

FORM NO. NL-48



**DISCLOSURES ON QUANTITATIVE AND QUALITATIVE PARAMETERS OF HEALTH SERVICES RENDERED
(ANNUAL DISCLOSURE)
MAGMA GENERAL INSURANCE LIMITED
(FORMERLY MAGMA HDI GENERAL INSURANCE COMPANY LIMITED)**

IRDAI Registration No. 149 dated May 22, 2012

Information as at March 31, 2026

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

Name of the TPA (If services rendered by TPA) - Raksha Health Insurance TPA Pvt Ltd

Validity of agreement with the TPA: from 18/09/2024 to 17/09/2027

(Data shall be 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	0	1	0
Number of lives serviced	0	15	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
Assam	Guwahati
Bihar	Patna
Chhatisgarh	Raipur
Gujarat	Vadodara
Gujarat	Ahmedabad
Gujarat	Surat
Haryana	Faridabad
Jammu & Kashmir	Jammu
Jharkhand	Ranchi
Karnataka	Bengaluru
Karnataka	Hubli
Karnataka	Mangalore
Kerala	Kochi
Madhya Pradesh	Bhopal
Madhya Pradesh	Indore
Maharashtra	Mumbai
Maharashtra	Pune
Maharashtra	Nagpur
Odisha	Bhubaneswar
Punjab	Chandigarh
Punjab	Ludhiana
Rajasthan	Jaipur
Rajasthan	Jodhpur
Tamil Nadu	Chennai
Tamil Nadu	Coimbatore
Telangana	Hyderabad
Uttar Pradesh	Lucknow
Uttarakhand	Dehradun
West Bengal	Kolkata

d. Data of number of claims processed:

i.	Outstanding number of claims at the beginning of the year	44
ii.	Number of claims received during the year	43
iii.	Number of claims paid during the year (specify % also in brackets)	75(89%)
iv.	Number of claims repudiated during the year (specify % also in brackets)	9(11%)
v.	Number of claims outstanding at the end of the year	3

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	0%	0%	55%	18%
2	Within 1-2 hours	0%	0%	9%	27%
3	Within 2-6 hours	0%	0%	9%	9%
4	Within 6-12 hours	0%	0%	27%	9%
5	Within 12-24 hours	0%	0%	0%	27%
6	>24 hours	0%	0%	0%	9%
	Total	0%	0%	100%	100%

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

f. Turn Around Time in case of payment of claims:

Payment

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	0	0	75	100%	0	0	75	100%
Between 1-3 months	0	0	0	0	0	0	0	0
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
Total	0	0	75	100%	0	0	75	100%

f (a). Turn Around Time in case of repudiation of claims:

Repudiation

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	0	0	8	89%	0	0	8	89%
Between 1-3 months	0	0	1	11%	0	0	1	11%
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
Total	0	0	9	100%	0	0	9	100%

Percentage shall be 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	NIL
2	Grievances received during the year	NIL
3	Grievances resolved during the year	NIL
4	Grievances outstanding at the end of the year	NIL

Refer Health TPA Regulations , as amended from time to time