SUMMER INTERNSHIP PROGRAM

at

TATA AIG

From 19/05/2025 to 18/07/2025

A REPORT BY

J HEMARANGAN

Master of Business Administration

(Pharmaceutical Management)

Roll no: - 0649

2024-26

under the Mentorship of

Dr. Hemant Kumar Mishra (Assistant Professor)

IIHMR UNIVERSITY, JAIPUR

Tata AIG General Insurance Company Ltd.
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IRDA Registration No.: 108
CIN: U85110MH2000PLC128425

Mr. J Hemarangan

Indian Institute of Health Management Research,
Jaipur

Dear Hemarangan,

Subject: **Internship Completion Certificate**

We are glad to inform that **J Hemarangan** has successfully completed his internship with **TATA AIG General Insurance Company Limited** from **May 19, 2025 - July 18, 2025.**

During the course of his internship, Hemarangan was assigned with a project, titled as **"GPA and EC medex pricing"** in **"SME"** department under the guidance of **Mr. Amit Patel, Senior Vice President - SME**. The nature of the assignment was confidential. Hemarangan has successfully completed all the requirements of the project and has delivered an appreciable report.

We wish him the very best in his future endeavors.

TATA AIG General Insurance Company Limited

Divya Arya
Senior Vice President & Head – Corporate HR

IIHMR University Faculty Mentor Approval

This is to certify that **Mr. J. Hemarangan** of the academic year 2024-26 **School of Pharmaceutical Management** has prepared a poster with respect to his summer internship held during May-July 2025.

He has carried out work as per the guidelines. His poster is approved for presentation.

for 28/7/25

Date: 29/07/2025

Dr. Hemant Kumar Mishra
Assistant Professor
IIHMR University, Jaipur

GPA AND EMPLOYEE COMPENSATION (EC) MEDEX PRICING

Faculty Mentor – Dr. Hemant Kumar Mishra

Industry mentor – Mr. Pranay Shah

Presented by : Hemarangan J

Roll No: 0649, MBA – Pharmaceutical Management (PM-16)

HISTORY & DESCRIPTION

TATA AIG General Insurance Company was founded in 2001 as a joint venture between the Tata Group and American International Group (AIG). The company was established under the leadership of Ratan Tata, aiming to provide innovative insurance solutions in India.

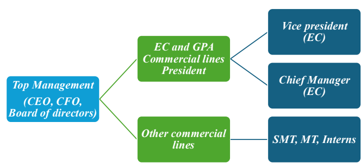
MISSION

TATA AIG General Insurance Company Limited's goal is to improve customers' tomorrows by providing them with innovative and dependable insurance solutions that are transparent, efficient, and focused on their needs. In addition to building enduring relationships and making a positive impact on the community and the Indian insurance ecosystem, the company aims to offer financial protection and peace of mind through superior products, prompt services, and strong ethical practices.

VISION

"To be the leader in the general insurance industry, by caring for our customers and offering them innovative risk solutions"

ORGANIZATION STRUCTURE



PRODUCT OVERVIEW

The Medical Extension Cover (sometimes branded as "Medex" or "medical cover add-on") extends the base policy by covering medical treatment costs for injuries arising out of employment. Without it, the base policy pays statutory compensation but does *not* cover actual hospital/doctor bills.

SWOT ANALYSIS

OBJECTIVE & METHODOLOGY

❖ To perform parameter analysis and then use the inferences of parameter analysis to do risk profiling to calculate the Incidence rate (IR) and Average claim size.

❖ 3 Years (2022-25) policy level database of EC was used in Excel to find the top 30 trade categories covering 80% of the business .

❖ Calculating Incidence rate (IR) and Actual claim size (Severity) by pricing framework.

