

SUMMARY REPORTS FROM HEALTH DATA OF TPAs - 2003-04, 2004-05 & 2005-06

Report HR1 - Numebr of Records - Policies, Insured Members, Claims for 2003/04, 2004/05 & 2005/06			
Period	Policy	Member	Claims
2003-2004	2,265,451	8,361,629	360,088
2004-2005	2,059,449	8,987,239	555,273
2005-2006	3,828,495	16,345,575	1,016,785

Source: Tariff Advisory Committee, Data Repository

Report HR2 – Total Premium, Total Claim Paid and Claim Ratio for 2003/04, 2004/05 & 2005/06			
Period	Premium (Cr.)	Claims Paid (Cr.)	Claims_Paid_Ratio
2003-2004	944	785	83.16%
2004-2005	987	948	96.11%
2005-2006	1,947	1,777	91.26%

Source: Tariff Advisory Committee, Data Repository

Report HR3 - Average Premium, Average Claim Paid and Average Number of Insured for 2003/04, 2004/05 & 2005/06			
Period	Premium(In. Rs.) Per Policy	Claim Paid(In. Rs.) Per Policy	Member Covered per Policy
2003-2004	4,166	3,465	4
2004-2005	4,792	4,606	4
2005-2006	4,892	4,440	4

Source: Tariff Advisory Committee, Data Repository

Report HR4 - Average Premium and Claim Paid Per Insured Member for 2003/04, 2004/05 & 2005/06		
Period	Premium	Claim_Paid
2003-2004	1,129	939
2004-2005	1,098	1,055
2005-2006	1,146	1,040

Source: Tariff Advisory Committee, Data Repository

Report HR5 - Average Number of Claims Per 1000 Policies and Per 1000 Insured Members for 2003/04, 2004/05 & 2005/06		
Period	Per 1000 Policies	Per 1000 Member
2003-2004	159	43
2004-2005	270	62
2005-2006	266	62

Source: Tariff Advisory Committee, Data Repository

Statement HR6 – Disease-wise Number of Claims, Amount Claimed Paid for 2005-06			
Disease Name	Records	Total Claimed (Crs.)	Total Paid (Crs.)
ACCIDENT	5,663	8.41	6.96
ARTHROPATHIES	29,624	97.92	82.15
BLOOD DISEASES	3,276	7.12	5.79
CHOLERA	47,511	53.63	48.59
CIRCULATORY	54,694	295.30	217.49
CLINICAL FINDINGS	61,048	58.66	49.59
DIGESTIVE	83,166	165.05	145.93
EAR	6,540	11.72	10.31
ENDOCRINE	13,695	30.19	24.24
EYE	57,299	105.48	99.74
HEALTH SERVICES RELATED	10,609	8.64	7.22
INFECTIOUS	59,510	67.62	59.09
INJURY	56,544	131.22	110.08
MALFORMATIONS/DEFORMATIONS	1,746	6.96	5.25
MENTAL DISORDERS	1,933	2.60	2.22
NEOPLASM	29,717	111.78	93.07
NERVOUS	11,522	29.88	24.27
FACTORS INFLUENCING HEALTH STATUS AND CONTACT WITH HEALTH SERVICES	1,106	0.45	0.12
PERINATAL PERIOD CONDITIONS	1,697	3.62	2.91
PREGNANCY	36,100	72.66	62.24
RESPIRATORY	53,808	69.21	60.64
SKIN	12,615	18.45	16.12
UROLOGY	64,085	136.61	120.89
Total	703,508	1493.17	1254.92

Source: Tariff Advisory Committee, Data Repository

CAVEATS

The validations process initiated with the TPAs for 2005-06 data has been completed in respect of 24 out of 27 TPAs. Hence, figures may undergo change during the validations process.

Claims figures reflect pure claims cost/ burning cost. Expenses/ interest not included.

Classification of Diseases have been done based on ICD-10 Codes to the extent provided by the TPAs.

Data with erroneous codes (non-ICD-10) have not been included for 2005-06. For the previous years, however, incomplete data has been manually corrected to some extent.

Classes of diseases, which are negligible in terms of numbers/ amounts, have not been included.

Tables reflect aggregate figures only and are not company specific.

The Tables are indicative, contextual and intended only for insurers' information and to facilitate internal research within the insurance industry.

Findings are not complete/ conclusive and anyone making use of the same are advised to make their independent assessment of the accuracy.

TAC is not liable for any unintended use of these figures by any party and any deductions drawn there from.

The information contained in the tables cannot be the subject matter for any litigation affecting IRDA/ TAC/ Insurance Companies/ Insurance Intermediaries.

Errors and Omissions Excepted.