CARE HEALTH INSURANCE GURUGRAM

ABOUT:

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. Best Health Insurance Plan – Care Plus' at the Global Financial Planner's Summit 2024.

VISION:

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

MISSION:

- Create value for all stakeholders.
- Extend benefits to rural and social sectors.
- Lead in customer care, products, and communication.

STRENGTHS:

- Real-time access to actual claims data.
- Support from experienced audit and claims teams.
- Strong collaboration across departments.

WEAKNESSES:

- Limited access to some hospital-side documents.
- Time constraints during high-volume data periods.

SWOT

OPPORTUNITIES:

- Scope to influence claim cost policies.
- Future integration of AI-based cost flags.
- Building predictive models using claim history.

THREATS:

- Resistance from hospitals during claim rejections.
- Risk of missing nuanced clinical justification without full case notes.

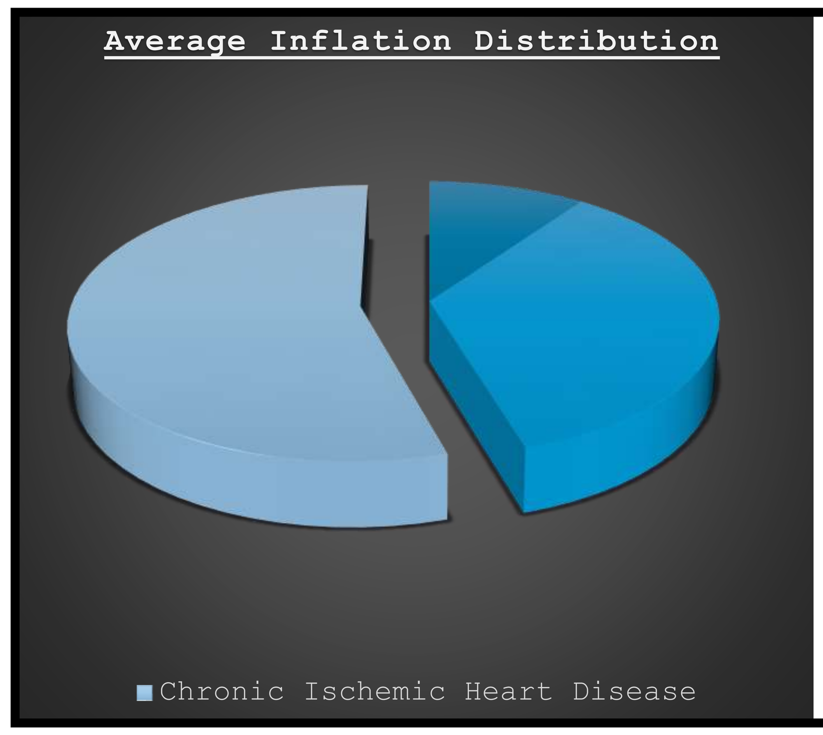
POSTER TITLE: Pricing the Procedure: A Business Lens on ACS Inflation in Network Hospitals

OBJECTIVES:

- To quantify inflation in Average Claim Size in Hyderabad hospitals
- To identify the clinical, operational, and billing reasons behind this inflation
- To differentiate patterns by hospital type, specialty, and procedure

ANALYSIS AND INTERPRETATION OF DATA:

- Compared year-on-year ACS data (FY 2023–24 vs 2024–25) for 3 high-frequency diseases.
- Segregated by:
  - Procedure type (e.g., open vs laparoscopic)
  - Length of stay
- Avoided direct tariff comparison; instead, analyzed clinical behavior patterns across 10 tertiary hospitals using anonymized labels (H1–H10)

