Internship at Care Health Insurance Limited, Gurgaon

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

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2025

INTERNSHIP REPORT

OBJECTIVES OF THE INTERNSHIP:

- To examine the frequency and pattern of various decision results (Approve, Query, Non-register, Investigation, Query, Reject) to identify the prevailing trend in claim processing.
- To assess the impact of geographic location on healthcare service utilization and claim approval rates, and to determine if regional factors contribute to it.

INTRODUCTION

Care Health Insurance Limited, previously Religare Health Insurance Company Limited, is a leading standalone health insurance company in India. Focused intensely on customer-centric services, innovative health products, and a robust claims process, the organization has established a strong position in India's rapidly changing healthcare financing scenario. Based in Gurgaon, Haryana, Care Health Insurance is integral in making good healthcare more accessible and affordable throughout India.

ORGANIZATION PROFILE

Background and Establishment

Care Health Insurance was introduced in 2012 under the name Religare Health Insurance as a business by the Religare Group and two of its key shareholders – Union Bank of India and Corporation Bank. The name was changed to "Care Health Insurance" in 2020 to align with its mission to care for the health of people.

The firm is governed under the Insurance Regulatory and Development Authority of India (IRDAI) regulatory regime and deals solely with health insurance products. In contrast to general insurance firms that deal in a variety of services, including health insurance, Care Health Insurance deals only in healthcare financing, which endows it with a niche advantage in the industry.

Vision, Mission, and Values

Care Health Insurance works with a vision to be the most reliable health insurer, which not only insures lives but also helps individuals to live healthier and happier. The mission revolves around:

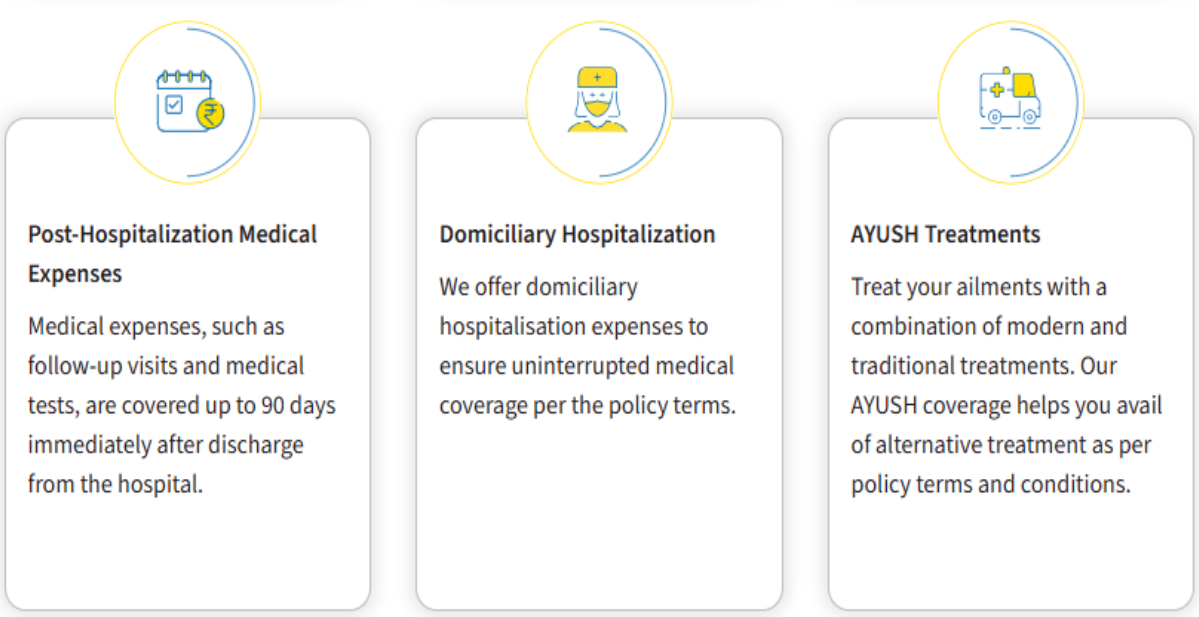
Offering world-class, affordable health coverage, building trust in the form of transparency, innovating for customer convenience, fostering preventive health and wellness

Corporate Office – Gurgaon

The head office is at Vipul Tech, Gurgaon. The Gurgaon office is not just the hub for business operations but also serves as a think-tank for digital innovation, customer service excellence, and strategic planning. This is the location that accommodates senior leadership teams, the IT division, underwriting and risk assessment departments, claims processing, corporate HR, and product development functions.

