A Study on Tele-MER (Tele Medical Examination Report) at Aditya Birla Health Insurance

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INTRODUCTION

- Tele: Telephonic MER: Medical Examination Report
- Tele-MER is a rapidly evolving field that allows healthcare providers/medical experts to do telemedicine examinations simply by calling patients.
- A convenient alternative to traditional face-to-face consultations, especially during the COVID-19 pandemic. This requires details regarding the client’s personal medical history, including any family history of sickness, over the phone at the designated time by the customer.
- <u>In-house and third-party Tele-MER-</u> In this process the organization hires medical experts in house for completing medical verification whereas in third party the medical experts are from third party from which the organization has signed contract with.

RATIONALE

When customer buys a policy, he/she wants that policy to be active in minimal time. To do so insurance companies require to have a less turn-around time(TAT) at every step from in-warding of policy to issue of policy. Thus, this study aims to find if there is a gap in research by comparing the two types of telemedicine services and determining their effectiveness. It is essential to find out whether in-house Tele-MER are more accurate and reliable than those done by third party providers to improve customer care and outcomes.

RESEARCH QUESTIONS

1. What are the differences in time taken between in-house tele-MER and Tele-MER done by the third party?
2. What are the factors for the differences, if any?
3. Can launching of in-house tele MER improve TAT in comparison to using third-party tele MER services?

OBJECTIVES

1. To study the process of in-house Tele MER at Aditya Birla Health Insurance.
2. To compare the quality (time taken) of tele-medical examination reports done in-house and by a third party at Aditya Birla Health Insurance.
3. To identify the factors that contribute to differences in quality between the two types of Tele-MER.

REVIEW OF LITERATURE

S. No.	Title and Year	Author Name	Objectives	Methodology	Key Results
1	Online sale underwriting game changer for insurance sector in COVID times published on May 21, 2021/ 3:06 PM IST	M. Saraswathy et al.	Implement video medical exams, including COVID-related questions, and improve the speed and security of the insurance policy purchase process while ensuring a suitable cooling-off period for COVID-recovered clients.	Conduct a thorough analysis of the body of knowledge, including books, articles, reports from the business world, and case studies, about the effect of COVID-19 on the insurance industry. Data gathering: Compile pertinent information from dependable sources such insurance industry associations, official reports, and market research companies. Interviews with industry specialists, insurance experts, and executives from insurance firms should be conducted.	• It states that insurance companies usually insist on receiving a comprehensive medical checkup. • Pricing is done in accordance with risk criteria to assure this. • The acceptance of an insurance risk is also influenced by a person's health. • Medical testing was not possible due to COVID-19 and the lockdown. So, video medical tests were used in place of these tests.

2	Evaluation of patient and doctor perception toward the use of telemedicine in Apollo Tele Health Services, India published on 2016 Oct-Dec	Rajesh V. Acharya1 and Jasuma J. Rai	To assess the acceptance of telemedicine services by patient and doctor both.	• Cross-sectional research on satisfaction with service quality, cost efficiency, and issues faced with healthcare delivered through telemedicine in Apollo Tele Health Services, Hyderabad, Telangana, India, including 122 participants (71 patients and 51 doctors).	• The findings of this study indicated that telemedicine in healthcare may be advantageous for patients in remote areas and for Indian rural doctors. • Telemedicine might potentially replace in-person patient treatment soon.
3	Applications, benefits, and challenges of telehealth in India during COVID-19 pandemic and beyond: a systematic review published online on on 2003, January 24	Eslavath Rajkumar et al.	To find the applications, benefits, and challenges of telehealth in India during the COVID-19 pandemic and beyond.	• The new rules for reporting systematic reviews were followed in structuring this review. • To provide a rigorous and repeatable procedure for critically examining the existing literature, a systematic review methodology was used.	• India, the second-most populous and seventh-largest country in the world, has significant healthcare difficulties. • During these trying times, telehealth, which permits treating patients remotely, was essential.

