

This report has been generated for the following policies:

Policy Number	Policy Holder	Policy Start Date	Policy End Date	Lives	Total Premium	Earned Premium	Policy Run Days
41010251000000335-00_topup	Birla Institute Of Technology MESRA	October 26, 2025	October 25, 2026	1,261	₹0	₹0	337
Total				1,261	₹0	₹0	337

Portfolio Report

As of 27 Sep 2026, the portfolio covers 1,261 lives. Premium updated in our system is ₹0. A total of 70 claims have been reported, with Incurred Amount of ₹56.16 Lakh. The Incurred Claims Ratio (ICR) is NA** on premium updated and NA** on Earned Premium. The claim incidence rate is 5.31% (Incurred Hospitalization claims per 100 lives). Ratios based on premium in Insurer's System would prevail.

1.0 Policy Lives	Count	2 Policy Premium	Amount (₹)
1.1 At Inception* & Addition	1,261	2.1 First Time	0
1.1.1 At Inception *	1,253	2.2 Addition	0
1.1.2 Addition	8	2.3 Deletion	0
1.2 Deletion	0	2.4 Total Premium	0
Current Lives	1,261	2.5 Earned Premium (EP)	0

• Inception Lives inclusive of lives added with policy or subsequently, with coverage date from policy start date

3 By Claim Status	Claim Count	% Claim Count	Claimed Amount (₹)	% Claim Amount	Incurred Amount (₹)	%Incurred Amount
3.1 Paid	63	89.72%	₹10,000,331	97.18%	₹5,523,606	98.36%
3.2 Denied due to document shortfall	1	1.46%	₹9,801	0.10%	₹0	0.00%
3.3 Denied due to Policy Exclusion	2	2.85%	₹7,626	1.55%	₹0	0.00%
3.4 Processed	2	2.98%	₹64,931	0.64%	₹51,572	0.92%
3.5 In Process	2	2.98%	₹55,030	0.54%	₹40,499	0.72%
Total	70		₹10,137,719		₹5,615,677	

Claim Type	Claim Count	% Claim Count	Claimed Amount (₹)	% Claim Amount	Incurred Amount (₹)	%Incurred Amount
IP						
4 Cashless						
4.1 Paid	27	93.03%	₹7,609,494	97.76%	₹3,864,011	99.61%
4.2 Denied due to document shortfall						
4.3 Denied due to Policy Exclusion	1	3.38%		1.93%	₹0	0.00%
4.4 Processed						
4.5 In Process	1	3.60%	₹23,500	0.30%	₹15,275	0.39%
Subtotal	29	100.00%	₹7,632,994	100.00%	₹3,879,286	100.00%
5 Reimbursement						
5.1 Paid	36	87.40%	₹2,390,837	95.29%	₹1,659,595	95.58%
5.2 Denied due to document shortfall	1	2.48%	₹9,801	0.41%	₹0	0.00%
5.3 Denied due to Policy Exclusion	1	2.49%	₹7,626	0.32%	₹0	0.00%
5.4 Processed	2	5.09%	₹64,931	2.69%	₹51,572	2.97%
5.5 In Process	1	2.55%	₹31,530	1.30%	₹25,224	1.45%
Subtotal	41	100.00%	₹2,504,725	100.00%	₹1,736,391	100.00%
Total	70	100.00%	₹10,137,719	100.00%	₹5,615,677	100.00%
OP						
6 Cashless						
6.1 Paid						
6.2 Denied due to document shortfall						
6.3 Denied due to Policy Exclusion						
6.4 Processed						
6.5 In Process						
Subtotal						
7 Reimbursement						
7.1 Paid						
7.2 Denied due to document shortfall						
7.3 Denied due to Policy Exclusion						
7.4 Processed						
7.5 In Process						
Subtotal						
Grand Total	70	100.00%	₹10,137,719	100.00%	₹5,615,677	100.00%

8 IP Claim Type	8.1 No. of IP Claims	8.2 Claims made per 100 Lives Insured
Cashless	28	2.22%
Reimbursement	39	3.09%
Total	67	5.31%

As of 27 Sep 2026 , 4 Claims with an Incurred amount of ₹92,071 are pending. Out of them 3 claims are under error log category

