



ANNUAL REPORT

2018-19



EXECUTIVE COUNCIL OF INSURERS

MEMBERS OF THE EXECUTIVE COUNCIL OF INSURERS

Chairperson (Vacant) as on 31.03.2019



Shri Nilesh Sathe, Member Life,
IRDAI – Member



Ms. Mudita Mishra, Director, DFS,
Ministry of Finance – Member



Shri A.V.Girijakumar, Chairman, GIPSA & CMD,
Oriental Insurance Co. Ltd. – Member



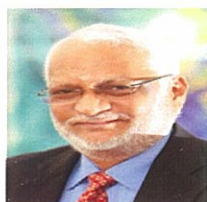
Shri Sanjeev Nautiyal, MD & CEO,
SBI Life Insurance Co. Ltd. –Member



Ms. Vibha Padalkar, MD & CEO,
HDFC Standard Life Insurance Co. Ltd. – Member



Shri Bhargav Dasgupta, MD & CEO, ICICI Lombard,
General Insurance Co. Ltd. – Member



Shri S. S. Gopalarathnam, MD & CEO,
Cholamandalam MS General Insurance Co. Ltd.
- Member



Shri Antony Jacob, CEO,
Apollo Munich Health Insurance Co. Ltd.
- Member

MEMBERS OF THE EXECUTIVE COUNCIL OF INSURERS

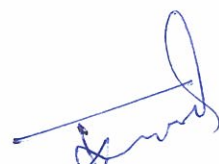
1	<p>Shri V.K.Sharma, Chairman, LIC of India and Chairman, ECOI (18.05.2017 to 31.12.2018)</p> <p>Shri Hemant Bhargava, Current-In-Charge & MD, LIC of India and Chairman, ECOI (01.02.2019 to 13.03.2019)</p>
2	Sri Nilesh Sathe, Member Life, IRDAI - Member
3	<p>Shri Sudhir Shyam, Director DFS, Ministry of Finance – Member (18.05.2017 to 07.03.2019)</p> <p>Ms. Mudita Mishra, Director DFS, Ministry of Finance – Member (08.03.2019 till date)</p>
4	<p>Shri G. Srinivasan, GIPSA & Chairman-cum-MD, New India Assurance Co. Ltd. – Member (18.05.2017 to 31.07.2018)</p> <p>Sri A.V. Girijakumar, Chairman, GIPSA & Chairman-cum-MD, Oriental Insurance Co. Ltd. – Member (25.09.2018 till date)</p>
5	<p>Shri Arijit Basu, MD & CEO, SBI Life Insurance Company Ltd. – Member (18.05.2017 to 24.09.2018)</p> <p>Shri Sanjeev Nautiyal, MD & CEO, SBI Life Insurance Co. Ltd. – Member (25.09.2018 till date)</p>
6	<p>Shri Amitabh Chaudhry, MD & CEO, HDFC Standard Life Insurance co. Ltd. – Member (18.05.2017 to 24.09.2018)</p> <p>Smt Vibha Padalkar, MD & CEO, HDFC Standard Life Insurance Co. Ltd. – Member (25.09.2018 till date)</p>
7	Sri Bhargav Dasgupta, MD & CEO, ICICI Lombard General Insurance Co. Ltd. - Member
8	Sri S. S. Gopalarathnam, MD & CEO, Cholamandalam MS General Insurance Co. Ltd. - Member
9	Sri Antony Jacob, CEO, Apollo Munich Health Insurance Co. Ltd. - Member

ANNUAL REPORT FOR THE YEAR 2018-19

We have the pleasure to present the Consolidated Annual Report and Audited Accounts of the office of the Executive Council of Insurers for the financial year ended as on 31st March, 2019.

The report has been prepared as per provisions of Insurance Ombudsman Rules, 2017.

We welcome valuable feedback to make the annual report more meaningful.

A handwritten signature in blue ink, appearing to be 'S. S. S.', is written over a horizontal line. To the right of the signature, the date '15.10.19' is written in blue ink.

15.10.19

SECRETARY GENERAL
Executive Council of Insurers

OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS

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(A) INTRODUCTION

The institution of Insurance Ombudsman was created by the Government of India under the Redressal of Public Grievances Rules, 1998, notified in official gazette, on 11th Nov. 1998. The rules have been replaced by Insurance Ombudsman Rules, 2017. The Executive Council of Insurers (earlier called Governing Body of Insurance Council, G.B.I.C.) prepares a panel through an open process by inviting applications from amongst the eligible candidates and the selection process shall be in accordance with the selection criteria finalised by the Executive Council of Insurers with the approval of the Central Government in the Ministry of Finance. An Ombudsman shall be selected from amongst persons having experience of the insurance industry, civil service, administrative service or judicial service. This institution was created to provide cost-effective, impartial, efficient and speedy resolution of grievances to aggrieved policyholders.

In terms of Rule 20 of RPG Rules, Insurance Ombudsmen were required to furnish a report every year, to the Government of India, containing a review of quality of services rendered by Insurers and recommendations on improving these services, the activities of the office of Ombudsman during the preceding financial year, and other information considered necessary. Government vide its letter Ref: F.No.11/02/2001-Vig (Ins.) dated 9th October 2001 (copy enclosed), directed the Governing Body of Insurance Council (GBIC) to consolidate the annual reports of all Insurance Ombudsmen and submit along with their considered views / comments to Government of India. Accordingly, annual reports from the year 2002-2003 are being consolidated every year at the Office of GBIC and submitted to the Government of India and I.R.D.A.I.

Consequent upon notification of Insurance Ombudsman Rules, 2017 the practice is being continued as the rule 18(2) of Insurance Ombudsman Rules, 2017 also specifies that Executive Council of Insurers will furnish a report containing a general review of the activities of Insurance Ombudsman during the preceding financial year and such other information as it may consider necessary to the Central Government and I.R.D.A.I by 30th September.

The annual reports for the financial year 2018-19 have been received from all Offices of the Insurance Ombudsman. A brief of the reports, highlighting their observations and suggestions is also reproduced in subsequent pages.

In the financial year under reference:

- The Insurance Ombudsman Rules 2017, which superceded the Redressal of Public Grievances Rule 1998, was effective from 27th April 2017.
- All the Offices of Insurance Ombudsman have confirmed that the prescribed procedures as envisaged in Insurance Ombudsman Rules 2017, in dealing with complaints have been followed.
- Appointment of Insurance Ombudsman at ten Offices of the Insurance Ombudsman, Ahmedabad, Bengaluru, Bhopal, Chandigarh, Chennai, Guwahati, Hyderabad, Jaipur, Kochi (Ernakulam) and Mumbai was approved by Department of Financial Services. All the Insurance Ombudsman had joined their offices during the year 2018-2019 except Insurance Ombudsman, (designate) Ahmedabad.
- The process of appointment of Insurance Ombudsman at the offices of Insurance Ombudsman, Ahmedabad, Delhi, Bhubaneshwar, Kolkata, Lucknow, Noida, Patna and Pune started during the year 2018-19 with the advertisement published on 10.10.2018 in Hindi and English newspaper
- Additional charge of vacant offices was allotted to all the Insurance Ombudsman with effect from 12.10.2018, as following:

SL.NO.	Name of Insurance Ombudsman	Name of Office
1	Ms. Neeraja Shah, Bengaluru	Pune
2	Shri Guru Saran Shrivastava, Bhopal	Lucknow
3	Shri M.Vasantha Krishna, Chennai	Ahmedabad
4	Shri K.B.Saha, Guwahati	Kolkata
5	Shri I. Suresh Babu, Hyderabad	Bhubaneswar
6	Ms. Sandhya Baliga, Jaipur	Delhi & Noida
7	Shri Milind Kharat, Mumbai	Patna

- Offices of the Insurance Ombudsman have conducted outstation hearings for the convenience of the complainants as envisaged in the Rules, wherever required.
- Periodical meetings were conducted by the Ombudsman offices with insurers in order to impress upon them to reconsider the complaints, particularly those cases where prima facie the decision of the insurer to repudiate the claim was found incorrect/ not in line with the policy terms and conditions. Complaints were re-examined and settled by insurers after intervention of the offices of Ombudsmen.

- Offices of the Insurance Ombudsmen are regularly submitting their monthly returns in respect of complaint statistics, Trial Balance, bank reconciliation etc., in time.
- As per the feedback received from all Offices of the Insurance Ombudsman, the Complaints Management System (CMS) module is working smoothly at all the Offices of Insurance Ombudsmen.
- Overall ratio of complaints received, disposed of and outstanding during the financial year 2018-19 in the Offices of Insurance Ombudsmen -

	Complaints at the beginning of the year		Complaints Received		Disposed off		Outstanding	
	Total Number	%	Total Number	%	Total Number	%	Total Number	%
Life	5320	50.27	11859	52.33	12103	55.10	5076	45.0
Non-life	5263	49.73	10805	47.67	9864	44.90	6204	55.0
TOTAL	10583	100	22664	100	21967	100	11280	100

- During the year lease agreement of Office of Insurance Ombudsman, Bengaluru was renewed.
- Dr.Subhash Khuntia, Chairman, IRDAI visited the Office of Insurance Ombudsman, Mumbai and office of ECOI on 15.06.2018.

Chairman, IRDAI discussed the following points with the officials-

- Adequate staffing should be there in all Insurance Ombudsman Offices.
- As far as possible, ECOI should meet twice in a year.
- Office of ECOI should also have a few officers on deputation from GICs.
- He advised for preparing a plan for disposal of pending complaints. He made a comment that some more staff from non-life companies can be engaged for a month or two for the disposal of work, as office of Insurance Ombudsman, Mumbai, has majority of complaints related to non-life insurance.
- He was happy to note that November 11, was celebrated as Bima Lokpal Day across the country for creating awareness about the institute of ombudsman.

- He suggested that analysis of compliance in the Annual Report should also be presented in the form of pie diagrams or bar charts. He noted the importance of phone numbers / toll-free numbers of insurance companies being available in a conspicuous place in the policy bond.
 - If compliance of award given by Ombudsman is delayed, a DO letter should be written to CMDs / CEOs of the related insurance company.
 - He noted that there was some problem related to the number of passwords which was creating a hurdle in reporting prompt compliance of awards. He advised that more passwords may be given to insurance companies in the matter wherever required.
 - All officers need to have sympathetic attitude towards the complainants.
 - In view of the complexity of insurance business, there is a great need to simplify procedures.
 - Efforts are needed to be made for change in attitude of public towards insurance.
 - Growth of insurance business indirectly helps the economy. For growth of business, addressing the grievances of policyholders is a pre-requisite.
- Offices of Insurance Ombudsman, Guwahati and Jaipur have disposed all the grievances received at their end, with “NIL” outstanding complaints at the end of the year 2018-19.
- Office of Insurance Ombudsman, Guwahati was the first to submit their audited and certified final accounts for the financial year 2018-19 as on 05.04.2019.
- 1st meeting of the Insurance Ombudsmen was held on 18th September, 2018 at IRDAI office, Hyderabad. The meeting was presided over by the Chairman, IRDAI, and was attended by all the Ombudsman, officers of ECOI and IRDAI.

On the basis of discussion held in the 1st meeting of the Insurance Ombudsman following is the summary of action taken during the year –

Sl.No.	Points of minutes of meeting	Action taken
1	Shri Nilesh Sathe, Member (Life) mentioned about the vacancy position in the offices of Insurance Ombudsman.	The process of appointment of Insurance ombudsman in vacant offices of Insurance Ombudsman (OIOs) is under way and the same shall be completed shortly. Further, in October, 2018 additional charge of the vacant offices of the Insurance Ombudsman was given to existing Ombudsman.

2	Chairman (IRDAI) advised ECOI to work in coordination with IRDAI in designing simplified and standardised format in line with Rule 14(1) & (2) of Insurance Ombudsman Rules, 2017.	As advised standardised formats were developed and the same contain all the details required under Rule 14(1) & (2) of Insurance Ombudsman Rules, 2017.
3	Chairman advised Insurance Ombudsman to act fairly and impartially at all times.	Insurance Ombudsman adhere to the instructions laid down in Rules 16 & 17 of the Insurance Ombudsman Rules, 2017.
4	Chairman instructed the Ombudsmen to ensure adherence to the time limit prescribed for issue of final orders.	Owing to huge backlog accumulated prior to appointment of Insurance Ombudsmen, it is difficult, at present, to adhere to the prescribed limit. However, OIOs have been advised to increase their efforts in the matter.
5	Chairman advised the Ombudsmen to pass reasoned orders ex-parte after giving two chances to the Insurance Companies to reply.	OIOs are adhering to the advice of the Chairman IRDAI.
6	Chairman desired that IRDAI should write to insurers to ensure that the policy contains contact phone number of issuing office, Head Office and Grievance Redressal Officer. Further, the insurance companies should have a dedicated toll-free number for complaints. He further suggested that each company should designate a nodal officer with whom each Office of the Ombudsmen can interact. The list should be available in the website of ECOI and IRDAI.	Office of ECOI had vide letter dated 29.03.2019 requested the CEOs of the Insurance Companies to provide with the details regarding the official designated as nodal officer for each Ombudsman offices. The same is being compiled at ECOI. Further, Office of ECOI also intimated the list of nodal officers of each insurance company received from IRDAI to all the OIOs. The process of displaying the same on its website is in progress.
7	Chairman, IRDAI advised Ombudsmen to clear the overdue complaints expeditiously and after fixing a strict time limit, remove the non-entertainable claims out of the pendency list. He further suggested monitoring of the implementation of awards by insurers.	The backlog of complaints was due to non-availability of Insurance Ombudsman in almost all the OIOs. Presently, Insurance Ombudsman are posted in 9 OIOs and additional charge was given to existing Insurance Ombudsman in 8 OIOs. Efforts are made by the Offices of Insurance Ombudsman to reduce the backlog of complaints. 2 Offices of Insurance Ombudsman viz. Guwahati and Jaipur have succeeded in reducing outstanding complaints to NIL as on 31.03.2019 Monitoring of implementation of awards is being done.
8	Chairman, IRDAI advised ECOI to select experienced and knowledgeable retired officers from	Notification and advertisement for selection of Professional Experts (life and non-life) in various Offices of Insurance

	GIPSA to fill vacancy on the general insurance side in the Offices of Ombudsman. He mentioned that a balance should be maintained between the number of serving officers on deputation from PSUs and those engaged on contractual basis.	Ombudsman was issued and applications have been received. The work of scrutiny of applications is over and we shall conduct the interviews for appointment of Professional Experts shortly.
9	He also advised ECOI to make additional charge arrangement for the posts of Ombudsmen by entrusting additional charge to those Ombudsmen who have comparatively less outstanding complaints and also looking into the aspect of distance.	Additional charge of vacant Offices of Insurance Ombudsman has been given to existing Insurance Ombudsman.
10	Chairman (IRDAI) advised ECOI to review the progress of disposal of cases by the Insurance Ombudsmen on a monthly basis and update the review on their website. He advised ECOI and Ombudsmen to keep track of two important parameters. (a) Disposal as a % of number of complaints received during a given time period. This ratio should be more than 100% in order to reduce pendency of earlier period. (b) Disposal as a percentage of total of (Outstanding complaints at the beginning of the period complaints received during the period)	All the offices have been advised to dispose off the complaints on a war footing so that no complaint remains outstanding beyond 3 months. The offices have been requested to submit a fortnightly progress report of complaints disposed and pending at their end. The same is being monitored at our end. Office of ECOI is also forwarding fortnightly statements of complaints to IRDAI for information. The statistics showing the two parameters as mentioned under Point 18(a) & (b) is sent to IRDAI for information. The statistics of complaints will be displayed on the website shortly.
11	Chairman advised ECOI to publish the full text of awards on the websites of respective Ombudsmen instead of only synopsis. Further, the synopsis should be written by competent personnel so that it adequately reflects the nature of the issue, the orders and the brief rationale	Office of ECOI had called for full text of awards from all the Offices of the Insurance Ombudsman. The work of compilation of full text of awards is under process and the same shall be displayed shortly.
12	ECOI mentioned about the next Council meeting scheduled to be held on 25 th September, after which a compendium of instructions will be circulated to all the stakeholders.	A compendium of instructions on ECOI and Office of Insurance Ombudsman was placed before the Council Meeting held on 25 th September 2018 and same was noted in the Meeting. Copy of the compendium was circulated amongst Office of ECOI and Offices of Insurance

		Ombudsman on 31.10.2018.
13	A concern was raised about the lack of monitoring on attendance of staff in the Offices of Insurance Ombudsman. Member (Life) advised ECOI to implement bio-metric system to record the attendance of the employees. Chairman advised that Secretaries of each office should ensure the punctuality of officials during office hours under the overall guidance and control of Ombudsmen.	The work of bio-metric system to record the attendance of employees posted at ECOI and Offices of Insurance Ombudsman is under process. In the meanwhile, Offices of Insurance Ombudsman are instructed to submit daily presence at 11 a.m. by email to ECOI and the same are being monitored by office of ECOI.
14	Chairman advised ECOI to include detailed information on center-wise number of complaints and disposed, financial reports and general recommendations in their Annual Report.	Information as per suggestions of Chairman IRDAI will be incorporated in the current Annual Report which will be published shortly.
15	Awareness about ombudsman among citizens is very low. In response, Chairman suggested all the Ombudsmen to undertake awareness activities in their jurisdiction to educate the people.	Bima Lokpal Day was celebrated in OIOs on 12 th November 2018. Press release was issued by OIOs in leading newspapers. Awareness session on insurance related frauds, mis-selling etc. and role of Insurance Ombudsman was organised by OIOs on Bima Lokpal Day. OIOs had also conducted an Interaction with officials of Insurance Companies, media, agents and policy holders on the same day. OIO, Delhi in collaboration with Noida and Jaipur ran a radio programme throughout the day on 12.11.2018 to create awareness about the Insurance Ombudsman Scheme as also to alert people about fraudulent calls etc. OIO, Chennai also covered the programme on All India Radio and Doordarshan.
16	Chairman clarified that Ombudsmen have the authority to award compensation not exceeding rupees thirty lakhs (including relevant expenses, if any)	Now, OIOs are strictly adhering to Rule 17(3)(ii) of Insurance Ombudsman Rules 2017.
17	A lot of mis-selling is done by retail brokers. A list of blacklisted agents / brokers should be published in the website. Chairman stated that action	As stated in Rule 13(1)(f) of the Insurance Ombudsman Rules, 2017 OIOs are receiving and considering complaints or disputes relating to policy-servicing related grievances against

	<p>against any agent or broker doesn't come under the purview of Ombudsman, however as per Rule 13(1) (f) , "The Ombudsman shall receive and consider complaints or disputes relating to policy-servicing related grievances against insurers and their agents and intermediaries."</p>	<p>insurers and their agents and intermediaries.</p>
18	<p>Typing or clerical error in the order should be allowed to be corrected by the Ombudsmen.</p> <p>The Chairman asked the ECOI to look into it.</p>	<p>Awards/recommendations prepared by officials of OIOs are duly approved and signed by Insurance Ombudsman before uploading the same in the CMS Module. Corrections in awards/recommendations can be effected at the concerned office itself till the signed copy is uploaded in the CMS Module. Once the awards/recommendations are duly signed by the Insurance Ombudsman, the same are uploaded in the CMS Module and forwarded to the complainant and the insurer. Thereafter, corrections in the awards/recommendations are generally not allowed in order to avoid misuse of the facility as explained by Secretary General (ECOI) in the meeting. However, in exceptional circumstances an award/recommendation is being uploaded in CMS Module after correction at ECOI level only after receipt of satisfactory justification from the Office of Insurance Ombudsman.</p>
19	<p>Leave entitlement of Ombudsmen is not clear and is still pending with DFS for approval.</p> <p>Chairman advised to follow the old rule in the interim period till the new rules are approved, and stated that he would write to DFS on the issue of finalisation of perks and benefits.</p>	<p>The Ministry of Finance vide letter dated 3rd/4th December 2018 had communicated the pay, allowances and perquisites payable to Insurance Ombudsman as per Insurance Ombudsman Rules 2017. We had vide letter dated 2.1.2019 sought clarification from Ministry of Finance with respect to rules relating to tour/travel, leave etc.</p> <p>It was decided in the 3rd Council Meeting held on 1st February 2019 that till the decision of DFS is received, the rules related to tour/travel etc. and leave as applicable to Executive Director in LIC of India shall be applicable to Insurance Ombudsman. Further, in the meeting held on 1.2.2019, it was decided to convey the recommendation as above for approval to DFS. The same was conveyed to the Ministry of Finance vide our letter dated 12.2.2019. We have again vide letter dated 2.5.2019 requested Ministry of Finance to convey their decision. The same is awaited.</p>

20	CAD suggested integrating IGMS with complaint portal of ECOI so that IRDAI can follow up with the respective companies. This was agreed to.	Access to Complaint Management System (CMS) Module has been given to officials of IRDAI on 16 th January 2019 and same was conveyed vide email dated 16 th January 2019.
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Chairman, IRDAI highlighted the duties and functions of the Ombudsmen. He advised the Ombudsmen to identify systemic issues to avoid delay. While protecting the public interest, Ombudsmen should also maintain neutrality and fairness. With their impartial awards, both the parties involved should have a feeling of satisfaction, having approached Ombudsman for justice.

(A1) Gist of decisions taken in the 2nd meeting of Executive Council of Insurers

The second Meeting of Executive Council of Insurers (ECOI) was convened on 25th September, 2018. The major decisions approved in this meeting are as following –

- I. It was decided by the council that the following procedure for sharing of expenses under Rule 12(2), 12(3) and 12(4) of Insurance Ombudsman Rules, 2017 will be followed from the financial year 2019-20 onwards-
 1. Approval of annual budget of the office of Executive Council of Insurers and its 17 Ombudsman offices in the Council meeting of ECOI.
 2. The amount of total approved budget will be divided equally between Life Insurance segment and General Insurance segment.
 3. Life Insurance (LI) Council and General Insurance (GI) Council will share the expenses equally (i.e. 50% by LI council and 50% by GI council) and remit the approved budgeted amount as in (2) above in advance on quarterly basis to the office of Executive Council of Insurers.

It was further decided that the present practice regarding the sharing of expenses will continue till the end of financial year 2018-19.

- II. The council passed the resolution in respect of engagement of retired officers from GIPSA and Life Insurance Companies and amendments to instructions for Contractual Engagement of retired officers of General Insurance and Life Insurance Companies.
- III. Report on the visit of Dr. Subhash Khuntia, Chairman, IRDAI on 15.06.2018 to the office of Insurance Ombudsman, Mumbai and office of ECOI as presented, was taken on record.
- IV. Report on the meeting with Department of Financial Services, Ministry of Finance was presented and the same was taken on record.

