As per Regulations 19 (9) of IRDAI (TPA - Health Services) Regulations, 2016

Annual Report by Third Party Administrator

FORM TPA - 8

1	PAR	TICULARS OF THE TPA:					
1.1		Name of the TPA: Healthing India TPA Services Pvt. Ltd.)	dia Insurance TPA Services Pvt Ltd (previously known as Health				
1.2	(A)		1114-Raheja Center, Free Press Journal Marg, Nariman Point, Mumbai				
		Address – Registered Office	Pin Code - 400021 Landline No - 022- 66820300 E-mail : contact@healthindiatpa.com kamaljeetg@healthindiatpa.com				

1.3	Financial Year - 2016-2017	
1.4	Board of directors as on 31 March, 2017 And changes in the board since the date of statement of the preceding year.	 KamalJeet Gupta Partha Sinha Usha Agrawal Devna Vora Mitul Vora

1.5	Details of Chief Executive Officer (CEO)	

Sr. No	Name of CEO	Age	Address with telephone No	Qualification	Details of Directorship in other companies	Date of joining with TPA Company
			NIL			

1.6	Details of Chief Administrative Officer (CAO)	
-----	---	--

Sr. No	Name of CAO	Age	Address with telephone No	Qualification	Details of Directorship in other companies	Date of joining with TPA Company
1	Kamal Jeet Gupta	55	Neelkanth Corporate Park, Office No. 406 to 412, 4 th Floor, Kirol Road, Vidya Vihar (W)	M.Com, ACA, FIII Diploma in Sales and Marketing	Nil	09/09/2009



1.7	Details of Chief Medical Officer (CMO)	

Sr. No	Name of CMO	Age	Address with telephone No	Qualification	Details of Directorship in other companies	Date of joining with TPA Company
			NIL			

1.8	Name and Address of the Auditor	Lakhani & Co LLP
	State of	Hemsharsaka, 19 Gola lane, Fort, Mumbai – 400001

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 Number of agreements with Doctors	4908 - Total No of agreements at the end of the year with Network Providers 2334 - Total agreement for Pre		

1.11		Summary of TPA Business:	
	A	No. of insurers with whom agreements entered with.	TPA: 15 RSBY & MSBY: 9 Pre- Insurance Medical - 31
	В	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: 1976872 RSBY& MSBY: 13544509
	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: 370453 RSBY& MSBY : 29
	d.	Number of Hospitals tied up by the TPA (beginning of concerned FY)	4330
	e.	Hospitals tied up during (for the concerned FY)	621
	f.	Total Hospitals terminated or removed during (concerned FY)	43
	g.	Total Hospitals tied up as on (end of concerned FY)	4908



CS0375599 N. T.		
1.12	Summary of TPA services:	

Sr. No.	Particulars of Services	No. of Policies Serviced	No. of lives Serviced	Amount of Premium Service wherever available. (INR in Lakh)
1	Individual / Retail Health Insurance Policies	369276	983864	36739.43
2	Group Health Insurance Policies (other than RSBY or other similar policies issued by insurers)	1177	993008	16332.02
3	Policies issued under RSBY or other similar policies issued by insurers	29	13544509	5157.56
4	Pre-Insurance Medical Examination	NA	No. of cases done : 602468	NA
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



FORM TP4 8 (1.9)

1. Enumeration of TPA services provided:

- a. Beneficiary Enrollment Services
 - i. New Enrollment Processing
 - ii. Issuance of ID cards to insured
- b. Call Centre Services

iii.

- 24/7 call center services.
- ii. Toll Free help Line
 - Call center analysis Services.
- c. Cashless Access (Hospitalization) Services.
 - i. Pre- authorization for Cashless Access.
 - ii. Hospitalization Assistance during emergency
 - iii. Medical Management Services.
- d. Customer relation & Contact Management Services.
 - i CRM Cell
 - ii. Customer Grievance Handling & Redressal
 - iii. Action taken Report for Customer Grievances.
 - iv. Customer satisfaction Survey
- e. Provider Billing & Payment services
 - i Standard Billing Pattern for Providers
 - ii Provider Payments.
 - iii. Provider Relation Manager
- f. Claims Processing & Payment Services
 - i. Claims intimation Registration
 - ii. Claims Registration
 - iii. Claims Scrutiny & Deficiency Retrieval
 - iv. Claims Float Management
 - v. Claims Processing & Payouts.
- g. Medical Management & Investigation Services
 - Fraud & irregularity investigations.
 - ii. ICD Coding Compliance by providers.

Pre-Policy Medical Check – ups Services.

For Life &Non-Medical Life Insurance Companies.

