone No. 022 - 66867663 e-mail kamaljeetg@healthindiatpa.com	M.com, ACA, FIII Diploma in sales and Marketing	NIL	09/09/2009

1.7 Details of Chief Administrative Officer (CMO)						
Sr.	Name of CMO	Age	Address with telephone no., Mobile no., e-mail	Qualifications	Details of Directorship in other Companies	Date of joining with TPA Company
1	Dr. Prakash Vindorai Katakia	69	1 Selarka Sadan, Dr M P Vaidya Marg, Tilak Road, Ghatkopar(East), Mumbai - 400077 / 9867695812 / prakash.katakia@healthindiatpa.com	M.B.B.S	NA	w.e.f 09th April 2021

1.8	Name and Address of Auditors	JAKHELIA & ASSOCIATES C/28, Sahyadri Apt, L T Road, Borivli (W), Mumbai 400092
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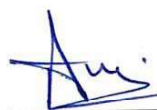
Date : 28.06.2023	For and on behalf of HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.	
Place : Mumbai		
	Mitul Jayant Vora Whole Time Director & CEO	Amin Badhra Director



1.9	Enumeration of TPA services provided :	As per Annexure attached		
1.10	Enumeration of standing arrangements with hospitals and with doctors :			
	Number of agreements with Network Providers	12608 - Total No of Agreements at the end of the year with Network Providers		
	Number of agreements with Doctors	2609 - Total agreement for Pre-Insurance Medical		
1.11	Summary of TPA Business:			
	a.	No. of insurers with whom agreements entered with.	TPA - 21 Pre-Insurance Medical - 41	
	b.	Lives covered under Health Policies (to be reported as per provisions of Reg. 14 of TPA Regulations and Circular in the matter issued by the Authority)	TPA – 91,33,522 Pre-Insurance Medical – 6,79,287	
	c.	Policies Served (to be reported as per provisions of Reg. 14 of TPA Regulations and Circular in the matter issued by the Authority)	TPA – 5,67,929	
	d.	Number of Hospitals tied up by the TPA (beginning of concerned FY)	10484	
	e.	Hospitals tied up during (for the concerned FY)	2498	
	f.	Total Hospitals terminated or removed during (concerned FY)	374	
	g.	Total Hospitals tied up as on (end of concerned FY)	12608	
1.12	Summary of TPA services:			
Sr. No.	Particulars of Services	No. of Policies Serviced	No. of lives Serviced	Amount of Premium Serviced wherever available. (INR in Lakh)
1	Individual / Retail Health Insurance Policies	5,64,970	10,66,495	35,986
2	Group Health Insurance Policies (other than RSBY or other similar policies issued by insurers)	2,959	80,67,027	125,225
3	Policies issued under RSBY or other similar policies issued by insurers	0	0	0
4	Pre-Insurance Medical Examination	0	6,79,287	0
5	Foreign Travel Policies issued by Indian insurer	0	0	0
6	Foreign Travel Policies issued by Foreign insurer	0	0	0
7	Non-insurance healthcare schemes sponsored by Central / State Government.	0	0	0