- V. The council approved and passed the modified Financial Power (Standing) Order, 2018 and Stores Code 2018 for the office of ECOI and the Offices of Insurance Ombudsman.
- VI. The guidelines for destruction of old records for the office of ECOI as well as for the Offices of Insurance Ombudsman were approved by the council and taken on record.
- VII. Secretary General informed the council that as on date of meeting, Eight Insurance Ombudsmen have been appointed in Bengaluru, Bhopal, Chandigarh, Chennai, Guwahati, Hyderabad, Jaipur and Mumbai. Further, the council approved the proposal to give temporary additional charge to the Ombudsman wherever required either out of vacancy at any Office of Insurance Ombudsman or due to heavy backlog of outstanding complaints in future.
- VIII. The ground rules for the employees deputed to the office of the Executive Council of Insurers and Offices of the Insurance Ombudsman were placed before the Council and the same were approved and taken on record.
- IX. Introduction of biometric system for recording attendance of the employees on deputation to the office of the Executive Council of Insurers and Offices of the Insurance Ombudsman approved by the Council. Provisional budget of Rs. 900000/- for purchase of Biometric system approved.
- X. Council approved not to charge any fee for providing photocopying charges under RTI Act, 2005, at the discretion of the CPIO where total fee for providing copies of documents under one RTI application does not exceed Rs.20.00.
- XI. For officials coming on deputation need of a compendium on various rules, a provision etc. was felt necessary. Secretary General (ECOI) placed before the council the compendium for office of ECOI and Offices of Insurance Ombudsman. The council appreciated the work and took note of the compendium.

(A2) Gist of decisions taken in the 3rd meeting of Executive Council of Insurers

The third meeting of Executive Council of Insurers (ECOI) was conducted on 1st February, 2019. The major decisions approved in this meeting are as following –

- a) Shri Hemant Bhargava, Chairman In-charge & MD of L.I.C of India, was elected as Chairperson of ECOI in this meeting.
- b) The proposal for renewal of Lease Deed for Office of Insurance Ombudsman, Bengaluru approved by the council.
- c) The Council advised that the selection process of Insurance Ombudsman has to be expedited in view of large number of complaints pending.
- d) The council authorized Secretary General to approve the transfer of complaints from one territorial jurisdiction to another in exceptional circumstances and to report to the Council in the following meeting.
- e) Secretary General informed the Council that a meeting was convened by Shri N. Srinivasa Rao, Economic Advisor, DFS in his office on the 25th of January, 2019 at 11.00 A.M. to review the status of appointment of Insurance Ombudsmen in the vacant offices. In the meeting with DFS the details of advertisement of vacant posts, stream wise number of applications received, stream wise number of eligible applications, etc. and the status of selection process were discussed.
- f) The Council advised that requirement of Professional Experts needs to be assessed and further action should be initiated in this regard.

A3) Gist of Circulars issued by Office of ECOI during the year 2018-19		
Cir no	Date	Subject
252	17.05.2018	Appointment of Insurance Ombudsman at Bengaluru, Chandigarh, Chennai, Guwahati, Jaipur and Mumbai
253	11.06.2018	Appointment of Insurance Ombudsman at Bhopal and Hyderabad
254	21.06.2018	Monthly statement of leave availed
255	21.06.2018	Printing of stationery
256	26.06.2018	Classification of work among officials working in offices of Insurance Ombudsman
257	28.06.2018	Standard Configuration for computers
258	11.07.2018	Insurance Ombudsman Rules, 2017
259	11.07.2018	Sanction of leave availed
260	31.07.2018	Administrative Instructions with regard to Right to Information Act, 2005
261	14.08.2018	Issue of Identity cards
262	05.09.2018	Reply to be submitted in respect of legal cases received from High court / Consumer Dispute Redressal forum / arbitration
263	08.10.2018	Synopsis of Awards
264	09.10.2018	Guidelines for Preservation and Destruction of Old Records for the office of Executive Council of Insurers
265	09.10.2018	Revised guidelines for Preservation and destruction of old records for Offices of Insurance Ombudsman
266	09.10.2018	Ground rules for the office of Executive Council of Insurers and Offices of Insurance Ombudsman
267	09.10.2018	Office Discipline
268	12.10.2018	Administrative Instructions with regard to Right to Information Act, 2005
269	12.10.2018	Maintenance of Imprest Cash and Safe
270	12.10.2018	Approval of modified financial power (Standing Order), 2018 for the office of ECOI & OIO
271	15.10.2018	Appointment of External Auditors
272	15.10.2018	Temporary additional charge to vacant Offices of Insurance Ombudsman
273	06.11.2018	Standard configuration for computers
274	09.11.2018	Insurance Ombudsman appointment at Kochi – dt 09.11.2018
275	28.11.2018	i) Appointment of / extension to P.E. on contractual basis. (ii) Seeking opinion of p.e. in a case
276	10.12.2018	Uploading of Awards
277	13.12.2018	Insurance of Cash-in-transit and safe custody

278	07.01.2019	Monthly statement of visit of Insurance Ombudsman
279	17.01.2019	DAVP rates for newspaper advertisements
280	18.01.2019	Direction of Hon'ble Court for depositing the amount with the Offices of Insurance Ombudsman under legal cases
281	24.01.2019	Delay in Compliance of Awards
282	04.02.2019	Election of New Chairman – Mr. Hemant Bhargav
283	05.02.2019	Training of deputed officials
284	08.02.2019	Legal cases
285	15.02.2019	Submission of letter to the High Court/Consumer Dispute Redressal Forum/Arbitration in respect of legal cases
286	22.02.2019	Accounting procedure for travelling expenses paid for the visit by Hon'ble Insurance Ombudsman to OIO's (additional charge) for hearings
287	22.02.2019	Internal meetings of insurers: Invitation by insurance company to (1) Insurance Ombudsman (2) Other officials of the Offices of Insurance Ombudsman
288	11.03.2019	Clarification regarding provision of Depreciation on fixed asset
289	11.03.2019	Instructions for closing of Accounts as at 31.03.2019
290	13.03.2019	Designation of deputationist from non-life insurance companies
291	14.03.2019	Non-compliance of awards passed by Ombudsman
292	18.03.2019	Accounting procedures for the Offices of Insurance Ombudsman and Office of Executive Council of Insurers

(A4) TERRITORIAL JURISDICTION OF INSURANCE OMBUDSMEN			
Sr. No.	Name of the Office and Year of Inception	State-wise Area of Jurisdiction	Name of the Current Ombudsman
1	Ahmedabad- July, 1999	State of Gujarat and Union Territories of Dadra and Nagar Haveli and Daman and Diu.	Vacant since 20.07. 2014
2	Bengaluru-August, 2014	State of Karnataka	Ms Neerja Shah joined on 23.04.2018
3	Bhopal- April, 2000	States of Madhya Pradesh and Chhattisgarh	Shri Guru Saran Srivastava joined on 24.05.2018
4	Bhubaneswar-May, 2000	State of Orissa	Vacant since 21.07.2017
5	Chandigarh-July, 1999	States of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and Union Territory of Chandigarh	Dr Dinesh Kumar Verma joined on 16.04.2018
6	Chennai- August, 1999	State of Tamil Nadu and Union Territories- Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).	Shri M. Vasantha Krishna joined on 03.05.2018
7	Delhi-July, 1999	State of Delhi	Vacant since 14.07.2017
8	Guwahati-September, 1999	States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.	Shri Kiriti B. Saha joined on 02.05.2018
9	Hyderabad- August, 1999	State of Andhra Pradesh Telangana and Union Territory of Yanam and part of Union Territory of Pondicherry.	Sri I.Suresh Babu joined on 11.06.2018
10	Jaipur- October, 2014	State of Rajasthan	Ms. Sandhya Baliga joined on 13.04.2018
11	Kochi-June, 2000	States of Kerala and Union Territory of (a) Lakshadweep (b) Mahe- a part of Union Territory of Pondicherry	Ms. Poonam Bodra joined on 07.11.2018
12	Kolkata- March, 2000	States of West Bengal, Sikkim and Union Territories of Andaman & Nicobar Islands	Vacant since 29.07.2017

13	Lucknow –October, 1999	Districts of Uttar Pradesh Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajganj, Santkabirnagar, Azamgarh, Kushinagar, Gorakhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharthnagar.	Vacant since 03.08.2017
14	Mumbai- November, 2000	State of Goa and Mumbai Metropolitan Region excluding Areas of Navi Mumbai and Thane.	Shri Milind Kharat joined on 04.05.2018
15	Noida - September 2014.	State of Uttaranchal and the districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farukkabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.	Vacant since 31.12.2017
16	Patna- September, 2014	States of Bihar and Jharkhand	Vacant since 09.09.2017
17	Pune- September, 2014	State of Maharashtra - Areas of Navi Mumbai and Thane but excluding Mumbai Metropolitan.	Vacant since 10.09.2017

(B)

ACCOUNTS

All the Offices of the Insurance Ombudsman have submitted their audited Trial Balances as at 31.03.2019. M/s NBS & Co., Chartered Accountants, Mumbai who have been appointed as External Auditors for conducting the audit of consolidated accounts of the Executive Council of Insurers and all Offices of the Insurance Ombudsman for the financial year 2018-2019 have completed their Audit and signed the Accounts.

Consolidation of Final Accounts at ECOI for all the Offices of the Insurance Ombudsman and Office of the ECOI was done in an automated manner, through "Tally-ERP 9" Package where consolidated statements of accounts were generated automatically without error.

As per the earlier decision of the Executive Council of Insurers, from fiscal year 2016-2017, the funding of the expenses of ECOI (erstwhile GBIC) and the Offices of Insurance Ombudsmen was changed and based on the previous year's Market share, the share of expenses was collected in advance from Member Companies. These advances were later adjusted as per actual share and thereafter properly accounted.

It may be mentioned that the Rule 12 (2) of the Insurance Ombudsman Rules, 2017 prescribed that the expenses for offices of the Insurance Ombudsman and office of Executive Council of Insurers was to be borne by the Life Insurance Council and General Insurance Council. However, since the new rules were promulgated on 25.04.2017 and the process for collecting funds had already been initiated, Executive Council in its first meeting held on 18.05.2017 permitted office of the Executive Council of Insurers to continue with the existing practice for the financial year 2018-19.

A copy of the consolidated Audit Report for office of the Executive Council of Insurers and the Offices of the Insurance Ombudsman along with the Income and Expenditure Account and Balance Sheet as at 31.03.2019 is placed below as Annexure.



NBS & CO.

Chartered Accountants

14/2, Western India House, Sir P. M. Road, Fort, Mumbai - 400 001.

Tel. : (91-22) 2287 0588 / 0939 / 4140, 2288 5229 • Fax : (91-22) 2288 4910

E-mail : admin@nbsandco.in • Web : www.nbsandco.in

Independent Auditor's Report

To,

The Secretary,

The Executive Council of Insurers & 17 Offices of Insurance Ombudsmen,

3rd Floor, Jeevan Seva Annexe,

Off. S.V. Road, Santacruz (West),

Mumbai – 400054.

Report on the Financial Statements

1. We have audited the attached Balance Sheet of **Executive Council of Insurers & 17 Offices of Insurance Ombudsmen** (ECOI and its offices) as at 31st March, 2019 and the Statement of Income & Expenditure for the year then ended and a summary of significant accounting policies and other explanatory information. The financial statements of 17 Offices of Insurance Ombudsmen have been included and consolidated in the attached Balance Sheet and Statement of Income and Expenditure out of which 16 offices(List of 16 offices not audited by us are annexed herewith) are audited by other Auditors and same has been relied upon by us.

Management's Responsibility for the Financial Statements

2. The ECOI and its Offices' Management are responsible for the preparation of these financial statements that give a true and fair view of the Balance Sheet and Statement of Income & Expenditure of the ECOI and its Offices in accordance with the requirements of the Insurance Act 1938 and Insurance Ombudsman Rules, 2017. This responsibility includes the design, implementation and maintenance of internal control relevant to the preparation and presentation of the financial statements that give a true and fair view and are free from material misstatement, whether due to fraud or error.



1

Branch Offices : (1) No.38, 1st Floor, CBI Road, 2nd Main, Behind CBI Road, Ganganagar, Bangalore – 560 032.

(2) No.6, Divya Enclave, M. G. Road, Mangalore – 575 003.

Auditors' Responsibility

3. Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with the Standards on Auditing issued by the Institute of Chartered Accountants of India. Those Standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence, about the amounts and disclosures in the financial statements. The procedure selected depends on the auditors' judgments, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the ECOI and its Offices preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of the accounting estimates made by Management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

4. In our opinion and to the best of our information and according to the explanations given to us, the financial statements have been prepared in accordance with the requirements of the Insurance Act,



1938 and Insurance Ombudsman Rules, 2017 to the extent applicable and in the manner so required, give a true and fair view in conformity with the accounting principles generally accepted in India, as applicable to the ECOI and its Offices.

- (i) In case of Balance Sheets give a true and fair view of the state of affairs of the ECOI and its Offices as at 31st March, 2019; and
- (ii) In case of Statement of Income & Expenditure, of the “deficit” of the year ended on that date.

Emphasis of Matter

5. Without qualifying our opinion, we draw attention to:

- a) Note 4 in Schedule B to the financial statements regarding Opening balances. The ECOI started its operations in 1998. Until 2000-2001, the Accounts were maintained by LIC. The ECOI started maintaining Accounts independently from the year 2001-2002. For the year 2001-2002, ECOI had only its Income & Expenditure Accounts certified by the Auditor. Hence, the opening balances brought down on 1st April, 2001 were unaudited figures.
- b) The financial statements regarding accounts of the 16 offices of Ombudsman offices have been audited by various auditors. We have relied on the audit reports of these various auditors. The consolidation of the same is being done after considering the fact that the amount received from Member Insurance Companies towards their share of expenses is not a surplus, but an advance / reimbursement towards their share of contribution. Further the amount received towards Capital Expenditure is reflected as a liability for contribution for Fixed Assets.
- c) Note 8 in Schedule B to the financial statements regarding maintaining member wise breakup of the excess / short funds received from Member Insurance Companies during the financial year 2018-19. Such allocation of excess / deficit of funds is pending as the financial statements of some of the Member Insurance Companies for financial year 2018-19 are yet to be finalized.
- d) Note 10 in Schedule B to the financial statements regarding Balances of Sundry Creditors and Sundry Debtors which are subject to confirmations and reconciliations.
- e) Note 15 in Schedule B to the financial statements regarding non-filing of Income Tax returns. The Management has obtained opinion on its obligation to file Income Tax Return. As per



opinion obtained, ECOI is not required to file Income Tax Return, as it is not carrying on any commercial activity.

- f) During the course of the audit, as pointed out by the OIO Bhopal , Noida and Mumbai auditors regarding Notification No.50/2018 – Central Tax issued by CBIC, section 51 of the CGST Act, 2017 related to applicability of TDS on GST, which came into force on 01.10.2018. as per this notification the liability to deduct and deposit TDS on GST will also arise on Office of Insurance Ombudsman for all its centres as well as ECOI from the date of applicability of the said act. It has been observed that no TDS on GST has been deducted and deposited during the year ended 31.03.2019. It is necessary to register the concern under GST as a tax deductor and deduct and deposit TDS along with interest if any on GST where required.
- g) In Delhi OIO the auditors have given Qualified Opinion based on following points:-
- 1) The BOOKS of accounts are prepared on Tally (ERP). In the absence of system audit of such module, we are unable to comment on the designing and effectiveness of control in the ERP system.
 - 2) No process in place to verify the statutory compliances being complied by the Contractor in relation to staff hired by the Office, resulting in ongoing short deposit of PF in the PF account of hired staff by the Contractor vis-à-vis paid by the office.

Report on Other Legal & Regulatory Requirements

6. As required by the Insurance Act 1938 and Insurance Ombudsman Rules 2016, as amended, except to the extent stated hereinabove, we report that:
- a) We have obtained all the information and explanations which to the best of our knowledge and belief were necessary for the purposes of our audit and have found them to be satisfactory.
 - b) In our opinion and to the best of our information and according to the explanations given to us, proper books of account as required by law have been maintained by the ECOI and its Offices so far as appears from our examination of books.



- c) The Balance Sheet and Statement of Income & Expenditure of the ECOI and its Offices referred to in this report are in agreement with the books of accounts and returns.
- d) In our opinion, the Balance Sheet and Statement of Income & Expenditure comply with the applicable accounting standards.

Other Matters

- a) There is a significant delay in filing of TDS for the Quarter April-June of 2018-19, it was filed on 21st August, 2018, whereas the last date of filing was 31st July, 2018.
- b) It is observed that there is default in payment of TDS amount as follows (found on TRACES) . This are long pending in nature and needs to be resolved or paid. Nonpayment or non-resolution will lead to payment of interest and late fees However, no provisions have been made in this regard.

Default Summary Details Of OIO Mumbai

YEAR	Quarter	Form Type	Net Payable (Rounded-Off) (Rs.)
2009-10	Q4	24Q	623180
2009-10	Q4	26Q	247290
2010-11	Q4	26Q	1870
2013-14	Q2	26Q	7410
2015-16	Q4	26Q	140
2017-18	Q2	26Q	270
2018-19	Q1	26Q	15630
2018-19	Q2	26Q	3340



Default Summary Details of Office of the Executive Council of Insurers

YEAR	Quarter	Form Type	Net Payable (Rounded-Off) (Rs.)
2007-08	Q4	24Q	130
2015-16	Q1	26Q	430
2017-18	Q4	24Q	6350
2018-19	Q4	24Q	272650

- b) During the year 2018-19 it is observed that Profit of sale of asset Rs. 10,994(OIO Mumbai) is on account of buyback of Old assets, with the book value of either Rs. 1 or Rs. 0.
- c) Bank reconciliation statement includes items which are reported to be payments made by NEFT as under, the effect of which appear in bank statement after a significant delay i.e. after the accounting period.

INSTRUMENT TYPE	Date of Entry in Cash Book	Date OF Debit in Bank	Amount
NEFT	26-03-2019	25-04-2019	7,500
NEFT	26-03-2019	25-04-2019	1,290
NEFT	28-03-2019	25-04-2019	5,006
NEFT	29-03-2019	02-04-2019	17,65,427



- d) It is observed that contractual payment made to Sodexo has been debited to Staff Amenities (CODE NO:-439) instead of Contractual payments (CODE:-443) Account i.e. totaling to Rs. 188370.
- e) It is observed that in year ending there is stock but when Stock Register was verified it come to notice that stock register has not been properly maintained.
- f) During the year 2018-19, the department has provided provision of Rs. 51000 for Auditors fees whereas the expense is of Rs. 50,976, hence there is excess provisions of Rs. 24.
- g) AMC expenses amounting to Rs. 12,29,170.20 includes amount of Rs. 92695 being prior period expense pertaining to the period 2017-18.
- h) During the year 2018-19, as per letter Ref: F.No14019/22/2010-Ins.II dated 24.9.2018 from Ministry of Finance arrears of payment of salary and allowance to retired Ombudsmen w.e.f 1.1.2016 has been paid. Accordingly amount of payment of salaries and allowances has been worked out as under:-

Basic Salary to Ombudsman	Rs.2,73,13,477.00
Add:-HRA to Ombudsman	Rs. 34,74,703.00
Add:- Transfer TE	Rs. 10,15,000.00
Add:- Leave Encashment to Ombudsman	Rs. 7,01,756.00
Total	Rs. 3,25,04,936.00
Less:-Recovery of DA to Ombudsman	Rs.1,88,87,862.00
Less:-Recovery of Transfer TE	Rs. 80,000.00
Less: Conveyance to Ombudsman	Rs. 15,42,712.00
Less recovery of Leave Encashment	Rs. 71,694.00
Less Income Tax	Rs. 15,75,440.00
Net Paid	Rs. 1,03,47,228.00



NBS & CO.

Chartered Accountants

The net amount of Rs 1,03,47,228/- has been paid to Retired Ombudsmen who were in service since 1st January 2016.

- i) It has been observed that in OIO Kolkata, in absence of any Code for prior period income & expenditure, income & expenditures of earlier years, if any are booked as current year Income & Expenses.

For NBS & Co.
Chartered Accountants



A handwritten signature in black ink, appearing to read "Devdas V. Bhat".

CA. Devdas V. Bhat
Partner
Membership No. 048094

Place : Mumbai

Date :



बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

CONSOLIDATED ACCOUNTS OF EXECUTIVE COUNCIL OF INSURERS AND 17 OMBUDSMAN OFFICES

SCHEDULE 'B'

NOTES TO THE ACCOUNTS FOR THE YEAR ENDED AS ON 31/03/2019

1. SIGNIFICANT ACCOUNTING POLICIES

A. SYSTEM OF ACCOUNTING

The office of Executive Council of Insurers and its 17 Ombudsman Offices have adopted the mercantile system of accounting, except for leave encashment which is accounted on cash basis.

B. FIXED ASSETS

- Fixed Assets are stated at cost less depreciation.
- Depreciation shall be provided at the rates prescribed as below and on the original cost of the assets on a straight-line method. All assets costing up to Rs.5,000/- each shall be charged to revenue (written off to account code 457 – Sundry Office Equipment if below Rs.5,000/-) in the year of purchase.

Account code	Asset	Rate of depreciation
216	Office Equipments	10%
217	Computers	30%
218	Air Conditioners, Fridge etc.	13.91%
219	Electrical Fittings	10%
221	Fax, Phone, EPABX etc.	10%
222	Xerox Machine	20%
223	Library Books	20%
224	Misc. Capital Equipments	10%
231	Lease-hold Improvements	10%

3. **Operating Leases:** Operating leases are those where the lessor effectively retains substantially all the risks and benefits of ownership over the leased term



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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

are classified as operating leases. Operating lease rentals are recognized as an expense, as applicable, over the lease period.

2. The renovation work of Delhi Ombudsman Centre had been completed during the financial year 2017-18. However we have received final bill from N Z Engineering Dept. of LIC of India in the current financial year. We have also received the refund of Rs.2,32,906.54 (Rupees two lakhs thirty two thousand nine hundred and six and paise fifty four only) . Thus the deposit of Rs 67,70,000/- paid to LIC NZ Engineering Dept has been adjusted on the receipt of final bill of Renovation work and refund in the current financial year 2018-19 and accounted for in the books of Delhi Ombudsman Office under various heads of fixed asset.
3. In respect of Ahmedabad OIO, final bill is received in the current F Y i.e.2018-19 from WZ Engineering Dept LIC of India along with the refund of Rs.6,75,374/-which was accounted in ECOI. The advance of Rs. 53,00,000/- was given in the financial year 2016-17 which was taken under expenses code A/C 455- Infrastructure & Renovation of Hire Premises. Accordingly rectification has been done to account for the asset created due to renovation in Ahmedabad OIO and the correct effect is accordingly presented in the Consolidated Balance Sheet as on 31.3.2019.
4. Office of Executive Council of Insurers (E.C.O.I) (erstwhile G.B.I.C) started its operations in 1998. Till the year 2000-01, the accounts were maintained by L.I.C of India. It started maintaining accounts independently from the year 2001-02. For the year 2001-02, it had only its Income & Expenditure account certified by the auditor. Hence, the opening balances brought forward on 1st April, 2001 were unaudited figures.
5. Up to the financial year 2014-15, office of Executive Council of Insurers and its 17 Ombudsman Offices used to receive a lump sum amount from L.I.C of India for the funding of their expenses. From the financial year 2015-16, as approved in its council meeting, office of Executive Council of Insurers had decided to discontinue the practice of receiving funds in advance only from L.I.C of India and instead it has been decided to approach all insurance companies including L.I.C of India for advance towards funding of their expenses.