❖ Analyzing different parameters like State, Number of months, workers band, wages band and Medex limit on how they influence pricing by affecting GLR, Premium % and GLI, Finally risk profiling and interpreting the premium calculation

PROJECT FINDINGS

❖ GLR is >65% in 10 trade categories among top 30 trade categories which had great premium % and GLI

❖ State, Medex limit were the most important parameters

❖ The parameter analysis gave us major findings that

❖ Gujarat, Maharashtra, Tamil Nadu, Telangana, and Delhi showed poor performance.

❖ High-risk groups had (8k–15k) wages, low Medex limits, and 30–100 workers, all grouped in high risk for pricing.

Conditions of data analysis	Risk profiling
GLR (>65%), Occupancy wise (>65% LR), >GLI, >Premium contribution %	High risk - 10 (ex: Coal/Geological) Low risk - 20
Pricing Calculation Formulae	**Calculation**
Base premium price = (Average claim size * Incidence rate / GLR) + 20% Expenses + 10% Commission + 5% profit	BPP = (112019 * 0.120 /186%) + 20% (7279.84) + 10% (7279.84) + 5% (7279.84) = ₹ 9,827.79

CHALLENGES

❖ Pricing EC-Medex was difficult as it was a new concept with no existing framework.

❖ Policy parameter analysis was limited due to insufficient data.

DIFFERNCE IN THEORETICAL AND PRACTICAL EXPOSURE

Gained basic Excel and digital health schemes theory at IIHMR; practically worked on advanced Excel data analysis and insurance pricing without prior theoretical exposure.

KEY LEARNINGS

❖ Learned basic fundamentals of EC Insurance.

❖ Analyzed data using MS Excel to identify key pricing parameters.

❖ Understood variables like GLR, GLI, premium % and built the pricing framework using IR and Severity.

SUGGESTIONS

❖ Same data integration in policy and claims level files.

❖ Using same calculator like GPA

❖ Using the same loading ratio like GPA calculator for better credibility

Reporting Format (Weekly) – Week 1

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME

Name of the Student: J Hemarangan

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 1
From:…12/5/25……………………**to**………16/5/25………………………..

Activity Done	Self-learning of TATA AIG platform courses on 3 areas such as Power BI, creating impactful presentations and Insurance Fundamentals to be completed before the end of July month.
Linking theory (Classroom learning) with practice at your organisation	Basic fundamentals of Ms-office tools learnt in IIHMR curriculum.
Gaps identified on the working area.	NIL
Suggestions for improvement	NIL
Plan for the next week	Joining for Induction and starting the project work in Internship related to Insurance pricing.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 2

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled "GPA and Employee Compensation (EC) medex pricing.

Name of the Student: J Hemarangan

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 2 **From:……19/5/25……………………to………23/5/25………………………..**

Activity Done	Attending two days Induction process, Understanding the basics of different Insurance schemes offered by TATA AIG, Understanding the fundamentals of Group Personal Accident and Employee Compensation Insurance schemes and pricing quotes interpretation.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning.
Gaps identified on the working area.	Medical expenses coverage was offered in both GPA and Ec scheme as per basic policy guidelines; the distinguishing factors and exclusion criteria and maximum insurance amount that can be offered as per calculator is unclear.
Suggestions for improvement	NIL
Plan for the next week	Understanding the major policy guidelines in both the schemes and studying the statistical techniques used in pricing of insurance.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 3

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled " GPA and Employee Compensation (EC) medex pricing.

Name of the Student: Hemarangan.J

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 3 **From:…26/5/25……………………to………30/5/25………………………..**

Activity Done	Understanding the fundamentals of GPA and Employee Compensation Insurance schemes and pricing quotes interpretation. Formulating the workflow for the whole project, Finding the policies with highest premium in last 6 years insurance data using excel data analysis and formulating pivot tables for analysis.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning. Using data analysis fundamentals thought in VAC subject SPSS
Gaps identified on the working area.	EC claims data is analysed firstly and there is huge amount of data unavailability which should be solved to properly implement the data analysis process.
Suggestions for improvement	Advancing proficiency in Excel data analysis
Plan for the next week	Performing data analysis using pivot tables to find incidence rate and severity of EC claims data.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 4

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled **"**GPA and Employee Compensation (EC) medex pricing.