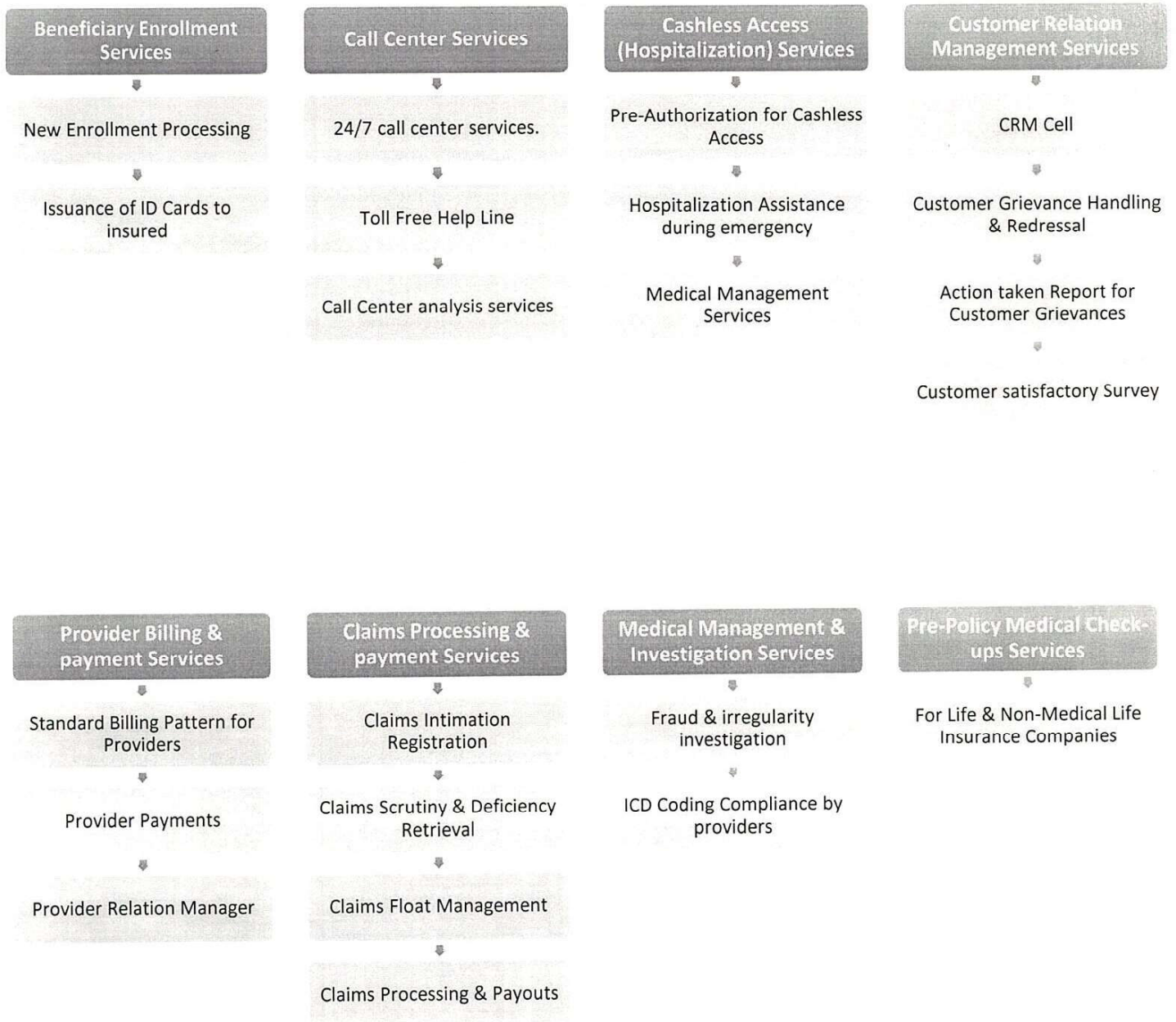


Mitul Jayant Vora
Whole Time Director & CEO

Amin Badhra
Director

1.9: Enumeration of TPA services provided:



Mitul Jayant Vora
Whole Time Director & CEO



Amin Badhra
Director

Office No. 406-412, Fourth Floor, Neelkanth Corporate IT Park, Kiroli Road, Opp. Vidyavihar Railway Station (W), Mumbai - 400086.
Tel.: +91-22-6686 7575 • Fax: +91-76661 36699 • E-mail: contact@healthindiatpa.com • Website: www.healthindiatpa.com

Schedule - 1, FORM TPA - 8-RA

Revenue Account for the year ending 31st March 2023

(Amount in Lakhs)


