REVIEW OF UNDERWRITING PRACTICES – CHART OF SPECIAL REPORTS

1. CHART OF SPECIAL REPORTS

It has been decided to revise the existing chart of Special Reports. The revised chart of Special Reports is shown below:-

G II.1	Age at Entry (Last Birthday)				
Sum Under Consideration	Upto 35 yrs	36 to 45 yrs	46 to 55 yrs	56 yrs & above	
Upto 2,00,000	Nil	Nil	Nil Rest ECG, FB		
2,00,001 to 5,00,000	Nil	Nil	Rest ECG, Rest ECG, FBS Lipidogram, FBS, RUA, Hb%		
5,00,001 to 10,00,000	Nil	Nil	Rest ECG, Lipidogram, FBS, RUA, Hb%	Rest ECG, Lipidogram, FBS, RUA, Hb%	
10,00,001 to 15,00,000	Nil	Lipidogram, FBS, RUA, Elisa for HIV Hb%	Rest ECG, SBT-13, RUA, Hb%	Rest ECG, Haemogram, SBT-13, RUA, CTMT	
15,00,001 to 35,00,000	FBS, Lipidogram Elisa for HIV Hb%	Rest ECG, SBT 13, RUA, Hb%	Rest ECG, Haemogram, SBT 13, RUA, CTMT	Rest ECG, Haemogram, SBT 13, RUA, CTMT, HbA1c	
35,00,001 to 50,00,000	Rest ECG, SBT 13, RUA, Hb%	Rest ECG, Haemogram, SBT 13, RUA, CTMT	Rest ECG, Haemogram, SBT 13, RUA, CTMT, HbA1c	Rest ECG, Haemogram, SBT-13, RUA, CTMT, HbA1c Chest X Ray	
50,00,001 and above	Rest ECG, Haemogram, SBT 13, RUA	Rest ECG, Haemogram, SBT 13, RUA, CTMT, HbA1c	Rest ECG, Haemogram, SBT 13, RUA, CTMT, HbA1c, Chest X-Ray	Rest ECG, Haemogram, SBT-13, RUA, CTMT, HbA1c, Chest X Ray	

- If Hbalc is not available, then PGBS (after giving 75 gm of glucose) is compulsory. PPBS will not be accepted.
- If HIV test by Elisa method is not available at a place, HIV test by Tridot method will be accepted upto SUC Rs.24.99 lacs. For SUC beyond Rs. 24.99 lacs, HIV test by Elisa method is to be insisted upon.
- The above chart is applicable for all plans. Whenever Critical Illness Rider is opted for, up to age at entry 35 years, special reports will be as per the above chart. For age at entry above 35 years, rest ECG, Hb% and Fasting Blood Sugar (FBS) will be compulsory.

The following points may be noted:-

i. Ranges of SUC for calling for Special Reports have been revised as under: -

Existing Ranges	Revised ranges		
Up to Rs. 1,00,000	Up to Rs. 2,00,000		
Rs. 1,00,001 to Rs. 3,00,000	Rs. 2,00,001 to Rs. 5,00,000		
Rs. 3,00,001 to Rs. 8,00,000	Rs. 5,00,001 to Rs. 10,00,000		
Rs. 8,00,001 to Rs. 20,00,000	Rs. 10,00,001 to Rs. 15,00,000		
Rs. 20,00,001 to Rs. 29,99,999	Rs. 15,00,001 to Rs. 35,00,000		
Rs. 30,00,000 to Rs. 99,99,999	Rs. 35,00,001 to Rs. 50,00,000		
Rs. one crore and above	Rs. 50,00,001 and above		

- ii. Post Glucose Blood Sugar (PGBS), SBT-12 and SBT-18 have been discontinued.
- iii. A new special report SBT-13 has been introduced. It will contain the following tests FBS, Total Cholestrol, HDL, LDL, S.Triglycerides, S.Creatinine, Blood Urea Nitrogen, S. Proteins, S. Bilirubin, SGOT, SGPT, GGTP, S. Alkaline Phosphatase, and Australia Antigen & Elisa for HIV. (Format for SBT-13 is enclosed).
- iv. HbAlc will be called for older ages and high SUC. If HbAlc is not available at any center, then PGBS (after giving 75 gm. of Glucose) will be necessary.
- v. Haemogram & X-ray of chest are not called for younger ages and low SUC.

There is no change in the formats of other reports.

Computerized reports can be accepted provided the tests were conducted after proper identification of the client and Normal Laboratory Ranges for the test are given on such reports. TPAs must obtain the signature of the life to be assured on a separate sheet (as per enclosed format) before the tests are carried out. The separate sheet should be enclosed along with the computer generated reports.

It is observed that the instructions given on the Special Report formats for conducting ECG and CTMT are not complied with. Before forwarding cases to U&R / ZUS, DO NB Departments should ensure that the ECG and CTMT have been conducted as per the

instructions. Special attention may be given to the following two important instructions while conducting ECG:

- i. The base line must be steady. The tracing must be pasted on a folder.
- ii. Rest ECG should be 12 leads along with the Standardization slip, each lead with minimum of 3 complexes, long lead II. If L-III and AVF shows deep Q or T wave change, they should be recorded additionally in deep inspiration. If V1 shows a tall R-wave, additional lead V4R should be recorded.