METHODOLOGY

- **Study design-** observational study to compare the quality and accuracy of in-house tele medical examination reports with those done by third party providers.
- **Setting-** Department: Retail Underwriting at Aditya Birla Health Insurance Office Thane, Maharashtra. Aditya Birla Health Insurance Co. Limited (ABHICL), a part of Aditya Birla Capital Ltd. (ABCL), is a joint venture between Aditya Birla Group and MMI holdings of South Africa.
- **Study population-** policyholders who have accessed the telemedicine services at Aditya Birla Health Insurance.
- **Duration of study-** Feb -May 2023.
- **Sampling Frame** A purposive sampling to select customers from NSTP (Non-Straight through process) which mainly concerns customers who have a medical history of asthma, hypertension, cholesterol, diabetes and thyroid who receive tele-MER from both the third-party medical experts and medical experts at in-house.
- **Sample size-** 1400 cases divided equally in 700 cases of Tele-MER (in house) and 700 cases of Tele-MER (by third party). This data is drawn in form of tables in MS-excel and further analyzed in form of graphs.

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- Checking of Proposal form by the medical experts
- Audit checking
- Benefits in terms of Sum insured
- Past medical records
- Telephonic conversation with customer on recorded time for her/his present condition by the medical experts.
- Declaration in previous policy cop

DATA ANALYSIS

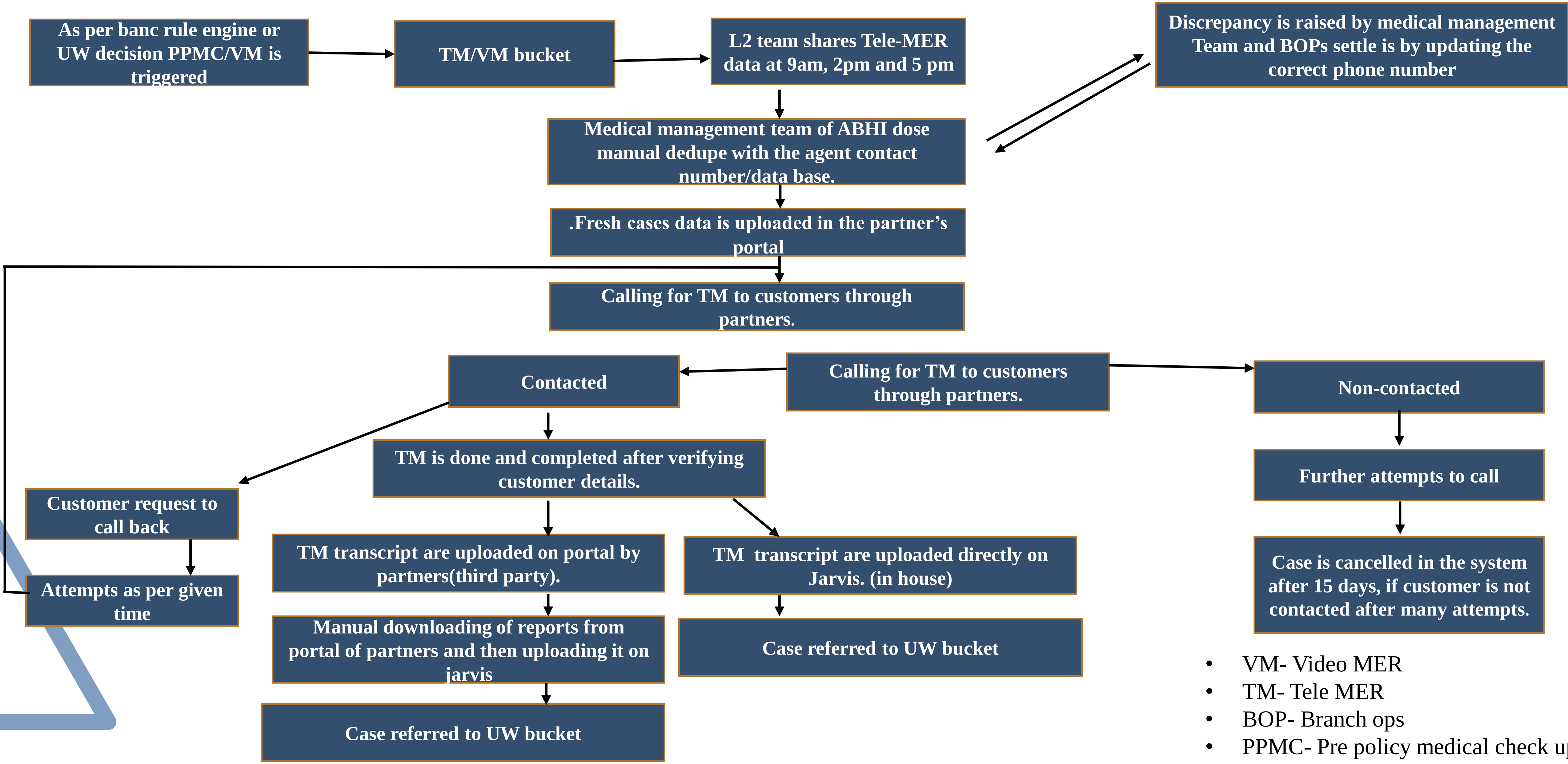
After collecting secondary data for both the Tele MER in-house and Tele MER done by third party from Ubona site, data was processed by the administrator on MS-Excel.