Expenses		Income	
I. Directors' Remuneration	241.74	I. Income	
II. Staff Expenses		(a) Income from Insurers (Indian & foreign)	11745.86
(a) Salaries, Provident fund	3873.54	(b) from others (please specify)	
(b) Other benefits	170.76	Interest on Bank Fixed Deposits	10.66
III. Office Expenses		Interest on Income Tax Refund	101.41
(a) Rent, rates and taxes	768.27	Sundry Credit Balance Written Back	5.15
(b) Electricity, water	112.56	Reversal of Provision	11.30
(c) House-keeping and cleaning	232.71	Misc Income	0.08
(d) Others	-	(c) Investment income	-
(e) Travel	232.83	(d) Profit on sale of investments or assets	-
(f) Entertainment	-		
(g) Lease rents of equipments	-		
(h) Post, telecommunications and similar expenses	258.82		
(i) Audit fees	6.75		
(j) Legal Expenses	-		
(k) Repair and Maintenance	141.06		
(l) Depreciation	520.30		
(m) Motor Vehicle Expenses	32.14		
(n) Other Expenses (please specify)	-		
Bank Charges	0.57		
Printing & Stationery	491.36		
Business Promotion	116.75		
Bad Debts / Sundry Balance w/off	11.50		
Finance Charges	587.74		
Insurance Expense	55.31		
Fixed Assets Written off	-		
Contingency provision	53.00		
Miscellaneous Expenses	156.83		
Professional Expense	187.52		
Provision for Doubtful Receivable Expenses	25.88		
(o) Loss on sales of investments or Fixed assets	-		
(p) Profit/Loss for the year	(1215.21)		
IV. Operating Expenses	4811.72		

For Healthindia Insurance TPA Services Private Limited



Mitul Jayant Vora
Whole Time Director & CEO





Amin Badhra
Director



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Schedule - 2, FORM TPA - 8-PL

Profit and Loss Appropriation Account for the year ending 31st March 2023

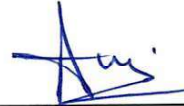
(Amount in Lakhs)

Particulars	Amount	Particulars	Amount
Loss Brought forward	-	Profit Brought Forward	683.22
Loss for the year	1215.21	Profit for the year	-
Dividend for the year	-	Transfer from reserves	-
Tax on Dividend	-	Loss carried forward	254.88
Transfer of Reserves	-	Deferred Tax Credit (assets)	322.32
Other allocation from profit	-		
Provision for taxation	-		
Deferred tax liability	-		
Taxation of earlier year	45.20		
Profit carried forward	-		

For Healthindia Insurance TPA Services Private Limited



Mitul Jayant Vora
Whole Time Director & CEO

Amin Badhra
Director



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Schedule - 3, FORM TPA - 8-BS

Balance Sheet as at 31st March 2023

(Amount in Lakhs)

Liabilities	Amount	Amount	Assets	Amount	Amount
Authorized Capital		500.00	Building/Properties Cost	900.63	
Issued Capital		416.78	Less: Depreciation	191.59	709.04
Paid up Capital	416.78		Furniture & Fixtures	587.89	
Reserves & Surplus	(254.88)	161.90	Less: Depreciation	212.71	375.18
Amounts Due to			Air Conditioners	65.76	
a) Insurers	-		Less: Depreciation	37.75	28.01
b) Hospitals	-		Electrical Installations	32.32	
c) Doctors	1128.15	1349.76	Less: Depreciation	25.65	6.67
d) Others	221.61		Office Equipments	547.59	
Secured Loan		341.50	Less: Depreciation	263.37	284.22
Unsecured Loan		2994.94	Computer Software	1167.14	
Deferred Tax Liability		-	Less: Depreciation	630.15	536.99
Bank Overdraft		2328.35	Motor Vehicle	310.22	
Current Liability			Less: Depreciation	206.79	103.44
Sundry Creditor	591.47		CWIP		112.35
Provisions	646.07		Investments		
Others	1715.74	2953.27	Government Securities (Market Value)	-	
			Loan & Debenture (Market Value)	-	
			Other Investments (Market value)	-	
			Receivables		
			From Insurers	5733.37	
			Others	2181.35	7914.71
			Cash & Bank Balances		59.12
TOTAL		10129.72	TOTAL		10129.72

For Healthindia Insurance TPA Services Private Limited

Mitul Jayant Vora
Whole Time Director & CEO



Amin Badhra
Director



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Schedule - 4

Schedule of the income received towards various activities during the FY 2022-2023

