PRE-POLICY ISSUANCE PROCESS

E-Commerce - Proposal Processing: Login till Policy Issuance

The process that is followed from proposal form login till policy issuance for proposals sourced via E-Commerce is as illustrated below:

CUSTOMER

- Prospect visits the Company's website and reviews the online products being offered
- Customer selects the product basis the need and proceeds to generate a premium quote
- Customer goes to the online portal and generates a premium quote / Benefit Illustration
- Customer reviews the Terms and Conditions of the chosen product and accepts the same
- A copy of the premium quote / Benefit Illustration is sent on the email Id of the customer / proposer
- Customer / Proposer makes the premium payment online
- Proposer fills out the online proposal form, reviews the information filled and edits in case if required, and uploads the requisite documents
- Proposer submits the online proposal form and once the proposal form is submitted, the soft copy of the proposal form is emailed to the proposer on the registered email id provided

HO – IT

- Information provided by the customer in the proposal form is uploaded to the Policy Administration System via batch run
- Proposal form along with supporting documents get saved in a centralized repository

HO – NEW BUSINESS

- New Business team checks the data in the core system and the KYC documents provided for processing of proposal forms
- Does the De-Dupe to check for the existing clients / policyholders and attaches the client, if a match found with any existing client / policyholder
- Forward the case to Underwriting

HO – UNDERWRITING

Underwriting team reviews each case, which may lead to either of the following decisions:

- Accepts the case and forwards for pre-issuance quality check
- Raises further requirement(s), as applicable, and awaits for requirements to get submitted
- Proposal is either declined, dropped or postponed basis the information provided by the customer

HO – MEDICAL NETWORK

- Upon medical requirements being raised by a underwriter, details forwarded to respective Regional Medical Coordinators (RMCs) for scheduling medical examinations for customers. Calling done by the RMCs
- Confirmation of an appointment for medical examination done to customers via email and SMS
- RMC follows-up for medical examination reports once medical examination is completed and same is forwarded to New Business team for further processing
- Upon review of medical examination reports by an underwriter, if any further medical examination requirement is raised, process from point 1 to 4 is repeated

HO – NEW BUSINESS

- Reviews the requirement and forwards the case to Underwriting for review

HO – UNDERWRITING

- Accepts the case and forwards for pre-issuance quality check

HO – NEW BUSINESS

- Does the pre-issuance quality check and awaits policy issuance in batch

HO – IT

- Policy gets issued in a batch
- E-Policy Pack gets triggered to a customer
- Policy issuance SMS gets triggered to a customer
- Physical policy pack gets generated

HO – NEW BUSINESS

- Policy pack is received from IT
- Policy pack is transferred to the Service Provider for printing and dispatch to a customer

HO – BILLING AND COLLECTION

- Upon successful completion of all the details in an application form, customer is navigated to "**Pay now**" button on the portal
- Upon clicking on "pay now" button, a customer is asked to choose from the following payment modes,
  - o Credit card
  - o Debit card
  - o Net Banking
  - o UPI (Unified payment interface)
- After selecting a payment option, a customer is asked to choose category of card / bank name

- Upon clicking on submit button, a customer is required to enter the card number, expiry date, CVV number and OTP and click on "make payment" button
- Post successful premium payment, a customer gets acknowledgement of premium payment along with transaction reference number

TURN-AROUND-TIME CHART

S.No.	Process Step	Start Point	End Point	TAT
1	Quality Check & Resolution of Partial Match Clients	Received cases in Data Entry QC queue	Movement of Cases to PIQC or UW	T
2	Pre-Issuance Quality Check	Received cases in PIQC queue	PIQC Completed	T
3	Requirement Management Cases	Received cases in Requirement update queue	Movement of Cases to PIQC or UW	T
4	Updating of credit for onward processing	Data entry done on Ingenium before 8:00 pm	Upload on Ingenium	T (T being the entry date in Ingenium)
5	Initial Underwriting & Raising of requirement/System updation, if any	Initial scrutiny by Underwriting	Updation in Ingenium	T + 2
6	Medical Appointment scheduling	On medical requirement raised by Underwriters	Handover of Medical Reports to NB team	Calling TAT T+1 day Medical Reports TAT : 0-2 days Tier I & II Cities (Delhi , Mumbai, Hyderabad, Chennai , Kolkata, Bangalore) 0-5 days smaller cities and remote towns