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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

Accordingly, office of Executive Council of Insurers has received Rs 42,81,58,572/- (rupees forty two crores eighty one lakh fifty eight thousand five hundred and seventy two only) from all insurance companies towards advance sharing of expenses for the financial year 2018-19, and an amount of Rs.22,81,41,719.46 (rupees twenty two crores eighty one lakh forty one thousand seven hundred nineteen and paise forty six only)) has been provided as replenishment to 17 Ombudsman offices for the financial year 2018-19.

Actual Replenishment to 17 OIOs is	Rs.22,22,80,000.00
Less: Refund of Ahmedabad renovation Accounted in ECOI	Rs 6,75,374.00
Add Delhi renovation Asset created & Expenses incurred	Rs 65,37,093.46

6. We have received Rs 11,96,320/- (rupees eleven lakhs ninety six thousand three hundred and twenty only) from M/S Reliance Nippon Life Ins. Co. Ltd towards advance sharing of expenses 2019-20.
7. We had called for the funds from insurance companies for the financial year 2018-19 based on the companies' data (2017-18) available with us. After getting the requisite data i.e., paid-up capital and gross direct premium income from insurance companies for the financial year 2017-18, we had completed the necessary exercise of arriving at the actual share of expenses of insurance companies (actual share of expenses of each insurance company) to identify status of each insurance company with regard to the excess or short remittance received from them in financial year 2017-18, and accordingly, a schedule was prepared. Finally, we had taken the necessary action in respect of all the concerned insurance companies (both refund action and arrangement of collection). The entire process was completed by 30.12.2018.
8. Vide our letter Ref:ECOI/ Co's data/2019-20 dated 10.5.2019 we have also initiated the process of collecting the requisite data of insurance companies for the financial year 2018-19. Once the data is received we will complete the necessary exercise for the financial year 2018-19 as explained in Item no 7
9. In Our Hyderabad OIO, Rs.13,68,971/- (Rupees thirteen lakhs sixty eight thousand nine hundred seventy one only) received from Insurance companies as deposit Payable as per High Court Order for the Legal cases pending in the Court which is shown under liability in the Balance Sheet as on 31.3.2019.



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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

10. Balances of Sundry Creditors and Sundry Debtors are subject to confirmation and reconciliation.
11. During the year 2018-19, as per letter Ref: F.No14019/22/2010-Ins.II dated 24.9.2018 from Ministry of Finance arrears of payment of salary and allowance to retired Ombudsmen w. e.f 1.1.2016 has been paid. Accordingly amount of payment of salaries and allowances has been worked out as under:-

Basic Salary to Ombudsman	Rs.2,73,13,477.00
Add:-HRA to Ombudsman	Rs. 34,74,703.00
Add:- Transfer TE	Rs. 10,15,000.00
Add:- Leave Encashment to Ombudsman	Rs. 7,01,756.00
Total	Rs. 3,25,04,936.00
Less:-Recovery of DA to Ombudsman	Rs.1,88,87,862.00
Less:-Recovery of Transfer TE	Rs. 80,000.00
Less: Conveyance to Omb	Rs. 15,42,712.00
Less recovery of Leave Encashment	Rs. 71,694.00
Less Income Tax	Rs. 15,75,440.00
Net Paid	Rs. 1,03,47,228.00

The net amount of Rs 1,03,47,228/- has been paid to Retired Ombudsmen who were in service since 1st January 2016. There is no dispute raised by the Ombudsmen for the settlement of arrears paid to them.

12. Writ Petitions have been filed against the office of Executive Council of Insurers (formerly Governing Body of Insurance Council) and the Union of India by Shri A.K.Dasgupta, ex. Insurance Ombudsman, Mumbai, Shri G. Rajeshwara Rao, ex. Insurance Ombudsman, Hyderabad, Shri A.K.Sahoo, ex. Insurance Ombudsman, Pune, Shri Mateshwar Prasad, ex. Insurance Ombudsman, Bangalore and Shri Kiriti Bhushan Saha, ex. Insurance Ombudsman, Kolkata in the Hon'ble High Court of Bombay in April / June, 2016. The contention of the petitioners is that not pre-



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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

commuted pension, but the pension after commutation should be recovered from the salaries of the Insurance Ombudsmen.

13. Total Rent of Rs.1,35,65,859.52 was paid to LIC of India for the financial year 2018-19 out of which Rs 67,82,929.76 received from Mumbai Ombudsman office as per the understanding with Mumbai Ombudsman Office.

14. During the year, status of complaints is as under:

Particulars	Complaints o/s as on 01.04.2018	Received during the year	Disposed during the year	Outstanding as on 31/03/2019
For life insurance	5,320	11859	12103	5076
For general insurance	5,263	10805	9864	6204
TOTAL	10,583	22664	21967	11280

15. The management has obtained opinion on its obligation to file Income Tax Return. As per the opinion obtained, office of Executive Council of Insurers is not required to file Income Tax Return, as it is not carrying on any commercial activity.

16. Regarding **TDS on GST** on Contracts applicable from 1.10.2018 as per notification no 50/2018-Central Tax issued by CBIC, section 51 of the CGST Act 2017, we are in the process of obtaining proper legal opinion on the applicability of the said notification to our Organization.

AS PER OUR REPORT OF EVEN DATE

For N.B.S & Co.,
Chartered Accountants
Firm Registration No. 110100W

CA. Devdas V. Bhat

Partner
Mem. No. 048094
Place: Mumbai
Date : 23.5.2019



for Executive Council of Insurers

Secretary

Secretary General



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Liabilities	Year ended 31/03/2019 (Amount in Rs.)	Year ended 31/03/2018 (Amount in Rs.)	Assets	Year ended 31/03/2019 (Amount in Rs.)	Year ended 31/03/2018 (Amount in Rs.)
Collection for Fixed Assets:					
1. Collection for Fixed Assets			Fixed Assets (at Cost):		
Balance as per last Balance Sheet	5,20,19,946.32		Gross Block	4,79,51,245.60	
Add : Fixed Assets purchased during FY 2018-19	1,21,87,529.10		Add : Additions during the year	1,21,87,529.10	
Less: F.A purchases during 2017-18 Ahmedabad	8,89,607.00		Less : Deletions during the year	-34,15,920.00	
Less : Depreciation charged for the FY 2018-19	59,54,867.12		Less : Accumulated Depreciation	-2,99,65,718.17	
(6062677.12-116149 dep on 888607 of Ahmedabad)		5,20,19,946.32	(As per Schedule A' attached herewith)	2,67,57,136.53	2,14,76,477.55
2. Receipts from Member Companies					
Balance as per last Balance Sheet	8,71,19,830.35		Current Assets:		
Add : Replenishment received from 54 Member Cos.	42,81,58,572.00		Advances to Staff	1,21,205.00	33,239.00
Less : Amount Refunded to 54 Member Cos.	6,71,19,830.35		Capital Work-in-Progress (LIC Delhi)		67,70,000.00
Less : Excess of Expenditure over Income			Deposits	11,18,347.25	11,37,890.85
(28,79,22,958.38-5300000) * Funds given to Ahmedabad for			Housing Loan Subsidy (LIC)		0.00
Renovation in 2016-17 wrongly debited to expenses code			Other Miscellaneous Debits (PLLI)		0.00
instead of Deposits. Rectification done in 2018-19 after receipt					
of Final bill					
Less : Fixed Assets purchased during FY 2018-19	28,26,22,858.38		Prepaid Expenses		6,95,372.17
Add : Depreciation for the FY 2018-19	1,21,87,528.10		Stamps on Hand	8,64,225.07	1,627.00
(6062677.12 less 116149 dep on 888607 of Ahmedabad)		13,93,03,051.64	Agricultural General Insurance Co.	960.00	
		19,88,67,052.94	Ltd. (Sundry Debtors)	0.00	26,25,140.00
			Stock on Hand Printing & Stationery	1,55,571.00	0.00
			Cash & Bank Balances:		
			Imprest Cash	0.00	0.00
			Balance at Bank	17,44,13,158.09	11,00,10,333.69
Current Liabilities:					
Advance from Reliance Nippon Life Ins. Co for FY 2019-20	11,96,320.00	0.00			
Cheque Cancelled Account	1,710.00	0.00			
Deposit received from Court for Legal Cases Hyderabad	13,68,871.00	0.00			
Outstanding Expenses	41,96,549.00	36,10,303.59			
Total (in Rs.)	20,34,30,602.94	14,27,50,080.28	Total (in Rs.)	20,34,30,602.94	14,27,50,080.28



For NDS & Co.
Chartered Accountants
Firm Registration No. 1101009W
CA. Devdas V. Bhat
Partner
Membership No. 048094

Secretary General

Secretary

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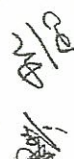
Executive Council of Insurers & 17 OIO Offices

Consolidated Income & Expenditure Account of ECI & 17 OIO Offices as on 31st March, 2019.

A/c Code	Expenditures	Year ended 31/03/2019 Amount (in Rs.)	Year ended 31/03/2018 Amount (in Rs.)	A/c Code	Income	Year ended 31/03/2019 Amount (in Rs.)	Year ended 31/03/2018 Amount (in Rs.)
401	Basic Salary to Ombudsman	2,15,47,548.00	50,069.00	501	Sundry Receipts	47,536.00	44,518.67
402	DA to Ombudsman	14,90,034.00	33,06,228.00	502	Reversal of Excess Provisions	55,948.00	74,68,866.00
403	HRA to Ombudsman	34,74,703.00	5,36,397.00	503	Payment received under RTI	1,464.00	1,05,966.13
405	Conveyance to Ombudsman	7,54,45,549.64	7,43,29,737.85	599	Profit on Sale of Fixed Assets	35,741.00	25,00,08,452.85
406	Basic Salary to Others	3,83,90,340.13	3,16,39,486.80		Excess of Expenditure over Income		
408	DA to Others	52,61,473.76	47,58,923.54				
409	HRA to Others	14,12,669.99	14,14,006.99				
410	CCA to Others	8,74,073.07	8,65,482.51				
411	FPA to Others	13,50,252.68	12,60,993.42				
412	Conveyance to Others	1,49,22,580.22	1,45,63,911.52				
413	Deputation Allowances		0.00				
414	Functional Allowances		0.00				
415	Washing Allowances	2,58,697.00	3,19,443.00				
416	Qualification Pay to Others	2,00,814.93	1,93,039.00				
417	Other Allowances to Others		19,837.00				
419	PLI						
420	Employer's Contribution to Pension Fund	58,98,021.59	58,99,000.38				
421	Employer's Contribution to Provident Fund	20,49,069.01	20,66,091.01				
422	Employer's Contribution to Gratuity	58,28,728.98	52,70,643.65				
423	Employer's Contribution to Mediclaim	9,42,774.42	7,38,512.02				
424	Employer's Contribution to GSI	85,020.34	59,551.48				
425	Leave Encashment	22,08,598.43	23,27,763.00				
426	Travelling Expenses on Tours	25,44,048.07	25,72,066.15				
427	Transfer TE	15,68,890.00	19,31,258.50				
428	LTC Expenses	16,72,451.00	10,75,447.00				
429	Motor Car Expenses	7,89,107.50	11,92,479.45				
430	Auditors' Remuneration	2,68,051.00	3,09,120.00				
431	Law Charges	1,05,870.00	17,00,365.00				
432	Printing & Stationery	15,49,861.51	15,87,502.43				
433	Postage & Revenue Stamps	17,70,005.12	13,25,432.47				
434	Bank Charges	14,515.88	16,109.66				
435	Telephone Charges	8,54,455.20	11,71,765.69				



AN/ R
31/3/19



Secretary

Chartered Accountants
Firm Registration No. 110
CA Devdas V Bhat
Partner
Membership No. 04E094



Executive Council of Insurers and 17 Offices of Insurance Ombudsman as on 31.3.2019
Consolidated schedule for Fixed Asset as on 31.3.2019

Schedule 'A' - FIXED ASSETS

Code	Particulars	Rate	As on 1/4/2018		As on 31/3/2019		During the year		upto 31/3/2019		As on 31.3.2019		Net Block	
			Additions	Deletions	Additions	Deletions	Additions	Deletions	Additions	Deletions	Additions	Deletions	As on 31/3/2019	As on 31/3/2018
216	Office Equipments	0.1	1,47,70,533.48	17,88,708.02	12,41,077.00	1,53,18,164.50	76,09,558.35	15,73,321.24	9,37,776.00	82,45,103.59	70,73,060.91	71,60,975.13		
217	Computers	0.3	1,03,40,766.01	13,43,540.40	12,31,901.00	1,04,52,405.41	87,62,753.00	10,37,937.00	17,16,317.00	85,64,473.00	10,67,932.41	15,79,011.01		
218	Air Conditioner, Fridge etc.	0.139	66,53,284.03	16,74,859.78	7,15,932.00	76,12,211.81	30,57,315.67	10,05,109.75	2,13,543.00	38,40,802.42	37,63,329.39	35,95,060.36		
219	Electrical Fittings	0.1	31,71,746.45	15,34,105.78	1,647.00	47,04,205.23	17,38,228.32	5,07,693.09	491.00	22,45,430.40	24,58,774.83	14,33,518.13		
221	Fax, Phone, Epabux etc.	0.1	6,68,439.00	28,497.00	8,038.00	6,88,898.00	4,13,788.09	34,728.00		4,48,016.00	2,40,882.00	2,54,651.00		
222	Xerox machine	0.2	5,04,777.40	97,830.00	97,830.00	4,11,957.40	4,94,555.40	10,215.00	92,820.00	4,11,950.40	7.00	10,222.00		
223	Library Books	0.2	4,73,249.01			4,73,249.01	4,59,967.01	4,974.00		4,64,841.01	8,403.00	13,382.00		
224	Miscellaneous Capital Equip.	0.1	20,52,373.02	1,68,407.00	1,24,505.00	20,96,275.02	13,19,229.10	1,18,553.90	1,19,329.00	13,38,554.00	7,57,721.02	7,13,143.92		
231	Leasethold Improvements	0.1	93,16,077.20	56,49,411.12		1,49,05,488.32	25,09,473.70	17,78,694.15		43,78,467.35	1,05,87,020.97	67,16,604.00		
	TOTAL		4,79,51,245.60	1,21,87,529.10	34,15,920.00	5,67,22,854.70	2,64,74,768.05	60,71,016.12	25,09,066.00	3,99,65,718.17	2,67,57,136.93	2,14,76,477.55		

V.S. Vasistha
 Admin. Officer

Do
 Asst. Secretary

M.V. V.V. (ECOI)
 Secretary General
 ECOI





बीमाकर्ताओं की कार्यकारी परिषद कार्यालय
Office of the Executive Council of Insurers

Ref: ECOI/Accts./2018-19

23rd May, 2019

M/s.N.B.S & Co.,
Chartered Accountants,
14/2, Western India House,
Sir P.M.Road, Fort,
Mumbai – 400 001

Dear Sirs,

Re: Audit of financial statements for the year ended March 31, 2019

In connection with your audit of Balance Sheet of Executive Council of Insurers (earlier Governing Body of Insurance Council) and its 17 Ombudsman Offices as at March 31, 2019 and the statement of Income and Expenditure for the year ended on that date, we acknowledge as management our responsibility for preparation and fair presentation of the financial statements and recognize that obtaining representations from us concerning the information contained in this letter is a significant procedure for the purpose of expressing an opinion as to whether the financial statements present fairly, in all material respects, the financial position results of operations of office of Executive Council of Insurers and its 17 Ombudsman Offices in accordance with the requirements of Insurance Act, 1938 and Insurance Ombudsman Rules, 2017 and in conformity with accounting principles generally accepted in India, as applicable.

We understand that your examination included such tests and procedures as you considered necessary for the purpose of expressing an opinion on the financial statements. We also understand that such procedures would not necessarily detect fraud, irregularities or error, should any exist. We acknowledge that control over and responsibility for the prevention and detection of fraud, irregularities and error remains with us.

Certain representations in this letter are described as being limited to matters that are material. Items are considered material, regardless of size, if they involve an omission

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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

or misstatement of accounting information that, in the light of surrounding circumstances, makes it probable that the judgment of a reasonable person relying on the information would be changed or influenced by the omission or misstatement.

We confirm, to the best of our knowledge and belief, the following representations made to you during your audit:

Financial statements and records:

1. The accounts and records of Executive Council of Insurers and its 17 Ombudsman Offices have been maintained in accordance with the requirements of the Insurance Act 1938, Insurance Ombudsman Rules, 2017 and also in conformity with accounting principles generally accepted in India, as applicable.
2. The financial statements are in agreement with the books of account, and we have maintained proper books of account, as required by law. There are no material transactions that have not been properly recorded in the accounting records underlying the financial statements.
3. The management has taken proper and sufficient care for the maintenance of adequate accounting records in accordance with the applicable provisions of the Insurance Act 1938, Insurance Ombudsman Rules, 2017 and for safeguarding the assets of Executive Council of Insurers and its 17 Ombudsman Offices for preventing and detecting fraud and other irregularities.
4. The financial statements are free from material errors and omissions.
5. There have been no material changes since the date of the Balance sheet in respect of any of the statements made above, and no events have occurred subsequent to the Balance sheet date, which are of such nature that would affect the true and fair view of the state of affairs and results of Executive Council of Insurers and its 17 Ombudsman Offices as at March 31, 2019 or would require adjustment to, or disclosure in the financial statements.

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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

6. The accounting policies and estimates followed by office of Executive Council of Insurers and its 17 Ombudsman offices during the current year are consistent with those adopted in the audited financial statements for the year ended 31st March, 2019.

Internal Controls:

7. There are no material weaknesses in internal control, including any for which we believe the cost of corrective actions exceeds the benefits. There have been no significant changes in internal control, other than regular strengthening of controls in the normal course of business, since March 31, 2019.
8. There has been no fraud or possible irregularities, involving management or employees who have significant roles in internal control or others where the fraud could have a material effect on the financial statements. We have no knowledge of any allegations of fraud or suspected fraud affecting the office of Executive Council of Insurers and its 17 Ombudsman offices or received in communications from employees, former employees, or others, which could have a material effect on the financial statements.
9. We acknowledge management's responsibility for implementation and operation of accounting and internal control systems in order to prevent and detect frauds and errors. We have adequate systems in place and we hereby certify that there were no material frauds, noticed or reported on or by office of Executive Council of Insurers and its 17 Ombudsman offices during the year.

Liabilities:

10. Full provisions have been made in the Balance sheet for all known liabilities of the office of Executive Council of Insurers and its 17 offices, due or accrued, as at March 31, 2019. The provisions made for expenses are not in excess and are reasonable.

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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

11. Other than as disclosed in financial statements, there are no other amounts which are due from / to other branches / zones.

Loans, Advances and Other Assets:

12. Office of Executive Council of Insurers and its 17 Ombudsman offices have satisfactory title to all owned assets, and there are no liens or encumbrances on such assets nor has any asset been pledged as collateral.
13. The current assets have a value on realization in the ordinary course of business at least equal to the amounts at which they are stated in the books.

Fixed Assets:

14. The net book values at which fixed assets are stated in the Balance sheet are arrived at:
- After taking into account all capital expenditure on additions thereto, but no expenditure properly chargeable to revenue;
 - After eliminating the cost and accumulated depreciation relating to items sold, discarded, demolished or destroyed;
 - After providing adequate depreciation on fixed assets during the year;
 - After considering impairment;

Cash and bank balances:

15. Office of Executive Council of Insurers and its 17 offices of Insurance Ombudsman in all have cash-in-hand of Rs. nil as at balance sheet date.
16. The management believes that the outstanding items lying in the bank reconciliation statements would not have material effect on financial statements.
17. There are proper controls and monitoring over the items reflected in the Bank Reconciliation Statement.

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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

Receivables:

18. Receivables represent bonafide sums due to the office of Executive Council of Insurers in normal course of business.

Others:

19. There have been no events subsequent to the Balance sheet date which require adjustment of or disclosure in the financial statements.
20. To the best of our knowledge and belief, office of Executive Council of Insurers and its 17 Ombudsman offices have not made any improper payments or payments which are illegal or against public policy.
21. Office of Executive Council of Insurers (ECOI) (erstwhile G.B.I.C) started its operations in 1998. Till the year 2000-01, the accounts were maintained by L.I.C of India. Office of Executive Council of Insurers started maintaining accounts independently from the year 2001-02. For the year 2001-02, office of Executive Council of Insurers had only its Income & Expenditure account certified by the auditor. Hence, the opening balances brought down on 1st April, 2001 were unaudited figures.
22. The accounts of 16 offices of the Insurance Ombudsman have been audited by various auditors whereas accounts of Insurance Ombudsman, Mumbai audited by your audit firm. The consolidation of the same is being done after considering the fact that the amount received from all the insurance companies would be found excess or short on receiving the requisite data i.e., paid-up capital and gross direct premium income from all the insurance companies. Accordingly, the excess / short will be duly adjusted from the funds required from all the insurance companies for the subsequent financial year.
23. During the year 2018-19, as per letter Ref: F.No14019/22/2010-Ins.II dated 24.9.2018 from Ministry of Finance arrears of payment of salary and allowance to

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बीमाकर्ताओं की कार्यकारी परिषद कार्यालय Office of the Executive Council of Insurers

retired Ombudsmen w. e.f 1.1.2016 has been paid. Accordingly amount of payment of salaries and allowances has been worked out as under:-

Basic Salary to Ombudsman	Rs.2,73,13,477.00
Add:-HRA to Ombudsman	Rs. 34,74,703.00
Add:- Transfer TE	Rs. 10,15,000.00
Add:- Leave Encashment to Ombudsman	Rs. 7,01,756.00
	Rs. 3,25,04,936.00
Less:-Recovery of DA to Ombudsman	Rs.1,88,87,862.00
Less:-Recovery of Transfer TE	Rs. 80,000.00
Less: Conveyance to Omb	Rs. 15,42,712.00
Less recovery of Leave Encashment	Rs. 71,694.00
Less Income Tax	Rs. 15,75,440.00
Net Paid	Rs. 1,03,47,228.00

The net amount of Rs 1,03,47,228/- has been paid to Retired Ombudsmen who were in service as on 1st January 2016. There is no dispute raised by the Ombudsmen for the settlement of arrears paid to them.

