



भारतीय प्रबन्ध संस्थान, लखनऊ
INDIAN INSTITUTE OF MANAGEMENT, LUCKNOW
Prabandh Nagar, IIM Road, Lucknow-226013

CORRIGENDUM & ADDENDUM -1 dated 23.4.2020
WITH RESPECT TO REQUEST FOR QUOTATION
(RFQ) NO. IIML/MEDICLAIM/19-2020 DATED 6th APRIL, 2020

Title of Corrigendum RFQ: Group Mediclaim Insurance Policy for IIM Lucknow employees and their dependents

With respect to RFQ dated 6th April 2020, the following modifications have been made in the above referred RFQ and additional information is enclosed as detailed below:

1. The last date for submission of bids is hereby extended up to 5th May 2020 (2:00 pm). Technical bids will be opened at 3:00 pm on the same day. The date & time for opening of Financial Bids of technically qualified bidders will be intimated to them by email/ over phone.
2. The bidders are also permitted to submit their bids through email (Email id: PURCHASE@IIML.AC.IN) in view of the present scenario due to the outbreak of COVID-19 pandemic. The bidders may submit their bids (2 separate PDFs i.e. Technical Bid and Financial Bid strictly in the format prescribed in the RFQ with necessary enclosures). The Financial Bid shall be password protected. The email shall also contain the name and contact number of the authorized person who can be contacted for obtaining the password for opening the financial bid. Failure to provide the password within 30 minutes from the time of communication (email / call), may result in cancellation of the submitted bid.
3. The Policy Document of the running policy for the extended period (from 16.02.2020 to 15.05.2020) is attached as **Annexure-A1**.
4. The updated claim ratio for the policy for the period from 16.02.2019 to 15.02.2020 and for running policy for the period from 16.02.2020 to 23.04.2020 are also attached as **Annexure-A2 & A3**. As far as claim ratio for previous years are concerned, it is also informed that some employees, who were covered under previous policies, have superannuated on attaining the age of 60/65 years and a good number of younger employees have joined the Institute resulting in decrease of average age of employees.
5. It is reiterated that only shortlisted Companies are allowed to submit the bid in the prescribed format. One Insurance Company can submit only one bid and in case of multiple bids from the same company, the latest bid submitted will only be considered. Agents / Brokers are not allowed to participate in the bidding process.

-s/d-

Chief Administrative Officer

THE NEW INDIA ASSURANCE CO. LTD.
(Government of India Undertaking)



POLICY SCHEDULE
NEW INDIA FLEXI FLOATER GROUP MEDICLAIM POLICY
IRDAI/HLT/NIA/P-H/V.II/340/15-16

Insured Name	INDIAN INSTITUTE OF MANAGEMENT		
Insured's Details		Issuing Office Details	
Customer ID	: PO32441119	Office Code	: DAB BRANCH LUCKNOW (420407)
Address	: PRABANDH NAGAR, OFF SITAPUR ROAD LUCKNOW LUCKNOW,UTTAR PRADESH, 226013	Address	: 3rd FLOOR, ARIF CHAMBERS-I KAPURTHALA COMPLEX, ALI GANJ, LUC .226001
Phone No	: //7408335500	Phone No	: 05222329958
Fax	:	Fax	:
E-mail/Fax	: sushil@iiml.ac.in, /	E-mail/Fax	: nia.420407@newindia.co.in /
PAN No	: AAATI2622Q	S.Tax Regn. No	: AAACN4165CST178
GSTIN/UIIN	: 09AAATI2622Q1ZC / NA	GSTIN	: 09AAACN4165C4ZM
		SAC	: 997139 (Other non-life insurance services excl RI)

Policy Details			
Policy Number	: 42040734190400000022	Business Source Code	: DIRECT BUSINESS - (1D9770911)
Period of Insurance	: From: 16/02/2020 12:00:01 AM To: 11:59:59 PM	Dev.Off level./Broker / Direct/Corp. Agent/Web Aggregator	
Date of Proposal	: 16/02/2020	Agent/Bancassurance/Sp ecified Person	
Prev. Policy no.	: NA	Phone No	: NA / 05222329958,
Client Type	: Non-Corporate	E-mail/Fax	: / NIA 420407@NEWINDIA.CO.IN. / /
		Financier(s) Details	: NA.

Premium	GST	Total	Receipt No. & Date:
₹525242	₹94544	₹619786 (RUPEES SIX LAC NINETEEN THOUSAND SEVEN HUNDRED EIGHTY-SIX ONLY)	42040781190000004548 14/02/2020

Details of TPA			
Name	: RAKSHA HEALTH INSURANCE TPA PVT. LTD.	Telephone	: 01294289999
Address	: MR. PAWAN BHALLA CHIEF EXECUTIVE OFFICER C/O ESCORTS CORPORATE CENTRE,15/5, MATHURA ROAD, FARIDABAD,HARYANA	Fax	: 01166173411
	: 15/5, MATHURA ROAD, FARIDABAD	Email	:
	: HARYANA	Toll Free No	: 18001801444

No. of Employees / Members covered	: 202	No. of persons covered	: 691
Maternity Benefits Opted	Normal Delivery Limit ₹ : 50000	Zone Opted	: I (Mumbai)
	Caesarian Section Limit ₹ : 50000		
Deletion of 9 months waiting period	: YES		
Pre-existing cover Opted	: YES		
Deletion of 30 days waiting period	: YES		
Deletion of 2/4 year exclusion	: YES		
Limit of additional ambulance charges per person	: 0		
Additional cover Opted	: YES		
SL.No	Name of Cover	Limit per family	Overall Policy Limit

Signature Not
Verified

Digitally signed
by Srinivasan
Vaideswaran
Date: 2020.02.14
16:06:59 +05'30'

Policy No.: 42040734190400000022 Document generated by 22703 at 14/02/2020 16:00:38 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

For redressal of your grievance, if any, you may approach any one of the following offices- 1. Policy issuing office 2. Regional office 3. Head office. In case, you are not satisfied with our own grievance redressal mechanism, you may also approach Insurance Ombudsman. For details of our office addresses and addresses of office of Insurance Ombudsman, please visit our website <http://newindia.co.in>.



डायरेक्ट एजेंट/बैंकएश्योरेन्स ब्रान्च (420407)
आरिफ चैम्बर-1, तृतीय तल, कपोरथला, काम्प्लेक्स, अलीगंज,
लखनऊ-226020 (यू.पी.) दूरभाष : 0522-2328096, 2329958

GST No.: 09AAACN4165C4ZM

Direct Agent/Bankassurance Branch (420407)
Arif Chamber-1, 3rd Floor, Kapoorthala Complex, Aliganj
Lucknow-226024 (U.P.) Phone : 0522-2328096, 2329958

THE NEW INDIA ASSURANCE CO. LTD.
(Government of India Undertaking)



SL.No	Name of Cover	Limit per family	Overall Policy Limit
N/A	NEW INDIA ASSURANCE CO. LTD.	N/A	100

Special Conditions

Special Condition 1	: Coverage as per pol.no.42040734180400000015 3)-Maternity Limit:50000 N&C 4)-Maternity 9 months waiting period waiver:Yes 5)Pre-Post Natal Expenses on In-Patient basis:Covered Pol.valid for 3 months up to 15.05.2020
Special Condition 2	: 1)Room Rent Restriction: 2% for Normal & ICU 2)Internal Congenital Ailments cover:-NO 3)Emergency Ambulance Charges:2000 4)Sub Limit for various Ailments/Treatments:No Capping 5)Co-Payment:-No 6)balance sum insured only covered.

* This Policy is subject to NEW INDIA FLEXI FLOATER GROUP MEDICLAIM POLICY Clause as attached
In the event of death of the insured person(s) due to an insured peril all benefits payable, in respect thereof under this insurance, shall become payable to the Nominee declared in the proposal (incorporated herein as the Schedule) and the Nominee declared in the proposal (incorporated herein as the schedule) and the receipt shall be construed as full and final discharge to the Company in respect of all liability under this policy.

Premium and GST Details

	Rate of Tax	Amount in INR
Premium		₹ 525242.00
SGST	9	47272
CGST	9	47272
IGST	0	0

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this _____ day of _____ 20__.

For and on behalf of
The New India Assurance Company Limited

Date of Issue: 14/02/2020

Duly Constituted Attorney(s)

Mudrank _____ Dt. _____ consolidated Stamp Fees Paid by Pay Order Number _____ vide receipt
number _____ dt. _____

Stamp Duty under the Policy is ₹1/-.

Policy No. : 42040734190400000022 Document generated by 22703 at 14/02/2020 16:00:38 Hours.

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डायरेक्ट एजेंट/बैंकएश्योरेन्स ब्रान्च (420407)
आरिफ चैम्बर-1, तृतीय तल, कपोरथला, काम्प्लेक्स, अलीगंज,
लखनऊ-226020 (यू.पी.) दूरभाष : 0522-2328096, 2329958

GST No.: 09AAACN4165C4ZM

Direct Agent/Bank Assurance Branch (420407)
Arif Chamber-1, 3rd Floor, Kapoorthala Complex, Aliganj
Lucknow-226024 (U.P.) Phone : 0522-2328096, 2329958



IMPORTANT

This policy is subject to the terms and conditions contained in the policy document (Clauses).

This policy is governed by Health Insurance Regulations 2016 issued by Insurance Regulatory Development Authority of India on 12.07.2016.

This policy is also governed by IRDAI (Protection of Policyholders' Interest) Regulations, 2017.

This Schedule comes attached with the policy document (Clauses). If not attached, please ask for the same.

Health Insurance Regulations 2016 and IRDAI (Protection of Policyholders' Interest) Regulations, 2017 are available on the website of IRDAI.

Tax Invoice No : 42040719P0006546

IRDA Registration Number: 190



Policy No. : 4204073419040000022 Document generated by 22703 at 14/02/2020 16:00:38 Hours.

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THE NEW INDIA ASSURANCE CO. LTD.
(Government of India Undertaking)



COLLECTION RECEIPT CUM ADJUSTMENT VOUCHER

Issuing Office : DAB BRANCH LUCKNOW (420407)
Address : 3rd FLOOR, ARIF CHAMBERS-I KAPURTHALA COMPLEX, ALI GANJ, LUC
226001
LUCKNOW
Phone : 05222329958
Email : nia.420407@newindia.co.in
Fax :
Collection Number : 42040781190000004548
Collection Date : 14/02/2020
Business Source Code : 1D9770911
PAN No of Payer : AAAT12622Q

Received with thanks from INDIAN INSTITUTE OF MANAGEMENT.

The amount received/Adjusted is towards -

Policy No.	A/C Description	Amount ₹	A/C Code	Sub A/C Code
4204073419040000022	Bank-420407	619786.00	9100.420407	BA00013368-420407-9100

Total = ₹ 619786.00

Your Payment/Adjustment Details are as under -

Mode	Amount ₹	Cheque No.	Cheque Date	Drawee Bank	Drawee Branch	Reference No.	Scroll/BG/A PD Balance
Cheque	619786.00	040884	04-FEB-20	STATE BANK OF INDIA	LUCKNOW	4204071910011714	N.A.

Total = ₹ 619786.00

Utilization details of the Collected Amount :

Premium	GST	Stamp Duty	Excess Amount
525242.00	94544.00	0.00	0
Sl no.	Agency Code	Agency Name	Department Code
1	NA	NA	34

For The New India Assurance Company Limited



Date of Issue: 14/02/2020

Cashier's Initial

Authorized Signatory

Note -

1. Please note the Policy Number, Collection Number and date in all future correspondence. This Receipt is subject to Realisation of Cheque..
2. NIA shall not be liable for any claim arising out of sales made during the period between the due date and date of payment of the installment if the premium paid has been exhausted by turnover declarations/if there is insufficient premium balance.

Tax Invoice No : 42040719P0006546

IRDA Registration Number: 190

Signature Not Verified
Digitally signed by Srinivasan Vaideswaran
Date: 2020.02.14 16:00:12 +IST

Policy No. : 4204073419040000022 Document generated by 22703 at 14/02/2020 16:00:09 Hours.

Regd. & Head Office: New India Assurance Bldg., 87 M.G. Road, Fort, Mumbai - 400 001. TOLL FREE No. 1 800 209 1415.

डायरेक्ट एजेंट/बैंकएश्योरेन्स ब्रान्च (420407)
आरिफ चैम्बर-1, तृतीय तल, कपूरथला, काम्प्लेक्स, अलीगंज,
लखनऊ-226020 (यू.पी.) दूरभाष : 0522-2328096, 2329958

GST No.: 09AAACN4165C4ZM

Direct Agent/Bank Assurance Branch (420407)

Arif Chamber-1, 3rd Floor, Kapoorthala Complex, Aliganj
Lucknow-226024 (U.P.) Phone : 0522-2328096, 2329958



RAKSHA HEALTH INSURANCE TPA PVT. LTD.
FARDABAD

Insurer: The New India Assurance Co. Ltd.
 Insured: Indian Institute Of Management
 Policy No: 4204073418040000015
 Period: 16-Feb-2019
 Report Date: 07-Apr-2020
 15-Feb-2020

Total Claims Experience

Claim Status	Claims	Value (Rs.)	% Claims	% Value
Paid				
Cashless Settled	24	15,64,737.00	43.64%	60.94%
Reimbursement Settled **	26	8,87,294.00	47.27%	34.56%
Total Paid (A)	50	24,52,031.00	90.91%	95.49%
Repaid				
Denials - Non Payable	4	92,363.00	7.27%	3.60%
Denials - File Closed	0	0.00	0.00%	0.00%
Total Repaid	4	92,363.00	7.27%	3.60%
Outstanding*				
Claims Passed	1	23,357.00	1.82%	0.91%
Documents Pending	0	0.00	0.00%	0.00%
Claims In Process	0	0.00	0.00%	0.00%
Preauthorizations Issued	0	0.00	0.00%	0.00%
Total O/s (B)	1	23,357.00	1.82%	0.91%
Total Reported	55	25,67,751.00	100.00%	100.00%

Total Premium (C)	1965242
Earned Premium (D)	1965242
Claim Ratio = (A+B)/C	125.96%
ICR% = (A+B)/D	125.96%

Note: *The Value for Outstanding may varies. The settlement amount will be less than or equal to the above figures & could result in respective decrease in claim ratio
 ** Reimbursement Claims also Includes Pre-Post Expenditure.