Schedule - 1, FORM TPA - 8-RA

Revenue Account for the year ending 31st March 2017

	Expenses			Income	
1.	Directors' Remuneration	4,83,39,556	Ŀ	Income (a) Income from Insurers (Indian &	97,14,60,688
II.	Staff Expenses			foreign) (b) from others (please specify)	
	(a) Salaries, Provident fund	12,60,58,273		Interest on Bank Fixed Deposits	7,56,270
	(b) Other benefits	1,16,30,273		Interest on Income Tax Refund	90,20,611
11.	7:00:00 A C			Sundry Credit Balance Written Back	20,322
	(a) Rent, rates and taxes	2,79,51,611		Profit on Sale of Fixed Asset	825
	(b) Electricity, water	76,24,576		Reversal of Provision for Contingencies	26,50,000
	(c) House-keeping and cleaning	1,19,15,364		(c) Investment income	17,219
	(d) Others	(**)		Mile	18
	(e) Travel	1,59,13,850			
	(f) Entertainment				
	(g) Lease rents of equipments	840			
	(h) Post, telecommunications and similar expenses	2,44,21,178			
	(i) Audit fees	6,75,000			
	(j) Legal Expenses	14			
	(k) Repair and Maintenance	72,61,550			
	(I) Depreciation	1,44,79,641			
	(m) Motor Vehicle Expenses	27,40,161			
	(n) Other Expenses (please specify)	-3350310533			
	Bank Charges	30,57,124			
	Printing & Stationery	3,49,81,687	31		
	Business Promotion	99,94,382			
	Bad Debts / Sundry Balance w/off	25,77,727			
	Finance Charges	2,95,27,126			
	Insurance Expense	30,20,047			
	Fixed Assets Written off	1,29,073			
	Conference Expense	1,22,956			
	Miscellaneous Expenses	44,31,599			
	Professional Expense	86,48,759			
	(o) Loss on sales of investments or assets	3,29,388			
	(p) CSR Expenses	6,10,000			
	(q) Profit/Loss for the year	4,58,44,083			
٧.	Operating Expenses	54,16,40,950			



Schedule - 2, FORM TPA - 8-PL

Profit and Loss Appropriation Account for the year ending 31st March 2017

Particulars	Amount (Rs.)	Particulrs	Amcurt (Rs.)
Loss Brought forward		Profit Brought Forward	9,73,43,898
Loss for the year		Profit for the year	4,58,44,083
Dividend for the year	(4)	Transfer from reserves	
Tax on Dividend		Loss carried forward	
Transfer of Reserves		Deferred Tax Credit (assets)	(*)
Other allocation from profit	5 4		
Provision for taxation	1,41,00,000		
Deferred tax liability	26,78,587		- at the area of the same of t
Taxation of earlier year	13,19,015		
Profit carried forward	12,50,90,379		- Commercial Commercia



Schedule - 3, FORM TPA - 8-BS

Balance Sheet as at 31st March 2017

Liabilities	Amount (Rs.)	Amount (Rs.)	Assets	Amount (Rs.)	Amount (Rs.)
Authorized Capital		5,00,00,000	Building/Properties Cost	10,05,21,732	
ssued Capital		4,16,78,000	Less: Depreciation	2,93,05,603	7,12,16,130
Paid up Capital	4,16,78,000		1		
Reserves & Surplus	12,50,90,379	16,67,68,379	Furniture & Fixtures	1,17,64,530	7010000 VOAV95000000
Amounts Due to			Less: Depreciation	16,17,781	1,01,46,749
a) Insurers			•		X11 /54 NO
) Hospitals	72,63,975		Air Conditioners	55,00,203	
c) Doctors	12,00,20,293		Less: Depreciation	8,33,184	45,67,019
d) Others	5,23,31,765	17,96,16,033	10 10	200000000000000000000000000000000000000	
E STATES TO SE) 		Electrical Installations	19,66,720	ATTACAS CALLARA PARA
Secured Loan		9,23,16,964	Less: Depreciation	8,89,803	10,76,917
Unsecured Loan	N .	2,91,92,198	Office Equipments	92,51,012	
			Less: Depreciation	44,26,544	48,24,468
Deferred Tax Liability		-	Computer Software	4,77,88,082	
Bank Overdraft		10,50,05,470	Less: Depreciation	3,14,52,414	1,63,35 669
C Habiliba			Motor Vehicle	2,24,20,397	
Current Liability	10,28,84,664		Less: Depreciation	51,70,499	1,72,49.898
Sundry Creditor Provisions	1,08,05,543	1	Less. Depreciation		
Others	4,28,59,894	15,65,50,101	CWIP		13,81.737
			Investments		
			Government Securities	5#0	
			(Market Value)		
			Loan & Debenture (Market		
			Value)		III
			Other Investments (Market	3,83,014	
			value)		3,83 014
			Receivables		
	1		From Insureres	43,68,28,900	
			Others		43,68,28,900
		1.2	Others		
			Cash & Bank Balances		3,05,09,653
			Others		13,48,28,992
TOTAL		72,94,49,145	TOTAL		72,94,49,145