24. The management has obtained opinion on its obligation to file Income Tax Return. As per the opinion obtained, office of Executive Council of Insurers is not required to file Income Tax Return, as it is not carrying on any commercial activity.
25. Regarding TDS on GST on Contracts applicable from 1.10.2018 as per notification no 50/2018-Central Tax issued by CBIC, section 51 of the CGST Act 2017, we are in the process of obtaining proper legal opinion on the applicability of the said notification to our Organization

For the Executive Council of Insurers

(M.M.L. Verma)
Secretary General
Place: Mumbai

Date - 23.5.2019



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(C)

COMPLAINT ANALYSIS

The Complaints Statistics have been generated through the CMS. The following consolidated statements as at 31.03.2019 are attached herewith:

No	Description	Statement
1	Complaints Disposal (Summary – Life & General Insurance)	L1G1
2	Complaints Disposal Centre Wise Life Insurance)	L2
3	Complaints Disposal (Company Wise Analysis- Life Insurance	L3
4	Complaints Disposal (Centre Wise General Insurance)	G2
5	Complaints Disposal (Company Wise General Insurance)	G3
6	Details of Awards & Recommendations – Amount Wise (Centre Wise- Life & General Insurance)	L4G4
7	Details of Awards & Recommendations – Amount Wise (Company Wise Analysis – Life Insurance)	L5
8	Details of Awards & Recommendations – Amount Wise (Company Wise Analysis – General Insurance)	G5
9	Nature wise classification of complains received (Centre Wise- Life & General Insurance)	L7G7
10	Nature Wise Classification of complaints received (Summary-Life)	L8
11	Nature wise Classification of complaints received (Centre wise – General Insurance)	G8
12	Nature wise Classification of Complaints received (Company wise analysis – Life Insurance)	L9
13	Nature wise classification of complaints received (Company wise analysis – General Insurance)	G9



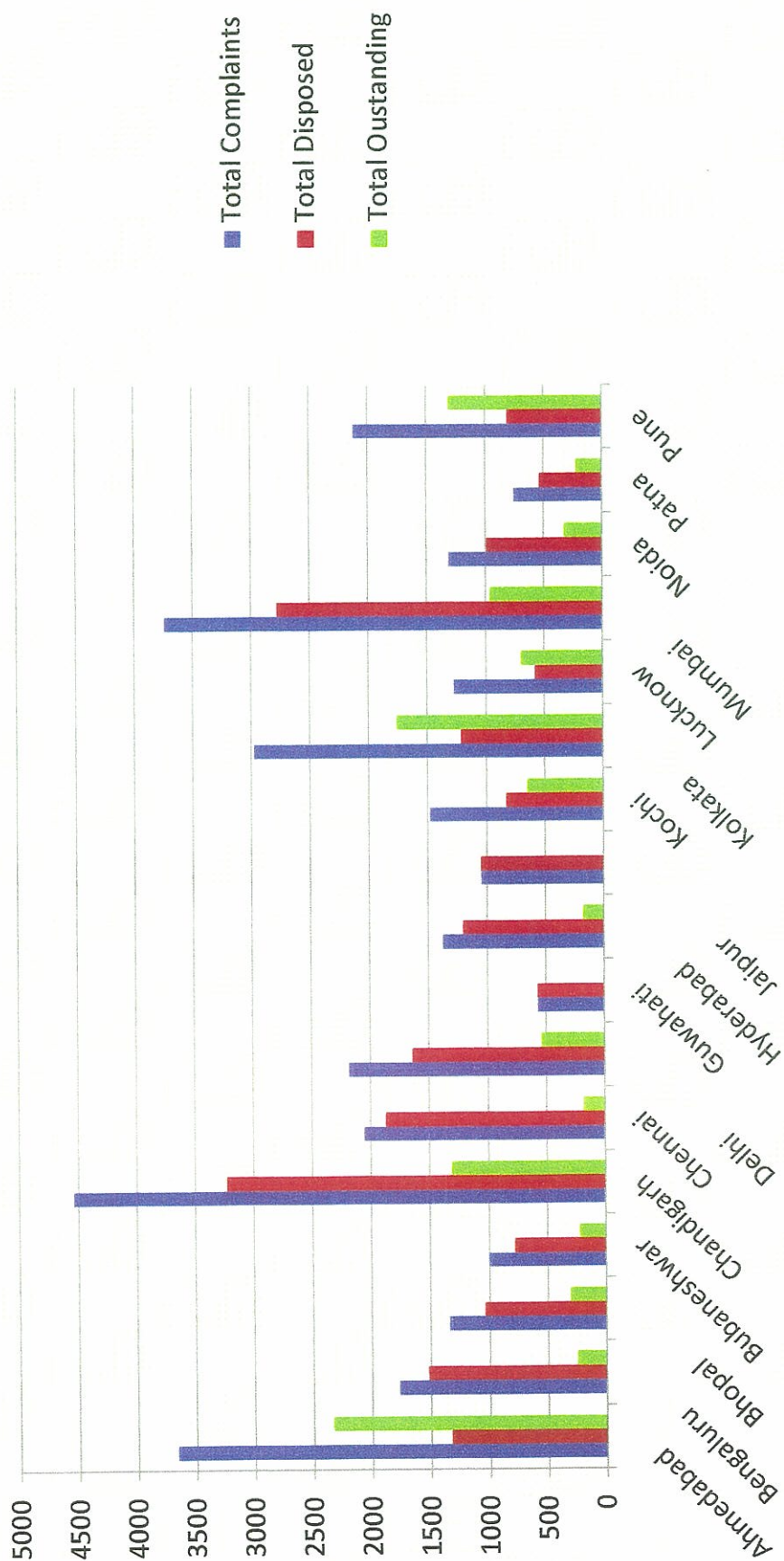
OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS
Complaints Received & Disposal statement for the period from 01.04.2018 to 31.3.2019

STATEMENT L1G1

LIFE AND GENERAL INSURANCE

Name of the centre	Total No of Complaints			Complaints disposed by way of						Durationwise disposal of Complaints						Durationwise Outstanding complaints		
	O/s at the beginning of the year	Received upto March	Total	Recommendations	Awards	Withdrawal	Non-acceptance	Dismissal awards fvg. Ins. Co.	Non-Entertainable	Total Disposed	Within 3 months	3 months to 1 year	Above 1 year	Total Disposed	Within 3 months	3 months to 1 year	Above 1 year	Total Outstanding
Ahmedabad	1338	2325	3663	0	69	217	0	25	1017	1328	1070	83	175	1328	290	953	1092	2335
Bengaluru	490	1283	1773	97	440	93	0	238	652	1520	716	683	121	1520	156	97	0	253
Bhopal	392	954	1346	133	69	62	0	277	497	1038	524	347	167	1038	118	133	57	308
Bubaneswar	204	801	1005	3	113	7	0	23	634	780	644	10	126	780	50	103	72	225
Chandigarh	2139	2403	4542	0	1273	11	0	658	1286	3228	1329	132	1767	3228	300	729	285	1314
Chennai	403	1655	2058	6	394	111	0	243	1118	1872	1174	561	137	1872	135	51	0	186
Delhi	674	1509	2183	373	564	51	0	3	652	1643	674	444	525	1643	262	278	0	540
Guwahati	100	472	572	11	170	45	0	84	262	572	456	109	7	572	0	0	0	0
Hyderabad	277	1104	1381	0	401	62	0	143	597	1203	704	469	30	1203	122	55	1	178
Jaipur	276	776	1052	63	393	107	0	121	368	1052	707	339	6	1052	0	0	0	0
Kochi	500	982	1482	0	213	56	0	197	365	831	384	39	408	831	223	356	72	651
Kolkata	1196	1780	2976	0	329	319	0	123	441	1212	487	213	512	1212	306	842	616	1764
Lucknow	430	847	1277	36	3	65	0	55	419	578	436	32	110	578	89	307	303	699
Mumbai	1228	2514	3742	55	1022	194	0	394	1112	2777	1177	1265	335	2777	460	488	17	965
Noida	215	1101	1316	32	187	149	0	88	534	990	563	362	65	990	237	89	0	326
Patna	114	643	757	12	112	41	0	24	346	535	363	101	71	535	69	150	3	222
Pune	607	1515	2122	8	73	99	0	34	594	808	612	57	139	808	288	599	427	1314
Total	10583	22664	33247	829	5825	1689	0	2730	10894	21967	12020	5246	4701	21967	3105	5230	2945	11280

Life Insurance and General Insurance Industries: Complaints Analysis 2011





OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS

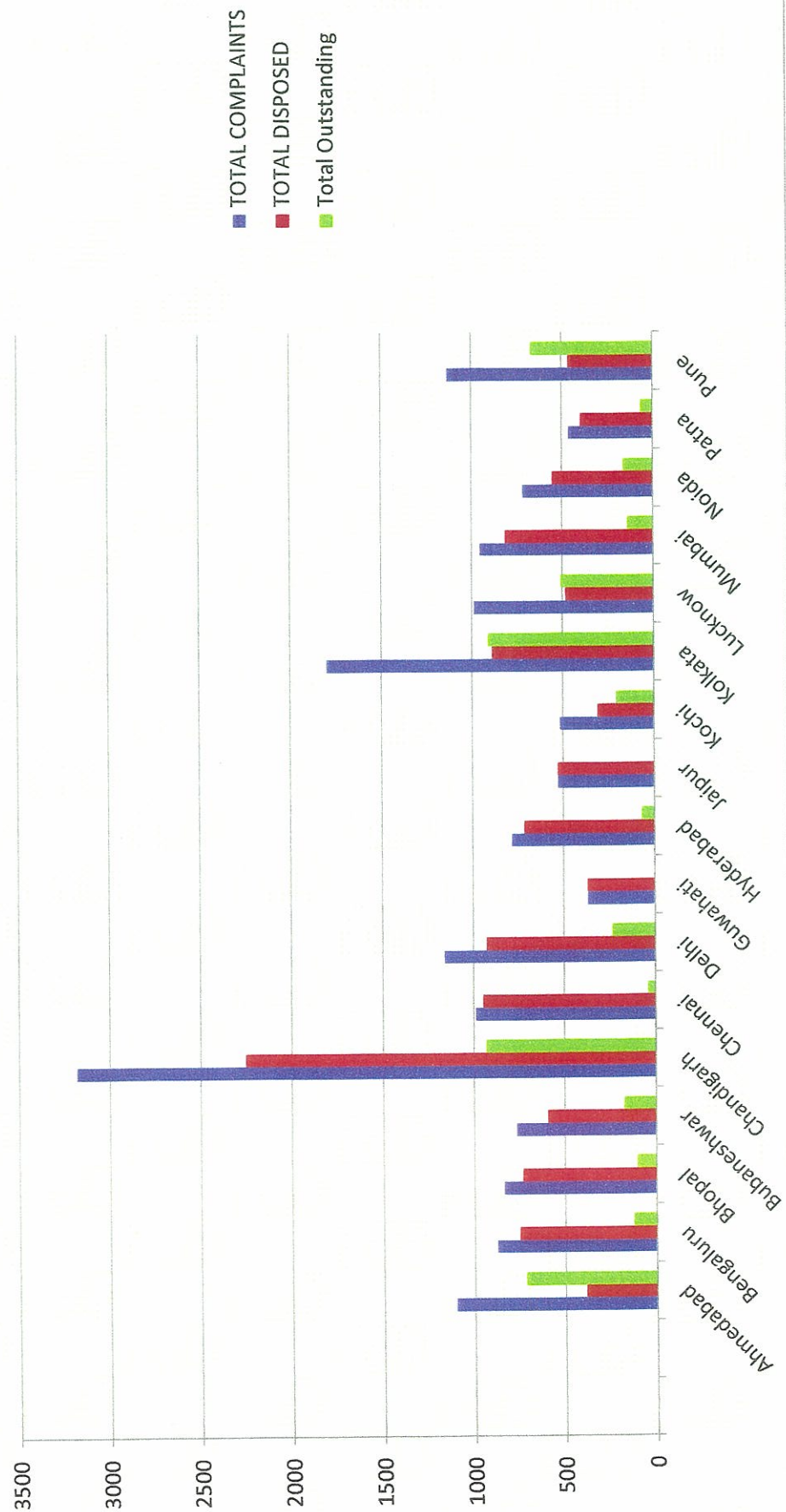
Complaints Disposal statement for the period from 01.04.2018 to 31.3.2019

STATEMENT L2

LIFE INSURANCE

Name of the centre	Total No of Complaints		Complaints disposed by way of						Durationwise disposal of Complaints				Durationwise Outstanding complaints					
	O/s at the beginning of the year	Received upto March	Total	Recom mendati ons	Awards	Withdraw al	Non- accepta nce	Dismissal awards fvg. Ins. Co.	Non- Entertaina ble	Total Dispose d	Within 3 months	3 months to 1 year	Above 1 year	Total Dispose d	Within 3 months	3 month s to 1 year	Above 1 year	Total Outstanding
Ahmedabad	411	693	1104	0	2	86	0	2	296	386	309	33	44	386	75	308	335	718
Bengaluru	229	648	877	35	217	43	0	108	348	751	377	294	80	751	68	58	0	126
Bhopal	218	620	838	128	46	35	0	201	322	732	343	319	70	732	74	32	0	106
Bubaneswar	149	619	768	3	106	4	0	22	458	593	465	9	119	593	48	103	24	175
Chandigarh	1709	1475	3184	0	1010	10	0	486	746	2252	765	91	1396	2252	184	497	251	932
Chennai	89	901	990	0	69	19	0	93	767	948	778	147	23	948	35	7	0	42
Delhi	348	814	1162	181	397	17	0	1	331	927	340	331	256	927	150	85	0	235
Guwahati	56	311	367	8	99	26	0	45	189	367	320	47	0	367	0	0	0	0
Hyderabad	130	655	785	0	215	40	0	62	397	714	488	209	17	714	59	11	1	71
Jaipur	154	374	528	48	200	54	0	49	177	528	336	189	3	528	0	0	0	0
Kochi	134	382	516	0	40	20	0	74	174	308	181	14	113	308	70	124	14	208
Kolkata	718	1082	1800	0	262	200	0	90	337	889	359	139	391	889	161	468	282	911
Lucknow	330	659	989	36	3	35	0	52	355	481	368	12	101	481	63	224	221	508
Mumbai	112	844	956	30	92	17	0	32	643	814	682	121	11	814	121	14	7	142
Noida	134	583	717	24	103	74	0	36	316	553	327	182	44	553	127	37	0	164
Patna	74	389	463	0	76	26	0	24	270	396	278	72	46	396	44	20	3	67
Pune	325	810	1135	8	43	38	0	15	360	464	366	18	80	464	142	292	237	671
Total	5320	11859	17179	501	2980	744	0	1392	6486	12103	7082	2227	2794	12103	1421	2280	1375	5076

Life Insurance Industry: COMPLAINTS ANALYSIS L2



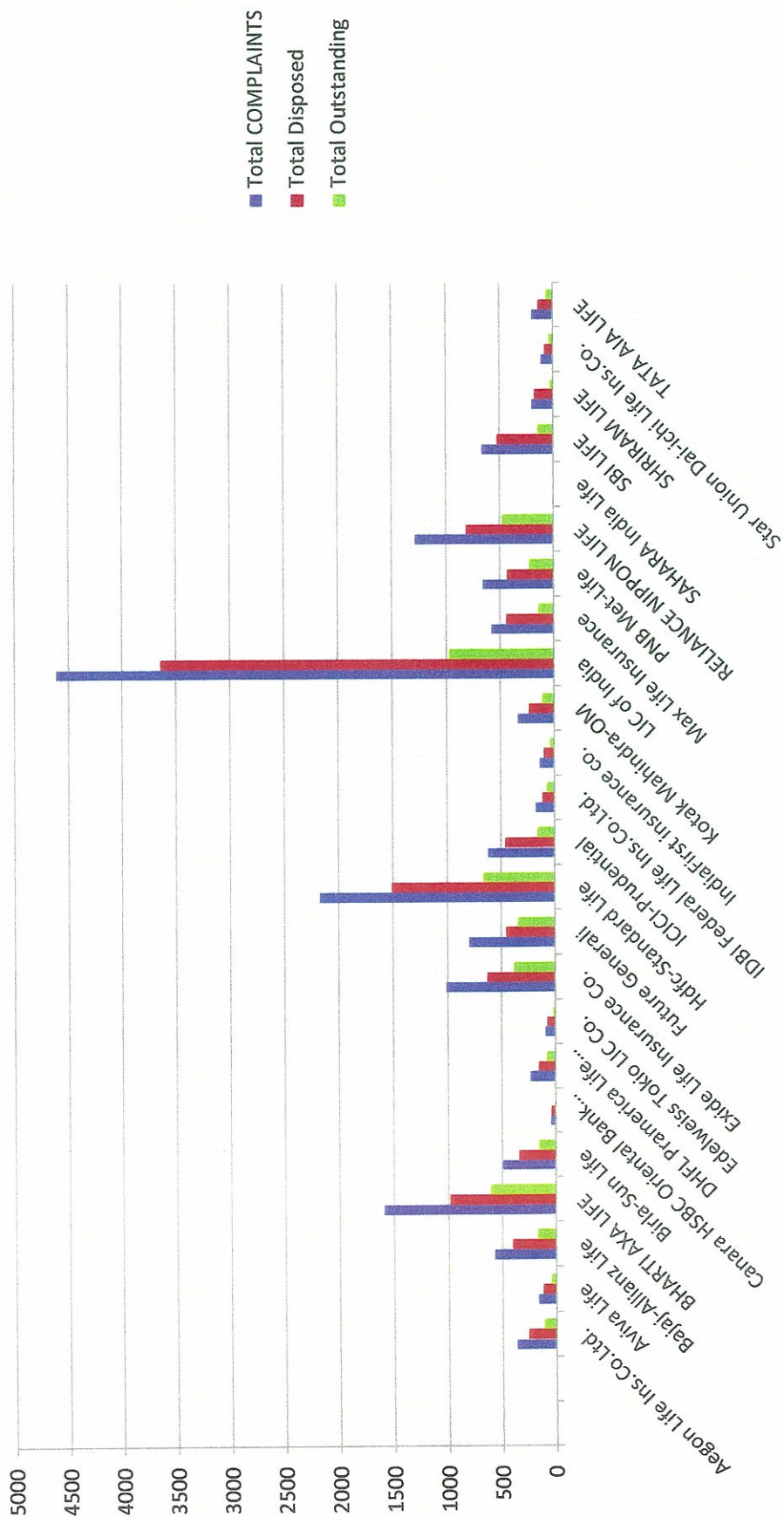
OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS
Complaints Disposal statement for the period from 01.04.2018 to 31.3.2019



**STATEMENT L3
LIFE INSURANCE**

Name of Company	Total No of Complaints			Complaints disposed by way of							Durationwise disposal of Complaints				Durationwise Outstanding complaints			
	O/s at the beginning of the year	Received upto March	Total	Recommendations	Awards	Withdrawal	Non-acceptance	Dismissal awards fvg. Ins. Co.	Non-Entertainable	Total Disposed	Within 3 months	3 months to 1 year	Above 1 year	Total Disposed	Within 3 months	3 months to 1 year	Above 1 year	Total Outstanding
Aegon Life Ins.Co.Ltd.	227	144	371	9	109	11	0	46	84	259	91	35	133	259	11	29	72	112
Aviva Life	81	86	167	6	38	5	0	32	39	120	44	11	65	120	13	25	9	47
Bajaj-Allianz Life	181	392	573	7	96	21	0	61	218	403	239	76	88	403	47	75	48	170
BHARTI AXA LIFE	505	1089	1594	78	376	62	0	69	402	987	452	282	253	987	200	273	134	607
Birla-Sun Life	164	336	500	16	87	40	0	30	170	343	192	54	97	343	58	71	28	157
Canara HSBC Oriental Bank Life	5	41	46	1	5	1	0	3	28	38	29	6	3	38	4	3	1	8
DHFL Pramerica Life Ins.Co.Ltd.	92	142	234	9	36	4	0	31	74	154	82	24	48	154	15	32	33	80
Edelweiss Tokio LIC Co.	50	43	93	12	24	4	0	10	21	71	25	23	23	71	6	6	10	22
Exide Life Insurance Co.	473	543	1016	31	256	37	0	63	243	630	260	131	239	630	65	161	160	386
Future Generali	356	445	801	40	166	15	0	54	180	455	204	108	143	455	59	130	157	346
Hdfc-Standard Life	769	1408	2177	82	437	172	0	158	662	1511	738	360	413	1511	184	324	158	666
ICICI-Prudential	219	404	623	14	135	36	0	52	223	460	249	100	111	460	55	64	44	163
IDBI Federal Life Ins.Co.Ltd.	37	139	176	8	14	7	0	11	68	108	69	14	25	108	25	37	6	68
IndiaFirst insurance co.	20	116	136	4	12	14	0	9	56	95	67	19	9	95	20	19	2	41
Kotak Mahindra-OM	103	238	341	0	59	8	0	40	125	232	131	45	56	232	35	45	29	109
LIC of India	772	3845	4617	68	405	162	0	408	2598	3641	2795	499	347	3641	301	497	178	976
Max Life Insurance	167	415	582	16	92	27	0	34	272	441	286	64	91	441	39	58	44	141
PNB Met-Life	226	434	660	18	155	14	0	49	196	432	211	77	144	432	76	102	50	228
RELIANCE NIPPON LIFE	599	691	1290	51	324	49	0	108	280	812	320	144	348	812	116	201	161	478
SAHARA India Life	0	4	4	0	0	0	0	0	4	4	4	0	0	4	0	0	0	0
SBI LIFE	153	514	667	22	89	23	0	73	316	523	346	90	87	523	50	71	23	144
SHRIRAM LIFE	49	152	201	3	37	12	0	25	95	172	108	30	34	172	15	7	7	29
Star Union Dai-ichi Life Ins.Co.	23	89	112	0	8	7	0	7	54	76	56	12	8	76	8	21	7	36
TATA AIA LIFE	49	149	198	6	20	13	0	19	78	136	84	23	29	136	19	29	14	62
Total	5320	11859	17179	501	2980	744	0	1392	6486	12103	7082	2227	2794	12103	1421	2280	1375	5076