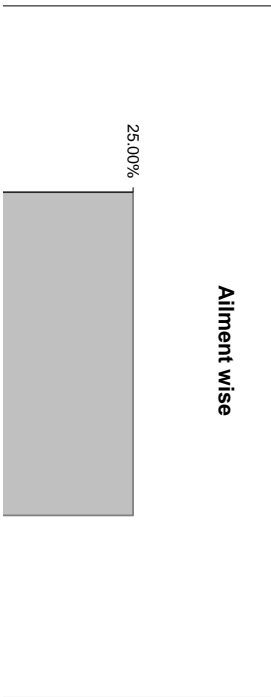
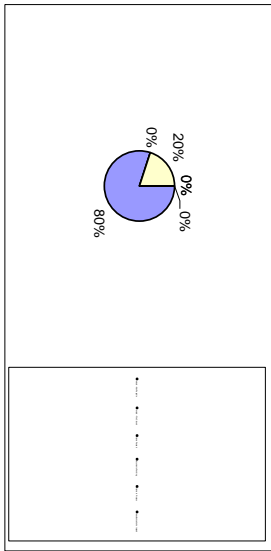
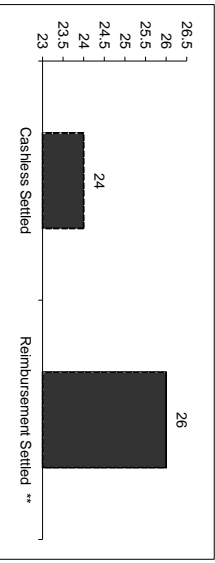
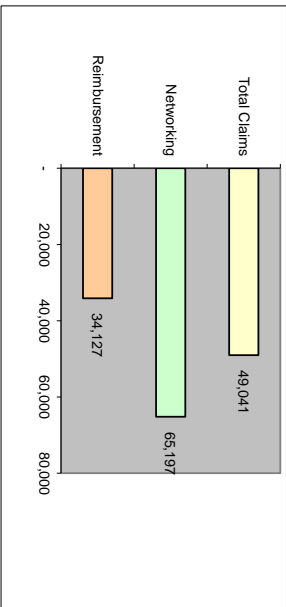
Morbidity Ratio

No. of Lives Covered	716
No. of Claims Reported	55
No. of Claims made Per 100 lives Insured	7.68%

Aliment-wise Claims Settled Report

Aliment	Claims	Value (Rs.)	% Claims	% Value
Diseases of the nervous system	0	-	0.00%	0.00%
Diseases of eye and adnexa	5	1,44,000.00	13.16%	7.60%

Reimbursement	34,127	Networking	65,197	Total Claims	49,041
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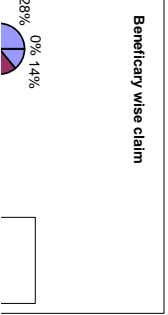
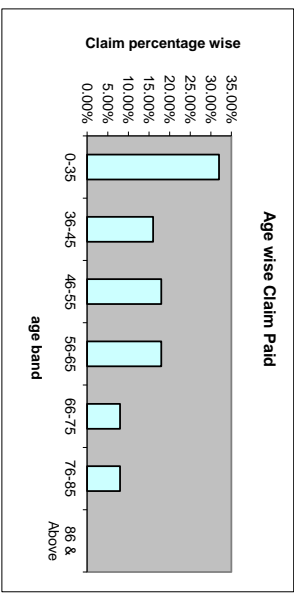
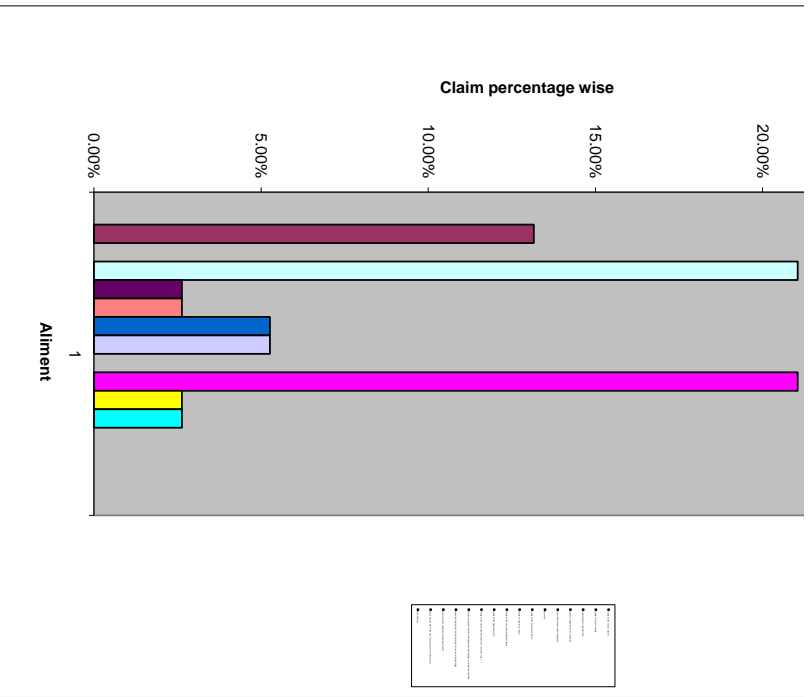


Mental and behavioural disorders	0	-	0.00%	0.00%
Pregnancy, childbirth and the puerperium	8	1,51,831.00	21.05%	8.01%
Certain infectious and parasitic diseases	1	21,292.00	2.63%	1.12%
Neoplasms	1	7,172.00	2.63%	0.38%
Malignant neoplasms of independent (primary) multiple sites	0	-	0.00%	0.00%
Diseases of the ear and mastoid process	0	-	0.00%	0.00%
Diseases of the circulatory system	8	7,93,843.00	21.05%	41.90%
Endocrine, nutritional and metabolic diseases	1	54,207.00	2.63%	2.86%
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	0	-	0.00%	0.00%
Diseases of the genitourinary system	2	30,706.00	5.26%	1.62%
Diseases of respiratory system	2	2,65,668.00	5.26%	14.02%
Diseases of the skin and subcutaneous tissue	0	-	0.00%	0.00%
Diseases of the digestive system	8	2,19,257.00	21.05%	11.57%
Diseases of the musculoskeletal system and connective tissue	1	1,90,765.00	2.63%	10.07%
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	1	15,800.00	2.63%	0.83%
Congenital malformations, deformations and chromosomal abnormalities	0	-	0.00%	0.00%
Certain conditions originating in the perinatal period	0	-	0.00%	0.00%
Injury, poisoning and certain other consequences of external causes	0	-	0.00%	0.00%
Health Checkup	0	-	0.00%	0.00%
Grand Total	38	19,94,541.00	100.00%	100.00%

Age Band	Claims	Value (Rs.)	% Claims	% Value
0-35	16	3,53,734.00	32.00%	14.43%
36-45	8	1,23,877.00	16.00%	5.05%
46-55	9	4,49,159.00	18.00%	18.32%
56-65	9	5,94,383.00	18.00%	24.24%
66-75	4	4,00,878.00	8.00%	16.35%
76-85	4	5,30,000.00	8.00%	21.61%
86 & Above	0	0.00	0.00%	0.00%
Grand Total	50	24,52,031.00	100.00%	100.00%

Category of Beneficiaries Report

Beneficiary	Claims	Value (Rs.)	% Claims	% Value
Self	7	4,62,418.00	14.00%	18.86%
Spouse	21	5,10,302.00	42.00%	20.81%
Child	8	1,76,773.00	16.00%	7.21%



Parents	14	13,02,538.00	28.00%	53.12%
Dependents	0	0.00	0.00%	0.00%
Grand Total	50	24,52,031.00	100.00%	100.00%

Amount Bands Report

Amount Band	Claims	Value (Rs.)	% Claims	% Value
0-10000	11	66,566.00	22.00%	2.71%
10001-25000	14	2,53,950.00	28.00%	10.36%
25001-50000	12	4,19,920.00	24.00%	17.13%
50001-100000	5	3,28,772.00	10.00%	13.41%
100001-200000	5	7,31,580.00	10.00%	29.84%
200001 and Above	3	6,51,243.00	6.00%	26.56%
Grand Total	50	24,52,031.00	100.00%	100.00%

Repeated Utilization Report for Employee

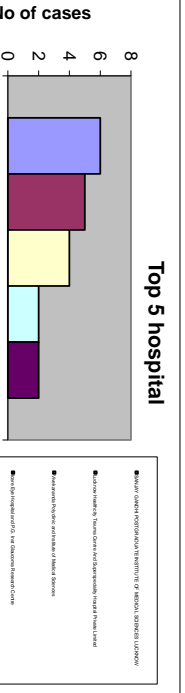
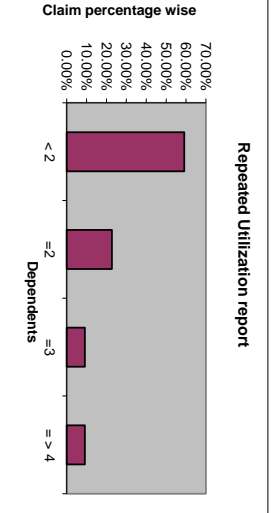
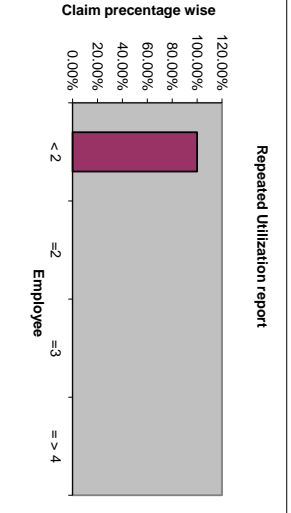
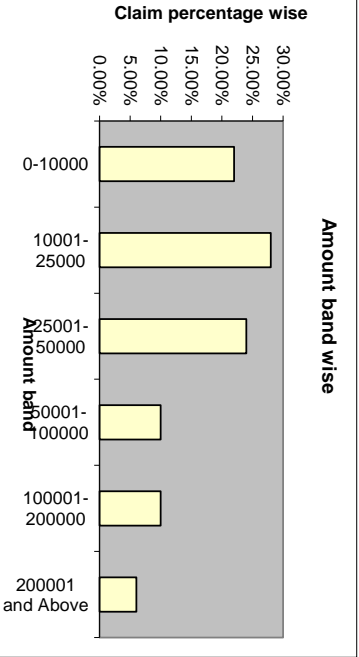
No. of Claims In current Policy	No. of Employees	Value (Rs.)	% Claims	% Value
< 2	7	4,62,418	100.00%	100.00%
= 2	0	0	0.00%	0.00%
= 3	0	0	0.00%	0.00%
= > 4	0	0	0.00%	0.00%
Total	7	4,62,418.00	100.00%	100.00%

Repeated Utilization Report for Dependents

No. of Claims In current Policy	No. of Dependents	Value (Rs.)	% Claims	% Value
< 2	13	65,5465	59.09%	32.94%
= 2	5	418909	22.73%	21.05%
= 3	2	679994	9.09%	34.18%
= > 4	2	235245	9.09%	11.82%
Total	22	19,89,613.00	100.00%	100.00%

Providers Report

Hospital	Claims	Value(Rs.)
GRADUATE INSTITUTE OF MEDICAL	6	83217
rauna Centre And SuperSpeciality HI	5	420977
da Polyclinic and Institute of Medic	4	60797
ospital and P. G. Inst. Glaucoma Rese	2	60000
andore Institute of Gastroenterolog	2	21828
OHAR LOHIA INSTITUTE OF MEDIC	2	166194
Apollo Gleneagles Hospitals Ltd	2	445793
ayushman fracture hospital	2	26402
AL AND DENTAL HOSPITAL AND RES	2	10860
Prakash Netra Kendr	2	54000
ig George Medical University/Luckn	2	97685



BRINDHAVAN AREION HOSPITAL	2	72601
FATIWA HOSPITAL	2	16862
Kailash Hospital and Heart Institute	1	15800
TENDER CARE NURSING HOME	1	33099
JRY Centre arthroscopy and sport me	1	65316
Bhardwai Hospital	1	22748
Institute Of Plastic Surgery Burns an	1	42839
Zenith Super Specialist Hospital	1	54207
Era Medical College And Hospital	1	13800
Madhurai Nursing Home	1	47696
ORTHOPAEDIC AND ARTHOSCOPY	1	205450
Avadh Hospital and Heart Centre	1	108058
Sahara Hospital	1	145866
The Heart Hospital and Research Ce	1	30000
SM HOSPITAL AND HEART CENTRE	1	57370
IO MEDICS SUPER SPECIALITY HOS	1	50000
ca Strical and Maternity Clinic - LUC	1	22566

1	1	Hospital	
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CLAIMS ANALYSIS REPORT
RAKSHA HEALTH INSURANCE TPA PVT. LTD.
FARIDABAD

Insurer: The New India Assurance Co. Ltd.
 Insured: Indian Institute Of Management
 Policy No: 42040734190400000022
 Period: 15-Feb-2020
 Report Date: 07-Apr-2020
 15-May-2020

Total Claims Experience Report

Claim Status	Claims	Value (Rs.)	% Claims	% Value
Paid				
Cashless Settled	1	30,000.00	100.00%	100.00%
Reimbursement Settled **	0	0.00	0.00%	0.00%
Total Paid (A)	1	30,000.00	100.00%	100.00%
Repaid/ated				
Denials - Non Payable	0	0.00	0.00%	0.00%
Denials - File Closed	0	0.00	0.00%	0.00%
Total Repaid/ated	0	0.00	0.00%	0.00%
Outstanding*				
Claims Passed	0	0.00	0.00%	0.00%
Documents Pending	0	0.00	0.00%	0.00%
Claims in Process	0	0.00	0.00%	0.00%
Preauthorizations Issued	0	0.00	0.00%	0.00%
Total O/s (B)	0	0.00	0.00%	0.00%
Total Reported	1	30,000.00	100.00%	100.00%

Total Premium (C) 525242
 Earned Premium (D) 73390

Claim Ratio = (A+B)/C 5.71%

ICR% = (A+B)/D 40.88%

Note:

*The Value for Outstanding may varies. The settlement amount will be less than or equal to the above figures & could result in respective decrease in claim ratio
 ** Reimbursement Claims also Includes Pre-Post Expenditure.