- TAT (turnaround time)
- No. of attempts made for tele-MER consultation.
- UW decision

RESULTS: Process of Tele-MER at Aditya Birla Health Insurance

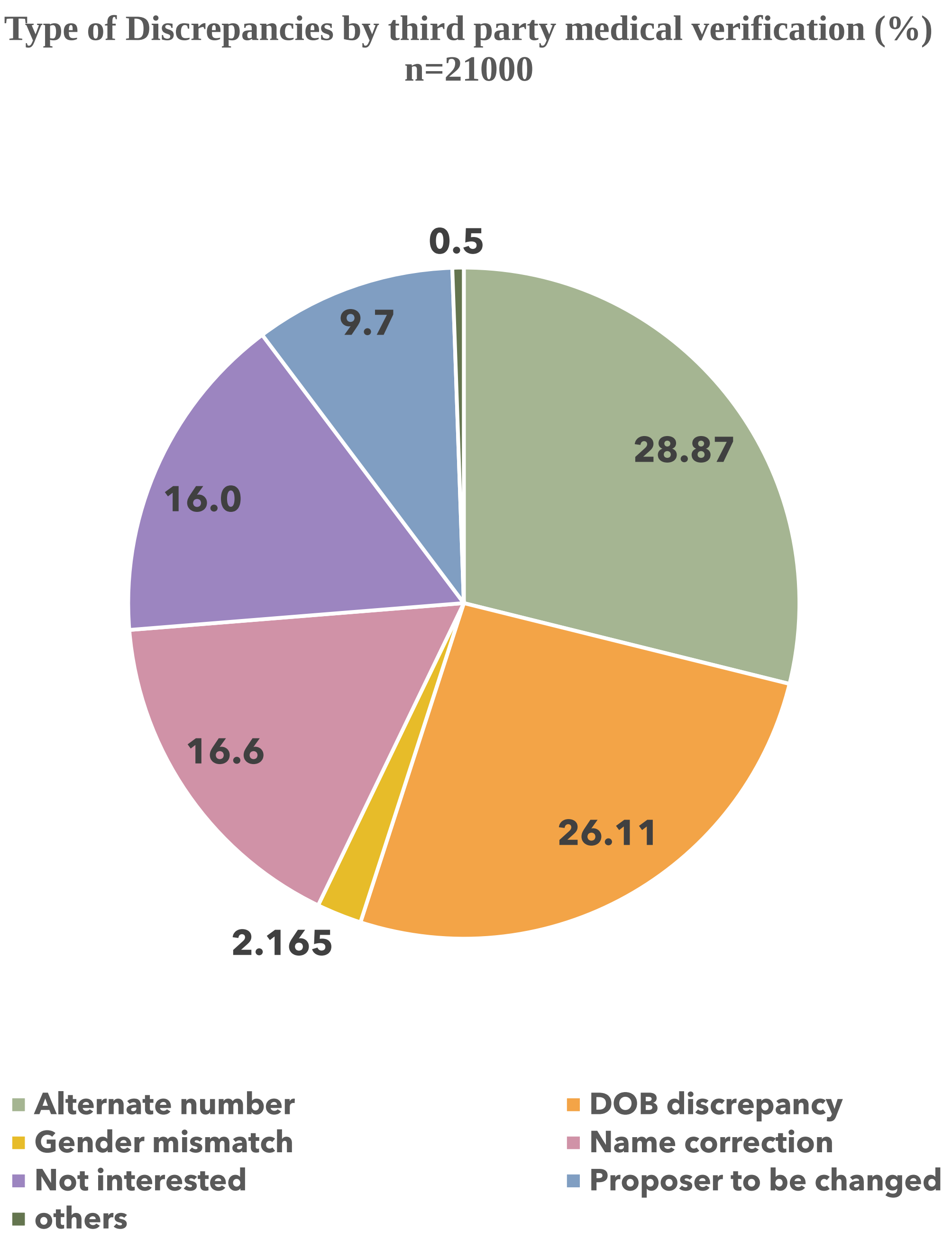
- The proposer for an insurance policy completes the proposal form; following that, the proposal form data is entered into the system, which determines whether cases are STP (straight through process) and NSTP (Non-straight through process) based on previously determined parameters.
- STP cases are issued directly by the system, so they are not sent to the underwriting team or Tele-MER bucket. On the other hand, NSTP cases are sent to the UW or Tele-MER bucket when the proposer disclosed information about a pre-medical disease in the proposal form, or when they require medical testing for various reasons or financial analysis in accordance with the client profile and company guidelines.
- To extract the proposal number from the system a person is assigned who allocates cases to underwriters or Tele-MER buckets. The cases when come to Tele-MER bucket follows the following procedure for third party and in-house respectively.