Life Insurance Industry: COMPLAINTS ANALYSIS- COMPANYWISE L3





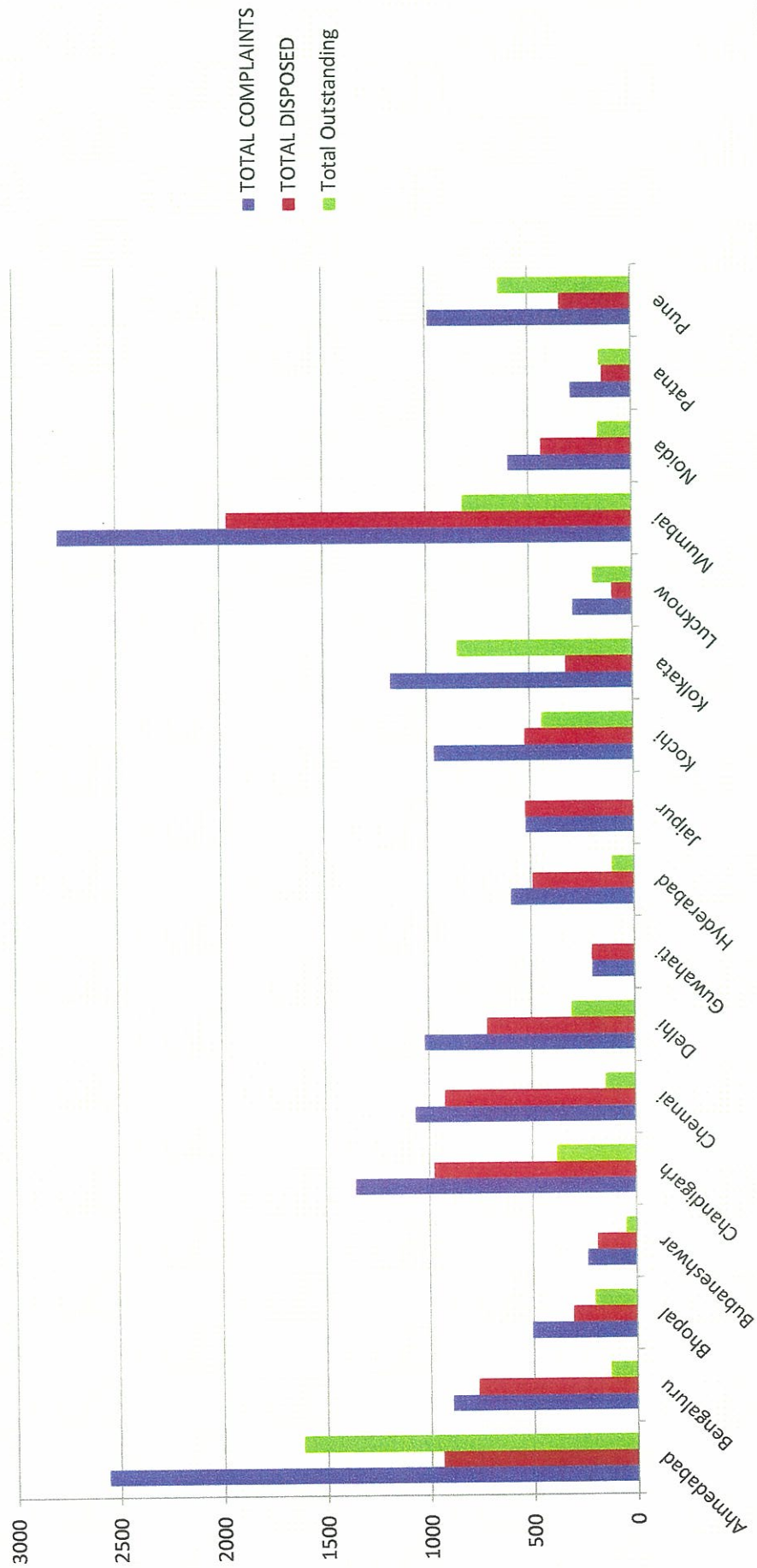
OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS
Complaints Disposal statement for the period from 01.04.2018 to 31.3.2019

STATEMENT G2
GENERAL INSURANCE

Name of the centre	Total No of Complaints		Complaints disposed by way of								Durationwise disposal of Complaints					Durationwise Outstanding complaints			
	O/s at the beginning of the year	Received upto March	Total	Recommendations	Awards	Withdrawal	Non-acceptance	Dismissal awards fvg. Ins. Co.	Non-Entertainable	Total Disposed	Within 3 months	3 months to 1 year	Above 1 year	Total Disposed	Within 3 months	3 months to 1 year	Above 1 year	Total Outstanding	
Ahmedabad	927	1632	2559	0	67	131	0	23	721	942	761	50	131	942	215	645	757	1617	
Bengaluru	261	635	896	62	223	50	0	130	304	769	339	389	41	769	88	39	0	127	
Bhopal	174	334	508	5	23	27	0	76	175	306	181	28	97	306	44	101	57	202	
Bubaneswar	55	182	237	0	7	3	0	1	176	187	179	1	7	187	2	0	48	50	
Chandigarh	430	928	1358	0	263	1	0	172	540	976	564	41	371	976	116	232	34	382	
Chennai	314	754	1068	6	325	92	0	150	351	924	396	414	114	924	100	44	0	144	
Delhi	326	695	1021	192	167	34	0	2	321	716	334	113	269	716	112	193	0	305	
Guwahati	44	161	205	3	71	19	0	39	73	205	136	62	7	205	0	0	0	0	
Hyderabad	147	449	596	0	186	22	0	81	200	489	216	260	13	489	63	44	0	107	
Jaipur	122	402	524	15	193	53	0	72	191	524	371	150	3	524	0	0	0	0	
Kochi	366	600	966	0	173	36	0	123	191	523	203	25	295	523	153	232	58	443	
Kolkata	478	698	1176	0	67	119	0	33	104	323	128	74	121	323	145	374	334	853	
Lucknow	100	188	288	0	0	30	0	3	64	97	68	20	9	97	26	83	82	191	
Mumbai	1116	1670	2786	25	930	177	0	362	469	1963	495	1144	324	1963	339	474	10	823	
Noida	81	518	599	8	84	75	0	52	218	437	236	180	21	437	110	52	0	162	
Patna	40	254	294	12	36	15	0	0	76	139	85	29	25	139	25	130	0	155	
Pune	282	705	987	0	30	61	0	19	234	344	246	39	59	344	146	307	190	643	
Total	5263	10805	16068	328	2845	945	0	1338	4408	9864	4938	3019	1907	9864	1684	2950	1570	6204	



General Insurance Industry:
COMPLAINTS ANALYSIS (Centrewise) (G2)





OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS

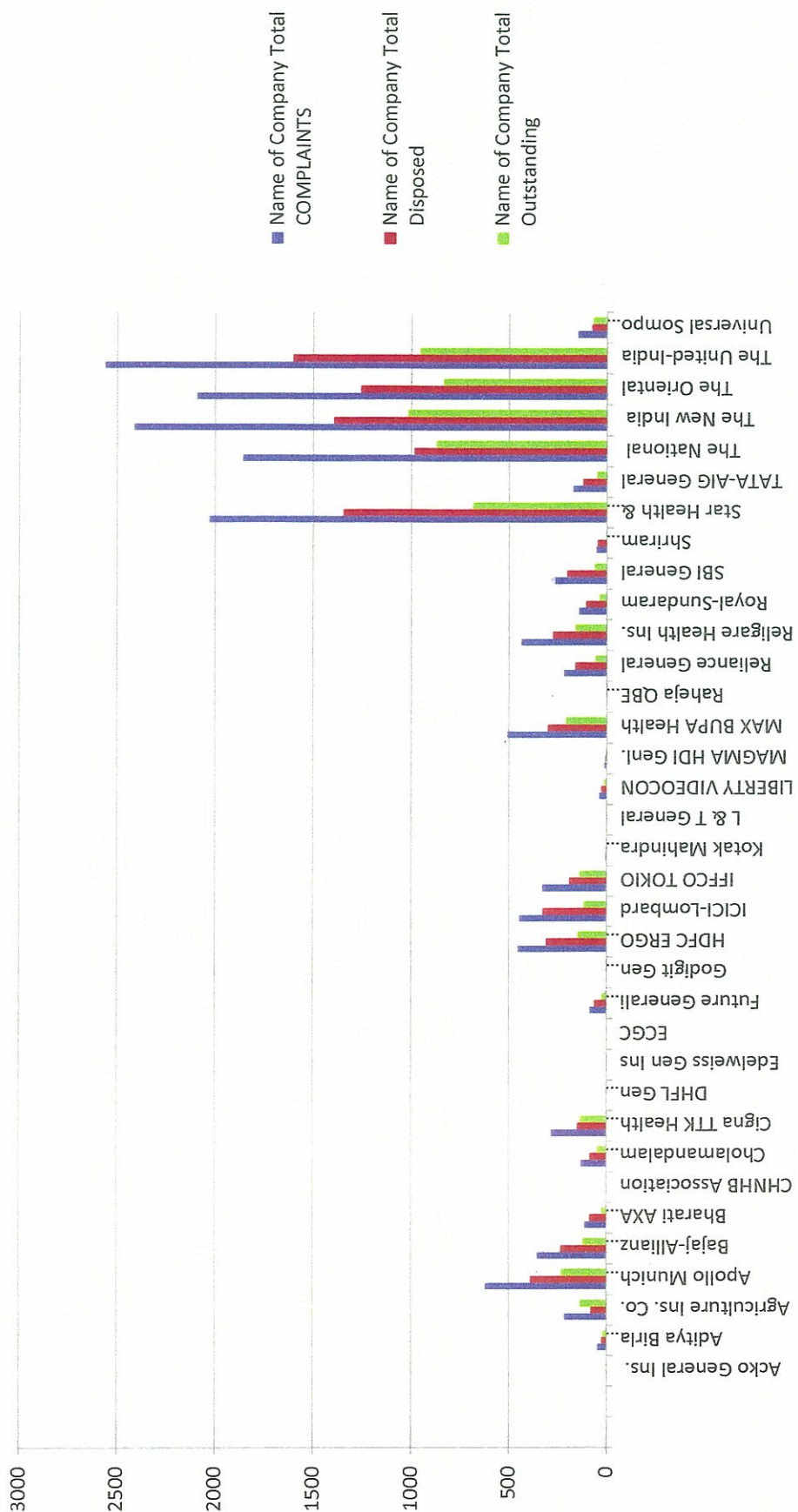
Complaints Disposal statement for the period from 01.04.2018 to 31.3.2019

STATEMENT G 3

GENERAL INSURANCE.

Name of Company	Total No of Complaints		Complaints disposed by way of						Durationwise disposal of Complaints				Durationwise Outstanding complaints			
	O/s at the beginning of the year	Received upto March	Total	Recom mendati ons	Awards	Withdraw al	Non- accepta nce	Dismissal awards fvg. Ins. Co.	Non-Enter tainable	Total Dispose d	Within 3 months to 1 year	Above 1 year	Total Disposed	Within 3 months to 1 year	Above 1 year	Total Outstanding
Acko General Ins.	0	3	3	0	0	1	0	1	1	3	2	1	0	0	0	0
Aditya Birla Health Ins. Co. Ltd.	7	40	47	0	2	5	0	1	18	26	20	6	0	10	2	21
Agriculture Ins. Co.	1	216	217	0	8	0	0	2	71	81	76	5	0	6	0	136
Apollo Munich Health	169	452	621	21	107	26	0	62	173	389	186	134	69	90	33	232
Bajaj-Allianz General	101	254	355	18	51	11	0	33	121	234	132	64	38	40	27	121
Bharati AXA Gen. Ins.	34	79	113	6	23	4	0	10	45	88	48	19	21	8	2	25
CHNHB Association	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cholamandalam MS	42	90	132	0	21	9	0	14	40	84	44	24	16	18	12	48
Cigna TTK Health Ins. Co.	98	186	284	10	46	11	0	11	71	149	78	28	43	27	37	135
DHFL Gen Insurance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Edelweiss Gen Ins	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ECGC	1	0	1	0	0	1	0	0	0	1	0	0	1	0	0	0
Future Generali Gen.	32	56	88	1	4	33	0	5	20	63	22	31	10	7	8	25
Godigit Gen Insurance	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
HDFC ERGO Gen. Ins.	156	299	455	15	87	23	0	45	138	308	144	96	68	47	26	147
ICICI-Lombard	160	286	446	28	63	57	0	47	132	327	150	124	53	38	28	119
IFFCO TOKIO	154	176	330	3	61	21	0	34	73	192	82	57	53	25	51	138
Koalak Mahindra Gen. Ins. Co. Ltd.	1	6	7	0	0	1	0	0	4	5	5	0	0	1	0	2
L & T General	1	0	1	0	1	0	0	0	1	1	0	1	0	0	0	0
LIBERTY VIDEOCON	7	33	40	1	5	3	0	3	15	27	21	2	4	6	2	13
MAGWA HDI Genl.	4	9	13	0	1	1	0	1	5	8	6	1	1	2	2	5
MAX BUPA Health	115	392	507	16	92	31	0	26	134	299	151	100	48	96	23	208
Raheja QBE Gen. Ins.	0	1	1	0	0	0	0	0	1	1	1	0	0	0	0	0
Reliance General	65	155	220	4	42	16	0	17	82	161	87	33	41	17	13	59
Religare Health Ins.	159	278	437	11	80	33	0	56	95	275	107	108	60	47	34	162
Royal-Sundaram	56	87	143	3	39	11	0	20	33	106	38	42	26	11	8	37
SBI General	64	202	266	2	39	11	0	26	125	203	138	34	31	17	17	63
Shriram Gen. Ins. Co. Ltd.	22	32	54	8	9	5	0	4	22	48	23	12	13	2	2	6
Star Health & Allied Ins.	564	1467	2031	53	295	201	0	200	596	1345	704	484	157	189	145	686
TATA-AIG General	31	143	174	3	22	13	0	14	70	122	73	31	18	20	6	52
The National	676	1184	1860	24	273	86	0	125	477	985	515	213	257	209	287	875
The New India	762	1653	2415	32	408	103	0	197	655	1395	729	411	255	278	261	1020
The Oriental	792	1303	2095	35	449	92	0	152	529	1257	594	375	288	184	267	838
The United-India	955	1607	2562	34	605	128	0	223	613	1603	707	568	328	268	257	959
Universal Sampo Gen.	34	116	150	0	12	8	0	9	49	78	55	15	8	21	20	72
Total	5263	10805	16068	328	2845	945	0	1338	4408	9864	3929	2169	1259	1684	1570	6204

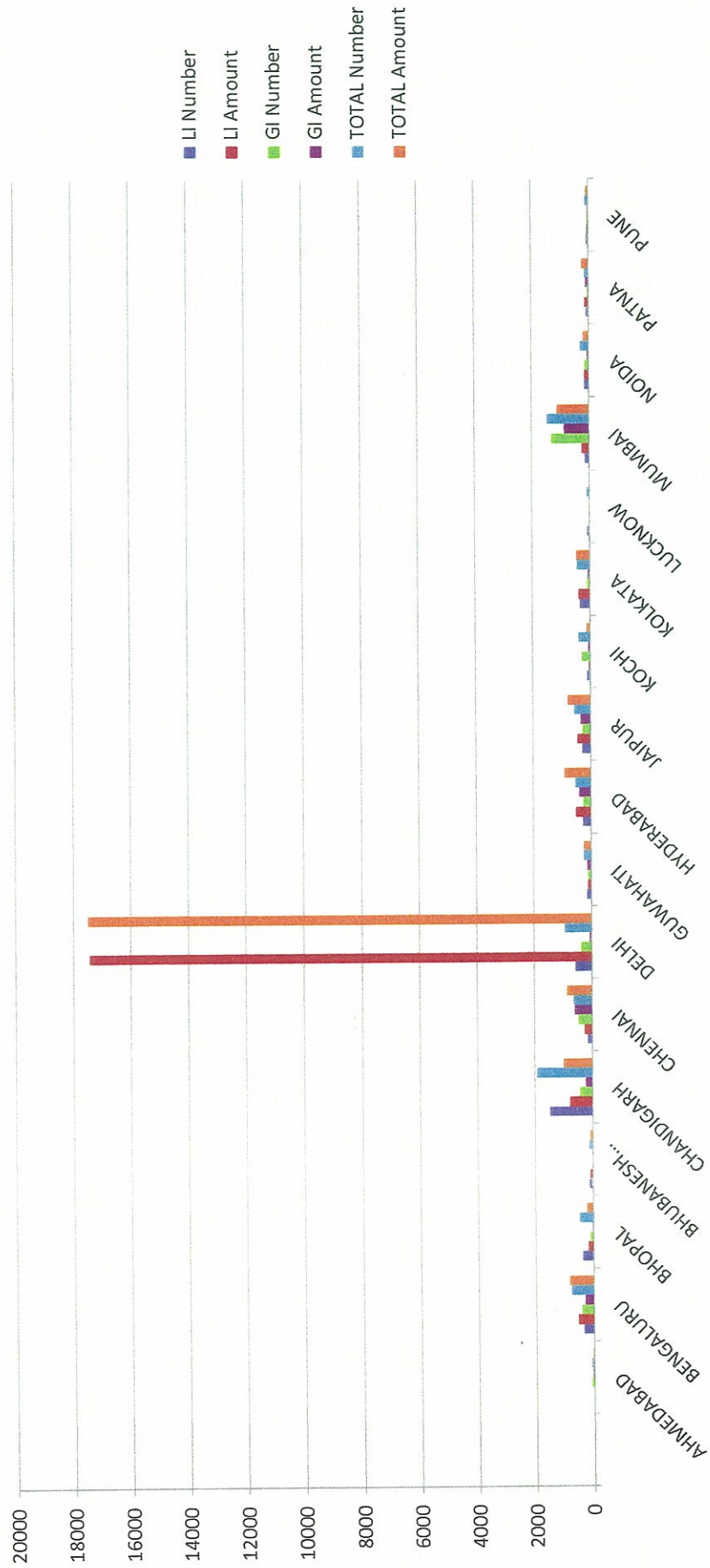
General Insurance Industry: COMPANY WISE COMPLAINT ANALYSIS (G3)



OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS									
Complaints Received & Disposal statement for the period from 01.04.2018 to 31.3.2019									
RECOMMENDATIONS AND AWARDS FOR THE PERIOD FROM 01.04.2018 TO 31.3.2019									
		Rs. in Lacs		L4G4					
Name of the Insurer	LIFE		GENERAL		TOTAL				
	RECOMMENDATION AND AWARDS		RECOMMENDATION AND AWARDS		RECOMMENDATION AND AWARDS				
	Number	Amount	Number	Amount	Number	Amount			
AHMEDABAD	4	2.00	90	37.03	94	39.03			
BENGALURU	360	535.98	415	297.28	775	833.25			
BHOPAL	375	177.78	104	35.22	479	213.01			
BHUBANESHWAR	131	87.67	8	0.00	139	87.67			
CHANDIGARH	1496	773.65	435	228.59	1931	1002.24			
CHENNAI	162	258.56	481	613.45	643	872.01			
DELHI	579	17426.75	361	65.29	940	17492.05			
GUWAHATI	152	109.52	113	138.03	265	247.56			
HYDERABAD	277	514.17	267	405.26	544	919.43			
JAIPUR	297	451.34	280	344.02	577	795.36			
KOCHI	114	54.78	296	70.86	410	125.65			
KOLKATA	352	393.16	100	73.36	452	466.52			
LUCKNOW	91	10.65	3	0.00	94	10.65			
MUMBAI	154	247.55	1317	868.28	1471	1115.83			
NOIDA	163	141.63	144	63.71	307	205.34			
PATNA	100	135.05	48	104.88	148	239.94			
PUNE	66	53.45	49	31.56	115	85.01			
Total	4873	21373.72	4511	3376.82	9384	24750.54			



Life & General Insurance Industries: RECOMMENDATIONS and AWARDS (L4G4)



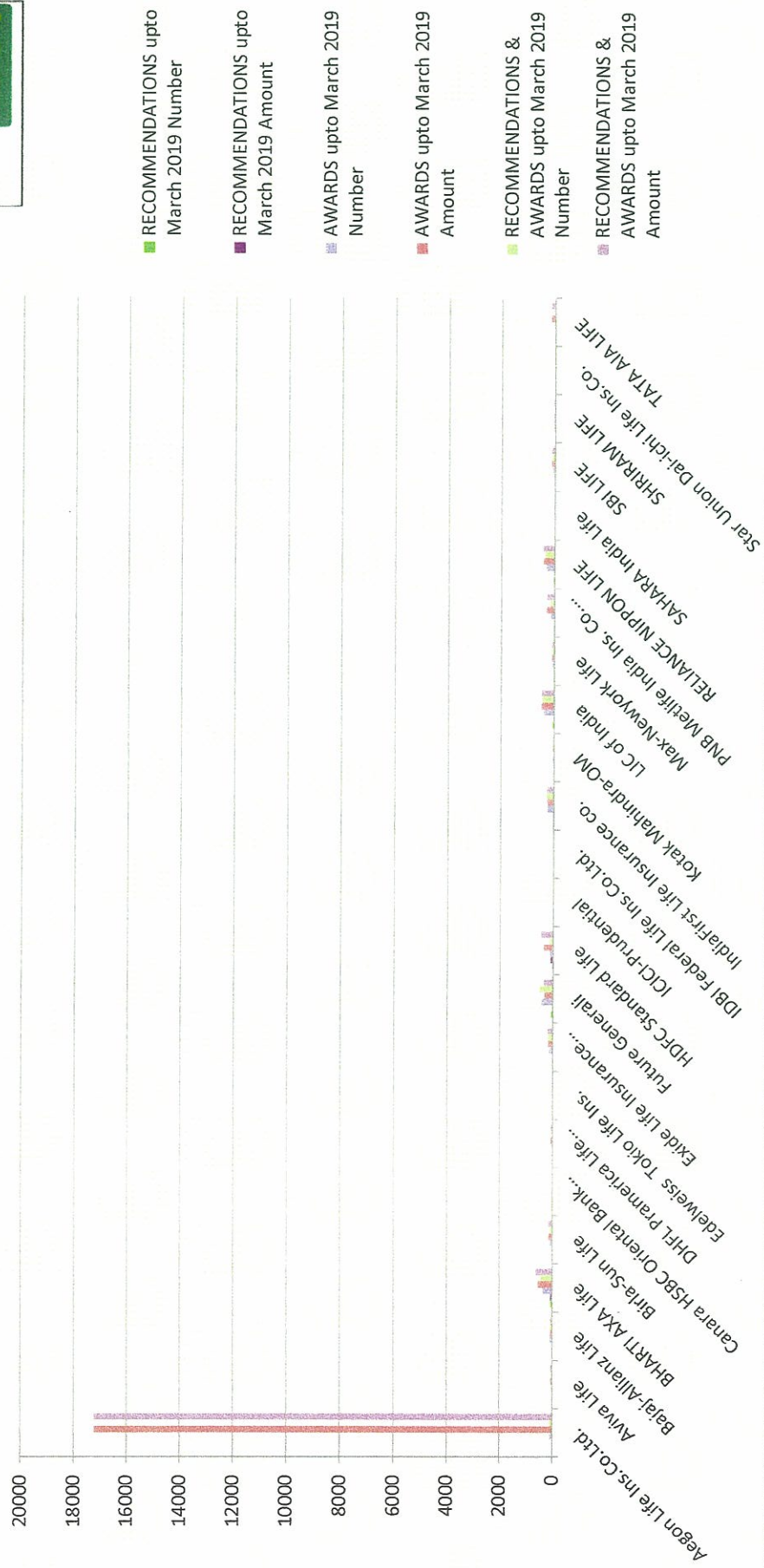
OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS
Complaints Disposal statement for the period from 01.04.2018 to 31.3.2019



STATEMENT L 5
LIFE INSURANCE
(FIGURES IN LACS)

