## Health Insurance Aditya Birla Health Insurance Co. Limited



## Service Level TAT's:

S. No	SERVICE	DESCRIPTION OF ITEM OF SERVICE	Regulatory Turnaround Time
1	New Business Proposal Processing	Processing of Insurance Proposal and seeking further requirements for consideration of the proposal	7 days
		Decision on proposal from the date of receipt of proposal or from the date of receipt of additional requirement whichever is later	
		Providing copy of the policy along with the proposal form	15 days
		Free look cancellation and refund of deposit from the date of receipt of the request	7 days
2	Post Policy Service Request	Post Policy Service Requests concerning mistakes / corrections in the Policy document	7 days
3	Policy Servicing (from the date of receipt of request for the service specified)	Change of Address (KYC Norms to be complied)	
		Registration /Change of Nomination, Assignment.	
		Alteration in Original Policy Conditions (where applicable)	
		Issuance of duplicate policy	7 days
		Inclusion of new member in case of group policies	
		Any other non-claim related changes	
		Cancellation of policy and refund of premium	
4	Claims	Acceptance of cashless claims by TPA /company to Hospital and communicate to them	1 hour
		TPA's offer of settlement to the Insurer / Hospital after submission of document	3 hours
		Settlement of claims (other than cashless)	15 days

S. No	SERVICE	DESCRIPTION OF ITEM OF SERVICE	Regulatory Turnaround Time
5	Auto Action by the Insurer	Premium Due Intimation	One Month Before Due date
6	Complaints	Acknowledge to complaint	Immediately
		Seek and obtain further details, if any, from the complainant (permitted only once)	Within one week
		Action on Complaint &	14 days
		Intimation of Decision to the complainant	
		If complaint is NOT resolved by the Insurer,	14 days from original date of receipt of complaint.*
		communicate the details to the Policyholder	
		of options including referring the complainant	
		to	
		Insurance Ombudsman / Consumer Court	
		Closure of grievance on non-receipt of reply from the complainant	Within eight weeks

<sup>\*(</sup>The policyholder may approach the Insurance Ombudsman if his / her complaint is not resolved within 30 days or if the decision of the company is not acceptable to the policyholder.)