Sr No	Description	Income / Remuneration received during the FY (Amt. in Lakhs) *
1	Towards Health Services of the Individual policies issued by Indian Insurers	1351.46
2	Towards Health Services of the Group Insurance policies issued by Indian Insurers	
	Group :	3111.04
	RSBY :	9.60
3	Pre-insurance medical examination	7273.76
4	Towards Health Services in the foreign jurisdiction in respect of the policies issued by Indian Insurers	
5	Towards Non Insurance Services rendered	
6	Towards Servicing of policies issued by foreign Insurers	
7	Other income (please specify accounting head wise other income received)	
	Interest on bank fixed deposits	10.66
	Interest on Income Tax Refund	101.41
	Sundry Credit Balance Written back	5.15
	Excess Provision Written Back	11.30
	Misc Income	0.08
	Total	11874.45

Schedule - 5

Schedule of apportionment of Expenses to various activities during the FY 2022-23

Sr No	Description	Expenses incurred during the FY (Amt. INR in Lakhs)
1	Health Services of the policies issued by Indian Insurers " * "	1,30,89,66,100
2	Health Services in the foreign jurisdiction in respect of the policies issued by Indian Insurers	
3	Non Insurance Services rendered	
4	Servicing of policies issued by foreign Insurers	
5	Other Expenses Incurred (to specify)	

Note :

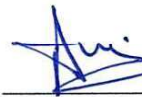
" * ,"

As per information and explanation given by the management of the Company all expenses incurred during the year are directly or indirectly in relation to their business i.e. Health services in relation to policies issued/to be issued. Hence all expenses of current year shown under Sr No.1 above.

For Healthindia Insurance TPA Services Private Limited



Mitul Jayant Vora
Whole Time Director & CEO



Amin Badhra
Director



HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.

Address: 406-412, NeelKanth Corporate Park, 4th Floor, Kiroli Road / Village, Vidya Vihar Society Vidya Vihar (West), Mumbai – 400086

Website : www.healthindiatpa.com**Schedule – 6****1. Data of claims received during the year 2022-2023**

Benefit Based Policies		Cashless Claims		Reimbursement Claims		Total	
Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
0	0	166663	11062295109	259699	10785305695	426362	21847600804

2. Data of Settled Claims in respect of Individual Policies;

Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	20335	1535428551	53692	2459557287	74027	3994985838
Between 1 – 3 Months	0	0	111	14459028	112	5413963	223	19872991
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0

3. Data of settled Claims in respect of Group Policies;

Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	124995	5999542976	154993	3951377621	279988	9950920597
Between 1 – 3 Months	0	0	1261	80520620	867	7129040	2128	87649660
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0



HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.

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4. Data of settled Claims in respect of Total (Individual Policies + Group Policies):

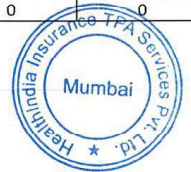
Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	145330	7534971527	208685	6410934908	354015	13945906435
Between 1 – 3 Months	0	0	1372	94979648	979	12543003	2351	107522651
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0

5. Data of Claims in respect of Individual Policies recommended for repudiation

Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	2085	198191273	10405	594815107	12490	793006380
Between 1 – 3 Months	0	0	105	9574601	918	45200267	1023	54774868
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0

6. Data of Claims in respect of Group Policies recommended for repudiation

Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	14253	751046922	33035	848004242	47288	1599051164
Between 1 – 3 Months	0	0	375	34601091	26	1187103	401	35788194
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0



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Website : www.healthindiatpa.com

7. Data of Claims in respect of Total Policies (Individual + Group Policies) recommended for repudiation:

Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	16338	949238195	43440	1442819349	59778	2392057544
Between 1 – 3 Months	0	0	480	44175692	944	46387370	1424	90563062
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0

(Note: In respect of data on Repudiations, amount of claim made by the policyholder to be mentioned as the amount of claim repudiated)

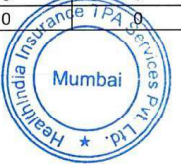
8. Data of Claims Outstanding in respect of Individual Policies:

Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	1056	83634302	2467	126895783	3523	210530085
Between 1 – 3 Months	0	0	20	835266	91	4915205	111	5750471
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0

9. Data of Claims Outstanding in respect of Group Insurance Policies:

Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	7422	356497615	9871	292509382	17293	649006997
Between 1 – 3 Months	0	0	231	10535443	193	8557048	424	19092491
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0

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Website : www.healthindiatpa.com

10. Data of Claims Outstanding in respect of Total Policies (Individual + Group Policies)

Description (to reckoned from the date of receipt of Claim)	Benefit Based Claims		Cashless Claims		Reimbursement Claims		Total	
	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims
within 1 months from date of receipt of claim	0	0	8478	440131917	12338	419405165	20816	859537082
Between 1 – 3 Months	0	0	251	11370709	284	13472253	535	24842962
Between 3 to 6 Months	0	0	0	0	0	0	0	0
More than 6 months	0	0	0	0	0	0	0	0

(Note: In respect of data on Claims Outstanding, amount of claim made by the policyholder to be mentioned as the amount of claim Outstanding)

 Mitul Jayant Vora Whole Time Director & CEO	 Amin Badhra Director
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MASS POLICY PAID CLAIM SUMMARY FOR THE YEAR 2022-2023

MASS POLICY PAID CLAIM SUMMARY FOR THE YEAR 2022-2023			
REGION	PROJECT NAME	PAID CLAIM SUMMARY	
		TOTAL NO OF CLAIM PAID	TOTAL PAID AMOUNT
NO MASS POLICY BUSINESS SERVICED DURING THIS FINANCIAL YEAR 2022-23			



Mitul Jayant Vora
Whole Time Director & CEO



Amin Badhra
Director

Undertaking from Registered TPA Company

It is hereby declared that the particulars furnished with respect Annual Report of our TPA Company in Form TPA-8 and Schedule 1 to 7 there under towards various activities of the TPA Company during the Financial Year 2022-2023 were examined, and are true and correct.

It is also declared that the TPA Company did not receive any other income or remuneration from any other sources than the one that is declared in the above Schedule.

Date: 28.06.2023	For and on behalf of (HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.)	
Place: Mumbai	 Mitul Jayant Vora Whole Time Director & CEO	 Amin Badhra Director



Annexure – 17

As per Regulations 19 (10) of IRDAI (TPA - Health Services) Regulations, 2016

FORM TPA - 6B

Quarterly and Cumulative Claims data for TPAs

Instructions for submission of the form: Information for both Quarterly and Cumulative data to be furnished every quarter.

Data to be furnished within 30 days of the end of the preceding quarter

1	PARTICULARS OF THE TPA COMPANY:		
1.1	Name of the TPA :	HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.	
1.2	(A)	Address - Registered Office:	HealthIndia Insurance TPA Services Pvt Ltd 406-412, NeelKanth Corporate Park, 4th Floor, Kiroli Road / Village Vidya Vihar Society, Vidya Vihar (West), Mumbai – 400086 E-mail: mitulvora@healthindiatpa.com Fax No: NA
1.3	(B)	Financial Year	2022-2023
1.4	(C)	Quarter for which Data is to be	April 2022 - March 2023
1.5	(d)	Name of Insurer (insurer wise data to be submitted in following format)	ALL INSURANCE COMPANY

ALL INSURANCE COMPANY

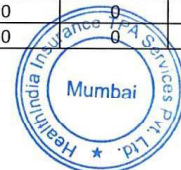
Claims Data: Furnish the following information in separate tables;

1. Table – 1a: Government Hospitals who are Network Providers;

Sr.No	Particulars	(Amount in INR)							
		Cashless Claim		Reimbursement Claim		Benefit Based		Total	
	Column Code	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
1	Claims pending at the beginning of the quarter	0	0	0	0	0	0	0	0
2	New claims received during the quarter	0	0	25	450503	0	0	25	450503
3	Claims settled	0	0	16	218011	0	0	16	218011
4	Claims repudiated	0	0	8	158208	0	0	8	158208
5	Claims pending at the end of the quarter	0	0	1	20000	0	0	1	20000