Name of Insurer	RECOMMENDATIONS		AWARDS		RECOMMENDATIONS & AWARDS	
	upto March 2019		upto March 2019		upto March 2019	
	Number	Amount	Number	Amount	Number	Amount
Aegon Life Ins.Co.Ltd.	9	2.24	109	17246.68	118	17248.92
Aviva Life	6	0.00	38	75.04	44	75.04
Bajaj-Allianz Life	7	0.00	96	89.75	103	89.75
BHARTI AXA Life	78	72.54	376	554.40	454	626.94
Birla-Sun Life	16	7.68	87	150.53	103	158.21
Canara HSBC Oriental Bank Life	1	0.00	5	10.52	6	10.52
DHFL Pramerica Life Ins.Co.Ltd.	9	0.00	36	75.81	45	75.81
Edelweiss Tokio Life Ins.	12	1.76	24	38.10	36	39.86
Exide Life Insurance Company Ltd	40	11.35	166	190.22	206	201.57
Future Generali	82	19.64	437	331.26	519	350.90
HDFC Standard Life	14	88.25	135	365.88	149	454.14
ICICI-Prudential	8	3.32	14	9.12	22	12.44
IDBI Federal Life Ins.Co.Ltd.	4	0.00	12	28.15	16	28.15
IndiaFirst Life Insurance co.	31	20.30	256	236.47	287	256.76
Kotak Mahindra-OM	0	0.00	59	38.48	59	38.48
LIC of India	68	7.62	405	482.72	473	490.34
Max-Newyork Life	16	0.50	92	98.00	108	98.50
PNB Metlife India Ins. Co. P.Ltd	18	0.90	155	312.74	173	313.64
RELIANCE NIPPON LIFE	51	18.43	324	425.15	375	443.58
SAHARA India Life	0	0.00	0	0.00	0	0.00
SBI LIFE	22	0.50	89	132.67	111	133.17
SHRIRAM LIFE	3	0.44	37	52.81	40	53.25
Star Union Dai-ichi Life Ins.Co.	0	0.00	8	10.04	8	10.04
TATA AIA LIFE	6	0.61	20	163.10	26	163.71
Total	501	256.08	2980	21117.65	3481	21373.72

Life Insurance Industries : RECOMMENDATIONS and AWARDS (L5)



OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS

Complaints Disposal statement for the period from 01.04.2018 to 31.3.2019



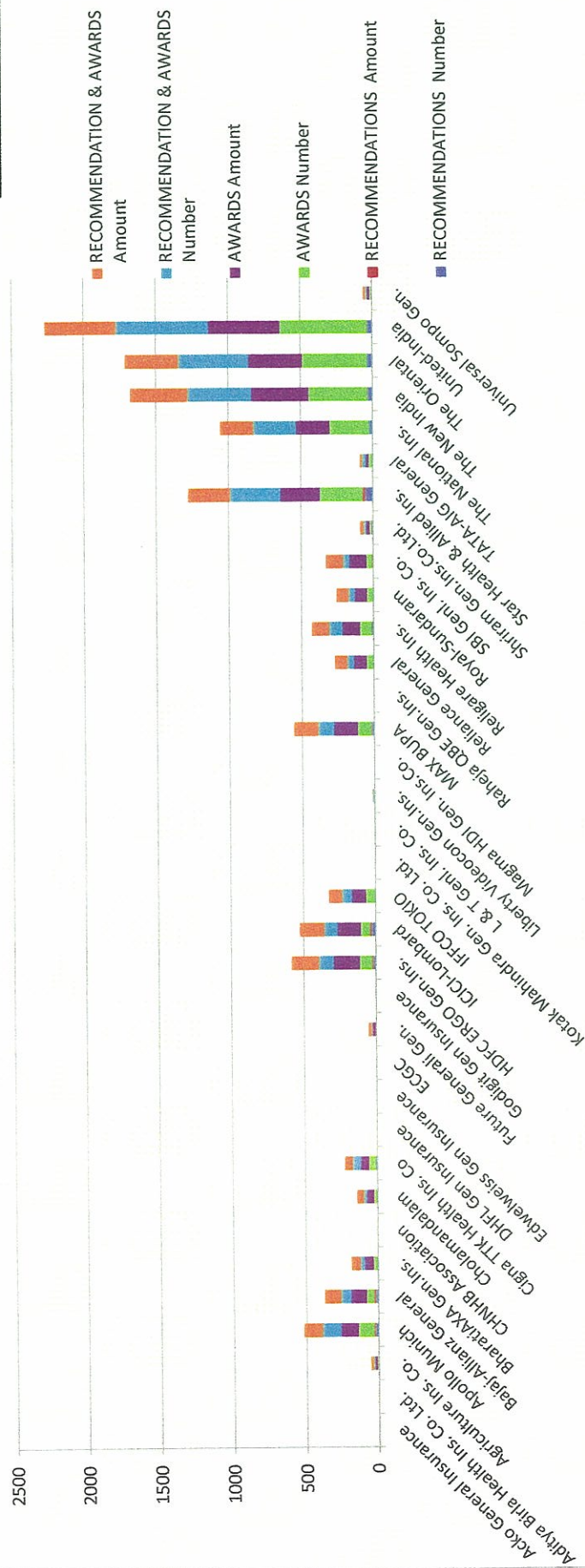
STATEMENT G 5

GENERAL INSURANCE

Amount in Lacs

Name of the Insurer	RECOMMENDATIONS		AWARDS		RECOMMENDATION & AWARDS	
	upto March 2019		upto March 2019		upto March 2019	
	Number	Amount	Number	Amount	Number	Amount
Acko General Insurance	0	0.00	0	0.00	0	0.00
Aditya Birla Health Ins. Co. Ltd.	0	0.00	2	0.39	2	0.39
Agriculture Ins. Co.	0	0.00	8	19.67	8	19.67
Apollo Munich	21	9.06	107	122.98	128	132.04
Bajaj-Allianz General	18	10.48	51	107.51	69	117.99
BharatAXA Gen. Ins.	6	0.35	23	63.04	29	63.39
CHNHB Association	0	0.00	0	0.00	0	0.00
Cholamandalam	0	0.00	21	49.54	21	49.54
Cigna TTK Health Ins. Co	10	0.40	46	56.00	56	56.40
DHFL Gen Insurance	0	0.00	0	0.00	0	0.00
Edelweiss Gen Insurance	0	0.00	0	0.00	0	0.00
ECGC	0	0.00	0	0.00	0	0.00
Future Generali Gen.	1	0.00	4	21.88	5	21.88
Godigit Gen Insurance	0	0.00	0	0.00	0	0.00
HDFC ERGO Gen. Ins.	15	7.82	87	181.77	102	189.59
ICICI Lombard	28	10.24	63	162.57	91	172.80
IFFCO TOKIO	3	0.00	61	98.88	64	98.88
Kotak Mahindra Gen. Ins. Co. Ltd.	0	0.00	0	0.00	0	0.00
L & T Genl. Ins. Co.	0	0.00	1	1.22	1	1.22
Liberty Videocon Gen. Ins.	1	0.00	5	2.14	6	2.14
Magnum HDT Gen. Ins. Co.	0	0.00	1	0.00	1	0.00
MAX BUPA	16	3.41	92	165.90	108	169.31
Rafaja QBE Gen. Ins.	0	0.00	0	0.00	0	0.00
Reliance General	4	1.37	42	88.05	46	89.42
Religare Health Ins.	11	0.78	80	122.84	91	123.62
Royal-Sundaram	3	0.00	39	87.29	42	87.29
SBF Genl. Ins. Co.	2	4.00	39	120.17	41	124.17
Shriram Gen. Ins. Co. Ltd.	8	2.97	9	24.93	17	27.90
Star Health & Allied Ins.	53	17.05	295	274.60	348	291.65
TATA-AIG General	3	0.00	22	20.60	25	20.60
The National Ins.	24	0.00	273	231.24	297	231.24
The New India	32	1.45	408	396.91	440	398.36
The Oriental	35	0.93	449	371.48	484	372.41
United-India	34	0.44	605	495.65	639	496.09
Universal Sampo Gen.	0	0.00	12	18.84	12	18.84
Total	328	70.75	2845	3306.08	3173	3376.43

General Insurance Industry: Recommendation and Awards (G5)





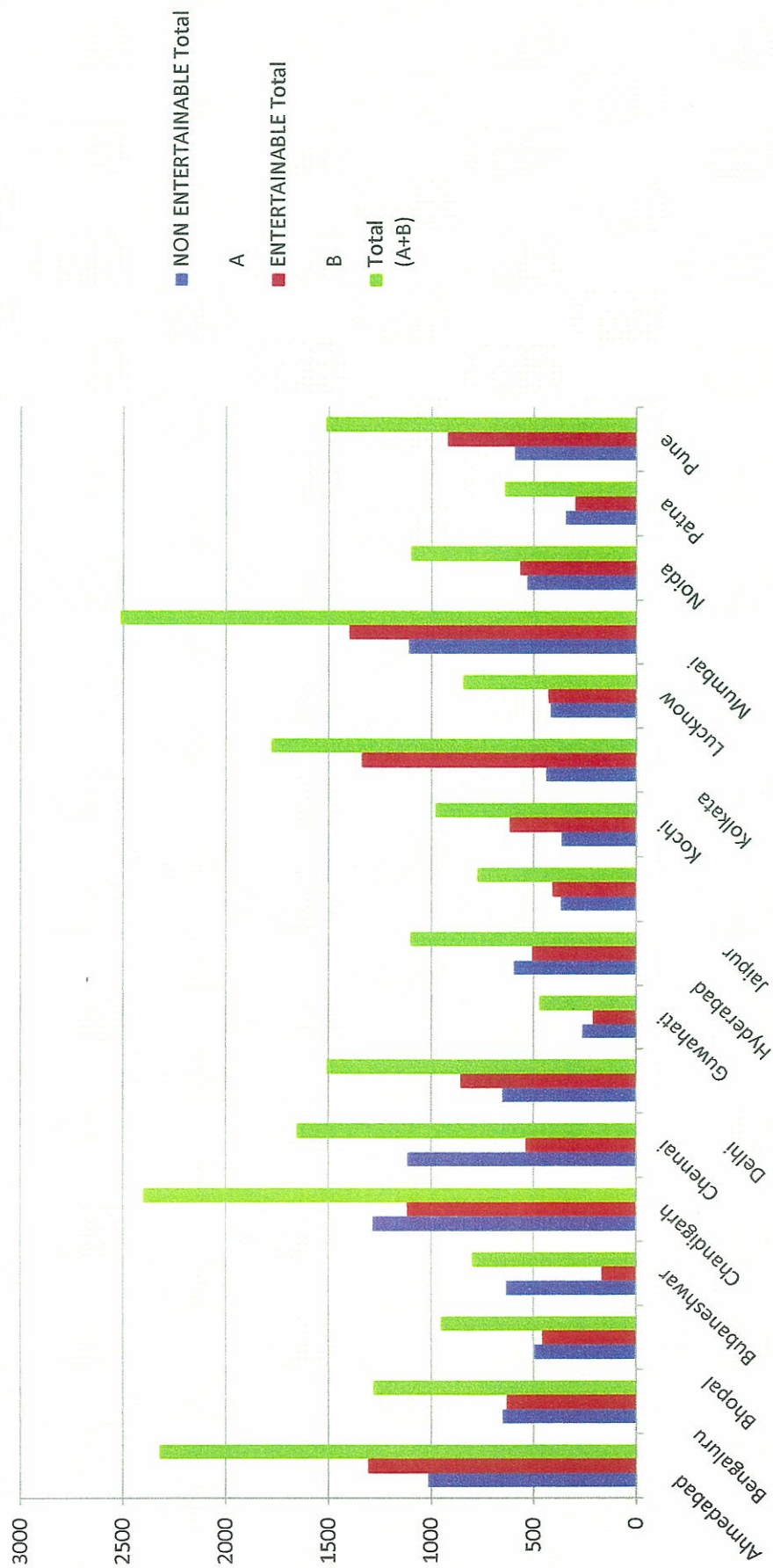
OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS
Complaints Received & Disposed statement for the period from 01.04.2018 to 31.3.2019
NATURE WISE CLASSIFICATION OF COMPLAINTS RECEIVED FOR THE PERIOD FROM 01.04.2018 TO 31.3.2019

STATEMENT L7G7
LIFE INSURANCE & GENERAL INSURANCE

Name of the Center	NON ENTERTAINABLE				ENTERTAINABLE												Total (A+B)
	[13(1)(a) to (i)]	[14(1)]	[14(3)]	[14(5)]	[14(3b)]	Total	13(a)	13(b)	13(c)	13(d)	13(e)	13(f)	13(g)	13(h)	13(i)	Total	
Ahmedabad	394	3	616	0	4	1017	7	984	292	16	0	5	1	1	2	1308	2325
Bengaluru	94	32	510	2	14	652	16	525	7	23	2	57	0	0	1	631	1283
Bhopal	255	10	213	1	18	497	40	210	157	32	0	13	1	4	0	457	954
Bhubaneswar	68	4	552	1	9	634	110	52	0	5	0	0	0	0	0	167	801
Chandigarh	297	35	888	1	65	1286	54	393	77	567	1	17	0	3	5	1117	2403
Chennai	503	32	583	0	0	1118	43	471	2	11	0	2	1	4	3	537	1655
Delhi	66	192	377	2	15	652	20	426	151	225	4	22	0	2	7	857	1509
Guwahati	10	6	245	0	1	262	45	95	18	49	0	0	2	0	1	210	472
Hyderabad	94	92	406	1	4	597	30	336	3	93	9	18	8	1	9	507	1104
Jaipur	152	6	199	1	10	368	144	111	33	112	2	3	0	2	1	408	776
Kochi	68	2	291	1	3	365	35	413	10	11	2	9	2	0	135	617	982
Kolkata	247	92	92	0	10	441	56	552	631	8	11	24	0	10	47	1339	1780
Lucknow	0	190	229	0	0	419	108	137	142	5	2	26	0	4	4	428	847
Mumbai	158	468	477	3	6	1112	14	1201	154	11	2	11	2	7	0	1402	2514
Noida	93	55	363	7	16	534	113	253	17	163	2	11	4	3	1	567	1101
Patna	78	8	234	8	18	346	26	220	39	0	1	10	0	1	0	297	643
Pune	201	17	353	2	21	594	18	484	138	253	8	11	1	5	3	921	1515
Total	2778	1244	6628	30	214	10894	879	6863	1871	1584	46	239	22	47	219	11770	22664

Beyond Scope of Rules [13(1)(a) to (i)]
Not within Jurisdiction [14(1)]
Customer not represented to Ins. Co. [14(3)]
Sub-judice in courts/forums [14(5)]
Time Barred [14(3)(b))]
Rule 13(1)(a) - delay in settlement of claims
Rule 13(1)(b) - any partial or total repudiation of claims by an insurer
Rule 13(1)(c) - any dispute in regard to premium paid or payable in terms of the policy.
Rule 13(1)(d) - Misrepresentation of policy terms and conditions at any time in the policy document or policy contract.
Rule 13(1)(e) - any dispute on the legal construction of the policies in so far as such disputes relate to claims
Rule 13(1)(f) - Policy servicing related grievances against insurers and their agents and intermediaries.
Rule 13(1)(g) - Issuance of policies which is not in conformity with the proposal form submitted by the proposer
Rule 13(1)(h) - non-issue of any insurance document to customers after receipt of premium.
Rule 13(1)(i) - Any other matter resulting from the violation of provisions

Life Insurance and General Insurance industries: ENTERTAINABLE and NONENTERTAINABLE COMPLAINTS (L7G7)



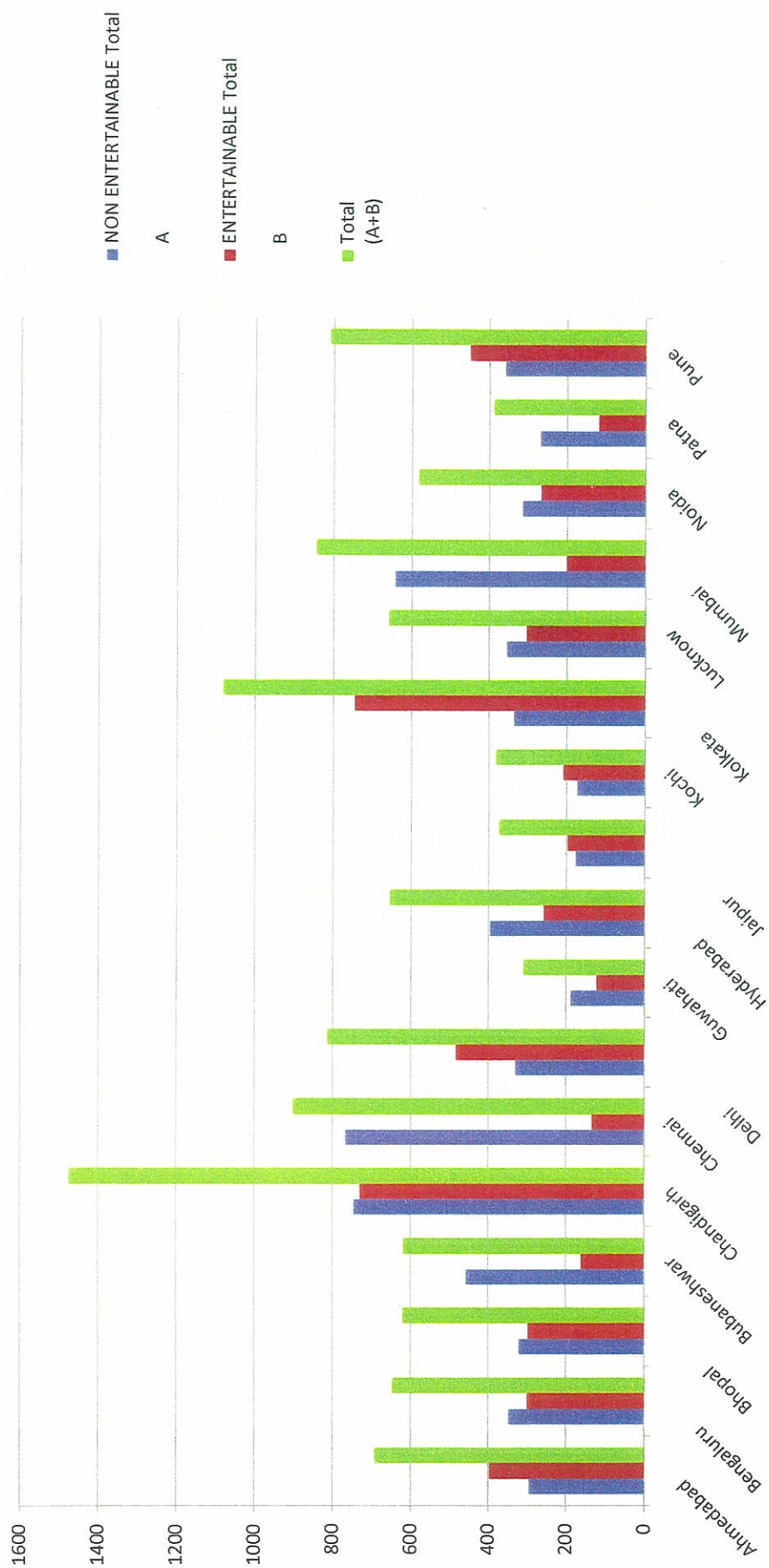


OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS
Complaints Received & Disposed statement for the period from 01.04.2018 to 31.3.2019
NATURE WISE CLASSIFICATION OF COMPLAINTS RECEIVED FOR THE PERIOD FROM 01.04.2018 TO 31.3.2019
STATEMENT L 8
LIFE INSURANCE

Name of the Center	NON ENTERTAINABLE					ENTERTAINABLE										Total (A+B)	
	[13(1)(a) to (i)]	[14(1)]	[14(3)]	[14(5)]	[14(3)(b)]	Total	13(a)	13(b)	13(c)	13(d)	13(e)	13(f)	13(g)	13(h)	13(i)		Total
						A										B	
Ahmedabad	82	1	212	0	1	296	3	98	276	16	0	1	1	0	2	397	693
Bengaluru	40	22	272	1	13	348	10	214	5	23	0	47	0	0	1	300	648
Bhopal	169	9	129	1	14	322	27	74	152	32	0	10	1	2	0	298	620
Bhubaneswar	54	3	392	1	8	458	107	49	0	5	0	0	0	0	0	161	619
Chandigarh	266	15	416	1	48	746	37	34	74	564	1	14	0	3	2	729	1475
Chennai	391	19	357	0	0	767	24	94	0	10	0	1	0	3	2	134	901
Delhi	30	116	176	0	9	331	12	67	149	223	3	20	0	2	7	483	814
Guwahati	8	2	179	0	0	189	21	35	16	47	0	0	2	0	1	122	311
Hyderabad	56	73	265	0	3	397	18	102	3	93	9	16	8	0	9	258	655
Jaipur	68	2	96	1	10	177	22	33	33	104	2	1	0	1	1	197	374
Kochi	41	1	128	1	3	174	12	51	7	11	2	8	1	0	116	208	382
Kolkata	160	76	92	0	9	337	41	57	556	8	8	23	0	6	46	745	1082
Lucknow	0	146	209	0	0	355	76	54	135	5	0	26	0	4	4	304	659
Mumbai	76	287	273	1	6	643	6	41	140	8	0	5	0	1	0	201	844
Noida	46	23	237	1	9	316	23	62	10	157	1	7	4	3	0	267	583
Patna	54	7	183	8	18	270	14	55	38	0	1	10	0	1	0	119	389
Pune	131	7	200	1	21	360	4	76	133	231	0	5	0	1	0	450	810
Total	1672	809	3816	17	172	6486	457	1196	1727	1537	27	194	17	27	191	5373	11859

Beyond Scope of Rules [13(1)(a) to (i)]
Not within Jurisdiction [14(1)]
Customer Not represented to Ins. Co. [14(3)]
Sub-judice in courts/forums [14(5)]
Time Barred [14(3)(b)]
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Rule 13(1)(i) - Any other matter resulting from the violation of provisions

Life Insurance Industry: Classification of Complaints (L8)