Process flow of Tele MER

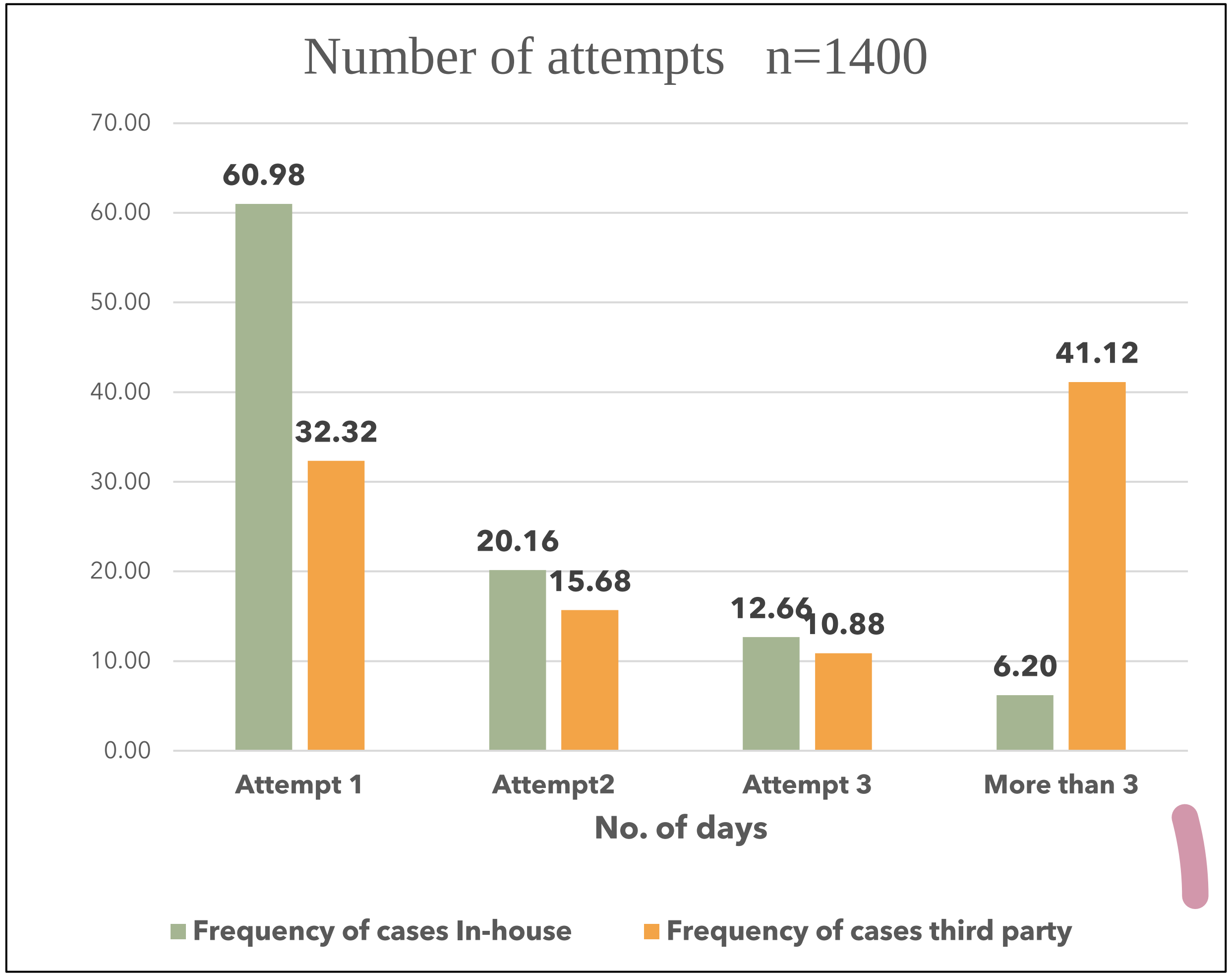


- VM- Video MER
- TM- Tele MER
- BOP- Branch ops
- PPMC- Pre policy medical check u
- UW- Under writing
- L2- Level 2 team

NOTE- Unverified cases are listed and discrepancies are raised for the necessary changes, the again the whole process is repeated.