9 Claims Pending With	Medi Assist		Insurer		Member		Provider		Total	
	Claim Count	Incurred Amount (₹)	Claim Count	Incurred Amount (₹)	Claim Count	Incurred Amount (₹)	Claim Count	Incurred Amount (₹)	Claim Count	Incurred Amount (₹)
9.1 IP	2	₹57,377	1	₹19,419			1	₹15,275	4	₹92,071
9.1.1 Cashless							1	₹15,275	1	₹15,275
9.1.2 Reimbursement	2	₹57,377	1	₹19,419					3	₹76,796
9.2 OP										
9.2.1 Cashless										
9.2.2 Reimbursement										
Total	2	₹57,377	1	₹19,419			1	₹15,275	4	₹92,071

10 Claims that are in Error	Claim Count
Processed	2
In Process	1
Total	3

Savings Summary

Total Savings for the portfolio from Proportionate Deduction, Defined Benefit, Copay, Hospital Discounts , FWA, and Case Management is ₹4.15 Lakh

Classification	Claim Count	Savings (₹)
Policy Driven		
Proportionate Deduction	1	₹34,204
Defined Benefit	1	₹13,755
Copay	0	₹0
Others		
Hospital Discount	24	₹366,624
Case Management	0	₹0
*Fraud Waste and Abuse	0	₹0

• Includes Claims awaiting for insurer concurrence

**Please see the index page for more information on the policies that were used to generate this report.

Top 10 Distribution Across Providers (In-Patient Claims)

Ranking name	Claim Count	% Claim Count	Approved Amount (₹)	% Approved Amount
Medanta Abdur Razzaque Ansari Weavers Hospital	4	9.52%	₹1,212,352	26.05%
Max Super Speciality Hospital, Vaishali (A Unit Of Crosslay Remedies Limited)	3	7.14%	₹900,000	19.34%
Mumbai cancer centre	10	23.81%	₹745,526	16.02%
B L Kapur Memorial Hospital	4	9.52%	₹413,143	8.88%
Apollo Spectra Hospitals	1	2.38%	₹308,376	6.63%
Medanta The Medicity	2	4.76%	₹278,538	5.98%
Santevita Hospital	9	21.43%	₹240,203	5.16%
Fortis Flt Lt Rajan Dhall Hospital	1	2.38%	₹199,482	4.29%
Curie Abdur Razzaque Ansari Cancer Institute	6	14.29%	₹185,005	3.97%
Bhagwan Mahavir Medica Superspecialty Hospital	2	4.76%	₹171,602	3.69%
Total	42		₹4,654,227	

*Based on Settled/Processed Hospitalization Claims Incurred

Top 10 Ailment Group wise Summary (In-Patient Claims)

Ailment Name	Claim Count	%Claim Count	Approved Amount (₹)	% Approved Amount
CANCER	21	35.00%	₹1,902,674	34.58%
INJURIES / FRACTURES / DISLOCATIONS	2	3.33%	₹937,122	17.03%
DISORDERS OF THE GASTROINTESTINAL SYSTEM	9	15.00%	₹505,353	9.18%
CARDIAC DISORDERS	4	6.67%	₹488,110	8.87%
DISORDERS OF THE MUSCULOSKELTAL SYSTEM	2	3.33%	₹476,741	8.66%
DISORDERS OF BLOOD VESSELS	4	6.67%	₹413,143	7.51%
DISORDERS OF THE KIDNEY	5	8.33%	₹305,459	5.55%
GYNECOLOGICAL DISORDERS	5	8.33%	₹258,843	4.70%
MATERNITY	5	8.33%	₹138,906	2.52%
Others	3	5.00%	₹76,126	1.38%
Total	60		₹5,502,477	

*Based on Settled/Processed Hospitalization Claims Counts

Distribution Across Beneficiary and Age Wise Summary (In-Patient Claims)

Relation Type	Claim Count	% Claim Count	Approved Amount (₹)	% Approved Amount
Self	27	41.54%	₹3,820,215	68.52%
Spouse	36	55.38%	₹1,683,793	30.20%
Child	2	3.08%	₹71,170	1.28%
Parent				
Others				
Total	65		₹5,575,178	

Age Wise Summary (In-Patient Claims)

Age Band Bucket	Lives	Claim Count	% Claim Count	Approved Amount (₹)	% Approved Amount
0-5	1	1	1.54%	₹11,170	0.20%
6-10					
11-15	1	1	1.54%	₹60,000	1.08%
16-20					
21-25					
26-30	2	2	3.08%	₹60,020	1.08%
31-35	2	3	4.62%	₹66,242	1.19%
36-40	4	7	10.77%	₹289,520	5.19%
41-45	4	4	6.15%	₹345,949	6.21%
46-50	12	36	55.38%	₹3,719,944	66.72%
51-55	2	2	3.08%	₹47,212	0.85%
56-60	2	5	7.69%	₹427,263	7.66%
61-65	2	4	6.15%	₹547,858	9.83%
66-70					
71-more					
Not classified					
Total	32	65		₹5,575,178	