Schedule - 4

Schedule of the income received towards various activities during the FY 2016-2017

Sr No	Description	Income / Remuneration received during the FY (Amt. INR in Lakhs)
1	Towards Health Services of the Individual policies issued by Indian Insurers	1768.58
2	Towards Health Services of the Group Insurance policies issued by Indian Insurers	Group: 812.57 RSBY: 540.74
3	Pre-insurance medical examination	6,592.72
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	7.56
	Interest on Income Tax Refund	90.21
	Sundry Credit Balance Written Back	0.20
	Divident from Current Investment - From Mutual Fund	0.17
71-	Profit on Sale of Fixed Asset	0.01
	Reversal of Provision for Contingencies	26.50
	TOTAL	9,839.26

Schedule - 5

Schedule of apportionment of Expenses to various activities during the FY 2016-2017

Sr No	Description	Income / Remuneration received during the FY (Amt. INR in Lakhs)
1	Health Services of the policies issued by Indian Insurers " * "	9,380.82
2	Health Services in the foreign jurisdiction in respect of the policies issued by Indian Insurers	Es
3	Non Insurance Services rendered	ь
4	Servicing of policies issued by foreign Insurers	
5	Other Expenses Incurred (to specify)	

Note:

0 # 0

As per the 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.



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

Schedule - 6

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1. Data of claims received during the year 2016-2017

Benefit Based Policie	S	Cashles	Cashless Claims	Reimburser	eimbursement Claims	70	Total
Nimbor of Claims	Amount of	Number of	Amount of	Number of	Amount of	Number of	Amount of
Name of Callins	Claims	Claims	Claims	Claims	Claims	Claims	Claims
0	0	43170	2866849077	140482	5395946434	183652	826279551

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

Description (to reckoned from the	Benefit Based	sed Claims	Cashles	Cashless Claims	Reimburser	Reimbursement Claims	To	Total
date of receipt of Claim)	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	17110	849473998	70430	2067009441	87540	2916483439
Between 1 – 3 Months	0	0	497	30280879	1206	65771207	1703	96052086
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	Benefit Based Claims	sed Claims	Cashless Claims	s Claims	Reimburser	Reimbursement Claims	To	Total
date of receipt of Claim)	Number of Claims	Amount of Claims	Number of Claims	Amount of Claims	Number of	Amount of	Number of	Amount of
within 1 months from date of receipt of claim	0	0	18856	886506930	44044	1109187896	62900	1995694826
Between 1 – 3 Months	0	0	574	33090931	2111	48583836	2685	81674767
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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4. Data of settled Claims in respect of Total (Individual Policies + Group Policies);

Description (to reckoned from the	Benefit Based Cl	sed Claims	Cashles	Cashless Claims	Reimbursen	Reimbursement Claims	Total	tal
date of receipt of Claim)	Number of	Amount of	Number of	Amount of	Number of	Amount of	Number of	Amount of
within 1 months from date of receipt of claim	0	0	35966	1735980928	114474	3176197337	150440	4912178265
Between 1 – 3 Months	0	0	1071	63371810	3317	114355043	4388	177726853
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	Benefit Based Cl	sed Claims	Cashles	Cashless Claims	Reimbursen	Reimbursement Claims	Total	tal
date of receipt of	Number of	Amount of	Number of	Amount of	Number of	Amount of	Number of	Amount of
filling.	Cidilis	Ciallis	Cidillis	Cidilis	CIGILIS	Cidillis	Cidillis	Cidillis
within 1 months from date of	c	c		3070705	177.0	000000000000000000000000000000000000000	2042	153454540
receipt of claim	>	>	7/	30/0/43	2//1	1492/2803	3843	153151548
Between 1 – 3 Months	0	0	6	318588	367	13006996	376	13325584
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	Benefit Based C	sed Claims	Cashles	Cashless Claims	Reimbursen	Reimbursement Claims	To	Total
date of receipt of	Number of	Amount of	Number of	Amount of	Number of	Amount of	Number of	Amount of
Claim)	Claims	Claims	Claims	Claims	Claims	Claims	Claims	Claims
within 1 months from date of receipt of claim	0	0	59	1091899	2993	98318247	3022	99410146
Between 1 – 3 Months	ú	n	3	70688	205	5140837	208	5211525
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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Address: 406-412, NeelKanth Corporate Park, 4th Floor, Kirol Road / Village, Vidya Vihar Society Vidya Vihar (West), Mumbai – 400086