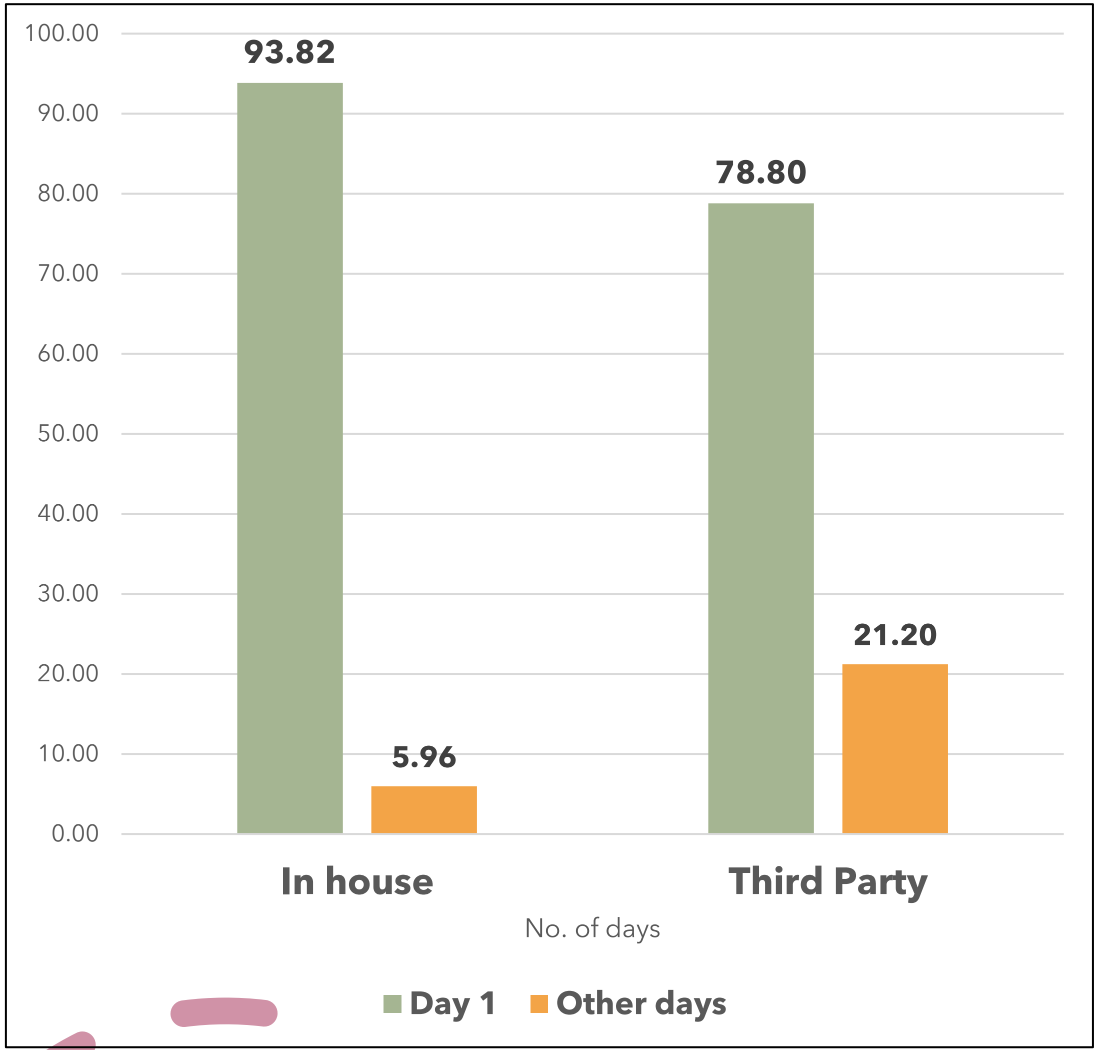


Type of Discrepancies by third party medical verification (%)
n=21000
0.5
9.7
28.87
16.0
16.6
26.11
2.165
Alternate number
DOB discrepancy
Gender mismatch
Name correction
Not interested
Proposer to be changed
others