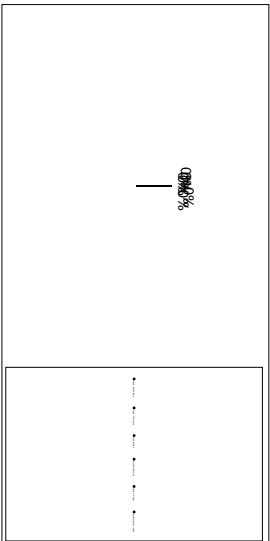
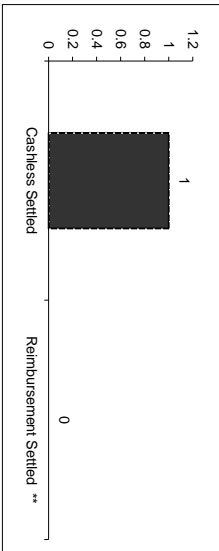
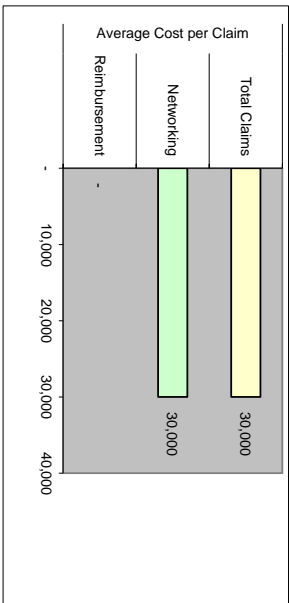
Morbidity Ratio

No. of Lives Covered	691
No. of Claims Reported	1
No. of Claims made per 100 lives Insured	0.14%

Allment-wise Claims Settled Report

Allment	Claims	Value (Rs.)	% Claims	% Value
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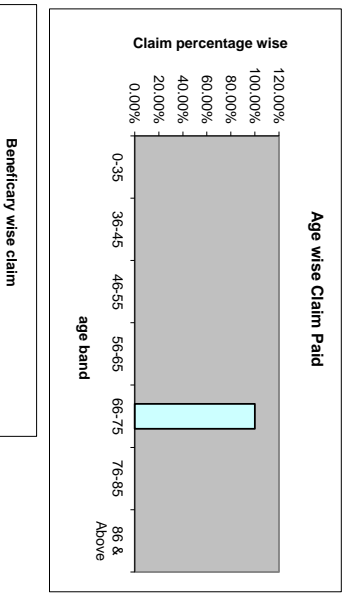
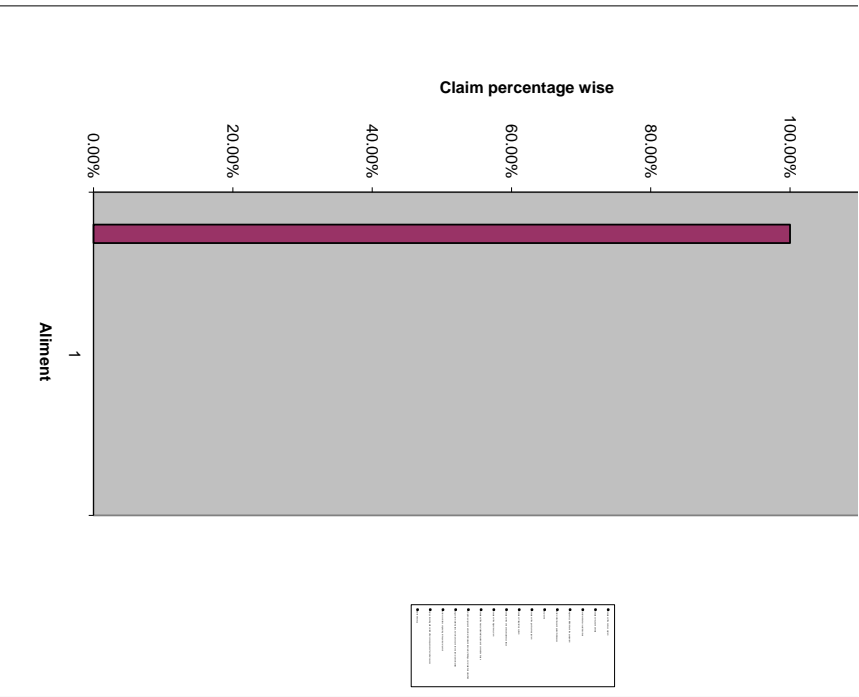
Average Cost per Claim		
Reimbursement	Networking	Total Claims
-	30,000	30,000



Diseases of the nervous system	0	-	0.00%	0.00%
Diseases of eye and adnexa	1	30,000.00	100.00%	100.00%
Mental and behavioural disorders	0	-	0.00%	0.00%
Pregnancy, childbirth and the puerperium	0	-	0.00%	0.00%
Certain infectious and parasitic diseases	0	-	0.00%	0.00%
Neoplasms	0	-	0.00%	0.00%
Malignant neoplasms of independent (primary) multiple sites	0	-	0.00%	0.00%
Diseases of the ear and mastoid process	0	-	0.00%	0.00%
Diseases of the circulatory system	0	-	0.00%	0.00%
Endocrine, nutritional and metabolic diseases	0	-	0.00%	0.00%
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	0	-	0.00%	0.00%
Diseases of the genitourinary system	0	-	0.00%	0.00%
Diseases of respiratory system	0	-	0.00%	0.00%
Diseases of the skin and subcutaneous tissue	0	-	0.00%	0.00%
Diseases of the digestive system	0	-	0.00%	0.00%
Diseases of the musculoskeletal system and connective tissue	0	-	0.00%	0.00%
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	0	-	0.00%	0.00%
Congenital malformations, deformations and chromosomal abnormalities	0	-	0.00%	0.00%
Certain conditions originating in the perinatal period	0	-	0.00%	0.00%
Injury, poisoning and certain other consequences of external causes	0	-	0.00%	0.00%
Health Checkup	0	-	0.00%	0.00%
Grand Total	1	30,000.00	100.00%	100.00%

Age wise Claims Paid Report

Age Band	Claims	Value (Rs.)	% Claims	% Value
0-35	0	0.00	0.00%	0.00%
36-45	0	0.00	0.00%	0.00%
46-55	0	0.00	0.00%	0.00%
56-65	0	0.00	0.00%	0.00%
66-75	1	30,000.00	100.00%	100.00%
76-85	0	0.00	0.00%	0.00%
86 & Above	0	0.00	0.00%	0.00%
Grand Total	1	30,000.00	100.00%	100.00%



Beneficiary wise claim

Category of Beneficiaries Report

Beneficiary	Claims	Value (Rs.)	% Claims	% Value
Self	0	0.00	0.00%	0.00%
Spouse	0	0.00	0.00%	0.00%
Child	0	0.00	0.00%	0.00%
Parents	1	30,000.00	100.00%	100.00%
Dependents	0	0.00	0.00%	0.00%
Grand Total	1	30,000.00	100.00%	100.00%

Amount Bands Report

Amount Band	Claims	Value (Rs.)	% Claims	% Value
0-10000	0	0.00	0.00%	0.00%
10001-25000	0	0.00	0.00%	0.00%
25001-50000	1	30,000.00	100.00%	100.00%
50001-100000	0	0.00	0.00%	0.00%
100001-200000	0	0.00	0.00%	0.00%
200001 and Above	0	0.00	0.00%	0.00%
Grand Total	1	30,000.00	100.00%	100.00%

Repeated Utilization Report for Employee

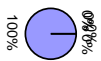
No. of Claims In current Policy	No. of Employees	Value (Rs.)	% Claims	% Value
< 2	-	-	-	-
= 2	-	-	-	-
= 3	-	-	-	-
= > 4	-	-	-	-
Total	0	-	-	-

Repeated Utilization Report for Dependents

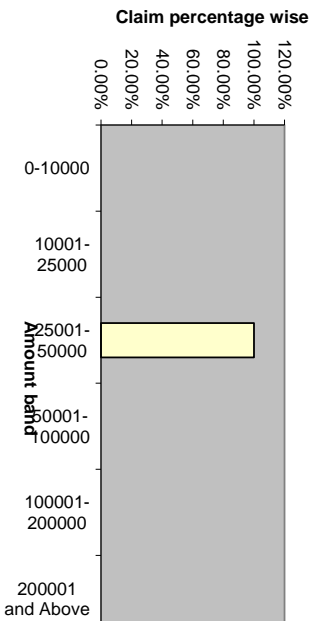
No. of Claims In current Policy	No. of Dependents	Value (Rs.)	% Claims	% Value
< 2	1	30000	100.00%	100.00%
= 2	0	0.00%	0.00%	0.00%
= 3	0	0.00%	0.00%	0.00%
= > 4	0	0.00%	0.00%	0.00%
Total	1	30,000.00	100.00%	100.00%

Providers Report

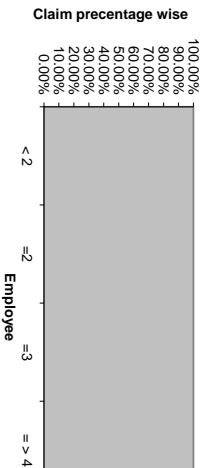
Hospital	Claims	Value (Rs.)



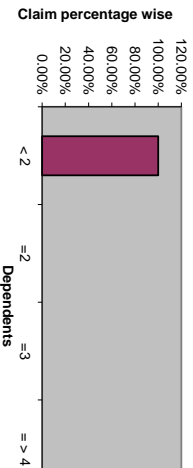
Amount band wise



Repeated Utilization report



Repeated Utilization report





भारतीय प्रबन्ध संस्थान, लखनऊ
INDIAN INSTITUTE OF MANAGEMENT, LUCKNOW
Prabandh Nagar, IIM Road, Lucknow-226013

IIML/MEDICLAIM/2020-21

April 06, 2020

REQUEST FOR QUOTATION (RFQ)

Title of Request for Quotation: Group Mediciam Insurance Policy for IIM Lucknow employees and their dependents

Indian Institute of Management Lucknow (IIML) invites bids from the shortlisted bidders (list enclosed) for submitting their bids for providing Group Mediciam Insurance Policy for IIM Lucknow employees and their dependents. The Institute has an existing Group Mediciam (tailor made with floater) Insurance Policy for extending facility of cashless hospitalization / reimbursement of hospitalization expenses to our employees and their dependents, The present sum insured amount is Rs.5,00,000/- per family per year. The period of existing policy is upto 15-05-2020 and we would like to continue the said policy without any break for further period of one year from 16-05-2020 to 15-05-2021. The claim ratio for last 3 policies is attached as **Annexure-A** for reference only

The RFQ document comprises of Technical Bid and Financial Bid. It is requested to download the tender from the Institute website <http://iiml.ac.in> or from CPP (e-publish) website: <https://eprocure.gov.in/epublish/app> and submit your bids (In 2 separate envelopes i.e. Technical Bids with supporting documents and Financial Bid) in submit the bids as per terms and conditions mentioned below:

Terms & Conditions are as follows:

1	Policy to be issued in favour of	Indian Institute of Management Lucknow
2	Address	<i>Prabandh Nagar, IIM Road, Lucknow 226013</i>
3	Period	One year, which may be extended for another 2 years on mutually agreed terms & conditions.
4	Policy Type	Group Mediciam – Tailor made with floater
5	Family Definition	As per Govt . of India rules (List of employees with dummy name, actual date of birth and dependents with relationship is attached as Annexure-B .)
5	Sum Insured (per family)	INR 5, 00,000/- Per Family Unit, Floater
6	Insurance Cover for Retired Employees	Employees, who will retire during the policy period, will be given an option to continue the same policy only for self and spouse on payment of premium (to be calculated by the Insurance Company at that time) with all benefits of existing policy. The normal age of superannuation / retirement is 60 years for non-Faculty and 65 years for Faculty.
7	Top up on	The employees shall be allowed to buy top up over and above the Sum

	Sum Insured	Insured of Rs.5,00,000/- for self & his/her dependents with all benefits of the existing policy. Premium for the top up to be calculated by the Insurance Company and payment shall be made directly by the employee concerned.
8	Policy Requirements	<p>A <u>Pre and post hospitalization-</u></p> <ol style="list-style-type: none"> 1. In case of Post-hospitalization treatment limited to 60 days. 2. In case of Pre-hospitalization treatment limited to 30 days. 3. Documents should be submitted with 15 days of completion of treatment. In deserving cases delay upto 20 days may be condoned. <p>B <u>Procedure for availing cashless-</u></p> <ol style="list-style-type: none"> 1. Hospitalization should be in listed hospital in the agreed list of networked hospital. 2. TPA, upon getting the related medical details/relevant information from insured/network hospital/nursing home, issues pre-authorization letter. 3. TPA has the right to deny pre-authorization in case insured/hospital is unable to provide relevant information. <p>C <u>Following reasonable and customary expense are reimbursable under the policy-</u></p> <ol style="list-style-type: none"> 1. Room, boarding and nursing expenses not exceeding 2% of SI. 2. I.C.U. not exceeding 2% of SI. 3. Ambulance charges Rs.2000/- or actual, whichever is less. 4. Maternity cover: Rs.75000/-for only employee or his spouse. No waiting period condition. 5. Room charges and intensive care unit charges (including diet charges, nursing care by qualified nurse, RMO charges, administration charges for IV fluids/blood transfusion/injection). 6. Anesthesia, blood, oxygen, operation theatre charges, surgical appliances 7. Medicines and drugs 8. Diagnostic procedures. 9. Prosthetics and devices or equipment if implanted internally during a surgical procedure. <p>D <u>Exclusion in IIM policy are as follows-</u></p> <ol style="list-style-type: none"> 1. Injury or disease directly or indirectly caused by or arising from or attributable to war, invasion, Act of Foreign enemy, war like operations (whether war be declared or not), nuclear weapon/ionizing radiation, contamination by Radioactive material, nuclear fuel or combustion of nuclear fuel. 2. Circumcision (unless necessary for treatment of a disease or necessitated due to accident). 3. Vaccination, inoculation or charge of life or cosmetic or aesthetic treatment. 4. Plastic surgery other than as may be necessitated due to an accident or as part of any illness.