Name of the Student: Hemarangan.J

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 4 **From:……2/6/25……………………to………6/6/25………………………..**

Activity Done	5 years policy level data was used to find policies with highest Sum Insured and Premium. Nearly 200-225 active trade categories were selected but from them top 30 trade categories were selected in statutory and medex database. Later, for these trade categories specific actual claim size (severity) and incidence rate based on the value of premium, GLI, number of claims and total number of policies.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning. Using data analysis fundamentals thought in VAC subject SPSS
Gaps identified on the working area.	Claims data was too much unorganized and scattered, data was cleaned before analysing data.
Suggestions for improvement	Advancing proficiency in Excel data analysis, need to check for the accuracy and correctness in the data.
Plan for the next week	Performing data analysis using Ms-excel to find incidence rate and Actual claim size of EC claims data.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 5

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled "GPA and Employee Compensation (EC) medex pricing.

Name of the Student: Hemarangan.J

Roll no : 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 5 **From:……09/6/25……………………to………13/6/25………………………..**

Activity Done	Data analysis was completed to find actual claim size and incidence rate/frequency for all the policies offered for specific trade categories in statutory and medical expenses during the inception years FY (21-25). Base premium was also calculated from these two quantitative variables.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning. Using data analysis fundamentals thought in VAC subject SPSS
Gaps identified on the working area.	The overall data had so many discrepancies in finding certain mathematical parameters due to incorrect data being recorded in the excel which was cleaned and then data analysis was completed.
Suggestions for improvement	Advancing proficiency in Excel data analysis.
Plan for the next week	Complete 15 days review, get insights on data analysis completed so far and then work based on the parameters.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 6

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled "GPA and Employee Compensation (EC) medex pricing.

Name of the Student: Hemarangan.J

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 6 **From:……16/6/25……………………to………20/6/25………………………..**

Activity Done	15 days review had been completed; Mentor had given serious potential feedbacks on developing the whole project with different methodology. Instead of working on the claims level data, the shift will be on the policy level data, the same calculation framework will be used. Potential parameters that affect pricing should be discovered and focused and thus 3 parameters namely state, channel, Number of months were used. Data analysis will be based on how these parameters affect GLI, GLR (>65%), Premium contribution. This analysis was initiated and will be completed in the following week.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning. Using data analysis fundamentals thought in SPSS
Gaps identified on the working area.	NIL
Suggestions for improvement	NIL

Plan for the next week	Completing the parameter analysis on the three selected parameters on how they influence GLR, premium, GLI.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 7

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled "GPA and Employee Compensation (EC) medex pricing.

Name of the Student: Hemarangan.J

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 7 From:……23/6/25……………………to………27/6/25………………………..

Activity Done	3 parameters were analysed to understand their influence over EC pricing. The final premium was calculated based on the pricing framework proposed by mentor; these parameter analysis results will be interpreted on risk profiling the trade categories.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning. Using data analysis fundamentals thought in VAC subject SPSS
Gaps identified on the working area.	NIL
Suggestions for improvement	NIL
Plan for the next week	Risk profiling will be performed on the trade categories grouped based on parameter analysis and then the corresponding premium price loading will be calculated.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 8

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled "GPA and Employee Compensation (EC) medex pricing.

Name of the Student: Hemarangan.J

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 8 **From:……30/6/25……………………to………04/725………………………..**

Activity Done	First month review was completed, 3 parameters are not sufficient to understand the overall effect on pricing and thus another 3 parameters were added to do further analysis and complete the Final premium pricing Workers band, Wages band, Medex limit and aggregates, occupancy were also used as potential parameters to determine how they affect GLR, GLI, Premium % etc. This parameter analysis had been initiated and also other than the trade category level analysis, overall analysis on all the existing 640 trade categories were performed to compare overall trend.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning. Using data analysis fundamentals thought in VAC subject SPSS
Gaps identified on the working area.	NIL
Suggestions for improvement	NIL
Plan for the next week	Parameter analysis to be modified as per the suggestions given by organization mentor and then the overall pricing should be overlooked for interpretations.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 9

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled "GPA and Employee Compensation (EC) medex pricing.