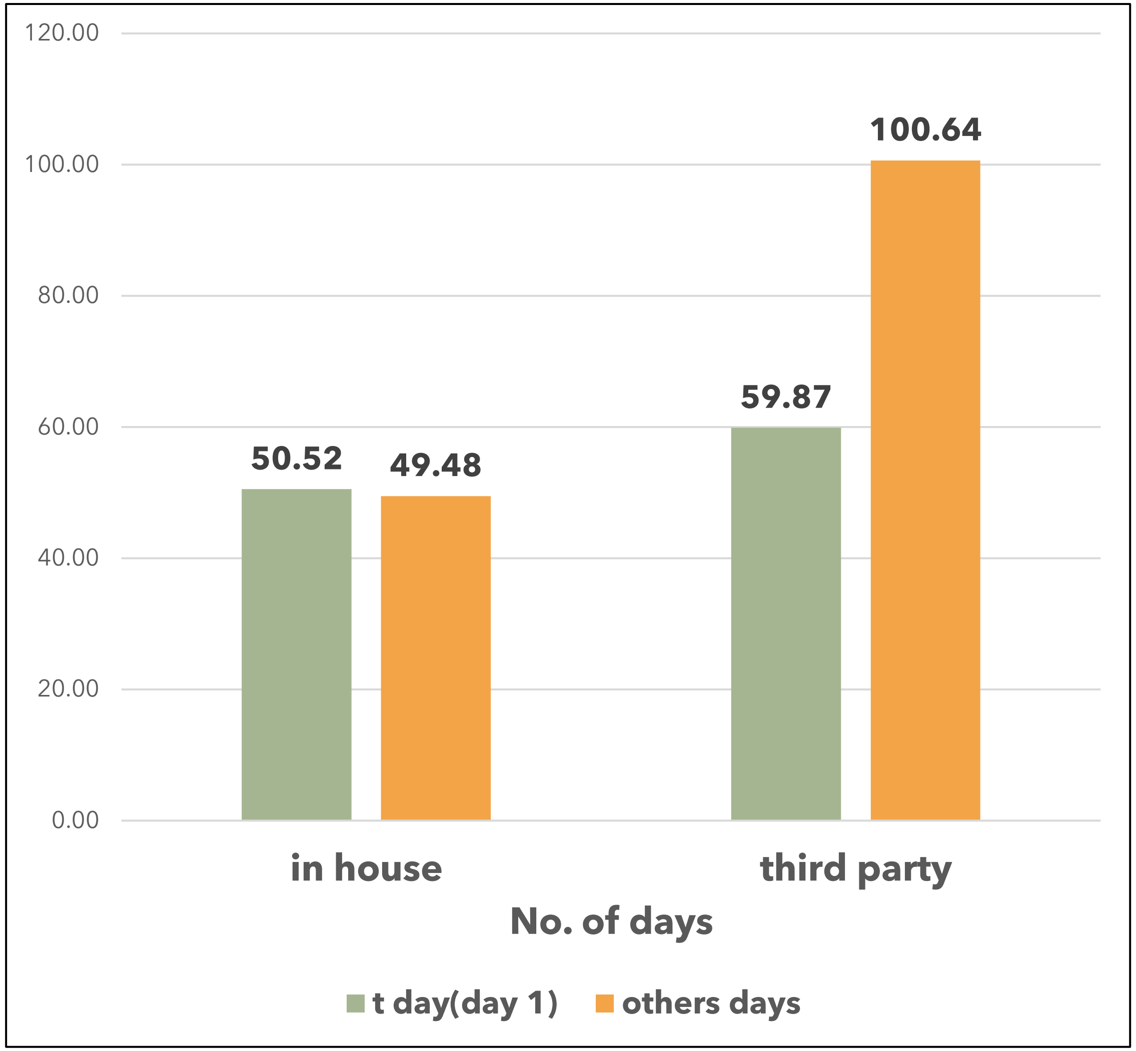


Number of attempts n=1400
70.00
60.00
50.00
40.00
30.00
20.00
10.00
0.00
60.98
32.32
20.16
15.68
12.66
10.88
6.20
41.12
Attempt 1
Attempt2
Attempt 3
More than 3
No. of days
Frequency of cases In-house
Frequency of cases third party

TAT Comparison- *reduction in Third Party and in house on first day and other days*



Underwriting Decision



DISCUSSION

- In two months, 60% of call attempts made by in-house were completed in first attempt as compared to the third party (30%). Similar trends were observed even in the 2nd attempt
- The TAT was reduced by 93% as compared with third party (78%), leads to fast underwriting decision
- In-house medical experts had better quality calls as they were given proper training and are monitored time to time. This not only led to reduction in TAT but also leaves a positive impact on customer service.

CONCLUSION

- Telemedical verification is the process of verifying medical information and evaluating policyholders' health remotely using telecommunications technology like video conversations or virtual consultations. In-house Tele-MER is a great initiative taken by Aditya Birla Health Insurance. It removes the requirement for in-person visits to medical facilities for verification.

- Processing time was shortened. Cost cutting related to in-person visits, such as travel charges and facility fees, by using telecommunications technologies. It allows policyholders to complete the process from their own homes, eliminating distance restrictions thereby increasing accessibility.

- In-house tele-MER leads to reduction in TAT, gives fast underwriting decision, better quality of calling done in which medical experts can be directly supervised and gives better output.
- Enables insurance providers full command and supervision over the whole procedure, workers may be communicated standards, and monitor adherence to internal rules, whereas verification procedure is outsourced to outside service providers in third-party telemedical verification.

RECOMMENDATIONS

- In-house teleMER is a better alternative, adequate number of medical experts for verification are required to increase the productivity.
- IT may make user friendly website (which may include editable version) so that medical experts work faster than the manual labour which is time consuming,
- Automated productivity excel sheets
- Training is a continuous process, the branch teams nay be trained/ oriented/ reinforced about the importance of early clearance of discrepancy.

THANK YOU