PARAMOUNT HEALTH SERVICES & INSURANCE TPA PRIVATE LIMITED

CORPORATE PREMIUM DETAILS				
Corporate Name	GUJRAT STATE COOP AGRICULTURE AND RURAL DEVELOPMENT BANK LTD			
Insurance Company	The Oriental Insurance Company Ltd.			
Broker Name	Madhuvan Ins. Broking Services Pvt. Ltd.			
Policy Number	153800/48/2025/327	Policy Period	Policy From	19/08/2024
Policy Run Days	326		Policy upto	18/08/2025
Inception Lives	1,826	Inception Premium	41,30,000	
Lives Added	3	Additional Premium	6,786	
Lives Deleted	0	Deletion Premium	0	
Present Lives Covered	1,829	Current Total Premium	41,36,786	
		Premium Type	***FULL PREMIUM***	

CORPORATE PREMIUM VS CLAIMS RATIO			
Earned Premium	36,94,773	Premium Per Life (Per Capita Premium)	*2,262*
Incurred Amt IPD	42,29,994	Incurred Amt OPD	0
Claim Frequency IPD	5%	Average Claim Size - IPD	39,663
Claim Frequency OPD	0%	Average Claim Size - OPD	0
Claim Ratio (Actual) - IPD	*102%*	Claim Ratio (Pro-rata) - IPD	*114%*
Claim Ratio (Actual) - OPD+IPD	*102%*	Claim Ratio (Pro-rata) - OPD+IPD	*114%*
CORPORATE FLOAT SUM INSURED ALLOTTED			9,00,000
CORPORATE FLOAT SUM INSURED UTILISED			2,00,000
BALANCE AMOUNT OF CORPORATE FLOAT SUM INSURED			7,00,000

CLAIMS REPORTED SUMMARY								
Type of Claims	Cashless		Reimbursement		OPD		Total No. of Claims	Total Amt of Claims
Claims Status	No. of Claims	Amt of Claims	No. of Claims	Amt of Claims	No of Claims	Amt of Claims		
Paid	6	3,13,862	75	28,98,872	0	0	***81***	***32,12,734***
Declined	1	20,000	2	30,969	0	0	***3***	***50,969***
Outstanding	1	4,18,470	6	5,98,790	0	0	***7***	***10,17,260***
Reported	**8**	**7,52,332**	**83**	**35,28,631**	**0**	**0**	***91***	***42,80,963***

CLAIMS PAID SUMMARY								
Claims Status	Cashless		Reimbursement		OPD		Total No. of Claims	Total Amt of Claims
	No. of Claims	Amt of Claims	No. of Claims	Amt of Claims	No of Claims	Amt of Claims		
Paid Main	6	3,13,862	75	28,87,281	0	0	***81***	***32,01,143***
Paid Pre Post	0	0	2	11,591	0	0	***2***	***11,591***
Total	**6**	**3,13,862**	**75**	**28,98,872**	**0**	**0**	***81***	***32,12,734***

CLAIMS DECLINED SUMMARY								
Claims Status	Cashless		Reimbursement		OPD		Total No. of Claims	Total Amt of Claims
	No. of Claims	Amt of Claims	No. of Claims	Amt of Claims	No of Claims	Amt of Claims		
Rejected Main	0	0	2	30,969	0	0	***2***	***30,969***
Rejected Pre Post	0	0	0	0	0	0	***0***	***0***
Deficient, Closed Main	0	0	0	0	0	0	***0***	***0***
Deficient, Closed Pre Post	0	0	0	0	0	0	***0***	***0***
Total	**0**	**0**	**2**	**30,969**	**0**	**0**	***2***	***30,969***

CASHLESS DENIAL SUMMARY								
Cashless Request Denied	1	20,000	0	0	0	0	***1***	***20,000***
Cashless Request Closed	0	0	0	0	0	0	***0***	***0***
Total	**1**	**20,000**	**0**	**0**	**0**	**0**	***1***	***20,000***

CLAIMS OUTSTANDING SUMMARY								
Claims Status	Cashless		Reimbursement		OPD		Total No. of Claims	Total Amt of Claims
	No. of Claims	Amt of Claims	No. of Claims	Amt of Claims	No of Claims	Amt of Claims		
Processed	1	4,00,000	0	0	0	0	***1***	***4,00,000***
Under Deficiency	0	0	1	43,284	0	0	***1***	***43,284***
Under Process	0	0	5	5,55,506	0	0	***5***	***5,55,506***
Bills Not Received	0	0	0	0	0	0	***0***	***0***
Pre Post	1	18,470	0	0	0	0	***1***	***18,470***
Total	**1**	**4,18,470**	**6**	**5,98,790**	**0**	**0**	***7***	***10,17,260***

GUIDELINES FOR CORPORATE OVERVIEW	
Earned Premium	Net Premium/Policy Period x Policy Run Days
Premium Per Life (Per Capita premium)	Net Premium/ No. of Lives as on report date
Claim Frequency	No. of Reported Claims/ No. of Lives as on report date
Average Claim Size	Amt of Claims Paid (OPD/IPD)/ No. of Claims Paid
Claim Ratio (Actual)	Amt of Incurred Claims (OPD/IPD)/ Net Premium
Claim Ratio (Pro-rata)	Amt of Incurred Claims (OPD/IPD) / Earned Premium

GUIDELINES FOR CORPORATE SUMMARY
"Declined" claims in "Claims Reported Summary" includes Rejected and Closed deficient claims.
"Deficient, Closed" claims in "Claims Declined Summary" includes claims closed due to deficient documents not received within stipulated time period.
"Cashless Requests Denied" and "Cashless Requests Closed" are not included under "Reported Claims".
"Cashless Requests Closed" under "Cashless Denial Summary" includes cashless requests issued but not utilised by the member.
"Processed" in "Claim Outstanding Summary" includes Claims processed and awaiting confirmation or approval from insurance company and awaiting payout from insurance company.
"Under Deficiency" claims in "Claims Outstanding Summary" includes deficient claims and claims awaiting for confirmation from insurance company, corporate, broker.
"Under Process" claims in "Claims Outstanding Summary" includes under process with PHS, under investigation and pending for PHS interdepartmental confirmation.
"Bill Not Received" in "Claims Outstanding Summary"includes cashless claims for which hospital bill is not received.
Total of "Claims Paid Summary", "Claims Declined Summary" and "Claims Outstanding Summary" respectively does not include the number of Pre-post claims, however amount of pre-post claims is included in total.