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ALL INSURANCE COMPANY

Aging of pending claims* Furnish the following information in separate tables;

1. Table – 1a: Government Hospitals who are Network Providers;

Sr. No	Particulars	(Amount in INR)							
		Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims Pending for less than 1 month	0	0	1	20000	0	0	1	20000
2	Claims Pending for 1-3 months	0	0	0	0	0	0	0	0
3	Claims Pending for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims Pending for 6-12 months	0	0	0	0	0	0	0	0
5	Claims Pending for 1-2 years	0	0	0	0	0	0	0	0
6	Claims Pending for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

ALL INSURANCE COMPANY

Aging of settled claims** Furnish the following information in separate tables;

1. Table – 1a: Government Hospitals who are Network Providers;

Sr. No	Particulars	(Amount in INR)							
		Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims Settled for less than 1 month	0	0	16	218011	0	0	16	218011
2	Claims Settled for 1-3 months	0	0	0	0	0	0	0	0
3	Claims Settled for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims Settled for 6-12 months	0	0	0	0	0	0	0	0
5	Claims Settled for 1-2 years	0	0	0	0	0	0	0	0
6	Claims Settled for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.



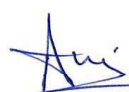
ALL INSURANCE COMPANY

Aging of repudiated claims*** Furnish the following information in separate tables;

1. Table – 1a: Government Hospitals who are Network Providers;

(Amount in INR)									
Sr. No	Particulars Column Code	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
		(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims repudiated for less than 1 month	0	0	8	158208	0	0	8	158208
2	Claims repudiated for 1-3 months	0	0	0	0	0	0	0	0
3	Claims repudiated for 3-6 months	0	0	0	0	0	0	0	0
4	Claims repudiated for 6-12 months	0	0	0	0	0	0	0	0
5	Claims repudiated for 1-2 years	0	0	0	0	0	0	0	0
6	Claims repudiated for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

ALL INSURANCE COMPANY

2. Table – 1b: Government Hospitals who are not Network Providers;

(Amount in INR)									
Sr.No	Particulars	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims pending at the beginning of the quarter	0	0	74	422631	0	0	74	422631
2	New claims received during the quarter	0	0	3027	19445431	0	0	3027	19445431
3	Claims settled	0	0	2382	11907875	0	0	2382	11907875
4	Claims repudiated	0	0	622	5880513	0	0	622	5880513
5	Claims pending at the end of the quarter	0	0	97	1174983	0	0	97	1174983

ALL INSURANCE COMPANY

Aging of pending claims* Furnish the following information in separate tables;

2. Table – 1b: Government Hospitals who are not Network Providers;

(Amount in INR)									
Sr. No	Particulars	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims Pending for less than 1 month	0	0	95	1168042	0	0	95	1168042
2	Claims Pending for 1-3 months	0	0	2	6941	0	0	2	6941
3	Claims Pending for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims Pending for 6-12 months	0	0	0	0	0	0	0	0
5	Claims Pending for 1-2 years	0	0	0	0	0	0	0	0
6	Claims Pending for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

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ALL INSURANCE COMPANY

Aging of settled claims** Furnish the following information in separate tables;

2. Table – 1b: Government Hospitals who are not Network Providers;

Sr. No	Particulars	(Amount in INR)							
		Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims Settled for less than 1 month	0	0	2362	11825275	0	0	2362	11825275
2	Claims Settled for 1-3 months	0	0	20	82600	0	0	20	82600
3	Claims Settled for 3-6 months	0	0	0	0	0	0	0	0
4	Claims Settled for 6-12 months	0	0	0	0	0	0	0	0
5	Claims Settled for 1-2 years	0	0	0	0	0	0	0	0
6	Claims Settled for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

ALL INSURANCE COMPANY

Aging of repudiated claims*** Furnish the following information in separate tables;

2. Table – 1b: Government Hospitals who are not Network Providers;

Sr. No	Particulars	(Amount in INR)							
		Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims repudiated for less than 1 month	0	0	617	5758773	0	0	617	5758773
2	Claims repudiated for 1-3 months	0	0	5	121740	0	0	5	121740
3	Claims repudiated for 3-6 months	0	0	0	0	0	0	0	0
4	Claims repudiated for 6-12 months	0	0	0	0	0	0	0	0
5	Claims repudiated for 1-2 years	0	0	0	0	0	0	0	0
6	Claims repudiated for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.