Name of the Student: Hemarangan.J

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 9 **From:……07/725……………………to………11/725………………………..**

Activity Done	Parameter analysis was completed on 6 parameters such as (State, Number of months. Medex limit, Wages band, workers band and occupancy) on the top 30 trade categories profile. The overall level data-based parameter analysis was also completed and the corresponding trends were compared with the top 30 interpretations, and both had similar trends. Risk profiling will be done for these interpretations and premium calculations will be finalized on the basis of the same.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning. Using data analysis fundamentals thought in VAC subject SPSS
Gaps identified on the working area.	NIL
Suggestions for improvement	NIL
Plan for the next week	Presentation preparation for the review scheduled on last week of internship, Interpretation and risk profiling completion.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Reporting Format (Weekly) – Week 10

Name of the Organisation: TATA AIG

Area/ Department/ Project of Summer Internship Program: SME, Project titled "GPA and Employee Compensation (EC) medex pricing.

Name of the Student: Hemarangan.J

Roll no: 0649 **Stream:** MBA - Pharmaceutical Management

Week no: 10 **From:……14/725……………………to………18/725………………………..**

Activity Done	Parameter analysis interpretations were used to make the risk profile analysis; The trade categories were grouped into high risk and low risk profiles. 10 profiles had high risk and 10 had low risk and the corresponding premium price calculated had values in the same range, thus final loading factor addition will be done in the future after checking the trends on implementing this new framework. The project was completed with the expected outcomes such as Incidence rate and Severity; the final review also took place on the scheduled date and the presentation made for the same was submitted.
Linking theory (Classroom learning) with practice at your organisation	Usage of Basic Health schemes fundamentals associated with digital health mission of government associated with Digital Health module of classroom learning. Using data analysis fundamentals thought in VAC subject SPSS
Gaps identified on the working area.	Overall data being scattered and thus data cleaning consumed more time. The pricing for medex was completed for the very first time and thus the framework used for calculation to get validated took more time.
Suggestions for improvement	NIL
Plan for the next week	Reporting to IIHMR and completing poster and report for final presentation.

Signature of the Student

Approved by the IIHMR University Jaipur Mentor

Compiled Reporting Format

Name of the Organisation: TATA – AIG

Area/ Department/ Project of Summer Internship: SME Department project titled "GPA and EC Medex Pricing"

Name of the Student: J HEMARANGAN

Roll no: 0649 **Stream:** MBA (Pharmaceutical Management)

Activity Done	• Basic fundamentals of Employee compensation Insurance and GPA were firstly understood for the whole project in the first week of the internship after induction. • GPA had inadequate data, and also it had pre-defined framework for pricing and thus it was used as a reference and the main focus was on working in EC Medical Expense pricing. • Framework was made to calculate the pricing for the whole medical expenses' component in EC, with the guidance of Organization Mentor. • There were nearly 640 trade categories in EC for which policies are offered, among these top 30 trade categories based on largest Sum of Premium for 3 years was used as the criteria to determine the same. • Firstly 4 years data was used for the calculation, later we used 3 years data from FY (2022-2025) for the whole process of data analysis and calculation. • Average claims size and Incidence rate were calculated on policy level database which were multiplied to get the Burn cost. This,

