

**Internship at
Deloitte Consulting US India Private Limited,
Bengaluru, Karnataka**

By

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MBA Hospital and Health Management

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1. OBJECTIVES OF INTERNSHIP:

- To understand the work pattern of Deloitte Consulting US India Pvt. Ltd., Bengaluru, and its organizational structure.
- To observe various protocols observed in the organization and try to acquire skills to accomplish them.
- To understand the functioning of the Life Sciences and Healthcare department and the various projects undertaken by the department.
- To carry out study on assessment of EMR Adoption Model developed by Health Information Management Systems Society for an EMR software.

2. ORGANIZATION PROFILE:

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3. KEY LEARNINGS

3.1 Healthcare

The prevention, treatment, and management of illness and the preservation of mental and physical well-being through the services offered by the medical and allied health professions.

Healthcare Market Segment

➤ Payors

Entities other than the patient that finance and reimburse the cost of healthcare. Examples: Insurance companies, health plans, third party administrators and remuneration.

➤ **Providers**

Individual or an institution who provides preventive, curative, promotional and rehabilitative healthcare services to the patients. Examples: - Acute care, ambulatory care, physician's offices, hospice, home-health, medical facility/hospitals.

➤ **Life Sciences and Ancillary Services**

Life sciences services enable pharmaceutical, biotech and diagnostics companies to accelerate drug discovery and advance clinical trial efficiencies. Examples: - Pharmaceuticals, clinical trial, clinical data management, bio-technology, regulatory/accreditation bodies, bio-engineering.

Patient Encounters

➤ **Out Patient**

Patient who has a single/ recurring series of clinical appointment and stay less than 24 hours. Examples: - fever, allergic reaction, minor surgery or treatment.

➤ **In Patient**

Admitted for minimum 24 Hours or until the time when the admit note is generated and assigned a room or bed. Examples: - Labor and delivery, surgery etc.

➤ **Emergency**

Patient in need of immediate care, triaged based on medical condition and may be admitted to IP or discharged from emergency directly. Examples: - Dizziness, food poisoning, accidents etc.

Patient Life Cycle

- Assessment
- Diagnosis
- Treatment
- Rehabilitation/Discharge
- Follow Up

3.2 Healthcare IT

➤ Hospital Information System (HIS)

A hospital information system (HIS) is a comprehensive, integrated information system designed to manage all the aspects of a hospital operation, such as clinical, administrative, financial and ancillary services.

Aim of HIS

- To achieve best possible patient care and outcome
- To provide internal and external communications among healthcare providers
- Provides patient health information when it is needed
- To keeps patient care data secure

➤ Electronic Medical Records

An electronic medical record (EMR) is digital version of a paper chart that contains all of a patient's medical history from one practice. An EMR mostly used by providers for diagnosis and treatment. An EMR contains the standard medical and clinical data gathered in one provider's office.

Benefits of EMR

- Track data over time
- Identify patient who are due for preventive visits and screening
- Monitor how patients measure up to certain parameters, such as vaccinations and blood pressure readings
- Improve overall quality of care in a practice

➤ Interfaces

Connecting link between systems with the use of standard messaging protocols. It enables different systems for different aspects of services and build on different platforms to communicate with each other.

4.3 US Healthcare

➤ Healthcare in United State

- The United States health care system relies heavily on private health insurance, which is the primary source of coverage for most Americans. According to the CDC, approximately 58% of Americans have private health insurance.

- The primary public programs are Medicare and Medicaid. 60–65% of healthcare provision and spending comes from programs such as Medicare, Medicaid Insurance Program.
- Most of the population under 67 is insured by their or a family member's employer, some buy health insurance on their own, and the remainder are uninsured.
- Health insurance for public sector employees is primarily provided by the government

➤ **Role of Government- Health and Laws**

Federal Government

Department of Health and Human Services (HHS) is the US principal agency involved in:

- Medical and social science research
- Preventing outbreak of infectious disease including immunization services
- Assuring food and drug safety
- Medicare & Medicaid
- Comprehensive Health services for the Americans
- Improving maternal and infant health

State Government

- State Insurance Department is the basic agency involved to
- Enforce health insurance laws
- Provide information for making-informed insurance buying decisions
- License and regulate health insurance companies for operations
- Review policy form filings for compliance and conformance
- Provide optimum consumer protection and resolving insurance disputes

➤ **Public Health Coverage**

- Medicare
- Medicaid
- TRICARE
- CHIP (Children's Health Insurance Program)

➤ **Private Health Coverage- Managed Care Plans**

- HMO (Health Maintenance Organization)
- PPO (Preferred Provider Organization)
- POS (Point of Service)

➤ **Healthcare Laws and Accreditation**

- HIPAA (Health Insurance Portability and Accountability Act)
- ARRA- HITECH Act (American Recovery and Reinvestment Act- Health Information Technology for Economic and Clinical Health Act)
- ACO (Accountable Care Organization)
- RHIO (Regional Health Information Organization)
- NHIN (Nationwide Health Information Network)
- JCI (Joint Commission International)
- COBRA (Consolidated Omnibus Budget Reconciliation Act)
- Workmen's Compensation Act