Submitted to

The IIHMR University, Jaipur

for the partial fulfillment for the award of the degree of

Master of Business Administration (MBA)

in

Hospital and Health Management

by

Dr. Asiya Murtaza

Under the Supervision and Guidance of

Dr. Prashant Sharma

COMPLETION CERTIFICATE

This is to certify that Dr. Asiya Murtaza in partial fulfillment of the requirements for the award of the degree of MBA (Hospital and Health Management) from the IIHMR University, Jaipur has successfully completed her internship at Care Health Insurance during March 22, 2021 to June 19, 2021.

Place: Faridabad

Preceptor/Head of the Organization- Dr. Geeta Sadana

Date: June 20, 2021

Name of the Organization: Care Health Insurance, Gurgaon

INTRODUCTION

The insurance industry of India has 57 insurance companies 24 are in the life insurance business, while 34 are non-life insurers. The stakeholders in the Indian Insurance market include agents (individual and corporate), brokers, surveyors and third-party administrators servicing health insurance claims.

OBJECTIVES OF INTERNSHIP

- The role is responsible for settlement of all claims for assigned verticals and to either process or repudiate the claims as per set terms and conditions of the health insurance product.
- Closing claims within the defined turnaround time.

ORGANISATIONAL PROFILE

Care Health Insurance is a specialized health insurer offering products in the retail segment for Health Insurance, Top-up Coverage, Personal Accident, Maternity, International Travel Insurance and Critical Illness along with Group Health Insurance and Group Personal Accident Insurance for Corporates, Micro Insurance Products for the Rural Market and a Comprehensive Set of Wellness Services. With its operating philosophy being based on the principal tenet of 'consumer-centricity', the company has consistently invested in the effective application of technology to deliver excellence in customer servicing, product innovation and value-for-money services.

Care Health Insurance has been adjudged the 'Best Health Insurance Company' at the ABP News-BFSI Awards 2015 and again at the Emerging Asia Insurance Awards, 2019 and 'Best Claims Service Provider of the Year' – Insurance India Summit and Awards 2018. Care Health Insurance has also received the 'Editor's Choice Award for Best Product Innovation' at Finnoviti in 2013 and was conferred the 'Best Medical/Health Insurance Product Award' at the FICCI Healthcare Excellence Awards in 2015, 2018 and 2019.

VISION

Being the most preferred health service provider, which is caring, cost effective, innovative and reachable.

MISSION

- To deliver solutions, beneficial to all stakeholders: our customers, our distributors, our employees and our shareholders.
- To ensure, as part of the above, that all parts of society benefit from our developments and proposition e.g. rural areas, and the social sector.
- To become an exemplary health insurance company, setting industry benchmarks in the area of customer care, products offering, communication clarity, along with customer treatment and engagement.
- To build enduring and profitable relationships with our agents and distribution partners who share our vision.
- As we guide our customers to address their Health needs, we ensure that both our services and relationships hold value for a lifetime.
- To provide leading solutions for employers, so they can ensure better health for their staff.

SERVICES PROVIDED BY THE ORGANISATION

- Mediclaim Policy
- Senior Citizen Health Insurance
- Health Insurance for Family
- Arogya Sanjeevani Health Insurance
- International Travel Insurance
- Individual Health Insurance
- Maternity Health Insurance
- Health Insurance

- Travel Insurance
- Student Travel Insurance
- Care All Plans
- Care

KEY ACTIVITIES/ PROJECTS UNDERTAKEN OTHER THAN DISSERTATION

- Claims processing- Indemnity (Reimbursement), Fixed Benefit Products.
- Settling claims according to the terms and conditions of the different health insurance products as per the regulations of the organizations.
- Understanding of the claims systems (Process flow and System fields).
- Maintaining the turnaround time of processing claims.
- Maintaining the accuracy of claims adjudication.
- Ensuring uniformity in quality of the claims decisions.
- Maintaining standards and following protocols established by the Claims team.
- Maintaining consistent service delivery to ensure client retention and satisfaction.
- Identification of claims with a potential risk to the company and its escalation accordingly.

KEY LEARNINGS FROM INTERNSHIP

One of the key learnings is, processing of claims through analysis of the medical records provided by the clients and escalations of potential risks and liabilities that certain claims could cause the company. This duration with care health insurance has also taught me the importance of liasoning with the different departments of the company on need basis like the underwriting team, sales team or the IT team. It has helped me demonstrate my analytical and judgment abilities as well. I have also learnt to ensure that insurance issues have been resolved, claims have been paid out to interested parties, and payments are accurate and in compliance with corporate policies.