		<ol style="list-style-type: none"> 5. Cosmetic surgery for correction of eye sight cost of spectacles, contact lenses, hearing aids, etc. 6. Any dental treatment or surgery which is corrective, cosmetic or of aesthetic procedure, filling of cavity, root canal including wear and tear unless arising from disease or injury and which requires hospitalization for treatment. 7. Convalescence, general debility "run down" conditions or rest cure. 8. Congenital external disease or defects or anomalies. 9. Sterility, fertility, sub fertility or assisted conception procedures. 10. Venereal disease, intentional self-injury/suicide. 11. All psychiatric and psychosomatic disorders. 12. Disease, accident due to use, misuse or abuse of drug or alcohol or use of intoxicating substance of such abuse or addiction. 13. Expenses arising out of any condition directly/indirectly caused by or associated with Human T-cell, lymph tropic virus type III, lymphadenopathy associated virus, or any syndrome or condition of similar kind commonly referred to as AIDS, HIV and its complications including STD. 14. Expenses incurred at hospital or nursing home primarily for evaluation/diagnostic purpose, which is not followed by active line of treatment. 15. Expenses incurred in hospitalization for less than 24 hrs. 16. Expenses on vitamins and tonics, etc. unless forming part of treatment for injury or disease. 17. Any treatment arising from or traceable to pregnancy, child birth, miscarriage. 18. Genetic disorder and stem cell transplantation surgery. 19. Treatment of obesity or condition arising there from and other weight control program. 20. Any treatment required arising from insured's participation in hazardous activity like scuba diving, motor racing, parachuting, hang gliding, rock or mountain climbing, etc. unless specifically agreed by the insurance company. 21. Massage, steam bathing, shirodhara and alike treatment under ayurvedic treatment.
	E	<p><u>List of Diseases covered-</u></p> <ol style="list-style-type: none"> 1. Benign ENT disorders and surgeries i.e. Tonsillectomy, Adenoidectomy, Mastoidectomy, Tympanoplasty etc. 2. Polycystic ovarian diseases. 3. Surgery of hernia. 4. Surgery of hydrocele. 5. Non infective Arthritis. 6. Un-descendent Tastes. 7. Cataract (Cataract operation with a cap of Rs.40000/- PER EYE uniform for all. PPN charges are not applicable for cataract claims and to be processed as per specified limit of Rs.40,000/-). 8. Surgery of benign prostatic hypertrophy.

		<ol style="list-style-type: none"> 9. Hysterectomy for menorrhagia or fibromyoma or myomectomy or prolapsed of uterus. 10. Fissure/fistula in anus. 11. Piles. 12. Sinusitis and related disorders. 13. Surgery of gallbladder and bile duct excluding malignancy. 14. Surgery of genitourinary system excluding malignancy. 15. Pilonidal Sinus. 16. Gout and Rheumatism. 17. Hypertension. 18. Diabetes. 19. Calculus diseases. 20. Surgery for prolapsed inter vertebral disk unless arising from accident. 21. Surgery of varicose veins and varicose ulcers. 22. Congenital internal diseases. 23. Joint Replacement due to Degenerative condition. 24. Age related osteoarthritis and Osteoporosis. 25. Asthma 26. Bronchitis. 27. Chronic Nephritis and Nephritic Syndrome. 28. Diarrhea and all types of Dysenteries including Gastro-enteritis. 29. Pyrexia of unknown origin for less than 10 days. 30. Tonsillitis and Upper Respiratory Tract infection including Laryngitis and Pharyngitis. 31. Which is not excluded from the policy.
	F	<p><u>Expenses on hospitalization are admissible only if hospitalization is for a minimum period of 24 hrs except in cases of specialized treatment-</u></p> <ol style="list-style-type: none"> 1) Haemo Dialysis, 2) Parental Chemotherapy, 3) Radiotherapy, 4) Eye Surgery, 5) Lithotripsy (Kidney stone removal), 6) Tonsillectomy, 7) D&C, 8) Dental surgery following an accident 9) Hysterectomy, 10) Coronary Angioplasty, 11) Coronary Angiography, 12) Surgery of Gall bladder, Pancreas and bile duct, 13) Surgery of Hernia, 14) Surgery of Hydrocele, 15) Surgery of Prostate. 16) Gastrointestinal Surgery, 17) Genital Surgery, 18) Surgery of Nose, 19) Surgery of throat,

		<p>20) Surgery of Appendix, 21) Surgery of Urinary System, 22) Treatment of fractures/dislocation excluding hair line fracture, Contracture releases and 23) Minor reconstructive procedures of limbs which otherwise require hospitalization. 24) Arthroscopic Knee Surgery, 25) Laparoscopic therapeutic surgeries, 26) Any surgery under General Anesthesia, or any such disease / procedure agreed by TPA/Company before treatment.</p>
		<p>G <u>Important points-</u></p> <ol style="list-style-type: none"> 1. Detention of Domiciliary Hospitalization <ul style="list-style-type: none"> • Exclusion Deleted (Pre-Existing Diseases Exclusion) • Exclusion Deleted (First 30 Days Exclusion) • Exclusion Deleted (First Year Exclusion) 2. Floater Policy, Family Sum Insured is Rs.500000/- 3. Pre-Existing Disease Covered for Under the Policy. 4. 1st Year and 30 Days Waived Off for Under the Policy. 5. Procedures / treatments usually done in out patient department are not payable under the policy even if converted to day care surgery / procedure or as in patient in the hospital for more than 24 hours. 6. In case of Ayurvedic / Homeopathic/Unani treatment, Hospitalization expenses are admissible only when the treatment is taken as in-patient, in a Government Hospital/Medical College Hospital. 7. New Born Baby (If happens to be 1st or 2nd child of the employee) shall be covered from Day 1 8. Additions & Deletion of employee & and his dependents on Pro Rata Basis i.e. the Employees joining during the policy period shall be added on receiving of intimation / instruction from the Institute and shall be covered in same policy on payment of pro-rata premium by Institute. 9. No waiting period including maternity 10. No Medical checkup of employees and their dependents family members
09	Claim settlement procedure	The insurance company shall be liable to settle the cashless claims instantly whereas, the reimbursement claims within a maximum turn-around time of fifteen (15) days after submission of documents and in case of the delay reasons has to be informed to IIML in writing. If reasons are not found justified, the Insurance Company shall be liable to pay interest as per IRDA notification.
10.	SUBMISSION OF THE BID	The shortlisted Insurance Companies may submit their proposals latest by 28.04.2020 up to 11.00 am along with RFQ duly signed as per Annexure I (Technical) and Annexure -II ((Financial BID) in 2 separate sealed envelopes for covering employees & their dependents as per the list enclosed. The financial bid will be opened after evaluation of the technical bid. Financial bid of only those

		<p>meeting the requirement of the Institute will be opened. The date, time of opening of financial bid will be communicated later. Proposals shall be in the sealed envelope super-scribing thereon “Quotation for Group Mediclaim Insurance policy” may be submitted to t h e “ Chief Administrative Officer, Indian Institute of Management Lucknow, Prabandh Nagar, IIM Road, Lucknow – 226013”. Bid submitted in any other form including email, will be rejected.</p> <p><u>The bids received will be opened on 30th April 2020 (11:00 am). The bidders, if interested may attend the bid opening.</u></p>
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GENERAL TERMS AND CONDITIONS:

1. No changes shall be made in this RFQ.
2. All the pages of RFQ along with the proposals should be duly signed & stamped by the insurance company as a token of acceptance of the terms & conditions of RFQ.
3. Proposals if not signed & stamped by the insurance company will not be entertained.
4. Medi-claim Policy Cards for availing Cashless facility by all the employees, and dependents to be provided within 10 days from the date of issue of the Policy.
5. The agencies should also submit an undertaking (**Annexure- III**) duly signed & Stamped.
6. The agencies should also confirm that, they have not been blacklisted/debarred by any organization, department etc.
7. Proposals received after the closing date will not be considered.
8. The rate quoted will be inclusive of all taxes.
9. Return of original documents: In some cases after the claims are submitted along with the original documents for reimbursement, where the patient is in need of getting back the original documents after the verifications are over by the TPA/Insurer, the same should be returned on furnishing a request towards the same by the concerned employee after the settlement of the case.
10. Periodic meeting to be held in Institute campus between the Institute and the TPA/Insurance Company for review of cases/settlement of grievances of the employees.
11. Any other facilities that would be extended for the policy without any additional premium may also be stated.
12. No additional terms and conditions shall be applicable.
13. In the event of dispute, Director, IIM Lucknow shall be the sole arbitrator and his decision shall be final and binding on both the parties.
14. The response time by the TPA at the time of admission should be maximum six hours.
15. Payment will be released by NEFT / RTGS.
16. The Institute reserves the right to accept or reject any proposal in full or part without assigning any reason thereof. The decision of IIML in this regard shall be final and binding on the proposer.
17. Corrigendum, if any will only be uploaded on the Institute website (<http://iiml.ac.in>). For updates, the bidders are requested to visit the website regularly. After submission of bids, all correspondence will be through email, therefore, the bidders must provide a valid email id.

(ON THE LETTER HEAD)

ANNEXURE - I

No.: IIML/MEDICLAIM/19-2020

TECHNICAL BID

SL. No.	Particulars	Details
1.	Name of the Insurance company	
2.	Full particulars of the office	
	a) Address	
	b) Telephone No.	
	c) Fax No.	
	d) E-Mail address	
3.	Registration details (attach self-attested copies of certificates / Registrations/License etc. mandatorily),	
	a) IRDA Reg. No.	
	b) PAN No.	
	c) GST Reg. No.	
4.	Full particulars of the Third Party Administrators (if any). If more than one is available, all TPAs may be indicated.	Number of TPAs: _____ List enclosed as Annexure-_____
5	Enclose the Certificate of Declaration for Confirmation of IRDA guidelines (Refer Annexure-III)	Dully signed and stamp

DECLARATION

I have carefully read and understood all the terms and conditions of the RFQ and hereby accept the same.

The information/document furnished along with the above application is true and authentic to the best of knowledge and belief.

Date:

Signature of the authorized person

Place:

Company Seal

(ON THE LETTER HEAD)

No.: IIML/MEDICLAIM/19-2020

FINANCIAL BID (SUM ASSURED)

1. Providing group Medclaim Policy for the period from 16/05/2020 to 15/05/2021:

S. No.	Sum insured per family (Floater)	Premium Amount (In Rs.)	GST tax Amount (In Rs.)	Total in Figures (In Rs.)	Total in Words (In Rupees)
01	Rs. 5,00,000/- (Rupees Five Lakh Only)				

Note:

1. The Lowest bidder will be decided based on rate quoted total premium quoted including GST for the plan opted by the Institute.

We agree with all the details of the Insurance Scheme and the Terms and Condition of RFQ, against which we have quoted our premium and the quoted premium is valid for 60 days from the last date of submission of this bid.

Date:

Signature of the authorized person

Place:

Company Seal

No.: IIML/MEDICLAIM/19-2020

(ON THE LETTER HEAD)

CERTIFICATE OF DECLARATION FOR CONFIRMATION OF IRDA GUIDELINES

1. I/We, _____
_____ hereby certify that our offer no. _____
dated _____ against RFQ specification No. _____ does not
amount to any breach of IRDA guidelines. I further confirm that in the event of
disclosure at a later stage that the same are not in line with IRDA Guidelines and
IIML is put to any disadvantage or face cancellation of the Policy or any claim
becomes substandard/untenable, the whole liabilities arising out of this shall lie
squarely on us.
2. I/We----- herby undertakes that in case of any violations to the above
declarations at any stage of the contract, IIML reserves the sole right to cancel the
contract and recover the full value of the contract from us.
3. I/We-----, further certify that I am the duly authorized representative of the Insurer
and competent to agree as above.
4. /We----- herby also declare that our company has not been
blacklisted/debarred by any organization, PSU, department etc.
5. I/We----- hereby accept all the terms and conditions of the RFQ document and
premium quoted considering the terms and conditions of the RFP.