2. REVISED CHARGES FOR SOME OF THE SPECIAL MEDICAL REPORTS

It has been decided to revise the fees payable for conducting the following Special Reports:-

Special Report	Existing Fee	Revised Fee	
Rest ECG	Rs. 90.00	Rs. 110.00	
X-ray of chest	Rs. 85.00	Rs. 100.00	
HbAlc (Glycosylated Hb%)	Rs. 100.00	Rs. 250.00	
SBT-13 with HIV test by Elisa Method	-	Rs. 1000.00	
SBT-13 with HIV test by Tridot Method	-	Rs. 900.00	
Stress Thallium	Rs. 5,000.00	Rs. 7,000.00	
2D-Echo	Rs. 800.00	Rs. 950.00	
Hb%	-	Rs. 30.00	

It may be noted that the above charges are the maximum permissible and the amount to be reimbursed will be lower of actual cost or the maximum permissible. There is no change in the fee payable for the remaining reports. There is also no change in the fee payable for conducting FMR and Juvenile FMR.

If FMR and Special Reports are done from our empanelled medical examiners, DMR and diagnostic centers, hospitals etc., the total amount to be reimbursed for FMR and special reports should not exceed Rs.4/- per Thousand Basic Sum Assured excluding SA under Term Rider and Critical illness Rider.

If FMR & Special Reports are done from TPAs, the upper limit of Rs.4/- per Thousand Sum Assured will not be applicable. In addition to the cost of FMR & Special Reports, the TPAs will be paid service charges as under:-

- a) Proposal where only FMR is required Rs.15/- per case.
- b) Proposals where Special Reports are required along with FMR Rs.30/- per report (Charges for FMR will be Rs.15/-), subject to maximum of Rs.100/-.
- c) When additional (other than manual requirements) reports are called for separately (i.e. not along with the reports mentioned in the chart of special reports), a service

charge of Rs.30/- for each report, subject to a maximum of Rs.50/- will be payable.

d) Service tax will be over and above the service charge payable.

The above instructions come into force with effect from 17th January 2008. However, Special Reports done as per the existing Chart of Special Reports will be accepted till 31st January 2008.

Further the following points may be noted:

- If SBT-18 done earlier is valid and if SBT-13 is a manual requirement as per the revised Chart of Special Reports, fresh SBT-13 need not be called for.
- If SBT-12 done earlier is valid and SBT-13 is a manual requirement as per the revised Chart of Special Reports, only balance tests are to be called for.
- If Haemogram done earlier is valid fresh Hb% need not be called for.

The Divisional Offices should get the format for SBT-13 printed at the earliest. They should also ensure that all the empanelled diagnostic centers and TPAs are informed about the revised format well before the target date.

All other existing underwriting rules remain unchanged.

LIFE INSURANCE CORPORATION OF INDIA

Form No. LIC03 - 013

SPECIAL BIO-CHEMICAL TESTS - 13 (SBT-13)

Zone		Division		Branch		
Proposal No.						
Agent/D.O. Code:		Introduce	ed by:	(name & signature)		
	me of Life to be assur	red:				
Age/Se	x :					
_	_				,	
	1	Actual Reading				
1	Fasting Blood Sug	ar				
	(Method_)				
2	Total Cholesterol					
	High Density Lipid (HDL)					
	Low Density Lipid					
3	S. Triglycerides	S. Triglycerides				
4	S. Creatinine					
5	Blood Urea Nitrogen (BUN)					
6	S. Proteins					
(a) Albumin						
	(b) Globulin					
	© AG Ratio					
7	S.Bilirubin					
	(a) Direct					
	(b) Indirect					
	© Total					
8	SGOT (AST)					
9	SGPT (ALT)					
10	GGTP (GGT)	` '				
11	S. Alkaline Phospl	S. Alkaline Phosphatase				
12	HbsAg (Australia	antigen)				
13	Elisa for HIV (Me	thod)			
earmari				humb impression) in the him/her or the Agen		
Dated a	t on the	day of 200	at	a.m./p.m.		
Signatu	re of the L.A.	Signature of the Pathologist's nar	_	s, Qualification		
Propos	er was identified on th	e basis of			-	
		SIG	NATURE (OF PATHOLOGIST		

Format of separate sheet to be sent alongwith computer generated special reports

To LIC of India, Branch Office
Proposal No
Name of the Life to be assured
The Life to be assured was identified on the basis of
I have satisfied myself with regard to the identity of the Life to be assured before conducting tests / examination for which reports are enclosed. The Life to be assured has signed as below in my presence.
Signature of the Pathologist / Doctor Name:
The examination / tests were done with my consent.
(Signature of the Life to be assured) Name:
Reports enclosed: 1 2 3

Rubber stamp of TPA