**Please see the index page for more information on the policies that were used to generate this report.

Utilization Report for Employees (In-Patient Claims)

No. of Claims	Employees Claim Count	% Claim Count	Approved Amount (₹)	% Approved Amount
1	8	29.63%	₹1,335,504	34.96%
2	8	29.63%	₹1,111,050	29.08%
3	3	11.11%	₹900,000	23.56%
4	8	29.63%	₹473,661	12.40%
5				
6				
7				
8				
9				
10				
Above 10				
Total	27		₹3,820,215	

Utilization Report for Dependents (In-Patient Claims)

No. of Claims	Dependents Claim Count	% Claim Count	Approved Amount (₹)	% Approved Amount
1	10	26.32%	₹446,249	25.43%
2	10	26.32%	₹342,876	19.54%
3				
4				
5				
6				
7	7	18.42%	₹172,774	9.84%
8				
9				
10				
Above 10	11	28.95%	₹793,064	45.19%
Total	38		₹1,754,963	

**Please see the index page for more information on the policies that were used to generate this report.

Insurer : | SBI General Insurance Co. Ltd.

Corporate** : | BIT Mesra

Report as on: 27 Sep 2026

Units in : Actuals

Distribution Across Amount Bands (In-Patient Cashless Claims)

Amount Band	Self		Spouse		Child		Parent		Others		Total			
	Claim Count	Approved Amount	Claim Count	Approved Amount	Claim Count	Approved Amount	Claim Count	Approved Amount	Claim Count	Approved Amount	Claim Count	%Claim ...	Approved Amount	% Appro...
Upto 10000	1	₹7,411									1	3.70%	₹7,411	0.19%
10001 - 25000	4	₹69,635	1	₹18,000							5	18.52%	₹87,635	2.27%
25001 – 50000	1	₹47,697	6	₹183,141							7	25.93%	₹230,838	5.97%
50001 – 75000	1	₹53,329			1	₹60,000					2	7.41%	₹113,329	2.93%
75001 – 100000	1	₹92,325									1	3.70%	₹92,325	2.39%
100001 – 200000	4	₹656,326	1	₹156,036							5	18.52%	₹812,362	21.02%
200001 – 300000	2	₹504,060									2	7.41%	₹504,060	13.04%
300001 – 400000	2	₹651,713									2	7.41%	₹651,713	16.87%
400001 - 500000	1	₹464,338									1	3.70%	₹464,338	12.02%
500001 - 750000														
750001 - 1000000	1	₹900,000									1	3.70%	₹900,000	23.29%
Above 1000000														
Total	18	₹3,446,834	8	₹357,177	1	₹60,000					27	100.00%	₹3,864,011	100.00%

Distribution Across Amount Bands (In-Patient Reimbursement Claims)

Amount Band	Self		Spouse		Child		Parent		Others		Total			
	Claim Count	Approved Amount	Claim Count	Approved Amount	Claim Count	Approved Amount	Claim Count	Approved Amount	Claim Count	Approved Amount	Claim Count	%Claim ...	Approved Amount	% Appro...
Upto 10000	1	₹7,188	5	₹26,449							6	15.79%	₹33,637	1.97%
10001 - 25000	4	₹69,029	4	₹66,349	1	₹11,170					9	23.68%	₹146,548	8.56%
25001 – 50000	2	₹72,339	9	₹299,130							11	28.95%	₹371,469	21.71%
50001 – 75000			3	₹204,978							3	7.89%	₹204,978	11.98%
75001 – 100000	1	₹98,943	5	₹434,445							6	15.79%	₹533,388	31.17%
100001 – 200000	1	₹125,882	2	₹295,265							3	7.89%	₹421,147	24.61%
200001 – 300000														
300001 – 400000														
400001 - 500000														
500001 - 750000														
750001 - 1000000														
Above 1000000														
Total	9	₹373,381	28	₹1,326,616	1	₹11,170					38	100.00%	₹1,711,167	100.00%

