

**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED  
(ANNUAL DISCLOSURE)**

MAGMA GENERAL INSURANCE LIMITED  
(FORMERLY MAGMA HDI GENERAL INSURANCE COMPANY LIMITED)  
IRDA Registration No. 149 dated 22nd May, 2012

Information as at March 31, 2025

Date: March 31, 2025

**a. Specify whether In-house Claim Settlement or Services rendered by TPA -**

Name of the TPA : Family Health Plan Insurance TPA Limited

Validity of agreement with the TPA: from 25/10/2023 to 24/10/2026

(Data is consolidated at insurer level in case of in-house claim settlements and at the level of concerned TPA in case of services rendered by TPA)

**b. Number of policies and lives services in respect of which public disclosures are made:**

Description	Individual	Group	Government
Number of policies serviced	44558	682	0
Number of lives serviced	105950	1559341	0

**c. Information with regard to the geographical area in which services are rendered by the TPAs/Insurer**

Name of the State	Name of the Districts
Andhra Pradesh	Vijayawada
Andhra Pradesh	Vishakhapatnam
Assam	Guwahati
Chandigarh	Chandigarh
Goa	Mapusa
Gujarat	Ahmedabad
Gujarat	Vadodara
Haryana	Gurugram
Jharkhand	Jamshedpur
Karnataka	Bengaluru
Kerala	Kochi
Kerala	Trivandrum
Madhya Pradesh	Bhopal
Madhya Pradesh	Indore
Maharashtra	Mumbai
Maharashtra	Pune
Maharashtra	Nagpur
Maharashtra	Solapur
Nagaland	Dimapur
New Delhi	Delhi
Odisha	Bhubaneswar
Punjab	Mohali
Rajasthan	Jaipur
Tamil Nadu	Chennai
Tamil Nadu	Coimbatore
Tamil Nadu	Madurai
Telangana	Hyderabad
Uttar Pradesh	Lucknow
West Bengal	Kolkata

**d. Data of number of claims processed:**

i.	Outstanding number of claims at the beginning of the year	928
ii.	Number of claims received during the year	31620
iii.	Number of claims paid during the year (specify % also in brackets)	25919 (80%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	4875 (15%)
v.	Number of claims outstanding at the end of the year	1754

**e. Turn Around Time (TAT) for cashless claims (in respect of number of claims):**

S. No.	Description	Individual Policies (in %)		Group Policies (in %)	
		TAT for pre-auth**	TAT for discharge***	TAT for pre-auth**	TAT for discharge***
1	Within <1 hour	81%	66%	87%	62%
2	Within 1-2 hours	12%	25%	8%	30%
3	Within 2-6 hours	7%	9%	4%	9%
4	Within 6-12 hours	0%	0%	0%	0%
5	Within 12-24 hours	0%	0%	0%	0%
6	>24 hours	0%	0%	0%	0%
	<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

Percentage to be calculated on total of the respective column.

\*\* reckoned from the time last necessary document is received by insurer / TPA (whichever is earlier) and till final pre-auth is issued to the hospitals

\*\*\* reckoned as final discharge summary sent to hospital from the time discharge bill is received by TPA

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**f. Turn Around Time in case of payment / repudiation of claims:**

Description (to be reckoned from the date of receipt of last necessary document)	Individual		Group		Government		Total	
	No. of Claims	Percentage	No. of Claims	Percentage	No. of Claims	Percentage	No. of Claims	Percentage
Within 1 month	7,988	99.66%	22,403	98.35%	-	-	30,391	98.69%
Between 1-3 months	27	0.34%	376	1.65%	-	-	403	1.31%
Between 3 to 6 months	-	0.00%	-	0.00%	-	-	-	0.00%
More than 6 months	-	0.00%	-	0.00%	-	-	-	0.00%
<b>Total</b>	<b>8,015</b>	<b>100.00%</b>	<b>22,779</b>	<b>100.00%</b>	<b>-</b>	<b>-</b>	<b>30,794</b>	<b>100.00%</b>

Percentage is calculated on total of the respective column

**g. Data of grievances received against the TPA:**

S. No.	Description	Number of Grievances
1	Grievances outstanding at the beginning of year	-
2	Grievances received during the year	-
3	Grievances resolved during the year	-
4	Grievances outstanding at the end of the year	-

Refer Health TPA Regulations , as amended from time to time