Internship at Care Health Insurance Limited, Gurgaon

By

Rahul Mewara

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The IIHMR University, Jaipur

1, Prabhu Dayal Marg, Near Sanganer Airport,
Jaipur – 302029, Rajasthan
Phone: 91-141-3924700, 2791431-32
E-mail: iihmr@iihmr.edu.in

Internship Report

1. Introduction

This report highlights my internship experience at **Care Health Insurance**, where I worked as a Claims Manager in the **Reimbursement Department**, Mumbai Zone at **Gurugram** Office**.** The internship was conducted from **10 March 2025 to 31 May 2025** as part of the MBA in Health Management program, providing hands-on exposure to real-world claim processing and customer coordination in private health insurance.

2. Objectives of Internship

- To understand the reimbursement claims process from submission to settlement.
- To manage coordination between policyholders and hospital documentation teams.
- To analyze rejection and approval trends in reimbursement claims.
- To identify process improvements in reimbursement workflow.
- To gain exposure to regulatory compliance in health insurance claims.

3. Organizational Profile

Care Health Insurance is a leading private health insurer in India, offering health coverage to individuals, families, and corporates. Known for its extensive hospital network and customer-centric policies, the company provides a range of health insurance products, emphasizing claim transparency and digital ease of access.

4. Services Provided by Organization

- Retail and group health insurance products
- Cashless and reimbursement-based claim settlement
- Digital claim submission via app and portal
- 24x7 customer support

- Preventive and wellness care initiatives
- Chronic care management

5. Key Activities/Projects Undertaken (Other than Dissertation)

- **Claims Scrutiny & Validation:** Evaluated submitted reimbursement claims, checking for eligibility, completeness, and policy terms compliance.
- **Documentation Review:** Assessed medical reports, discharge summaries, invoices, and prescriptions for authenticity and policy relevance.
- **Discrepancy Handling:** Flagged fraudulent or inconsistent claims and prepared them for escalation to the fraud investigation unit.
- **TAT Monitoring:** Tracked and improved turnaround time for claim approvals by coordinating with medical and finance teams.
- **MIS Reporting:** Maintained daily logs and performance dashboards using Excel for review by the Claims Operations Head.

6. Key Learnings from Internship

- In-depth understanding of the reimbursement claim lifecycle and IRDAI claim regulations.
- Improved decision-making skills for claim approval and rejections based on policy wording.
- Developed proficiency in CRM tools and Excel-based MIS reporting.
- Gained exposure to customer sensitivity in health finance issues and communication skills.
- Learned about interdepartmental coordination and process optimization in health insurance.