Date:

Signature of the authorized person

Place:

Company Seal

LIST OF SHORTLISTED INSURANCE COMPANIES

1. NATIONAL INSURANCE COMPANY
2. NEW INDIA ASSURANCE COMPANY
3. ORIENTAL INSURANCE COMPANY
4. UNITED INDIA INSURANCE COMPANY
5. BAJAJ ALLIANZ
6. IFFCOO TOKIO
7. RELIGARE
8. MAX BUPA
9. APPOLO MUNICH
10. HDFC ERGO
11. STAR HEALTH
12. BHARTI AXA
13. RELIANCE GENERAL

Annexure - A

Corporate Portfolio

INDIAN INSTITUTE OF MANAGEMENT LUCKNOW

Report as On	12/17/2018	Insurance Company	The Oriental Insurance Co. Ltd.
Policy No	221300/48/2017/1990	Policy Period	Policy From Feb 16, 2017
Days Left For Renewal	Expired		Policy Upto Feb 15, 2018
Premium Earned	2,820,000	Total Premium	2,820,000
Lives	Employees	215	Per Life Premium 3,662
	Dependents	555	Incidence Rate 6.88%
Settlement Ratio (in %)	96.23%	Cashless (in %)	56.60%
% ICR on Earned Premium	83%	Overall %ICR	83%

Claim Summary

Claim Type	Intimated		Claim Closed		Paid		Repudiated		Outstanding	
	No. Of Claim	Amount	No. Of Claim	Amount	No. Of Claim	Amount	No. Of Claim	Amount	No. Of Claim	Amount
Cashless	30	1394256	1	0	29	1292378	0	0	0	0
Reimbursement	23	1390049	2	0	18	936408	1	0	2	113682
Total	53	2784305	3	0	47	2228786	1	0	2	113682

Outstanding Details

Claim Status	Reimbursement		Total	
	No. of Claim	Amount	No. of Claim	Amount
Under Query	2	113682	2	113682
Total	2	113682	2	113682

Relation Wise Analysis On Settled Claims

Relation	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
Self	8	16%	649553	29%	81194
Spouse	7	14%	194172	9%	0
Children	16	31%	473943	21%	479
Parents	20	39%	911118	41%	1167
Total	51	100%	2228786	100%	43702

Age Band Wise Analysis On Settled Claims

Age Band	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
0 - 20 Years	14	27%	430443	19%	547
21 - 30 Years	3	6%	53954	2%	17985
31 - 40 Years	2	4%	90248	4%	45124
41 - 50 Years	7	14%	210043	9%	0
51 - 60 Years	7	14%	691688	31%	98813
61 - 70 Years	6	12%	193195	9%	32199

70 Years Above	12	24%	559215	25%	1946
Total	51	100%	2228786	100%	43702

Sum Insured Wise Analysis On Settled Claims

SI Band	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
400001-500000	51	100%	2228786	100%	150
Total	51	100%	2228786	100%	43702

Paid Amount Wise Analysis On Settled Claims

Amount Band	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
0 - 5000	6	12%	6041	0%	0
5001-15000	9	18%	93341	4%	851
15001-25000	9	18%	189814	9%	2594
25001-40000	7	14%	222164	10%	31738
40001-55000	5	10%	220462	10%	44092
55001-75000	4	8%	251704	11%	62926
75001-100000	5	10%	418649	19%	83730
Above 1 Lac	6	12%	826611	37%	137768
Total	51	100%	2228786	100%	43702

Disease Wise Analysis On Settled Claims

Disease Name	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
Certain infectious and	3	6%	51506	2%	17169
Diseases of the	1	2%	32494	1%	32494
Diseases of the	11	22%	235549	11%	0
Diseases of the eye	4	8%	158819	7%	39705
Diseases of the	4	8%	247535	11%	1915
Diseases of the	3	6%	200260	9%	66753
External causes of	2	4%	129858	6%	64929
Injury, poisoning and	6	12%	631732	28%	105289
Neoplasms	7	14%	251463	11%	3335
Others	1	2%	0	0%	0
Symptoms, signs and	9	18%	289570	13%	0
Total	51	100%	2228786	100%	43702

Top 10 Hospital Wise Analysis On Settled Claims

Hospital Name	No. of Claim	Paid Amount	Avg. Amount
Vivekananda Polyclinic	7	89543	12792
Institute Of Medical Prakash Netra Kendr	4	158875	39719
Kailash Health Care Ltd	3	75928	25309
Neera Hospital	3	47707	15902
Pawars Clinic	3	101944	33981
S.M. HOSPITAL & HEART CENTRE	3	110250	36750
aastha hospital	2	129858	64929
Aliganj Orthopadic & Orthoscopy Centre	2	129574	64787
Lucknow Healthcity Trauma Centre and	2	45000	22500

Rajiv Gandhi Cancer Institute & Research	2	113159	56580
Others	20	1226948	61347
Total	51	2228786	43702

**Repeated Utilisation Wise of Employees
(Hospitalisation)**

No. of Claims	No. of Employees	Paid Amount
1	7	644215
Total	7	644215

**Repeated Utilisation Wise of Dependents
(Hospitalisation)**

No. of Claims	No. of Dependents	Paid Amount
1	19	610064
2	4	482125
3	2	176658
4	1	224985
Total	26	1493832

Corporate Portfolio

INDIAN INSTITUTE OF MANAGEMENT LUCKNOW

Report as On	12/17/2018	Insurance Company	The Oriental Insurance Co. Ltd.
Policy No	221300/48/2018/1740	Policy Period	Policy From Feb 16, 2018
Days Left For Renewal	60		Policy Upto Feb 15, 2019
Premium Earned	1,758,039	Total Premium	2,105,020
Lives	Employees 215	Per Life Premium	2,807
	Dependents 535	Incidence Rate	4.93%
Settlement Ratio (in %)	83.78%	Cashless (in %)	37.84%
% ICR on Earned Premium	77%	Overall %ICR	64%

Claim Summary

Claim Type	Intimated		Claim Closed		Paid		Outstanding	
	No. Of Claim	Amount	No. Of Claim	Amount	No. Of Claim	Amount	No. Of Claim	Amount
Cashless	14	1083441	1	0	10	558205	3	368610
Reimbursement	23	627900	5	0	15	368869	3	53082
Total	37	1711341	6	0	25	927074	6	421692

Outstanding Details

Claim Status	Reimbursement		Cashless		Total	
	No. of Claim	Amount	No. of Claim	Amount	No. of Claim	Amount
Under Payment	1	9682			1	9682
Under Process	1	19400	1	38875	2	58275
Bill to be received	1	24000	2	329735	3	353735
Total	3	53082	3	368610	6	421692

Relation Wise Analysis On Settled Claims

Relation	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
Self	7	23%	203506	22%	29072
Spouse	11	35%	289482	31%	4545
Children	4	13%	81173	9%	3942
Parents	9	29%	352913	38%	4982
Total	31	100%	927074	100%	29906

Age Band Wise Analysis On Settled Claims

Age Band	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
0 - 20 Years	2	6%	25620	3%	7885
21 - 30 Years	6	19%	182787	20%	8333
31 - 40 Years	1	3%	0	0%	0
41 - 50 Years	8	26%	268987	29%	0

51 - 60 Years	6	19%	122952	13%	20492
61 - 70 Years	6	19%	259930	28%	7472
70 Years Above	2	6%	66798	7%	33399
Total	31	100%	927074	100%	29906

Sum Insured Wise Analysis On Settled Claims

SI Band	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
400001-500000	31	100%	927074	100%	3568
Total	31	100%	927074	100%	29906

Paid Amount Wise Analysis On Settled Claims

Amount Band	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
0 - 5000	9	29%	11343	1%	0
5001-15000	4	13%	42405	5%	10601
15001-25000	1	3%	15770	2%	15770
25001-40000	8	26%	230325	25%	28791
40001-55000	6	19%	281162	30%	15806
55001-75000	1	3%	62111	7%	62111
75001-100000	1	3%	81000	9%	81000
Above 1 Lac	1	3%	202958	22%	202958
Total	31	100%	927074	100%	29906

Disease Wise Analysis On Settled Claims

Disease Name	No. of Claim	% of Claim	Paid Amount	% of Amount	Avg. Amount
Diseases of the	8	26%	239590	26%	29949
Diseases of the eye	4	13%	61924	7%	0
Diseases of the	5	16%	115926	13%	0
Diseases of the	1	3%	0	0%	0
Endocrine, nutritional	1	3%	44835	5%	44835
Injury, poisoning and	3	10%	266936	29%	88979
Neoplasms	2	6%	15770	2%	7885
Pregnancy, childbirth	4	13%	127234	14%	12500
Symptoms, signs and	3	10%	54859	6%	0
Total	31	100%	927074	100%	29906

Top 10 Hospital Wise Analysis On Settled Claims

Hospital Name	No. of Claim	Paid Amount	Avg. Amount
Neera Hospital	4	153479	38370
Sanjay Gandhi	3	34926	11642
Postgraduate Institute Fortis Escort Hospital	2	50000	25000
Agarwal Medical center	2	51924	25962
LIFE CARE HOSPITAL & NEURO CARE CENTRE	2	0	0
Radius joint surgery hospital	2	215095	107548
Sanjay Gandhi Post Graduate Institute of	2	54859	27430
Vivekananda Polyclinic Institute Of Medical	2	9850	4925
Kalinga Institute Of Medical Science (Kims)	1	0	0
Globe Medicare	1	45135	45135

Others	10	311806	31181
Total	31	927074	29906

**Repeated Utilisation Wise of Employees
(Hospitalisation)**

No. of Claims	No. of Employees	Paid Amount
1	5	196850
Total	5	196850

**Repeated Utilisation Wise of Dependents
(Hospitalisation)**

No. of Claims	No. of Dependents	Paid Amount
1	17	596332
2	2	110412
Total	19	706744

Please refer to the corrigendum for updated document.



RAKSHA HEALTH INSURANCE TPA PVT. LTD.
FARIDABAD

Insurer: The New India Assurance Co. Ltd.
Insured: Indian Institute Of Management
Policy No: 42040734180400000015
Period: 16-Feb-2019
Report Date: 31-Jan-2020

15-Feb-2020

CLAIMS ANALYSIS REPORT

Total Claims Experience Report

Paid	Claim Status	Claims	Value (Rs.)	% Claims	% Value
Cashless Settled		15	7,24,348.00	30.00%	34.50%
Reimbursement Settled **		22	6,05,668.00	44.00%	28.85%
Total Paid (A)		37	13,30,016.00	74.00%	63.35%
Repudiated		4	92,363.00	8.00%	4.40%
Denials - Non Payable		0	0.00	0.00%	0.00%
Denials - File Closed		0	0.00	0.00%	0.00%
Total Repudiated		4	92,363.00	8.00%	4.40%
Outstanding*		4	5,03,340.00	8.00%	23.98%
Claims Passed		0	0.00	0.00%	0.00%
Documents Pending		2	94,789.00	4.00%	4.52%
Claims in Process		3	78,885.00	6.00%	3.75%
Preauthorization's Issued		9	6,77,014.00	18.00%	32.25%
Total O/s (B)		16	12,79,008.00	100.00%	100.00%
Total Reported		50	20,99,393.00	100.00%	100.00%

Total Premium (C) 1965242
Earned Premium (D) 1879094

Claim Ratio = (A+B)/C 102.13%

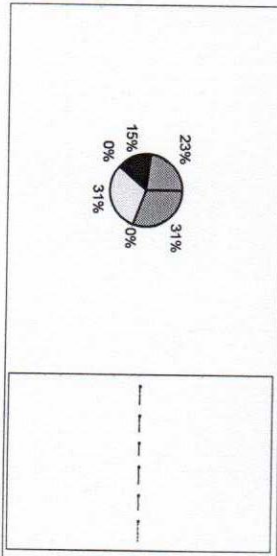
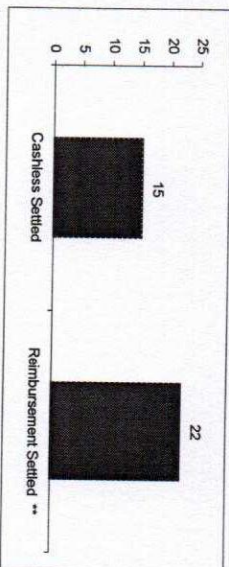
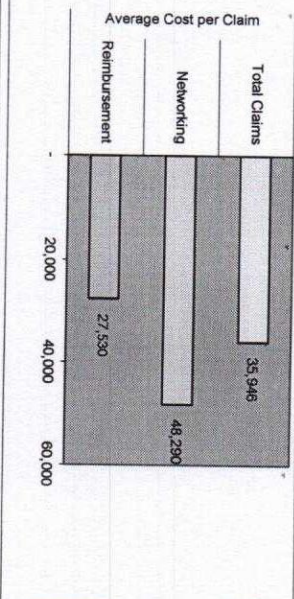
TCR% = (A+B)/D 106.81%

Note:
*The Value for Outstanding may varies. The settlement amount will be less than or equal to the above figures & could result in respective decrease in claim ratio
** Reimbursement Claims also Includes Pre-Post Expenditure.