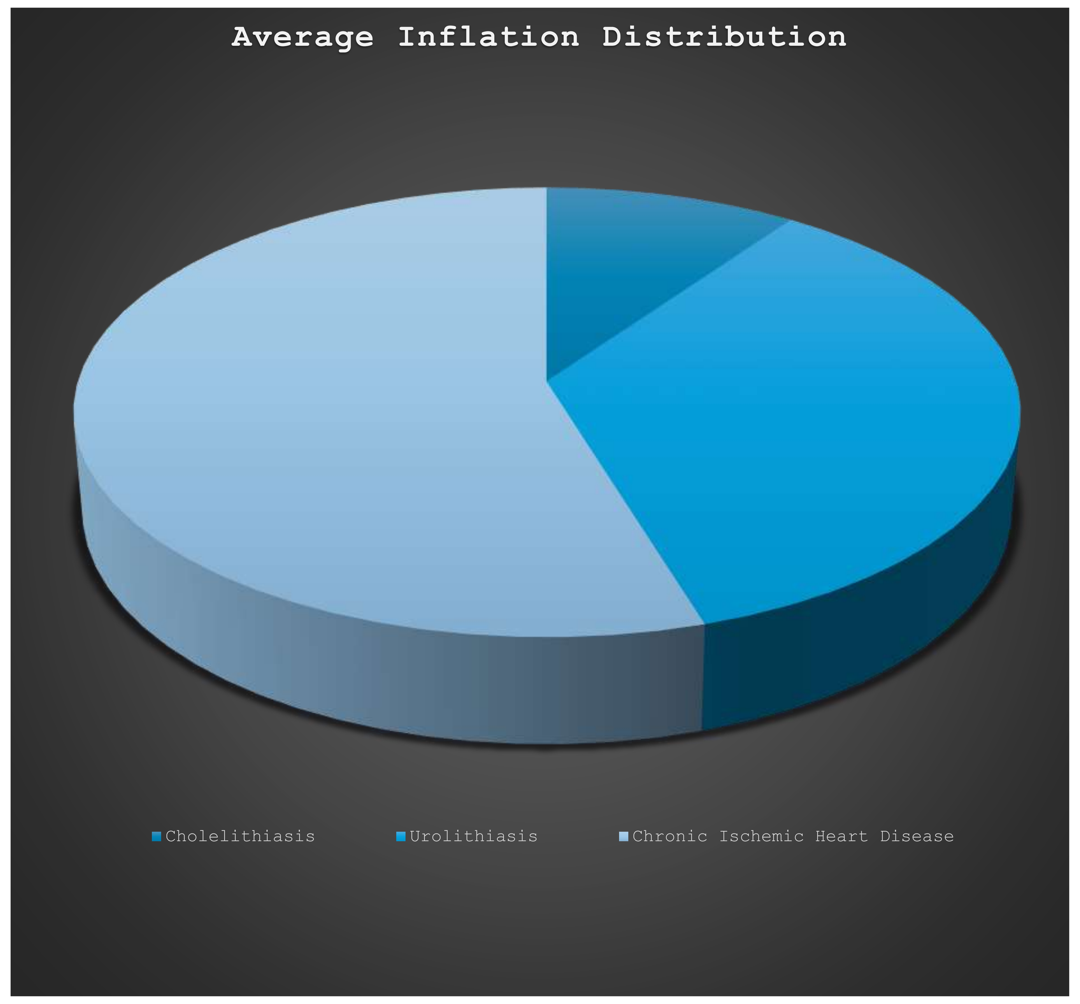


H9	Hyderabad	36.6%
H10	Hyderabad	41.85%

In 2024, surgery was billed above the approved tariff with extra investigation charges, despite tests being included—leading to unjustified claim inflation.

The hospital used open billing and separately charged for cath lab and service fees already covered in the package, causing duplicate billing and inflated costs.