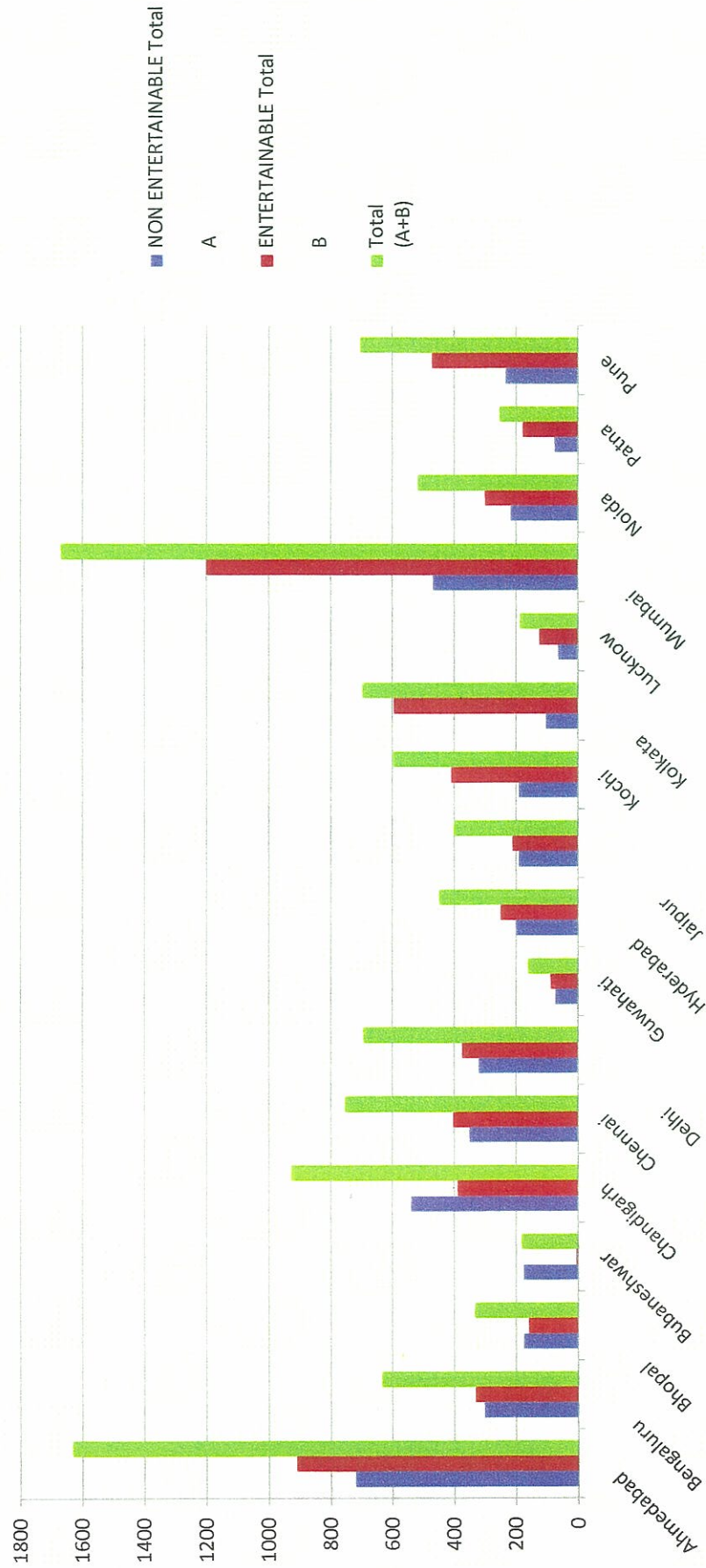
OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS
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NATURE WISE CLASSIFICATION OF COMPLAINTS RECEIVED FOR THE PERIOD FROM 01.04.2018 TO 31.3.2019

STATEMENT G 8
GENERAL INSURANCE

Name of the Center	NON ENTERTAINABLE					ENTERTAINABLE										Total (A+B)	
	[13(1)(a) to (i)]	[14(1)]	[14(3)]	[14(5)]	[14(3)(b))]	Total	13(a)	13(b)	13(c)	13(d)	13(e)	13(f)	13(g)	13(h)	13(i)		Total
Ahmedabad Bengaluru Bhopal Bhubaneswar Chandigarh Chennai Delhi Guwahati Hyderabad Jaipur Kochi Kolkata Lucknow Mumbai Noida Patna Pune Total	312	2	404	0	3	721	4	886	16	0	0	4	0	1	0	911	1632
	54	10	238	1	1	304	6	311	2	0	2	10	0	0	0	331	635
	86	1	84	0	4	175	13	136	5	0	0	3	0	2	0	159	334
	14	1	160	0	1	176	3	3	0	0	0	0	0	0	0	6	182
	31	20	472	0	17	540	17	359	3	3	0	3	0	0	3	388	928
	112	13	226	0	0	351	19	377	2	1	0	1	1	1	1	403	754
	36	76	201	2	6	321	8	359	2	2	1	2	0	0	0	374	695
	2	4	66	0	1	73	24	60	2	2	0	0	0	0	0	88	161
	38	19	141	1	1	200	12	234	0	0	0	2	0	1	0	249	449
	84	4	103	0	0	191	122	78	0	8	0	2	0	1	0	211	402
	27	1	163	0	0	191	23	362	3	0	0	1	1	0	19	409	600
	87	16	0	0	1	104	15	495	75	0	3	1	0	4	1	594	698
	0	44	20	0	0	64	32	83	7	0	2	0	0	0	0	124	188
	82	181	204	2	0	469	8	1160	14	3	2	6	2	6	0	1201	1670
	47	32	126	6	7	218	90	191	7	6	1	4	0	0	1	300	518
	24	1	51	0	0	76	12	165	1	0	0	0	0	0	0	178	254
	70	10	153	1	0	234	14	408	5	22	8	6	1	1	4	3	471
1106	435	2812	13	42	4408	422	5667	144	47	19	45	5	20	28	6397	10805	

Beyond Scope of Rules [13(1)(a) to (i)]
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General Insurance Industry: Classification of Complaints (G8)





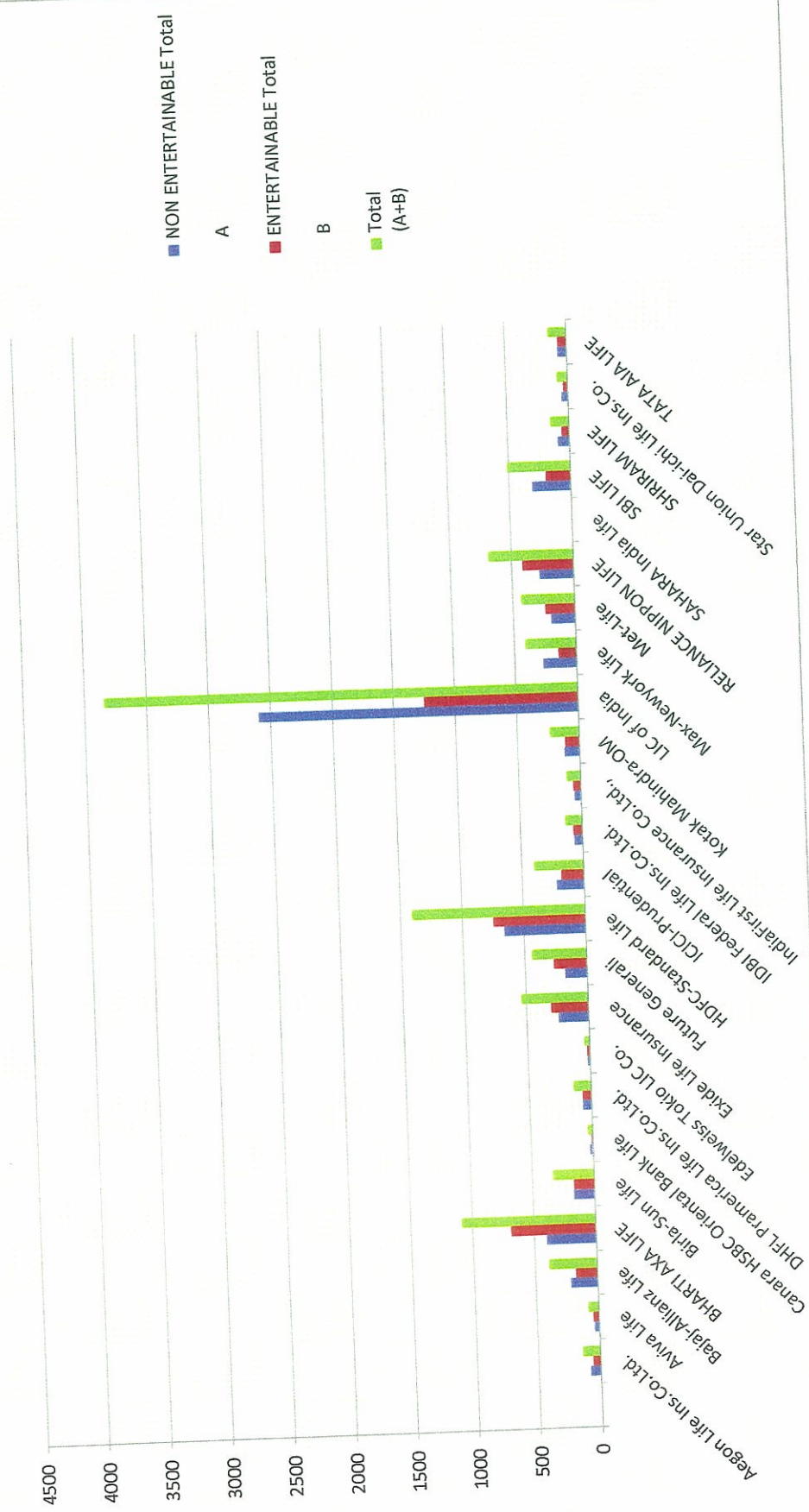
OFFICE OF THE EXECUTIVE COUNCIL OF INSURERS
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NATURE WISE CLASSIFICATION OF COMPLAINTS RECEIVED FOR THE PERIOD FROM 01.04.2018 TO 31.3.2019
STATEMENT L 9
LIFE INSURANCE

Name of the Center	NON ENTERTAINABLE				ENTERTAINABLE										Total (A+B)			
	[13(1)(a) to (i)]	[14(1)]	[14(3)]	[14(5)]	[14(3(b))]	Total	13(a)	13(b)	13(c)	13(d)	13(e)	13(f)	13(g)	13(h)		13(i)	Total	
Aegon Life Ins.Co.Ltd. Aviva Life Bajaj-Alianz Life BHARTIAXA LIFE BIRLA-Sun Life Canara HSBC Oriental Bank Life DHFL Pramerica Life Ins.Co.Ltd. Edelweiss Tokio LIC Co. Exide Life Insurance Future Generali HDFC-Standard Life ICICI-Prudential IDBI Federal Life Ins.Co.Ltd. IndiaFirst Life Insurance Co.Ltd., Kotak Mahindra-OM LIC of India Max-Newyork Life Met-Life RELIANCE NIPPON LIFE SAHARA India Life SBI LIFE SHRIRAM LIFE Star Union Dai-ichi Life Ins.Co. TATA AIA LIFE Total	31	3	40	0	10	84	3	4	24	25	0	3	1	0	0	60	144	
	13	2	23	0	1	39	2	8	21	14	0	0	0	0	1	47	86	
	50	22	135	1	10	218	22	38	51	44	1	8	2	0	8	174	392	
	96	39	253	0	14	402	13	65	222	222	1	20	6	4	4	687	1089	
	44	14	97	0	15	170	21	26	57	31	1	14	1	0	15	166	336	
	6	7	15	0	0	28	0	4	2	4	0	2	0	0	1	13	41	
	30	8	32	0	4	74	3	13	32	19	0	1	0	0	0	68	142	
	3	4	12	0	2	21	0	0	14	4	0	1	0	1	2	22	43	
	82	17	140	0	4	243	6	28	166	94	1	3	0	1	1	300	543	
	57	11	111	0	1	180	7	7	153	94	0	1	1	1	1	265	445	
	177	72	390	2	21	662	31	101	255	311	1	24	0	3	20	746	1408	
	63	23	134	0	3	223	20	28	49	66	2	3	1	2	10	181	404	
	16	0	51	0	1	68	3	12	20	23	0	0	0	0	13	71	139	
	9	8	39	0	0	56	4	11	16	25	1	2	1	0	0	60	116	
	44	10	64	0	7	125	2	15	32	50	0	9	0	2	3	113	238	
	591	406	1552	9	40	2598	263	651	96	71	13	61	3	4	85	1247	3845	
	88	45	134	1	4	272	12	21	41	53	1	9	0	0	6	143	415	
	57	22	113	0	4	196	4	29	103	90	0	7	0	0	4	1	238	434
	60	20	178	0	22	280	16	51	141	188	2	3	1	1	1	8	411	691
	2	1	1	0	0	0	4	0	0	0	0	0	0	0	0	0	0	4
88	51	170	1	6	316	11	46	45	69	1	14	0	3	9	198	514	152	
28	8	58	0	1	95	6	19	14	15	0	3	0	0	0	0	57	152	
14	5	34	0	1	54	6	5	16	6	1	0	0	0	1	0	35	89	
23	11	40	3	1	78	2	14	27	19	1	5	0	0	0	3	71	149	
1672	809	3816	17	172	6486	457	1196	1727	1537	27	194	17	17	27	191	5373	11859	

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**Life Insurance Industry:
Entertainable and Non-entertainable complaints (L9)**





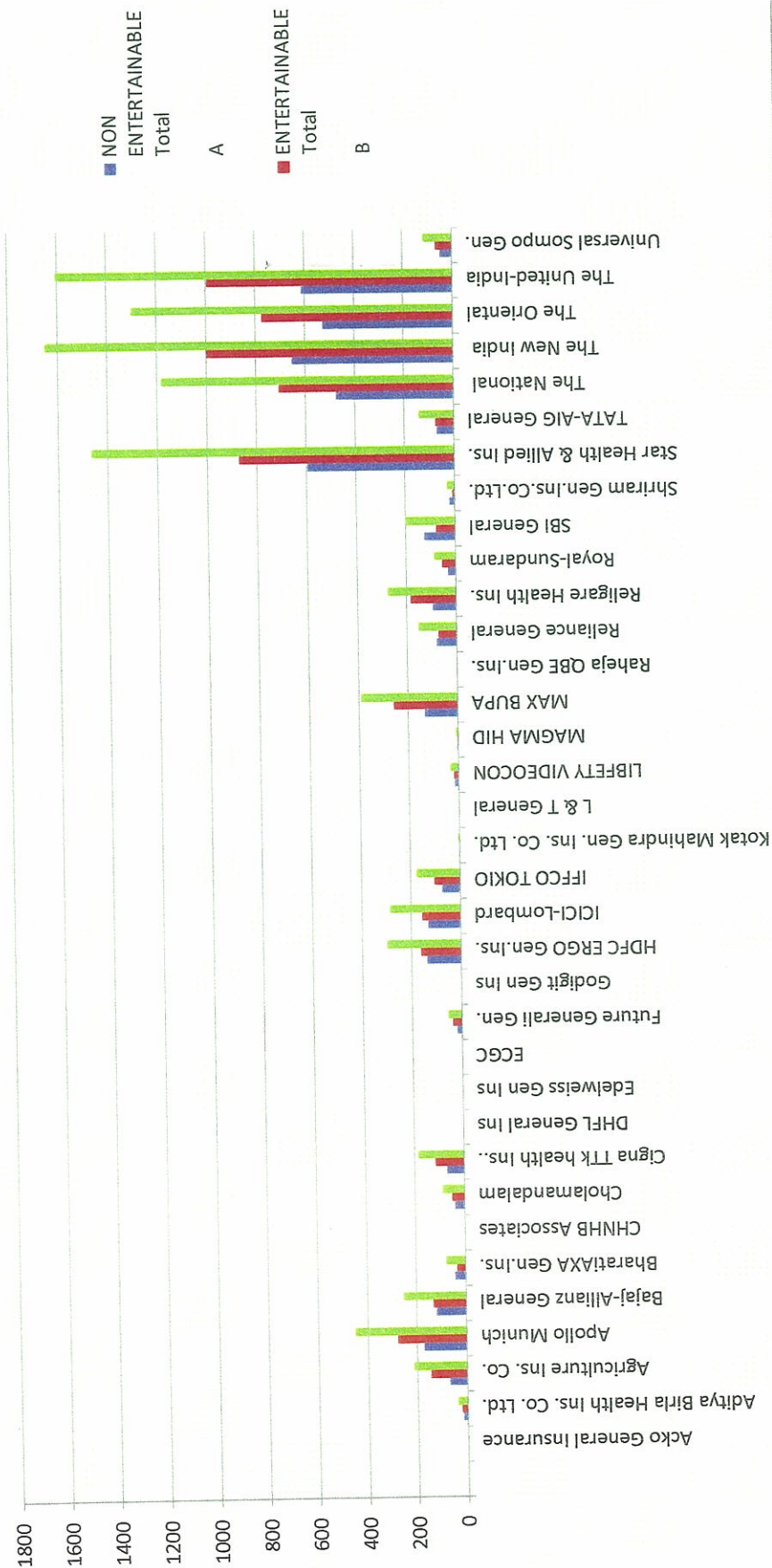
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NATURE WISE CLASSIFICATION OF COMPLAINTS RECEIVED FOR THE PERIOD FROM 01.04.2018 TO 31.3.2019

STATEMENT G 9
GENERAL INSURANCE

Name of the Center	NON ENTERTAINABLE					ENTERTAINABLE					Total (A+B)						
	[13(1)(e) to (i)]	[14(1)]	[14(3)]	[14(5)]	[14(3)(b) to (j)]	Total	13(a)	13(b)	13(c)	13(d)		13(e)	13(f)	13(g)	13(h)	13(i)	Total
1		0	0	0	0	A	1	1	0	0	0	0	0	0	0	2	3
Acko General Insurance	4	2	12	0	0	18	0	15	4	0	1	2	0	0	0	22	40
Aditya Birla Health Ins. Co. Ltd.	47	0	24	0	0	71	8	137	0	0	0	0	0	0	0	145	216
Agriculture Ins. Co.	32	19	120	0	2	173	5	259	6	3	2	3	0	0	1	279	452
Apollo Munich	38	8	74	0	1	121	8	109	3	1	1	5	0	4	2	133	254
Bagel-Allianz General	13	11	20	1	0	45	2	30	0	0	0	0	0	2	0	34	79
BharatAXA Gen. Ins.	33	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0
BharatAXA Gen. Ins.	0	0	0	0	0	0	5	40	0	3	0	1	1	0	0	50	90
CHNHB Associates	11	5	23	0	1	40	5	54	45	9	0	2	0	0	2	115	186
Cholanandaram	10	4	57	0	0	71	3	0	0	0	0	0	0	0	0	0	0
Cigna TTK health Ins.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
DHFL General Ins.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Edelweiss Gen Ins	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ECGC	0	0	0	1	0	20	2	16	17	1	0	0	0	0	0	0	0
Future Generali Gen.	8	2	9	0	0	0	0	0	0	0	0	0	0	1	0	161	299
Godigit Gen Ins	0	0	0	0	1	138	9	147	3	0	0	4	0	4	1	154	286
HDFC ERGO Gen. Ins.	40	22	74	1	1	132	1	141	2	0	1	4	0	0	0	103	176
ICICI Lombard	36	11	84	0	1	132	10	91	2	0	0	0	0	0	0	6	0
IFFCO TOKIO	17	3	50	0	3	73	0	2	0	0	0	0	0	0	0	0	0
IFFCO TOKIO	0	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0
Kotak Mahindra Gen. Ins. Co. Ltd.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
L & T General	0	0	0	0	0	15	0	14	0	0	0	0	0	0	0	4	9
LIBFETY VIDEOCON	6	1	8	0	0	5	0	4	0	0	0	2	0	0	2	258	392
MAGMA HID	1	0	0	0	0	134	11	233	5	5	0	0	0	0	0	0	1
MAX BUPA	29	19	86	0	0	0	0	0	0	0	0	0	0	0	0	73	155
Raheja QBE Gen. Ins.	1	0	0	0	0	1	0	65	0	0	0	0	0	0	0	183	278
Reliance General	21	15	44	0	2	82	8	158	7	3	0	2	0	0	1	54	87
Religare Health Ins.	19	10	66	0	0	95	12	47	1	0	0	0	0	0	0	77	202
Royal Sundaram	5	6	22	0	0	33	5	60	2	1	0	2	0	3	1	10	32
SBI General	40	9	75	0	1	125	8	0	0	0	0	0	0	0	0	1467	2254
Shriram Gen. Ins. Co. Ltd.	4	2	16	0	0	22	6	4	7	4	5	3	1	0	0	871	1467
Star Health & Allied Ins.	134	49	408	2	3	596	30	818	4	0	0	0	1	0	3	73	143
TATA-AIG General	14	9	46	0	1	70	11	55	4	0	2	5	1	4	1	707	1184
The National	122	46	304	0	5	477	58	628	6	0	1	3	0	0	4	998	1653
The New India	170	57	417	4	7	655	52	925	6	7	2	7	1	1	2	774	1303
The Oriental	140	55	319	2	13	529	59	688	10	4	4	3	0	1	3	994	1607
The United-India	133	66	411	2	1	613	104	864	12	3	4	3	0	1	0	67	116
Universal Sampo Gen.	10	4	35	0	0	49	4	62	0	1	0	0	0	0	0	0	0
Total	1106	435	2812	13	42	4408	422	5667	144	47	19	45	5	20	28	6397	10805

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General Insurance Industry: Entertainable and Non-entertainable complaints (G9)



D) COMMON OBSERVATIONS / SUGGESTIONS / RECOMMENDATIONS OF OMBUDSMEN REGARDING QUALITY OF SERVICES RENDERED BY INSURER & CAUSES OF GRIEVANCES.

LIFE

1. The maximum complaints registered in the forum against Life Insurance companies are pertaining to Mis-sale and other major chunk pertains to partial or total repudiation of death claim and the remaining pertains to non-receipt of policy bond, dispute regarding premium paid or payable in terms of the policy and other policy servicing related grievances etc.
2. A number of life cases connected with mis-selling are generally based on fraud and forgery of signatures of the policy holder/ life assured on proposal forms and benefit/ sales illustration. Mis-selling can be reduced by making consumers aware of Insurance especially in rural areas. The companies, IRDA and Offices of Insurance Ombudsman should hold meetings involving Panchayats, local administrations & NGOs to spread awareness about Insurance.
3. Many times customer unknowingly signs the proposal form for insurance believing it to be a fixed deposit scheme or one-time payment of single premium. Agents should be trained to avoid mis-selling.
4. It was further observed that lack of accountability of the Insurer on its Agent/ Representative/ Intermediary, the customer is left alone in the fight for justice against mis-sale.
5. In most cases of mis-selling the financial underwriting rules have been disregarded by the underwriter. So mis-selling which could have been arrested at the underwriting stage instead gets an impetus when the underwriter clears long premium paying term plans even though the proposer does not have the paying capacity to maintain the policy beyond the initial first payment.
6. Insurance Companies are denying complaints of mis-selling simply because a satisfactory Pre-login verification call had been made, even though experience over last few years has shown that the brokers/agents have been tutoring the customers to accept all terms when verification calls are received. It is indeed a catch 22 situation where unscrupulous agents/brokers are continuing to derive undue benefit out of the greed of customers. However, Insurance companies, Regulator, Redressal

Officers, as stake holders of the industry should be able to devise controls to prevent this unchecked mis-selling and mis-guiding of customers.

7. Solicitation of business and issuance of premium receipts by unlicensed entities.
8. The share of complaints for a company as a ratio to the total complaints received by the Ombudsman office is an indicator of the effectiveness of the grievance redressal machinery of the companies. As an example, the customer base of LIC is the highest but their complaint share is much lower in comparison to the market share.