Morbidity Ratio

No. of Lives Covered 716

Average Cost per Claim		
Reimbursement	27,530	35,946
Networking	48,290	35,946
Total Claims		35,946

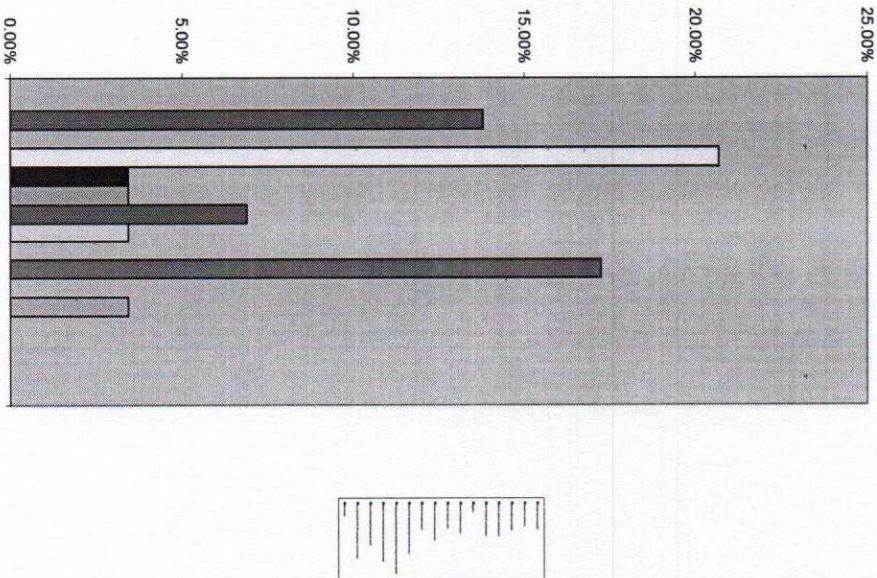


No. of Claims Reported	50
No. of Claims made per 100 lives Insured	6.98%

Aliment-wise Claims Settled Report

Aliment	Claims	Value (Rs.)	% Claims	% Value
Diseases of the nervous system	0	-	0.00%	0.00%
Diseases of eye and adnexa	4	1,14,000.00	13.79%	9.80%
Mental and behavioural disorders	0	-	0.00%	0.00%
Pregnancy, childbirth and the puerperium	6	1,40,971.00	20.59%	12.12%
Certain infectious and parasitic diseases	1	21,292.00	3.45%	1.83%
Neoplasms	1	7,172.00	3.45%	0.62%
Malignant neoplasms of independent (primary) multiple sites	0	-	0.00%	0.00%
Diseases of the ear and mastoid process	0	-	0.00%	0.00%
Diseases of the circulatory system	7	5,70,879.00	24.14%	49.08%
Endocrine, nutritional and metabolic diseases	1	54,207.00	3.45%	4.66%
Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism	0	-	0.00%	0.00%
Diseases of the genitourinary system	2	30,706.00	6.90%	2.64%
Diseases of respiratory system	1	42,839.00	3.45%	3.68%
Diseases of the skin and subcutaneous tissue	0	-	0.00%	0.00%
Diseases of the digestive system	5	1,65,410.00	17.24%	14.22%
Diseases of the musculoskeletal system and connective tissue	0	-	0.00%	0.00%
Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified	1	15,800.00	3.45%	1.36%
Congenital malformations, deformations and chromosomal abnormalities	0	-	0.00%	0.00%
Certain conditions originating in the perinatal period	0	-	0.00%	0.00%

Claim percentage wise



Aliment wise

Injury, poisoning and certain other consequences of external causes	0	-	0.00%	0.00%
Health Checkup	0	-	0.00%	0.00%
Grand Total	29	11,63,276.00	100.00%	100.00%

Age Band	Claims	Value (Rs.)	% Claims	% Value
0-35	11	2,63,831.00	29.73%	19.84%
36-45	8	1,23,877.00	21.62%	9.31%
46-55	5	2,59,055.00	13.51%	19.48%
56-65	8	4,03,618.00	21.62%	30.35%
66-75	3	1,95,428.00	8.11%	14.69%
76-85	2	84,207.00	5.41%	6.33%
86 & Above	0	0.00	0.00%	0.00%
Grand Total	37	13,30,016.00	100.00%	100.00%

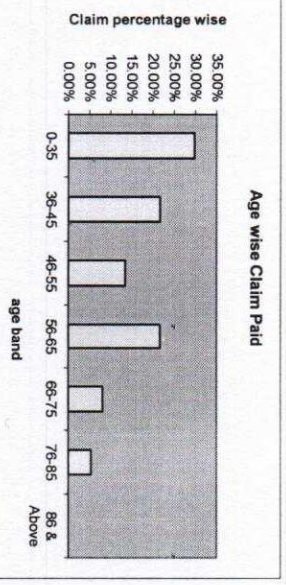
Category of Beneficiaries Report

Beneficiary	Claims	Value (Rs.)	% Claims	% Value
Self	3	1,11,549.00	8.11%	8.39%
Spouse	17	4,21,746.00	45.95%	31.71%
Child	6	1,45,426.00	16.22%	10.93%
Parents	11	6,51,295.00	29.73%	48.97%
Dependents	0	0.00	0.00%	0.00%
Grand Total	37	13,30,016.00	100.00%	100.00%

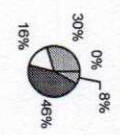
Amount Bands Report

Amount Band	Claims	Value (Rs.)	% Claims	% Value
0-10000	8	50,093.00	21.62%	3.77%
10001-25000	13	2,31,450.00	35.14%	17.40%
25001-50000	9	3,16,490.00	24.32%	23.80%
50001-100000	3	1,91,168.00	8.11%	14.37%
100001-200000	4	5,40,815.00	10.81%	40.66%
200001 and Above	0	0.00	0.00%	0.00%
Grand Total	37	13,30,016.00	100.00%	100.00%

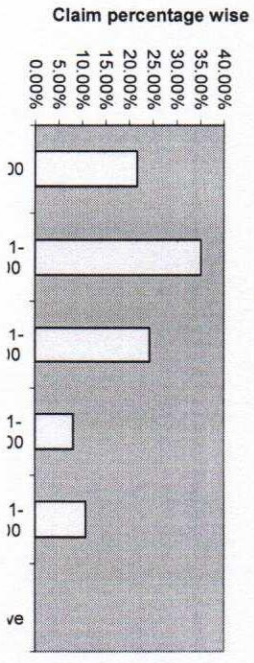
Aliment



Beneficiary wise claim



Amount band wise



Repeated Utilization Report for Employee

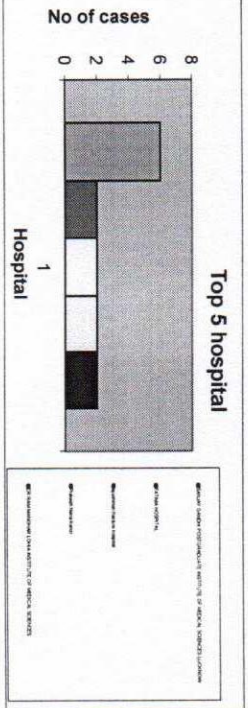
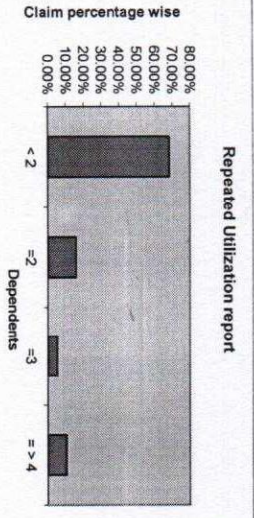
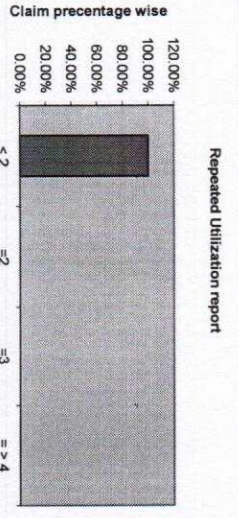
No. of Claims In current Policy	No. of Employees	Value (Rs.)	% Claims	% Value
< 2	3	1,11,549	100.00%	100.00%
= 2	0	0	0.00%	0.00%
= 3	0	0	0.00%	0.00%
= > 4	0	0	0.00%	0.00%
Total	3	1,11,549.00	100.00%	100.00%

Repeated Utilization Report for Dependents

No. of Claims In current Policy	No. of Dependents	Value (Rs.)	% Claims	% Value
< 2	13	507321	68.42%	41.64%
= 2	3	327254	15.79%	26.86%
= 3	1	179994	5.26%	14.77%
= > 4	2	203898	10.53%	16.73%
Total	19	12,18,467.00	100.00%	100.00%

Providers Report	Hospital	Claims	Value(Rs.)
	GRADUATE INSTITUTE OF MEDICAL	6	83217
	FATIMA HOSPITAL	2	16862
	ayushman fracture hospital	2	26402
	Prakash Netra Kendr	2	54000
	OHAR LOHIA INSTITUTE OF MEDIC	2	166194
	ospital and P.G. Inst Glaucoma Rese	2	60000
	ing George Medical University/Luckn	2	97685
	BRINDHAVAN AREION HOSPITAL	2	72601
	rama Centre And Superspecialty HI	2	135424
	ingione Institute of Gastroenterolo	2	21828
	da Polyclinic and Institute of Medic	2	29450
	Era Medical College And Hospital	1	13800
	Bharadwaj Hospital	1	22748
	Zenith Super Specialist Hospital	1	54207
	Institute Of Plastic Surgery Burns an	1	42839
	da Surgical and Maternity Clinic - Luc	1	22566
	Sahara Hospital	1	143866
	S M HOSPITAL AND HEART CENTRE	1	57370
	TENDER CARE NURSING HOME	1	33099

0-100
1000
2500
5000
10000
20000
200001 and Above



O MEDICS SUPER SPECIALITY HOS	1	50000
Kailash Hospital and Heart Institute	1	15800
Avadh Hospital and Heart Centre	1	108058

Annexure-B

Total Employees (In Relation column marked as 'Self')	221
Total number of depedents	513
Total proposed to be covered	734

Sl. No	Temporary name allotted	Relation	Date of Birth
1	Name1	Self	26-Jun-1980
2	Name2	Father	25-Jun-1943
3	Name3	Mother	5-Nov-1949
4	Name4	Self	3-Jan-1978
5	Name5	Mother	15-Aug-1953
6	Name6	Self	15-Feb-1988
7	Name7	Wife	18-Jul-1995
8	Name8	Son	31-Mar-2019
9	Name9	Self	19-May-1984
10	Name10	Wife	16-Sep-1988
11	Name11	Self	6-Apr-1963
12	Name12	Wife	1965-July
13	Name13	Self	18-Aug-1964
14	Name14	Husband	10-Jul-1966
15	Name15	Self	15-Aug-1962
16	Name16	Daughter	21-Sep-1998
17	Name17	Self	1-Apr-1963
18	Name18	Wife	1-Jan-1965
19	Name19	Self	8-Feb-1965
20	Name20	Wife	15-Apr-1971
21	Name21	Daughter	2-Oct-1996
22	Name22	Daughter	19-Jul-1992
23	Name23	Self	8-Mar-1961
24	Name24	Self	22-Aug-1963
25	Name25	Mother	2-Aug-1940
26	Name26	Wife	5-Apr-1975
27	Name27	Self	18-Sep-1964
28	Name28	Wife	12-Feb-1969
29	Name29	Self	14-Sep-1964
30	Name30	Father	1-Aug-1935
31	Name31	Self	5-Oct-1962
32	Name32	Wife	20-Aug-1967
33	Name33	Daughter	2-Oct-1992
34	Name34	Son	16-Aug-1996
35	Name35	Self	7-Jun-1962
36	Name36	Wife	5-Apr-1969
37	Name37	Son	10-Nov-1996
38	Name38	Son	12-May-1998
39	Name39	Self	2-Dec-1963
40	Name40	Wife	1-Jul-1964
41	Name41	Daughter	15-Apr-1994
42	Name42	Self	15-Aug-1970
43	Name43	Son	25-Dec-2002
44	Name44	Self	12-Dec-1964
45	Name45	Father	3-Apr-1945
46	Name46	Mother	18-Jul-1947

Sl. No	Temporary name allotted	Relation	Date of Birth
47	Name47	Wife	13-May-1972
48	Name48	Daughter	31-Mar-1994
49	Name49	Daughter	6-Dec-1997
50	Name50	Daughter	2-Jan-2003
51	Name51	Son	1-Jul-2005
52	Name52	Self	8-Sep-1970
53	Name53	Wife	3-Aug-1976
54	Name54	Daughter	22-Sep-1998
55	Name55	Son	1-Aug-2002
56	Name56	Self	17-Jul-1966
57	Name57	Husband	19-Oct-1967
58	Name58	Daughter	20-Apr-1995
59	Name59	Son	31-Aug-1999
60	Name60	Self	18-Mar-1963
61	Name61	Son	4-May-2003
62	Name62	Self	26-Mar-1965
63	Name63	Wife	19-Apr-1969
64	Name64	Daughter	6-Nov-1999
65	Name65	Self	15-Aug-1966
66	Name66	Father	74 Years
67	Name67	Wife	18-Jun-1969
68	Name68	Daughter	10-Apr-2004
69	Name69	Daughter	2-Dec-2005
70	Name70	Self	13-Jul-1964
71	Name71	Husband	25-Aug-1958
72	Name72	Self	30-Apr-1963
73	Name73	Wife	13-Aug-1968
74	Name74	Daughter	22-Mar-1995
75	Name75	Daughter	4-Sep-2000
76	Name76	Self	6-Aug-1962
77	Name77	Mother	4-May-1930
78	Name78	Wife	4-Jun-1964
79	Name79	Self	1-Jul-1967
80	Name80	Wife	20-Sep-1970
81	Name81	Daughter	20-Feb-1997
82	Name82	Self	5-Nov-1966
83	Name83	Father	1-Feb-1941
84	Name84	Wife	1-Jan-1968
85	Name85	Self	1-Mar-1968
86	Name86	Wife	20-Apr-1969
87	Name87	Daughter	5-Aug-1994
88	Name88	Daughter	18-Apr-1996
89	Name89	Daughter	25-May-1998
90	Name90	Son	28-Dec-2004
91	Name91	Self	10-Jul-1965
92	Name92	Wife	16-Oct-1978
93	Name93	Daughter	25-May-1994
94	Name94	Daughter	15-Aug-1996
95	Name95	Self	20-May-1960
96	Name96	Wife	12-Oct-1972
97	Name97	Son	14-Mar-1997
98	Name98	Self	12-Mar-1963
99	Name99	Wife	1-Jan-1965