ALL INSURANCE COMPANY

3. Table – 2a: Private Hospitals who are Network Providers;

(Amount in INR)									
Sr.No	Particulars	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims pending at the beginning of the quarter	5585	286852411	2204	109288524	0	0	7789	396140935
2	New claims received during the quarter	166663	11062295109	98336	4201343101	0	0	264999	15263638210
3	Claims settled	146702	7629951175	79506	2320822504	0	0	226208	9950773679
4	Claims repudiated	16817	993410416	16189	608854702	0	0	33006	1602265118
5	Claims pending at the end of the quarter	8729	451502626	4845	160035031	0	0	13574	611537657

ALL INSURANCE COMPANY

Aging of pending claims* Furnish the following information in separate tables;

3. Table – 2a: Private Hospitals who are Network Providers;

(Amount in INR)									
Sr. No	Particulars	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims Pending for less than 1 month	8478	440131917	4720	153358721	0	0	13198	593490638
2	Claims Pending for 1-3 months	251	11370709	125	6676310	0	0	376	18047019
3	Claims Pending for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims Pending for 6-12 months	0	0	0	0	0	0	0	0
5	Claims Pending for 1-2 years	0	0	0	0	0	0	0	0
6	Claims Pending for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

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ALL INSURANCE COMPANY

Aging of settled claims** Furnish the following information in separate tables;

3. Table – 2a: Private Hospitals who are Network Providers;

Sr. No	Particulars Column Code	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
		(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims Settled for less than 1 month	145330	7534971527	78887	2314964504	0	0	224217	9849936031
2	Claims Settled for 1-3 months	1372	94979648	619	5858000	0	0	1991	100837648
3	Claims Settled for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims Settled for 6-12 months	0	0	0	0	0	0	0	0
5	Claims Settled for 1-2 years	0	0	0	0	0	0	0	0
6	Claims Settled for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

ALL INSURANCE COMPANY

Aging of repudiated claims*** Furnish the following information in separate tables;

3. Table – 2a: Private Hospitals who are Network Providers;

Sr. No	Particulars Column Code	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
		(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims repudiated for less than 1 month	16338	949238195	15823	586460292	0	0	32161	1535698487
2	Claims repudiated for 1-3 months	479	44172221	366	22394410	0	0	845	66566631
3	Claims repudiated for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims repudiated for 6-12 months	0	0	0	0	0	0	0	0
5	Claims repudiated for 1-2 years	0	0	0	0	0	0	0	0
6	Claims repudiated for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

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ALL INSURANCE COMPANY

4. Table – 2b: Private Hospitals who are not Network Providers;

(Amount in INR)									
Sr.No	Particulars	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims pending at the beginning of the quarter	1	4971	4693	190905637	0	0	4694	190910608
2	New claims received during the quarter	0	0	158311	6564066660	0	0	158311	6564066660
3	Claims settled	0	0	127760	4090529521	0	0	127760	4090529521
4	Claims repudiated	1	3471	27565	874313296	0	0	27566	874316767
5	Claims pending at the end of the quarter	0	0	7679	271647404	0	0	7679	271647404

ALL INSURANCE COMPANY

Aging of pending claims* Furnish the following information in separate tables;

4. Table – 2b: Private Hospitals who are not Network Providers;

(Amount in INR)									
Sr. No	Particulars	Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims Pending for less than 1 month	0	0	7522	264858402	0	0	7522	264858402
2	Claims Pending for 1-3 months	0	0	157	6789002	0	0	157	6789002
3	Claims Pending for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims Pending for 6-12 months	0	0	0	0	0	0	0	0
5	Claims Pending for 1-2 years	0	0	0	0	0	0	0	0
6	Claims Pending for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