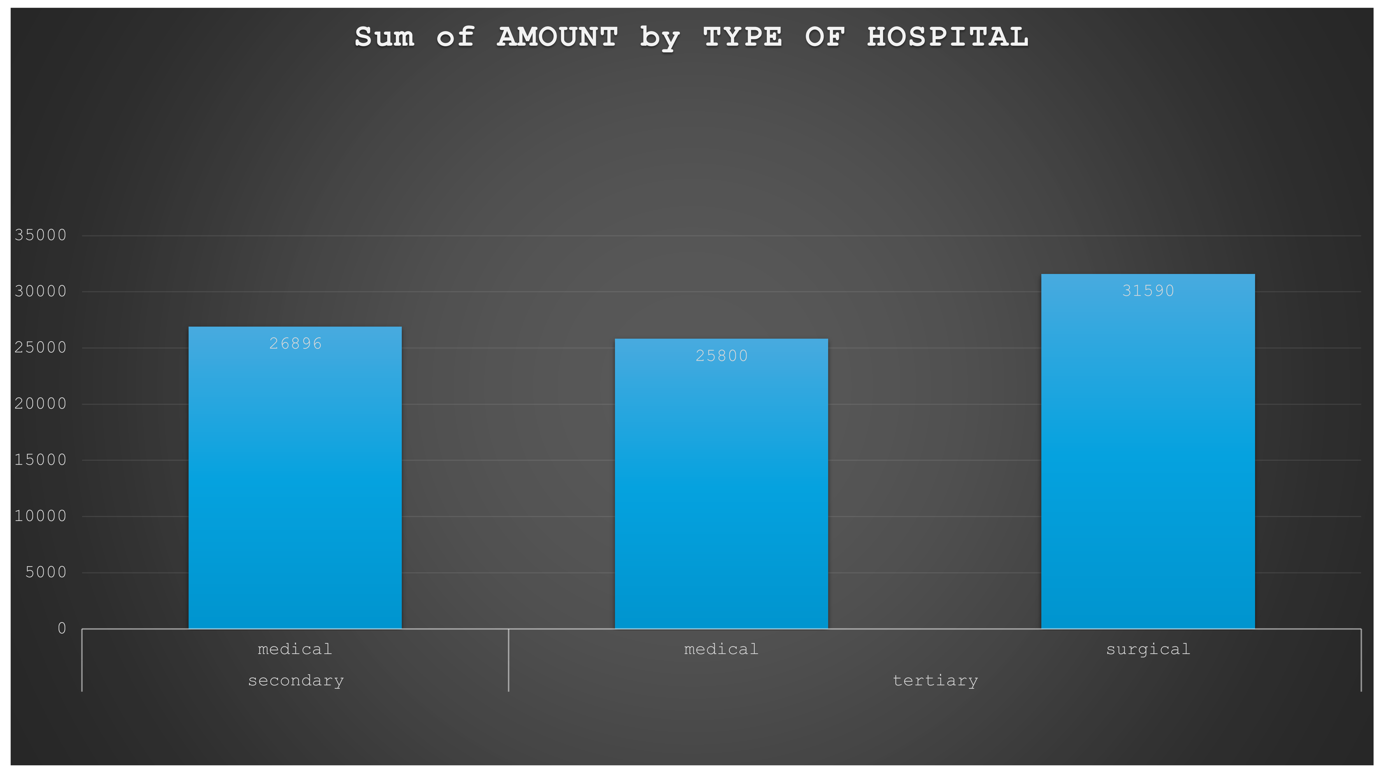
INFLATION FINDINGS ACCORDING TO ICD:



From the sample, following diseases appear prominently:

- **Cholelithiasis (10.29%)**
- **Urolithiasis (37%)**
- **Chronic Ischemic Heart Disease**
- **(57%)**

RECOVERY AUDIT FINDINGS:



FINDINGS:

- Hospitals often billed above approved tariffs, especially in 2024.
- Packages were modified with added items and unbundled charges.
- Implants, diagnostics, and professional fees were billed separately.
- Open billing and duplicate procedures led to inflated claims.
- Pharmacy and equipment costs rose without medical justification.

RECOMMENDATIONS:

- Implement a Digital Package Lock to prevent extra billing after approval.
- Create a real-time Tariff Breach Dashboard.
- Set Pre-Authorization Cost Flags for high-risk claims.
- Develop Hospital Billing Scorecards.
- Start pilot contracts for Outcome-Based Pricing.
- Maintain a High-Risk Procedure Watchlist (e.g., cardiac, urology).

CHALLENGES:

- Adapting to real-world claim complexities
- Limited access to complete clinical documents
- Time constraints during high-volume analysis
- Coordinating across departments
- Communicating audit findings tactfully

Presented By: Dr. Nandini Chaturvedi
Under the Guidance of: Dr. Anupam Mehrotra