Sl. No	Temporary name allotted	Relation	Date of Birth
100	Name100	Daughter	15-Mar-1993
101	Name101	Self	1-Dec-1967
102	Name102	Wife	25-Jul-1978
103	Name103	Daughter	10-Oct-1993
104	Name104	Self	21-Nov-1967
105	Name105	Daughter	2-Jan-2002
106	Name106	Self	28-Jul-1963
107	Name107	Mother	25-Sep-1943
108	Name108	Wife	28-May-1969
109	Name109	Daughter	6-Jan-1998
110	Name110	Son	10-Mar-2004
111	Name111	Self	25-May-1964
112	Name112	Wife	6-Oct-1966
113	Name113	Daughter	15-Jun-1997
114	Name114	Son	16-Sep-2004
115	Name115	Self	30-Jan-1968
116	Name116	Wife	20-Mar-1971
117	Name117	Son	27-Jul-1998
118	Name118	Self	20-Sep-1968
119	Name119	Wife	1-Jan-1972
120	Name120	Daughter	16-Nov-1995
121	Name121	Daughter	23-Jun-2005
122	Name122	Daughter	4-Sep-2006
123	Name123	Self	15-Jun-1965
124	Name124	Mother	74 Years
125	Name125	Wife	9-Apr-1972
126	Name126	Son	31-Dec-1999
127	Name127	Daughter	25-Jun-2001
128	Name128	Son	7-Jan-2012
129	Name129	Self	1-Jan-1970
130	Name130	Wife	1-Jul-1976
131	Name131	Son	3-Aug-1997
132	Name132	Son	10-Aug-2004
133	Name133	Self	10-Jun-1974
134	Name134	Father	10-Jul-1941
135	Name135	Mother	20-Jul-1946
136	Name136	Wife	19-May-1975
137	Name137	Daughter	21-Sep-2002
138	Name138	Self	29-May-1969
139	Name139	Mother	21-Aug-1943
140	Name140	Wife	23-May-1978
141	Name141	Daughter	23-Nov-1999
142	Name142	Daughter	4-May-2004
143	Name143	Self	28-Jan-1973
144	Name144	Wife	25-Jul-1975
145	Name145	Daughter	22-Aug-1997
146	Name146	Father	20-Nov-1952
147	Name147	Mother	3-Oct-1955
148	Name148	Self	8-Feb-1985
149	Name149	Wife	14-Jan-1990
150	Name150	Daughter	27-Oct-2017
151	Name151	Self	1-Oct-1976
152	Name152	Wife	14-Jun-1976

Sl. No	Temporary name allotted	Relation	Date of Birth
153	Name153	Daughter	23-Feb-2008
154	Name154	Son	18-Oct-2010
155	Name155	Self	2-Jun-1971
156	Name156	Mother	1-Jan-1945
157	Name157	Wife	1-Jul-1977
158	Name158	Son	10-Mar-2004
159	Name159	Son	29-Dec-2011
160	Name160	Self	7-Jan-1983
161	Name161	Wife	5-May-1982
162	Name162	Daughter	22-Apr-2008
163	Name163	Son	5-Nov-2011
164	Name164	Father	20-Aug-1956
165	Name165	Mother	18-Jul-1957
166	Name166	Self	3-Sep-1981
167	Name167	Wife	27-Dec-1981
168	Name168	Mother	31-May-1952
169	Name169	Son	31-Mar-2017
170	Name170	Self	27-Feb-1981
171	Name171	Husband	11-Jul-1982
172	Name172	Daughter	14-May-2015
173	Name173	Self	1-Mar-1989
174	Name174	Wife	19-May-1989
175	Name175	Father	28-Sep-1964
176	Name176	Mother	16-Jun-1969
177	Name177	Daughter	20-Feb-2018
178	Name178	Self	15-Jun-1967
179	Name179	Daughter	12-May-2003
180	Name180	Daughter	20-Apr-1998
181	Name181	Self	14-Jan-1991
182	Name182	Self	27-Apr-1988
183	Name183	Mother	14-Feb-1957
184	Name184	Father	13-Jul-1952
185	Name185	Self	10-Jan-1984
186	Name186	Self	24-Nov-1986
187	Name187	Husband	26-Jun-1980
188	Name188	Son	2-Jan-2015
189	Name189	Father-in-Law	9-Dec-1939
190	Name190	Mother-in-Law	28-May-1952
191	Name191	Self	3-Jan-1985
192	Name192	Wife	2-Apr-1984
193	Name193	Son	11-Dec-2016
194	Name194	Mother	10-Apr-1945
195	Name195	Self	15-Aug-1990
196	Name196	Mother	3-May-1960
197	Name197	Sister	10-Jul-2001
198	Name198	Wife	26-Apr-1994
199	Name199	Self	15-Jul-1991
200	Name200	Father	15-Jul-1963
201	Name201	Mother	10-Jun-1967
202	Name202	Sister	19-Jul-1996
203	Name203	Wife	12-Jul-1994
204	Name204	Son	10-Jan-2020
205	Name205	Self	9-Feb-1985

Sl. No	Temporary name allotted	Relation	Date of Birth
206	Name206	Mother	1-Sep-1942
207	Name207	Wife	1-Jul-1986
208	Name208	Son	7-Feb-2018
209	Name209	Self	16-Jul-1984
210	Name210	Wife	1-Nov-1984
211	Name211	Son	2-Jun-2017
212	Name212	Daughter	15-Sep-2010
213	Name213	Self	26-Mar-1987
214	Name214	Wife	12-Jul-1980
215	Name215	Daughter	10-Aug-2019
216	Name216	Daughter	3-Jun-2016
217	Name217	Self	1-Jul-1986
218	Name218	Wife	3-Jan-1987
219	Name219	Son	15-Nov-2019
220	Name220	Self	5-Aug-1986
221	Name221	Wife	15-Aug-1992
222	Name222	Daughter	8-May-2018
223	Name223	Self	28-Dec-1987
224	Name224	Wife	24-Aug-1991
225	Name225	Daughter	30-Oct-2017
226	Name226	Self	8-Oct-1987
227	Name227	Father	1-Jul-1963
228	Name228	Mother	1-Jan-1972
229	Name229	Wife	5-May-1994
230	Name230	Daughter	3-Jun-2019
231	Name231	Self	6-Jul-1964
232	Name232	Wife	9-Oct-1966
233	Name233	Son	20-Oct-1995
234	Name234	Daughter	13-Mar-1998
235	Name235	Self	2-Sep-1961
236	Name236	Wife	19-Sep-1972
237	Name237	Daughter	3-Nov-2002
238	Name238	Self	4-Feb-1964
239	Name239	Wife	1-Jan-1970
240	Name240	Daughter	26-Sep-1993
241	Name241	Son	9-Oct-1995
242	Name242	Daughter	29-Jul-1998
243	Name243	Self	12-Mar-1963
244	Name244	Wife	12-Dec-1965
245	Name245	Self	16-Aug-1965
246	Name246	Wife	1-Jan-1969
247	Name247	Daughter	17-Jan-1986
248	Name248	Self	10-Jun-1973
249	Name249	Self	15-Aug-1963
250	Name250	Wife	20-Jul-1971
251	Name251	Self	15-Jan-1974
252	Name252	Father	18-Feb-1948
253	Name253	Mother	10-Apr-1950
254	Name254	Wife	7-Mar-1974
255	Name255	Daughter	12-Jun-1996
256	Name256	Son	27-Jul-2003
257	Name257	Self	3-Nov-1965
258	Name258	Wife	19-Aug-1969
259	Name259	Son	7-Aug-1995

Sl. No	Temporary name allotted	Relation	Date of Birth
260	Name260	Self	5-Apr-1966
261	Name261	Mother	1-Jan-1951
262	Name262	Wife	1-Jul-1980
263	Name263	Son	14-Jan-1998
264	Name264	Son	18-Mar-2002
265	Name265	Self	15-Jan-1975
266	Name266	Wife	1-Jan-1979
267	Name267	Daughter	5-Jul-1996
268	Name268	Son	5-Sep-2000
269	Name269	Father	1-Jan-1950
270	Name270	Mother	12-Dec-1953
271	Name271	Self	9-Nov-1966
272	Name272	Wife	Year- 1972
273	Name273	Daughter	13-Jul-1994
274	Name274	Daughter	9-Nov-1995
275	Name275	Self	3-Jun-1962
276	Name276	Self	1-Dec-1975
277	Name277	Wife	3-Jan-1980
278	Name278	Son	30-Oct-1998
279	Name279	Son	15-Nov-2000
280	Name280	Mother	14-Apr-1953
281	Name281	Self	23-Nov-1969
282	Name282	Wife	8-Feb-1973
283	Name283	Son	5-Aug-2006
284	Name284	Daughter	11-Nov-2010
285	Name285	Self	6-Jul-1967
286	Name286	Wife	30-Mar-1972
287	Name287	Son	24-Jul-2001
288	Name288	Son	18-Nov-2006
289	Name289	Self	18-Dec-1966
290	Name290	Son	21-Jun-1997
291	Name291	Self	30-Jun-1986
292	Name292	Wife	5-Oct-1993
293	Name293	Father	1-Jan-1957
294	Name294	Mother	1-Jan-1962
295	Name295	Daughter	21-Dec-2016
296	Name296	Self	30-Sep-1964
297	Name297	Self	6-Jun-1963
298	Name298	Wife	1-Jan-1969
299	Name299	Self	8-Jul-1960
300	Name300	Self	1-Apr-1973
301	Name301	Mother	1-Jan-1945
302	Name302	Wife	1-Jan-1977
303	Name303	Son	14-Nov-1995
304	Name304	son	9-Sep-2001
305	Name305	Daughter	29-Aug-2004
306	Name306	Self	16-Jul-1971
307	Name307	Mother	1-Jan-1950
308	Name308	Wife	1-Jan-1973
309	Name309	Son	26-Jun-2000
310	Name310	Daughter	16-Apr-2009
311	Name311	Self	6-Feb-1963
312	Name312	Wife	9-Aug-1966

Sl. No	Temporary name allotted	Relation	Date of Birth
313	Name313	Son	25-Mar-2004
314	Name314	Self	15-May-1967
315	Name315	Wife	16-Feb-1971
316	Name316	Daughter	15-Jun-1996
317	Name317	Mother	15-May-1946
318	Name318	Self	22-Apr-72
319	Name319	Wife	3-Dec-76
320	Name320	Son	24-Jul-02
321	Name321	Daughter	24-Sep-05
322	Name322	Self	23-Nov-61
323	Name323	wife	3-Oct-72
324	Name324	Son	25-Apr-06
325	Name325	Self	30-Mar-80
326	Name326	Mother	4-Mar-55
327	Name327	Father	16-May-52
328	Name328	Self	19-Nov-68
329	Name329	Wife	6-Dec-71
330	Name330	Self	22-Mar-80
331	Name331	Son	2-Jul-08
332	Name332	Daughter	2-Dec-10
333	Name333	Self	2-Jul-84
334	Name334	Wife	19-Dec-87
335	Name335	Son	16-Dec-19
336	Name336	Self	11-Aug-76
337	Name337	Wife	5-Jul-79
338	Name338	Son	26-Aug-09
339	Name339	Self	5-Jul-78
340	Name340	Wife	15-Jul-82
341	Name341	Son	1-Nov-10
342	Name342	Daughter	15-Jan-19
343	Name343	Self	28-Jun-79
344	Name344	Wife	5-Jul-83
345	Name345	Son	21-Sep-15
346	Name346	Mother	26-Jun-52
347	Name347	Self	11-Mar-64
348	Name348	Wife	24-Jun-65
349	Name349	Daughter	20-Oct-90
350	Name350	Self	16-Sep-62
351	Name351	Wife	22-Feb-69
352	Name352	Son	3-Aug-99
353	Name353	Self	1-Jan-61
354	Name354	Wife	5-Aug-69
355	Name355	Self	13-Apr-62
356	Name356	Mother	23-Jul-43
357	Name357	Wife	16-Feb-72
358	Name358	Daughter	1-Aug-97
359	Name359	Self	20-Mar-62
360	Name360	Wife	3-Nov-65
361	Name361	Daughter	9-Nov-94
362	Name362	Self	31-Dec-65
363	Name363	Mother	15-Jun-45
364	Name364	Wife	16-Jun-69
365	Name365	Daughter	27-Oct-96

Sl. No	Temporary name allotted	Relation	Date of Birth
366	Name366	Self	7-Nov-73
367	Name367	Son	7-Dec-01
368	Name368	Son	31-May-06
369	Name369	Mother-in-Law	5-Oct-46
370	Name370	Self	14-Sep-73
371	Name371	Wife	15-Sep-78
372	Name372	Son	30-Oct-07
373	Name373	Son	7-Sep-13
374	Name374	Self	21-Jun-74
375	Name375	Husband	22-Mar-76
376	Name376	Son	17-Mar-06
377	Name377	Self	1-Sep-61
378	Name378	Wife	1-Jan-66
379	Name379	Son	1-Sep-95
380	Name380	Self	2-Jul-62
381	Name381	Wife	1-Jul-70
382	Name382	Daughter	15-Feb-93
383	Name383	Self	6-Aug-66
384	Name384	Wife	5-Jan-67
385	Name385	Daughter	29-Jun-98
386	Name386	Self	8-Aug-60
387	Name387	Wife	24-Apr-61
388	Name388	Son	27-Jan-97
389	Name389	Self	19-Nov-63
390	Name390	Wife	15-Aug-65
391	Name391	Self	7-Oct-61
392	Name392	Father	15-Dec-33
393	Name393	Wife	2-Aug-70
394	Name394	Daughter	17-Feb-02
395	Name395	Self	20-May-63
396	Name396	Wife	10-Oct-67
397	Name397	Self	12-Jan-64
398	Name398	Wife	1-Sep-70
399	Name399	Son	8-Feb-01
400	Name400	Sister	21-Jul-60
401	Name401	Self	20-Apr-65
402	Name402	Wife	27-May-70
403	Name403	Daughter	24-Jul-97
404	Name404	Daughter	31-Jan-03
405	Name405	Self	1-Sep-61
406	Name406	Wife	1-Apr-68
407	Name407	Daughter	31-Dec-90
408	Name408	Daughter	1-Oct-92
409	Name409	Son	5-Sep-96
410	Name410	Self	19-Apr-66
411	Name411	Husband	4-Jan-60
412	Name412	Daughter	17-Nov-99
413	Name413	Self	30-Oct-65
414	Name414	Wife	7-Mar-66
415	Name415	Self	6-Aug-64
416	Name416	Wife	14-Nov-72
417	Name417	Son	6-Jan-00
418	Name418	Self	5-Apr-69