NON-LIFE

1. In General Insurance Business, large number of complaints pertains to Motor Insurance or Health Insurance claims.
2. TPAs decision on settlement of claims should not be final and the matter should be reviewed by the insurer to arrive at a judicious decision. Most general insurers do not have any established system for review of the claims rejected by their TPAs. Even when the complainant approaches the Grievance Cell, after repudiation of the claim by the TPA, the insurer seldom examines the claim dispassionately. In some cases, the insurer depends on the TPA to present cases before the Ombudsman.
3. Assessment of surveyors on the quantum of loss in motor claims is not in tune with the desired repairs and reasons for not allowing the estimated items are not explained.
4. There has to be a mechanism to ensure that Provider Net Work Hospitals do not charge more than agreed rates and proper treatment is administered.
5. Lack of clarity in some of the clauses and conditions in the policy, Mediclaim in particular. A few clauses like proportionate clause require a relook, in the interest of policyholders. Similarly "enhancement of sum insured clause", "active line of treatment" and "Reasonable and Customary Charges" require proper interpretation. Inadmissibility of cost of Multi Focal Lens in case of cataract treatment should be clearly spelt out in the Policy terms, if the same is excluded.
6. In Mediclaim policies the pre-existing diseases should be specified on the schedule of the policy so that the Insured is aware of the exclusion given in the terms and conditions of the policy.

7. In General Insurance, Mediclaim and Motor Accident/Theft Claims need to be managed with a lot more sensitivity and care. The TPA's and Surveyors add significantly to the woes of hapless customers. The Surveyors and TPA's need to be nudged on to the right path. Possibly, the Claim Investigation Agencies also should be brought under a licensing process. Where self-regulation is given a go by, a stronger regulation remains the only alternative.
8. In many complaints, Hospital Expenses have been repudiated by Insurance Companies due to LAMA (Left against Medical Advice) and decision upheld by the Ombudsman. However, in the recent Punjab & Haryana High Court ruling has laid down that a terminally ill person who decides to stop treatment against medical advice and dies cannot be denied insurance claims. The reasoning which the High Court has cited is that a patient's desire not to be treated is an issue of patient autonomy and embracing dignity in death.
9. It is observed that some of the Insurance Companies do not send repudiation letters to the customers at all. The rejection letter from the TPAs is the only correspondence sent to the policyholder. Even after references to the Grievance Officer; the Companies do not bother to re-examine the cases and treat the complaints as closed. As a result the effectiveness of the system is seriously compromised and status of the complaints does not get correctly reflected in the IRDA's records. Many companies, instead of guiding their customers to approach their in-house grievance machinery, are directing them to Ombudsman, thus short-circuiting the whole system and intentionally reducing its effectiveness in a planned manner. When questioned on the issue, representatives from the companies have related this to their corporate decision.

GENERAL SUGGESTIONS

1. It is noticed that there is a delay in submission of Self-Contained Note (SCN) and in many cases the SCN is not comprehensive enough.
2. Investigator should take care to collect supporting documentary evidence to substantiate findings noted in the report in all investigations.

3. Insurance companies should educate the insuring public and Agents about the importance of exact disclosure of material facts at the time of filling up the proposal form and also at the time of revival of lapsed policy.
4. Local offices of the Insurers should help grieving policy holders in reporting the loss through their helpline as most of the policyholders are not conversant with the system. The policy document should bear the address of the Grievance Redressal/Customer Care Department in bold letters so that before approaching the Insurance Ombudsman, the services of insurer's in house grievance redressal mechanism are utilized by the complainant. A sizable number of complaints are termed and treated as non entertainable as the complainant has not approached the GRO / Customer Care Department.
5. Technical circulars issued by insurance companies should be furnished to the Offices of the Insurance Ombudsman.
6. Wide publicity on lacunae on mis-selling through print and electronic media may be made for increasing awareness amongst the general public.
7. In order to prevent mis-selling a deliberate attempt should be made in drafting the product literature in vernacular language and in keeping the terms and conditions of policy document simple and concise.
8. The craze for new business, communication gap between the insurer and the insured, casual approach in filing up proposal forms, non-disclosure of terms and conditions of policy and the indifferent approach in settlement of claims being the genesis of most complaints, the Insurer should take necessary steps to plug these loopholes.
9. The commission payout scheme to insurance intermediaries should also be revised so as to avoid mis-selling. If more payout will be towards the end of the policy term, then mis-selling could be curtailed as agents/intermediaries will also be interested in maintaining the persistency ratio of the policy, which can be done by selling the right product to the right client.
10. A Large number of complaints are received against rejection of claims under Mediclaim policies where insurance was ported to some other company when it was for long time with the ceding company. Once a policy is ported it should be with all the benefits it is already enjoying and should not be with curtailment of benefits.

11. At the time of renewal of policy, substantive changes in the Terms & Conditions of the Policy should be highlighted in the renewal notices and also on the first page of the policy schedule.
12. IRDA guidelines state that the claim should not be repudiated merely on the grounds of delay should be followed strictly. Clear guidelines must be issued in this regard and it should be enforced.
13. It is observed that the Grievance Redressal Mechanism of the Insurers has become ritualistic (with the same stereo typed letters sent from all the escalation levels) without properly addressing the grievances raised by their customers / complainants. The Insurers are becoming more cautious about their business ranking in the Market and least bothered about the ranking in number of Complaints registered against them.
14. ECOI to publish the full text of awards on the websites.
15. Ombudsman orders are binding on the insurers. But it is seen that the insurers sometimes do not implement the orders or if implemented not done on time. This is a concern now, which might eventually lead to loss of faith in the system. Therefore, IRDAI has taken note of such lapses and has advised the insurers for timely compliance failing which will attract stern action. The insurers must honor the decision of the Insurance Ombudsman and necessarily comply with the orders fully and timely, which is the need of the hour.

E. Other issues -

(I) Specific issues that are contributing to complaints:

- 1) Mis-selling –
 - a) By promising interest free loan
 - b) Making fraudulent promise of getting old deposits back
 - c) Promise of payment of renewal premium through rent from mobile towers falsely stated to be erected by the Insurance Company
- 2) Not taking decision in time in respect of death claims and mediclaim
- 3) Calling for requirement piecemeal
- 4) Not exercising discretion and in some cases prompting claimants to approach Insurance Ombudsman
- 5) Waiting period clause not explained in case of porting of policies from one insurer to another
- 6) Not justifying reasonable customary charges under mediclaim policies
- 7) Change in policy conditions after issuance
- 8) Inarticulate terms and conditions under Health Insurance policy
- 9) Selling of ULIPs with high amount of health cover to persons of advanced age
- 10) Absence of proper review of arbitrary decisions taken by TPAs
- 11) Lack of awareness on the part of –
 - a) Insuring public
 - b) Distribution channel
- 12) Repudiation of death claim without satisfying grounds of the repudiations
- 13) Delay in dispatch of policy bond
- 14) Non-inclusion of complete terms and conditions in the policy bond
- 15) No review of complaints by GRO – simple complaints like non-receipt of policy bond, non-receipt of mediclaim card (TPA card) also sometimes reach Insurance Ombudsman
- 16) Non application of mind in rejecting complaints on appeal
- 17) Non responsive customer care phone nos.
- 18) a) vague/evasive replies to queries
b) No replies to emails/letters of the customer
- 19) Completion of proposal form by agents/intermediaries leading to non-disclosure/mis-representation.
- 20) Upholding of decisions of TPAs without application of mind
- 21) Inaction against erring agents/brokers
- 22) Not facing responsibility for serious deficiency of service

(II) Issues pertaining to co-ordination with the insurers :

- 1) Delay in submission of self contained note (SCN)
- 2) Non-submission of copies of policy bond, proposal form and declaration of good health
- 3) The attending official not having any authority from the insurers
- 4) SCN not properly drafted
- 5) The attending official not conversant with the issue quite often. The local branch head is sent to represent the insurer
- 6) Not informing details of settlement under the complaint before hearing in office of Insurance Ombudsman
- 7) The local RO Nodal Officer not able to coordinate with other ROs for timely submission of SCNs / additional information required before the hearing
- 8) Not attending hearing punctually
- 9) Excessive dependence on TPAs during hearing
- 10) Repudiation letters being issued by TPAs
- 11) Change in nominated Nodal officer not conveyed to Office of Insurance Ombudsman

(III) Non compliance including delay in compliance :

- 1) Information about compliance not given regularly
- 2) Not posting delays of compliance in CMS module
- 3) Not sending any communication if there is delay in compliance of the award for genuine reasons
- 4) Not payment of interest in case of delay in compliance

(IV) Any other relevant issue :

- 1) Written communication only in the English language
- 2) The contact details of ECOI should not be communicated with the policyholders

F)

BRIEF REPORTS OF THE

OFFICES OF THE INSURANCE OMBUDSMEN

An edited version citing important issues dealt at various Offices of the Insurance Ombudsmen is briefed hereunder:

From the desk of the Insurance Ombudsmen

AHMEDABAD

There has been no regular Ombudsman for this centre since 20th July 2014. Shri M.Vasantha Krishna, Insurance Ombudsman, Chennai was given additional charge of the office vide ECOI's Order dated 12.10.2018.

In the absence of a regular Ombudsman, the disposal ratio of the centre for the year 2018-19 was only 36% and the number of outstanding complaints at the end of the year has gone up to 2,335 from 1,338 at the beginning of the year. During the year office received 2325 complaints and 1328 complaints were disposed off. Only 94 awards could be issued, whereas as many as 217 complaints were amicably settled.

Final account closing statements were duly audited and certified by the external auditor, M/s R S Patel & Co., Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

BENGALURU

Smt. Neerja Shah took charge as Insurance Ombudsman at this office on 23.04.2018 and was given additional charge of the Office of Insurance Ombudsman, Pune vide ECOI's Order dated 12.10.2018.

The independent Audit Report for the year 2018-19 was duly audited and certified by M/s P Chandrasekar LLP, Chartered Accountants, Bengaluru.

BHOPAL

Shri Guru Saran Shrivastava took charge as Insurance Ombudsman at this office on 24.05.2018 and was given additional charge of the Office of Insurance Ombudsman, Lucknow vide ECOI's Order dated 12.10.2018.

In the F.Y. 2018-19, a total of 1038 complaint (Life - 732 and Non-Life -306) were disposed off as against the receipt of 954 New Complaints (Life - 620 and Non-Life – 334).

The audit of the Annual Accounts for the financial year was done by M/s S.L. Chhajed & Co., Chartered Accountants.

BHUBANESWAR

The rate of disposal of complaints could not be improved upon due to Insurance Ombudsman post lying vacant from 21.07.2017 to 11.10.2018. Shri I. Suresh Babu, Insurance Ombudsman, Hyderabad was given additional charge of the office vide ECOI's Order dated 12.10.2018.

The office registered 801 complaints (Life – 619 & Non-life – 182) during the year. The disposal ratio of the centre for the year 2018-19 was 77.61% and the number of outstanding complaints at the end of the year were 225 (Life – 175 & Non-life – 50). During the year, total 139 awards were passed.

Final account closing statements were duly audited and certified by the external auditor, M/s A.K.Sabat & Co., Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

CHANDIGARH

The office had a huge pendency of outstanding complaints numbering about 2139 in April, 2018 as Insurance Ombudsman post was lying vacant for last two years. Dr. Dinesh Kumar Verma had taken over charge as Insurance Ombudsman at this Centre on 16.04.2018.

During the current year 2018-19 office has disposed of 3228 (Life -2252 and Non-life – 976) complaints being the highest among all the Offices of Insurance Ombudsman. During the year 2018-19, total complaints received in this office were 2403 (Life - 1475 & Non- life – 928). As far as non-life sector is concerned the major complaint area is Health Insurance sector. During the year, total 1273 awards were passed.

The centre organised Bimalokpal Day on 12.11.2018 that attracted participation from major insurance companies. On the occasion the extensive discussions

were held with representatives of insurance companies to improve further mechanism for grievance redressal/ resolution in amicable manner.

The centre has been organising meeting with various insurance companies on a regular basis to expedite the process of complaints resolution and as a follow up another meeting was organised on 29.03.2019 with insurance companies in this direction.

Final account closing statements were duly audited and certified by the external auditor, Datta Singla & Co., Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

CHENNAI

The position of Insurance Ombudsman in this office was vacant since May, 2016. Shri M. Vasantha Krishna took charge as Insurance Ombudsman on 03.05.2018.

During this period the Chennai office handled 1655 Complaints and pronounced 643 Awards (Life - 162 and Non-life - 481 awards). The ratio of awards passed in favour of complainants was 62%, and dismissal of complaints in favour of insurer was 38%. The number of awards issued during the year 2018-19 is the highest ever at Chennai office. In all 1872 complaints were disposed of during the year.

The Centre conducted in all 726 hearings during the year 2018-19. In order to provide justice to customers at doorstep, Chennai Centre has been conducting outstation hearings in locations outside Chennai. During the year 2018-19, 162 outstation hearings were conducted in Coimbatore, Trichy, Madurai, Salem, and Thanjavur.

With a view to create awareness about the role and importance of Insurance Ombudsman in redressal of insurance grievances, Bimalokpal day was celebrated on 9th November, 2018 at Nalanda, United India Insurance (UII) Corporate Learning Centre, Chennai.

In order to improve the system of claims and complaints handling by Insurers, the Centre also organized a meeting of non-life insurers at Madurai on 24th August, 2018 with the support and help of National Insurance, Regional Office, Madurai.

The office also contributed a lot in creating and improving the awareness about the institution of Ombudsman amongst the insuring public, by way of meetings,

discussions, lectures, workshops and through the print media.

Final account closing statements were duly audited and certified by the external auditor, Sundaram & Srinivasan, Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

DELHI

Smt. Sandhya Baliga, Insurance Ombudsman, Jaipur was given additional charge of the Office of Insurance Ombudsman, Delhi vide ECOI's Order dated 12.10.2018.

The office started the financial year with a pendency of 674 complaints from the previous financial year 2017-18. The pendency was due to non-availability of Ombudsman during the period 2017-18. During the FY 2018-19, a total of 1509 complaints were received (Life - 814 and Non-Life - 695). After adding outstanding complaints at the beginning of year, total complaints were 2183. Out of 2183 complaints received, 652 were non-entertainable. In 564 cases, awards were pronounced in favour of complainants, 373 cases were in favour of insurance companies. Only 51 cases were settled by insurers as a goodwill gesture on receipt of hearing notices from Office of Insurance Ombudsman.

"Bima Lokpal Day" was observed on 12th November 2018. Several activities were undertaken to create awareness among public regarding the forum instituted for speedy redressal of grievances.

The forum is endeavouring for speedy redressal of the grievances, within the frame of Insurance Ombudsman Rules, 2017 and policy terms and conditions.

Final account closing statements for the year 2018-19 were duly audited and certified by the external auditor, S.P Chopra & Co, New Delhi., Chartered Accountants.

GUWAHATI

Shri Kiriti B. Saha took charge as Insurance Ombudsman at this office on 02.05.2018 and was given additional charge of the Office of Insurance Ombudsman, Kolkata vide ECOI's Order dated 12.10.2018.

During the current year 2018-19 office has disposed the highest number of grievances so far, with "NIL" outstanding at the end of the year. The office started the current year with Opening balance of 100 complaints (Life sector – 56 and Non-life sector – 44) and during the year complaints received were 472 (Life sector – 311 and Non-life sector – 161).

It was suggested by Insurance Ombudsman that the area where there is a need for improvement by the office is (a) enhancing awareness amongst policyholders living across the state and (b) Improve the quality of drafting and presentation of awards.

Office submitted the Audited final accounts on 05.04.2019 being the first office among 17 Offices of Insurance Ombudsman.

Final account closing statements were duly audited and certified by the external auditor, H.K.Agrawala & Associates, Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

HYDERABAD

Shri I. Suresh Babu took charge of Office of Insurance Ombudsman, Hyderabad from 11.6.2018 and was given additional charge of Bhubaneswar office vide ECOI's office order dated 12.10.2018.

At the beginning of the year the outstanding complaints for hearing were 277. During the period 2018-19 under review, the office received 1381 complaints (life - 785 and non-life - 596) out of which 1203 were disposed (life - 714 and non-life - 489). Complaints remain outstanding for hearing at the year-end were 178 (life - 87 and non-life - 167). During the year under review 544 complaints were disposed by way of passing Awards. Out of which, 401 Awards were issued in favour of the complaints and 143 in favour of the Insurers.

Final account closing statements were duly audited and certified by the external auditor, M. Bhaskara Rao & Co., Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

JAIPUR

Smt. Sandhya Baliga took charge as Insurance Ombudsman of Jaipur office on 13.04.2018 and was given additional charge of the Office of Insurance Ombudsman, Delhi and Noida vide ECOI's Order dated 12.10.2018.

The office started the financial year 2018-19 with a pendency of 276 complaints of the previous financial year 2017-18. The pendency was due to non-availability of Ombudsman during the period 2017-18. During the financial year 2018-19, a total of 776 complaints, (Life - 374 and Non-Life - 402), were added to the outstanding complaints bringing the total to 1052. All the complaints were disposed off by the office with "NIL" outstanding at the end of the year.

The Bimalokpal Day was observed on 12th November, 2018. A meeting was organized at the office where representative of Insurance Companies and complainants were invited to interact and help develop methods for redressal of customer's grievances. Banners were displayed at prominent places to create awareness. The Bima Lokpal Day celebration and activities were published in local newspapers.

The Forum is endeavouring to redress the grievance expeditiously and in a fair manner within the structural frame work of policy terms and conditions.

Final account closing statements were duly audited and certified by the external auditor, D.R. Mohnot & co., Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

KOCHI

Ms. Poonam Bodra took charge as Insurance Ombudsman, Kochi on 07.11.2018. At the beginning of the year the outstanding complaints for hearing were 500. During the period 2018-19 under review, the office received 982 complaints (life - 382 and non-life - 600). By the end of the financial year 2018-19 office could dispose of 831 complaints (Life - 308 and Non-life - 523) out of which 410 (life - 114 and non-life - 296) were by way of awards. The total complaints pending as on 31.03.2019 were 651 (life - 208 and non-life - 443).

'Bima Lokpal Day' was observed on 12.11.2018 by the office. A meeting of representatives of various Insurance Companies was held in the office on this occasion.

The final audited accounts for the year ending 31st March, 2019, along with Schedules were duly signed by M/s. K. Varghese & Co., Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

KOLKATA

There has been no regular Ombudsman for this centre since 29.07.2017. Shri Kiriti B. Saha, Insurance Ombudsman, Guwahati was given additional charge of the office vide ECOI's Order dated 12.10.2018.

At the beginning of the year the outstanding complaints for hearing were 1196. During the period 2018-19 under review, the office received 1780 complaints (life - 1082 and non-life - 692) out of which 1212 were disposed (life - 889 and non-life - 323). Complaints remain outstanding for hearing at the yearend were 1764 (life - 911 and non-life - 853). During the year under review 452 complaints were disposed by way of passing Awards.

'Bima Lokpal Day' was observed on 12.11.2018 by the office. On this occasion office had arranged interaction with Officials of various life and non-life insurance companies during open house session for the complainants/invitees. Meeting with official government representative of the Directorate of Consumer Affairs and Fair Business Practices, Govt. of West Bengal was also organised.

Annual Accounts of the office for the year 2018-19 were audited and certified by M/s. Chatterjee & Co., Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

LUCKNOW

Shri Guru Saran Shrivastava took charge of Office of Insurance Ombudsman, Bhopal from 24.05.2018 and was given additional charge of Lucknow office vide ECOI's Order dated 12.10.2018.

At the beginning of the year the outstanding complaints for hearing were 430. During the year 2018-19, total of 578 complaints (Life - 481 and Non-Life - 97) were disposed off as against the receipt of 847 New Complaints (Life - 659 and Non-Life - 188). As in the earlier years, most of the complaints under Life segment were relating to mis-sale of the policies. The modus operandi is found to be similar under majority of cases.

Final account closing statements were duly audited and certified by the external auditor, M/s R.M.Lall & Co., Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

MUMBAI

Shri Milind A. Kharat, Insurance Ombudsman took charge on 4th May, 2018. The Office of Insurance Ombudsman (OIO), Mumbai, is providing its service to the insured public residing in Mumbai Metropolitan Region & the State of Goa.

At the beginning of the year the outstanding complaints for hearing were 1228. During the year 2018-19, the office received 2514 complaints (Non-life - 1670 and Life - 844). 2777 (Life - 814 and Non-life - 1963) cases were disposed off through the process of hearing and award. The closing balance at the end of the year 2018-19 was 965 (Life - 142 and Non-life - 823). 'Bima Lokpal Day' was observed on 12.11.2018. Meetings were organised for Insurers (both life and non-life) complainants and media personnel.

Final account closing statements were duly audited and certified by the external auditor, NBS & Co., Chartered Accountants.

NOIDA

There has been no regular Ombudsman for this centre since 31.12.2017. Smt. Sandhya Baliga, Insurance Ombudsman, Jaipur was given additional charge of the office vide ECOI's Order dated 12.10.2018.

The office started the financial year with a pendency of 215 complaints for the previous financial year 2017-18. The pendency was due to non-availability of Insurance Ombudsman during last quarter of 2017-18. During the financial year 2018-19, a total of 1101 complaints (Life - 583 and Non- Life - 518) were added to the outstanding complaints bringing the total to 1316. At the end of the financial year 2018-19, there were 326 (Life - 164 and Non- Life - 162) outstanding complaints. Out of total complaints received, in 181 cases Awards were pronounced in favour of complainants, 88 cases were in favour of Insurance Companies and 32 cases were settled by insurer as a goodwill gesture on receipt of hearing notices from Office of Insurance Ombudsman.

The Bima Lokpal Day was observed on 12th November, 2018. Several activities were undertaken to make the public aware. A meeting was organized with representative of Insurance Companies and complainants to interact with each other for better customer services and developing methods for redressal of customer's grievances. Pamphlets regarding awareness against spurious calls and fraudulent offers by agents were distributed. Banners were displayed at the prominent places to create awareness about the forum.

Annual accounts for the FY 2018-19 were duly audited and certified by the external auditor, PSMG & Associates, Chartered Accountants, Ghaziabad.

PATNA

There has been no regular Ombudsman for this centre since 08.09.2017. Shri Milind A. Kharat, Insurance Ombudsman, Mumbai was given additional charge of the office vide ECOI's Order dated 12.10.2018.

The office had 114 outstanding complaints at the beginning of the year and received 643 complaints during the year. Out of 757 complaints 535 complaints were disposed off by way of award/ recommendations.

Majority of the Life Insurance complaints received by the office are mainly on account of mis-selling particularly from the Private Life Insurance Companies. Majority of non-life complaints pertain to health insurance claims.

Final account closing statements were duly audited and certified by the external auditor, Thakur Bhuwanesh & Associates, Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.

PUNE

There has been no regular Ombudsman for this centre since 9th September, 2017. Smt. Neerja Shah, Insurance Ombudsman, Bengaluru was given additional charge of the office vide ECOI's Order dated 12.10.2018.

The office had 607 (Life – 325 and Non-life - 282) outstanding complaints at the beginning of the year and received 1515 (Life – 810 and Non-life - 705) complaints during the year. The number of pendency of complaints is 1314 (Life – 671 and Non-life - 643) at the end of 2018-19. In the absence of regular Ombudsman the disposal ratio of the office for the year 2018-19 is 38% as against 65% for 2017-18.

Final account closing statements were duly audited and certified by the external auditor, M/s S U N S V G AND Associates, Chartered Accountants. There were no adverse comments in the Auditors' Report for the financial year 2018-19.