Website I www.healtoindiatpa.com

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

Description (to reckoned from the	Benefit Based C	sed Claims	Cashles	Cashless Claims	Reimbursen	Reimbursement Claims	Total	tal
date of receipt of	Number of	Amount of	Number of	Amount of	Number of	Amount of	Number of	Amount of
Claim)	Claims	Claims	Claims	Claims	Claims	Claims	Claims	Claims
within 1 months from date of	c	c	101	1130201	VJLJ	247504050	2002	252564604
receipt of claim	5	5	101	49/0044	9/04	74/391030	6000	450T0C7C7
Between 1 – 3 Months	0	0	12	389276	572	18147833	584	18537109
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
(Notes to seconds of data and	J . T	January and all and and and	A mark and a state of the contract	Land of the same and a	Annual and the	the state of the Barner	- 10	

(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	Benefit Based C	sed Claims	Cashles	Cashless Claims	Reimbursen	Reimbursement Claims	Total	tal
date of receipt of Claim)	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	772	40877311	1550	44248721	2322	85126032
Between 1 – 3 Months	0	0	6	335430	13	240086	22	575516
Between 3 to 6 Months	0	0	9	242742	11	187923	17	430665
More than 6 months	0	0	0	0	0	0	0	0

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

Number of Amount of Number of Amount of Amou	Description (to reckoned from the	Benefit Ba	Benefit Based Claims	Cashles	Cashless Claims	Reimbursen	Reimbursement Claims	To	Total
s from date of 0 0 828 36168914 Aonths 0 0 21 757594 Months 0 0 20 1000391	date of receipt of Claim)	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 21 0 0 20 1	nonths from date of claim	0	0	828	36168914	1050	29078150	1878	65247064
0 0 20	1 – 3 Months	0	0	21	757594	38	667300	59	1424894
	3 to 6 Months	0	0	20	1000331	15	656149	32	1656540
More than 6 months 0 0 0 0 0	16 months	0	0	0	0	٥	No voeurance	0	0

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

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

150373096 Amount of 2000410 2087205 Claims 0 Total Number of Claims 4200 52 81 0 Amount of 73326871 Reimbursement Claims 907386 844072 Claims 0 Number of Claims 2600 26 51 Amount of 77046225 1243133 1093024 Claims 0 Cashless Claims Number of Claims 1600 30 0 Amount of Claims Benefit Based Claims 0 0 0 0 Number of Claims 0 0 0 0 Description (to reckoned from the within 1 months from date of date of receipt of Between 3 to 6 Months Between 1-3 Months More than 6 months receipt of claim

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





TPA Licence No.: 022 CIN: U67200MH1997PTC105960



Office No. 406-412, Fourth Floor, Neelkanth Corporate IT Park, Kirol 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

RSBY AND MSBY PAID CLAIM SUMMARY FOR THE F.Y. 2016-2017

Region	PROJECT NAME	PAID CLAIN	M SUMMARY
Kegion	PROJECT NAME	TOTAL NO OF CLAIMS PAID	TOTAL PAID AMOUNT
Assam	RSBY	3962	28783730
Gujarat	RSBY	17967	117448305
Uttarakhand	RSBY	3	21500
Uttarakhand	MSBY	4435	30507279
Karnataka	RSBY	10594	59437394
Bihar	RSBY	3884	26226165
Odisha	RSBY		IA .



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Annexure - 19

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.
- This declaration and undertaking is to be submitted to the Authority along with Annual Report of the TPA Company.

1 P	ARTICULARS OF THE TPA COMPAN	Y:			
1.1	Name of the TPA:	HEALTHINDIA INSURANCE	TPA SERVICES PVT. LTD.		
		1114- Raheja Center, Free F	Press Journal Marg , Nariman Po	int , Mumbai	
1.2	Address - Registered Office:	Pin code: 400021	Landline No: 022-66820	300	
		E-mail:contact@healthindia	atpa.com Fax	Fax No: +917666136599	
1.3	Financial Year	2016-2017	\		

2		Kamal Jeet Gupta and Parth P Sinha the directors of HealthIndia Insurance TPA Services Pvt. Ltd hereby declare and ertake 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 TFA 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: 13/05/2017	For and on behalf of (Name of Applicant (Company)
		Deef
Place: Mumbai	11/2/	eet Gupta & CAO
	g Mumbai P	



TPA Licence No.: 022 CIN: U67200MH1997PTC105960



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Undertaking from Registered TPA Company.

It is hereby declared that the particulars furnished with respect Annual Report of our TPA Company in Form TFA – 8 and Schedule 1 to 7 there under towards various activities of the TPA Company during the FY 2016 - 17 were examined, and are true and correct.

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

		F HealthIndia I (previously known a	Date:13th May 2017
amal Jeet Gupta JMD & CAC	·	Partha P Sinha	Place : Mumbai
1	ing Institute		Place : Mumbai