**Please see the index page for more information on the policies that were used to generate this report.



Insurer : SBI General Insurance Co. Ltd.
Corporate** : BIT Mesra

Report as on: 27 Sep 2026

Units in : Actuals

No. of Claims Pending with	Medi Assist	Insurer	Member	Provider	Total
IP					
Cashless					
A.1.1 Documents awaited					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.2 In process - Decision pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others				1	1
A.1.3 In process - Denial pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.4 In process - Payment pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
Subtotal				1	1
Reimbursement					
A.1.1 Documents awaited					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.2 In process - Decision pending					
Intimated to Insurer	1				1
Intimation pending					
Member Addition					
Others					
A.1.3 In process - Denial pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.4 In process - Payment pending					
Intimated to Insurer		1			1
Intimation pending					
Member Addition					
Others	1				1
Subtotal	2	1			3
Total	2	1		1	4
OP					
Cashless					
A.1.1 Documents awaited					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.2 In process - Decision pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.3 In process - Denial pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.4 In process - Payment pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
Subtotal					
Reimbursement					
A.1.1 Documents awaited					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.2 In process - Decision pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.3 In process - Denial pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
A.1.4 In process - Payment pending					
Intimated to Insurer					
Intimation pending					
Member Addition					
Others					
Grand Total	2	1		1	4

Particulars	Premium	Refund	Total
Opening Premium - Inception	0		0
Addition	0		0
Deletion		0	0
Post-Policy Expiry Addition	0		0
Post-Policy Expiry Deletion		0	0
Closing Premium	0	0	0

Month	Particulars	Premium	Refund	Total
Month-1	Opening Premium - Inception	0		0
Month-1	Addition	0		0
Month-1	Deletion		0	0
Month-2	Addition	0		0
Month-2	Deletion		0	0
Month-3	Addition	0		0
Month-3	Deletion		0	0
Month-4	Addition	0		0
Month-4	Deletion		0	0
Month-5	Addition	0		0
Month-5	Deletion		0	0
Month-6	Addition	0		0
Month-6	Deletion		0	0
Month-7	Addition	0		0
Month-7	Deletion		0	0
Month-8	Addition	0		0
Month-8	Deletion		0	0
Month-9	Addition	0		0
Month-9	Deletion		0	0
Month-10	Addition	0		0
Month-10	Deletion		0	0
Month-11	Addition	0		0
Month-11	Deletion		0	0
Month-12	Addition	0		0
Month-12	Deletion		0	0
Month-13	Post-Policy Expiry Addition	0		0
Month-13	Post-Policy Expiry Deletion		0	0
Closing Premium	Closing Premium	0	0	0

Glossary

Label	Description
1.0 Policy Lives	Details of insured members.
1.1 At Inception & Addition	Total lives at start and added during policy.
1.1.1 At Inception	lives covered from policy inception date.
1.1.2 Addition	Lives added via endorsement.
1.2 Deletion	Lives removed via endorsement.
1.3 Current Lives	At inception + additions - deletions.
2.0 Policy Premium	Breakdown of premium values.
2.1 First Time	Initial premium.
2.2 Addition	Premium added via endorsement.
2.3 Deletion	Premium reduced via endorsement.
2.4 Total Premium	First + Additions - Deletions.
2.5 Earned Premium	Premium applicable to elapsed policy period.
3.0 Claim Status	Indicates processing stage of claims.
4 IPD Cashless	In-patient claims where treatment cost is directly settled with the provider as per policy terms.
4.1 Paid	Payment completed and details available.
4.2 Denied – Document Shortfall	Denied due to missing documents.
4.3 Denied – Inadmissibility	Denied as per policy exclusions or inadmissible conditions.
4.4 Processed	Claims where processing is complete and ready for payment upload.
4.5 In Process	Under review, investigation, or awaiting inputs.
5 IPD Reimbursement	In-patient claims where the insured pays first and is reimbursed later as per policy terms.
6 OPD Cashless	Out-patient claims where the provider is paid directly.
7 OPD Reimbursement	Out-patient claims where the insured pays and is reimbursed.
9 Pending With	Claims pending with Medi Assist, Insurer, Member, or Provider.
9.1 IPD Pending	Count and amount of IPD claims pending.
9.1.1 Cashless	IPD claims processed as cashless.
9.1.2 Reimbursement	IPD claims processed as reimbursement.
9.2 OPD Pending	Count and amount of OPD claims pending.
9.2.1 Cashless	OPD claims processed as cashless.
9.2.2 Reimbursement	OPD claims processed as reimbursement.
8.1 IPD Claim Count	Total number of IPD claims.
8.2 Claims per 100 Lives (%)	Claim frequency per 100 insured lives.
10 Claims that are in Error	Claims that are in Error

**Please see the index page for more information on the policies that were used to generate this report.