Sl. No	Temporary name allotted	Relation	Date of Birth
419	Name419	Father	22-Aug-30
420	Name420	Wife	1-Jun-71
421	Name421	Son	22-Jan-98
422	Name422	Daughter	26-Jul-05
423	Name423	Self	25-Dec-68
424	Name424	Daughter	24-Jan-11
425	Name425	Self	30-Nov-72
426	Name426	Wife	8-Feb-78
427	Name427	Daughter	17-Mar-05
428	Name428	Self	15-Jul-73
429	Name429	Wife	18-Oct-77
430	Name430	Daughter	18-Feb-05
431	Name431	Son	29-Jul-11
432	Name432	Self	11-06-1960
433	Name433	Mother	18-10-1935
434	Name434	Self	09-07-1967
435	Name435	Self	29-07-1956
436	Name436	Wife	27-05-1967
437	Name437	Self	19-04-1969
438	Name438	Wife	25-02-1977
439	Name439	Son	07-11-2005
440	Name440	Self	11-04-1982
441	Name441	Wife	11-11-1984
442	Name442	Son	02-12-2016
443	Name443	Self	28-09-1978
444	Name444	Wife	23-06-1981
445	Name445	Daughter	05-11-2013
446	Name446	Self	30-08-1966
447	Name447	Wife	30-06-1971
448	Name448	Daughter	18-11-2002
449	Name449	Daughter	09-01-2009
450	Name450	Self	17-04-1976
451	Name451	Wife	23-10-1981
452	Name452	Daughter	08-10-2008
453	Name453	Father	07-01-1936
454	Name454	Self	14-08-1973
455	Name455	Wife	24-09-1978
456	Name456	Son	18-03-2013
457	Name457	Self	19-12-1967
458	Name458	Wife	29-12-1976
459	Name459	Daughter	01-04-2001
460	Name460	Daughter	19-06-2005
461	Name461	Daughter	23-10-2006
462	Name462	Self	19-08-1971
463	Name463	Wife	16-07-1975
464	Name464	Self	16-01-1958
465	Name465	Wife	16-03-1965
466	Name466	Daughter	23-04-1992
467	Name467	Self	05-07-1958
468	Name468	Wife	16-01-1965
469	Name469	Father	77 Years
470	Name470	Mother	74 Years
471	Name471	Self	18-03-1970

Sl. No	Temporary name allotted	Relation	Date of Birth
472	Name472	Self	05-09-1964
473	Name473	Wife	03-09-1968
474	Name474	Daughter	01-04-1995
475	Name475	Son	10-03-1999
476	Name476	Self	30-07-1971
477	Name477	Wife	27-09-1976
478	Name478	Daughter	11-07-2005
479	Name479	Son	16-12-2009
480	Name480	Self	02-04-1979
481	Name481	Wife	16-07-1982
482	Name482	Son	19-09-2010
483	Name483	Self	25-12-1969
484	Name484	Self	07-10-1982
485	Name485	Wife	28-03-1990
486	Name486	Self	14-11-1978
487	Name487	Wife	19-12-1984
488	Name488	Son	20-03-2013
489	Name489	Mother	12-01-1958
490	Name490	Self	15-05-1963
491	Name491	Wife	28-05-1971
492	Name492	Son	25-04-1997
493	Name493	Sister	28-11-1967
494	Name494	Daughter	10-12-2003
495	Name495	Self	22-12-1979
496	Name496	Wife	15-11-1983
497	Name497	Son	01-07-2016
498	Name498	Father	23-06-1953
499	Name499	Mother	03-09-1957
500	Name500	Self	10-09-1966
501	Name501	Wife	01-03-1977
502	Name502	Son	15-09-2000
503	Name503	Self	01-12-1983
504	Name504	Father	01-01-1950
505	Name505	Mother	30-12-1955
506	Name506	Sister	25-08-1995
507	Name507	Self	08-05-1977
508	Name508	Mother	15-02-1952
509	Name509	Son	07-03-2014
510	Name510	Wife	01-09-1983
511	Name511	Self	08-07-1981
512	Name512	Wife	13-07-1981
513	Name513	Daughter	13-06-2016
514	Name514	Self	29-06-1968
515	Name515	Wife	10-06-1971
516	Name516	Son	11-02-1998
517	Name517	Daughter	14-11-2002
518	Name518	Self	28-03-1974
519	Name519	Self	10-10-1963
520	Name520	Father	1940
521	Name521	Mother	1945
522	Name522	Daughter	13-03-2003
523	Name523	Self	22-08-1985
524	Name524	Self	05-08-1987

Sl. No	Temporary name allotted	Relation	Date of Birth
525	Name525	Mother	24-12-1956
526	Name526	Self	15-08-1970
527	Name527	Wife	06-12-1969
528	Name528	Son	28-12-1998
529	Name529	Self	12-08-1978
530	Name530	Wife	18-08-1982
531	Name531	Son	22-11-2009
532	Name532	Son	26-04-2015
533	Name533	Mother	09-04-1955
534	Name534	Self	12-06-1972
535	Name535	Wife	18-10-1973
536	Name536	Son	08-10-2000
537	Name537	Father	08-10-1937
538	Name538	Self	15-08-1967
539	Name539	Wife	25-07-1969
540	Name540	Son	14-09-2000
541	Name541	Daughter	15-04-2007
542	Name542	Self	10-08-1971
543	Name543	Husband	15-03-1967
544	Name544	Daughter	31-07-1998
545	Name545	Daughter	03-08-2003
546	Name546	Mother-in-law	01-05-1949
547	Name547	Self	24-03-1977
548	Name548	Wife	05-01-1986
549	Name549	Mother	07-05-1949
550	Name550	Daughter	08-06-2010
551	Name551	Son	17-10-2011
552	Name552	Self	12-08-1971
553	Name553	Wife	15-07-1976
554	Name554	Son	15-01-2002
555	Name555	Self	23-01-1976
556	Name556	Wife	21-01-1979
557	Name557	Son	19-01-2014
558	Name558	Self	04-05-1982
559	Name559	Self	25-12-1980
560	Name560	Wife	01-06-1980
561	Name561	Mother	13-11-1952
562	Name562	Self	01-03-1977
563	Name563	Wife	04-02-1978
564	Name564	Daughter	19-02-2007
565	Name565	Son	02-06-2015
566	Name566	Self	30-10-1954
567	Name567	Wife	05-03-1959
568	Name568	Self	01-09-1975
569	Name569	Wife	21-07-1981
570	Name570	Daughter	10-01-2011
571	Name571	Self	18-06-1986
572	Name572	Self	15-07-1981
573	Name573	Daughter	29-03-2018
574	Name574	Mother-in-law	23-07-1962
575	Name575	Self	23-03-1978
576	Name576	Mother	01-01-1957
577	Name577	Wife	14-09-1984

Sl. No	Temporary name allotted	Relation	Date of Birth
578	Name578	Daughter	21-07-2016
579	Name579	Daughter	15-07-2011
580	Name580	Father	12-12-1945
581	Name581	Self	27-12-1976
582	Name582	wife	16-12-1975
583	Name583	son	28-01-2006
584	Name584	Self	25-12-1967
585	Name585	Wife	24-11-1973
586	Name586	Son	08-10-1998
587	Name587	Self	07-11-1965
588	Name588	Daughter	25-03-1995
589	Name589	Husband	24-09-1965
590	Name590	Self	06-05-1973
591	Name591	Wife	15-02-1976
592	Name592	Son	22-02-2002
593	Name593	Son	31-05-2009
594	Name594	Self	17-04-1964
595	Name595	Wife	12-11-1973
596	Name596	Daughter	31-08-1995
597	Name597	Son	03-05-2000
598	Name598	Self	11-05-1968
599	Name599	Wife	30-06-1973
600	Name600	Daughter	27-12-2001
601	Name601	Son	02-04-2009
602	Name602	Self	11-04-1959
603	Name603	Self	30-09-1987
604	Name604	Self	13-07-1978
605	Name605	Daughter	11-05-2006
606	Name606	Mother	30-06-1950
607	Name607	Son	12-11-2011
608	Name608	Self	05-12-1987
609	Name609	Mother	21-03-1963
610	Name610	Daughter	08-06-2018
611	Name611	Wife	29-07-1989
612	Name612	Self	13-05-1984
613	Name613	Daughter	27-07-2010
614	Name614	Self	28-07-1965
615	Name615	Wife	07-11-1973
616	Name616	Daughter	08-07-1997
617	Name617	Father	01-01-1943
618	Name618	Mother	01-01-1948
619	Name619	Son	31-01-2013
620	Name620	Self	30-03-1966
621	Name621	Wife	30-04-1970
622	Name622	Daughter	03-12-1997
623	Name623	Son	13-07-2002
624	Name624	Self	01-08-1987
625	Name625	Wife	07-09-1986
626	Name626	Son	13-07-2012
627	Name627	Father	01-01-1962
628	Name628	Mother	02-05-1965
629	Name629	Self	24-09-1971

Sl. No	Temporary name allotted	Relation	Date of Birth
630	Name630	Wife	07-11-1971
631	Name631	Father	09-12-1943
632	Name632	Mother	23-09-1946
633	Name633	son	08-05-1998
634	Name634	Self	27-12-1954
635	Name635	Wife	05-11-1961
636	Name636	Self	11-12-1977
637	Name637	Mother	01-01-1949
638	Name638	Son	15-01-2015
639	Name639	Self	01-09-1966
640	Name640	Self	11-08-1955
641	Name641	Wife	15-04-1956
642	Name642	Self	13-02-1988
643	Name643	Father	09-08-1957
644	Name644	Mother	09-09-1961
645	Name645	Wife	10-04-1989
646	Name646	Daughter	29-04-2019
647	Name647	Self	03-08-1985
648	Name648	Self	13-06-1985
649	Name649	Self	13-02-1987
650	Name650	Wife	28-05-1993
651	Name651	Father	15-02-1958
652	Name652	Mother	26-01-1965
653	Name653	Self	26-06-1975
654	Name654	Spouse	24-10-1981
655	Name655	Son	09-09-2016
656	Name656	Self	13-02-1988
657	Name657	Self	15-07-1985
658	Name658	Wife	31-07-1988
659	Name659	Father	11-05-1951
660	Name660	Mother	04-08-1956
661	Name661	Self	05-01-1978
662	Name662	Mother	25-05-1936
663	Name663	Wife	02-05-1980
664	Name664	Son	23-03-2010
665	Name665	Daughter	18-03-2017
666	Name666	Self	15-08-1979
667	Name667	Wife	19-03-1986
668	Name668	Daughter	28-06-2011
669	Name669	Daughter	17-12-2013
670	Name670	Self	28-08-1961
671	Name671	Wife	30-06-1970
672	Name672	Daughter	03-01-2006
673	Name673	Son	24-11-2010
674	Name674	Self	04-10-1970
675	Name675	Wife	06-07-1973
676	Name676	Daughter	12-11-1996
677	Name677	Daughter	02.10.2002
678	Name678	Self	19-07-1962
679	Name679	Wife	12-11-1964
680	Name680	Daughter	17-11-1992
681	Name681	Daughter	14-07-1998
682	Name682	Mother	18-05-1932

Sl. No	Temporary name allotted	Relation	Date of Birth
683	Name683	Self	09-11-1963
684	Name684	Self	26-12-1972
685	Name685	Self	21-12-1961
686	Name686	Self	28-01-1979
687	Name687	Wife	10-10-1977
688	Name688	Son	13-03-2015
689	Name689	Self	12-10-1975
690	Name690	Wife	26-04-1979
691	Name691	Son	08-09-2006
692	Name692	Daughter	30-04-2010
693	Name693	Self	05-10-1979
694	Name694	Mother	10-04-1957
695	Name695	Wife	05-09-1986
696	Name696	Son	01-01-2014
697	Name697	Son	25-10-2019
698	Name698	Self	15-07-1955
699	Name699	Wife	17-11-1958
700	Name700	Self	30-11-1977
701	Name701	Father	63 yrs.
702	Name702	Mother	58 yrs.
703	Name703	Wife	20-07-1980
704	Name704	Self	28-11-1976
705	Name705	Husband	31-05-1976
706	Name706	Mother-in-Law	20-04-1951
707	Name707	Daughter	12-08-2005
708	Name708	Son	14-05-2012
709	Name709	Self	05-05-1957
710	Name710	Wife	10-06-1964
711	Name711	Daughter	12-08-1990
712	Name712	Daughter	09-05-1994
713	Name713	Self	19-06-1967
714	Name714	Wife	01-05-1973
715	Name715	Son	22-09-2004
716	Name716	Self	11-03-1972
717	Name717	Mother	80 Yrs.
718	Name718	Self	25-07-1973
719	Name719	Daughter	03-05-2007
720	Name720	Self	03-12-1963
721	Name721	Daughter	20-08-1996
722	Name722	Self	12-09-1969
723	Name723	Wife	17-02-1973
724	Name724	Son	29-10-1999
725	Name725	Daughter	21-04-2005
726	Name726	Self	05-05-1955
727	Name727	Wife	30-06-1957
728	Name728	Self	01-06-1965
729	Name729	Wife	19-06-1971
730	Name730	Son	28-08-1996
731	Name731	Mother	69 yrs.
732	Name732	Self	16-07-1970
733	Name733	Wife	09-05-1974
734	Name734	Son	16-07-2007