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ALL INSURANCE COMPANY

Aging of settled claims** Furnish the following information in separate tables;

4. Table – 2b: Private Hospitals who are not Network Providers;

Sr. No	Particulars	(Amount in INR)							
		Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims Settled for less than 1 month	0	0	127420	4083927118	0	0	127420	4083927118
2	Claims Settled for 1-3 months	0	0	340	6602403	0	0	340	6602403
3	Claims Settled for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims Settled for 6-12 months	0	0	0	0	0	0	0	0
5	Claims Settled for 1-2 years	0	0	0	0	0	0	0	0
6	Claims Settled for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.




ALL INSURANCE COMPANY

Aging of repudiated claims*** Furnish the following information in separate tables;

4. Table – 2b: Private Hospitals who are not Network Providers;

Sr. No	Particulars	(Amount in INR)							
		Cashless Claim		Reimbursement Claim		Benefit Based		Total	
		No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims	No of Claims	Amt. of Claims
	Column Code	(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)	(viii)
1	Claims repudiated for less than 1 month	0	0	26992	850442076	0	0	26992	850442076
2	Claims repudiated for 1-3 months	1	3471	573	23871220	0	0	574	23874691
3	Claims repudiated for 3.-6 months	0	0	0	0	0	0	0	0
4	Claims repudiated for 6-12 months	0	0	0	0	0	0	0	0
5	Claims repudiated for 1-2 years	0	0	0	0	0	0	0	0
6	Claims repudiated for more than 2 years.	0	0	0	0	0	0	0	0

*Reckoned from date of first intimation.

 Mitul Jayant Vora Whole Time Director & CEO		 Amin Badhra Director
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As per Regulations 19 (11) of IRDAI (TPA – Health Services) Regulations, 2016

Declaration and Undertaking by TPA Company.



Form TPA – 6D

Instructions for Submission of required Declaration and Undertaking:

1. Periodicity of submission of this Declaration and Undertaking is annual.
2. This declaration and undertaking shall be signed by any two directors of a TPA Company.
3. This declaration and undertaking is to be submitted to the Authority along with Annual Report of the TPA Company.

1	PARTICULARS OF THE TPA COMPANY:		
1.1	Name of the TPA :	HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.	
1.2	Address - Registered Office:	1114-Raheja Center, Free Press Journal Marg , Nariman Point, Mumbai	
		Pin Code : 400021	Landline No : 022-66820300
		E-mail: mitulvora@healthindiatpa.com	Fax No : NA
1.3	Financial Year	2022-2023	

2	We Mitul Jayant Vora the Whole Time Director of HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD. hereby declare and undertake that;		
	a)	CEO or CAO possesses the requisite qualifications and practical training as specified by Insurance Regulatory and Development Authority of India. The CEO, CAO of the company is / are also fit and proper as per Regulation 11 of the TPA Regulations. Such a CEO or CAO are engaged in day to day administration of the activities of the TPA and also in ensuring compliance of regulatory requirements.	
	b)	The TPA Company is not engaged in any other business apart from Health Services by TPAs, as defined in the TPA regulations.	
	c)	A Director with required medical qualification and an appointed Chief Medical Officer have valid registration with the Medical Council of India or Medical Council of the state.	
	d)	None of the director(s), promoter(s), shareholder(s), and Key managerial personnel of our company is or are, directly or indirectly engaged in any other insurance or insurance related activity(s). (Note: Where it is to be determined whether officials referred herein are involved in any other insurance or insurance related activities or not, TPA Company shall furnish the detailed information separately along with the form)	
	e)	The Company did not violate the code of conduct or not committed any breach of the provisions of the applicable Acts, Regulations and / or circulars issued by the Authority from time to time.	

Date : 28.06.2023	For and on behalf of HEALTHINDIA INSURANCE TPA SERVICES PVT. LTD.	
Place : Mumbai		
	Mitul Jayant Vora Whole Time Director & CEO	Amin Badhra Director