SERVICES PROVIDED BY THE ORGANIZATION

- Care Health Insurance provides the finest health insurance policies for medical bills, which offer complete financial safety during times of need by covering different medical bills aside from the hospitalization bills you pay. The coverage available depends on the policy, conditions and terms. The medical bills covered in health insurance policies are:



- **Health Insurance Plans**
  - Individual Health Insurance – Provides complete protection for medical bills, hospitalization, and treatment charges.
  - Family Health Insurance – Covers the whole family under a single health policy, providing security to all members.
  - Senior Citizen Health Insurance – Tailor-made plans for elderly citizens with benefits such as increased sum insured, no co-payment, and coverage for pre-existing diseases.
  - Critical Illness Insurance – Pays a lump sum on the diagnosis of listed critical illnesses.
  - Top-up Health Insurance – Extends existing health insurance policies with extra coverage at low premiums.
  - Maternity Insurance – Covers maternity expenses such as prenatal and postnatal treatment, delivery, and baby care.
- **Personal Accident Insurance**
  - Offers financial protection in case of accidental death, permanent or temporary disability, and accident-related medical expenses.

- **Travel Insurance**

➢ International Travel Insurance – Protects international travelers for emergency medical conditions, trip cancellations, loss of baggage, and other travel risks.

- **Group Insurance Plans**
  - ➢ Group Health Insurance – Customized health insurance schemes for corporate employees, including medical costs, hospitalization, and wellness services.
  - ➢ Group Personal Accident Insurance – Provides cover for employees for accidental death, disablement, and related medical costs.

KEY ACTIVITIES/PROJECTS UNDERTAKEN OTHER THAN THE DISSERTATION

During my induction training program, I had the opportunity to participate in a series of engaging and insightful activities designed to enhance team collaboration, problem-solving, critical thinking, and organizational understanding. These activities were carried out with the aim of acclimatizing new joiners to the work environment, fostering interdepartmental collaboration, and developing key soft skills.

One of the activities was riddle-solving in groups. This seemingly easy task proved to be a fine icebreaker and a good exercise in logical thinking and collaboration. I collaborated with colleagues from different departments, and from this activity, I learned to appreciate different perspectives and communication styles. It also established a camaraderie atmosphere among the new hires since we merged our strengths to achieve collective goals.

We also undertook a product pitching exercise, where we were placed in groups and challenged to think of and pitch a new product or service. This activity fostered creativity, planning, and presentation skills. It forced us to approach it from a business point of view — determining market niches, knowing the needs of customers, and crafting a selling proposition. My group worked on a solution related to the healthcare field, and we had to sell it to a mock panel representing prospective investors. It provided me with important lessons in product innovation and marketing strategy.

One of the most impactful exercises was the process improvement exercise related to claims processing. As part of the induction into the operational processes of the company, we were prompted to notice and review the current claims process. Our group outlined particular bottlenecks, gaps in communication, and duplicate steps that were resulting in delays or inefficiencies. We then prepared a report and presented actionable recommendations to streamline the process, minimize turnaround time, and enhance overall service quality. This assignment not only enhanced my knowledge of health insurance operations but also brought into perspective the significance of regular process assessment and feedback.

These exercises, while undertaken in the first phase of onboarding, were highly significant in defining my professional psyche. They provided hands-on exposure to teamwork, strategic planning, and problem-solving, which are fundamental in the dynamic environment of healthcare management. Furthermore, these exercises epitomized the organization's culture of innovation, collaboration, and employee engagement in ongoing improvement.

Overall, the induction program was a valuable learning experience that went beyond book smarts. It served to bridge the gap between theoretical learning and real-world application, and it gave me a solid foundation as I started my career in the organization.

KEY LEARNING FROM THE ORGANIZATION

Through interactive exposure to the reimbursement claim process at Care Health Insurance, I gained a comprehensive understanding of the end-to-end lifecycle of a health insurance claim, right from submission, documentation, adjudication, to the final decision (approval, query, rejection). Also understood the differentiation between cashless and reimbursement claims.

The study highlighted delays in claim settlement, especially for cases under investigation. learned the importance of streamlined documentation, standard operating procedures, and efficient communication for reducing turnaround times and increasing patient satisfaction.

During my tenure as a full-time employee in the Claims Reimbursement Department of Care Health Insurance, I acquired useful experience in processing and validating reimbursement claims. The job stressed precision, adherence to policy regulations, and prompt settlement of claims. I honed great analytical and documentation skills to make sure each claim was scrutinized thoroughly to avoid discrepancies and delays. The experience improved my capability to critically evaluate supporting documents, have transparency in the reimbursement process, and uphold the company's adherence to customer service.