	burn cost was later used to calculate the base premium price by dividing the same by GLR (Gross loss ratio), along to this Expenses, Commission and Profit was added to arrive at the Final premium. • Post the 15 days and first monthly review, additional parameter analysis was performed to get major insights on how different parameters affect pricing. • Parameters such as State, Channel, Occupancy, Wages band (wages grouped into bands), workers band, Medex limit (limit of medical expense in the overall cover) were used as potential parameters. • These 6 parameters were analyzed based on the following criteria's such as: • GLR > 65% • High premium contribution, high GLI contribution, high average claims size (severity) and incidence rate. • These parameter analysis results were used to do the further risk profiling to group the top 30 trade categories in high-risk and low risk profiles, and add the loading factor accordingly. • The expected outcome of the project was to find the average claim size, severity and complete the parameter analysis to complete the risk profiling and all these activities were completed on the given time of 2 months. • Further, loading factor will be added according to the risk-profiling and analyzing this framework after implementation in the scheme. • GPA calculation was used as a reference and

	finally, EC based medex pricing was found more promising than GPA.
Linking theory (Classroom learning) with practice at your organisation	• Data analysis theory fundamentals of how to classify independent and dependent variables learnt in SPSS value added course was practically used in the parameter analysis. • Ms-Excel techniques that are used in Marketing Analytics and basic induction session such as data analysis using Pivot tables. • Digital Health based hospital operations and medical emergencies and accidents-based theories were used in understanding the different medical expenses covered in both GPA and EC scheme.
Gaps identified on the working area.	• Policy level database had several issues such as incorrect data in policy duration, inception data and corresponding inception year. Thus, the whole data was cleaned and it took more time for the process to get over. • Claims level database and policy level database had several important parameters that were common but still sufficient data was not available to do the further analysis. • GPA had no specific policy level data and thus performing the same data analysis was not achieved. • The specific parameters that were selected for the study need sufficient data to do further trend analysis, but parameters such as occupancy had no data and thus the trade categories were considered to be occupancies as well. • Some other potential parameters such as nature of loss, industry and clerical role classifications, desk/electrical workers had no data. • The framework used in the project is new and thus the reliability of this framework is subject to a matter of time. Implementation in proper time can give best results to

	analyze the trends.
Suggestions for improvement	• Using the same GPA calculator for EC for a specific time period can give potential insights to check if the approach used is the better one among the both. • The overall pricing strategy proposed for medex can be implemented on high-risk zones like Gujrat first and then can be used in other zones. • The Burn cost-based risk profiling was done for the overall grouping done for all the trad categories this can be performed for the other parameters as well to do further sub grouping. • Since, GPA was used as a reference we can witness the trends of loading ratio in GPA claims and the similar loading ratio can be applied for EC as well.
Key Learnings	• Fundamentals of the medical expenses included in both EC and GPA were majorly studied. • Parameter analysis gave major findings on the overall work being done: - • On the basis of state Gujarat had major risk in terms of high-risk zone and other potential zones like Tamil Nadu, Telngana, Maharashtra and Delhi. • (6-12) month policies had higher GLR and other high risk based on the parameters. • Workers band of (30-100) had high risk indicating that the minimum number of workers employed in small underdeveloped construction sites and other industries are more prone to accidents. • Areas such as Civil construction, Brick and Tiles Manufacturing and Road paving and Tarring, Coal and geological mines had the highest risk ever and workers with least wages band of (>8k-15k) had highest risk. • Medex limit of (0-25k) had highest premium contribution in the overall cover and it had

	GLR of more than >100% which gave us the inference that the pricing strategy currently in practice should be modified soon. • Risk profiling was done based on the parameter analysis and among the 30 trade categories: 10 categories had high risk and 20 categories had low risk. • Ultimately, these categories had workers being employed in remote areas and in occupancies like steel manufacturing, coal mines, construction and building electrical workers, painters and many kinds of base work employees • Proper consideration was seen in claims from zones like Himachal Pradesh, Chhattisgarh, Jharkhand, North Eastern states of India and Kashmir with no significant loss ratio in risk zone. This finding indicates that the other medium risky zones should be also looked into properly for reducing the GLR below 65%. • These findings can be used to fix the premium price with the loading ratio.

Signature of the student

Approved by the IIHMR University Jaipur Mentor