From Cost to Care: Impact of Lower Deposits on Patient Admissions

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ABOUT THE ORGANIZATION

Kokilaben Dhirubhai Ambani Hospital(KDAH) and Medical Research Institute is a multi-speciality 750-bed quaternary-care hospital in Mumbai, became operational in 2009. It is one of the leading hospitals in Mumbai, with full-time doctors for full-time care, providing all super specialties. As the flagship social initiative of the Reliance Group headed by Tina Ambani, the hospital emphasizes excellence in clinical services, diagnostic facilities and research. It has 4 quality accreditations- NABH, JCI, NABL and CAP

MISSION

" To be an institution that offers comprehensive quality healthcare services under one roof through transparent patient-centric care ensuring patient safety, privacy and dignity. An institution where Every Life Indeed Matters."

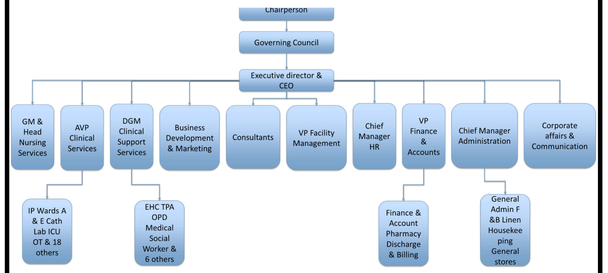
VISION

" We aim to be a global healthcare institution that combines the best in medical treatment with strong ethical principles and a culture of care and compassion."
- Late Shri. Dhirubhai Ambani

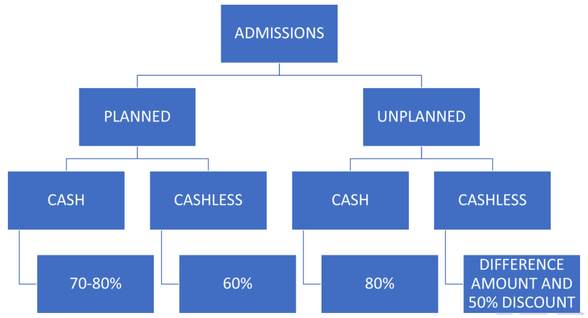
MAJOR LEARNINGS

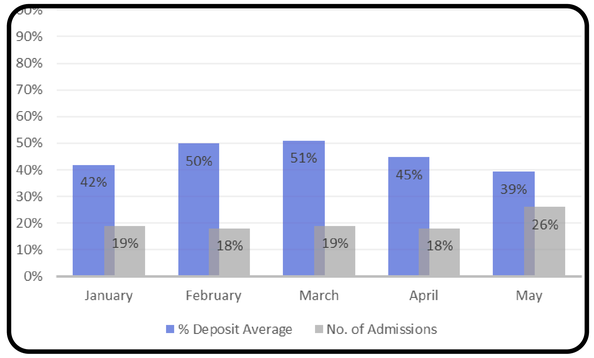
- Learned how reduced deposits influence patient admissions and care access.
- Realized that SOPs and interdepartmental coordination streamline hospital operations.
- Understood how insurance approval patterns affect hospital finances.
- Used data tracking and feedback to identify and fix workflow gaps.
- Discovered the power of clear, simple communication in improving patient experience.

ORGANOGRAM



ADMISSION DEPOSIT PROCESS





OBJECTIVE

To study the impact of reducing the initial deposit amount on hospital admission rates, patient accessibility, and its implications on operational efficiency.

METHODOLOGY

- Study Design: Retrospective observational study
- Sampling Technique: Purposive sampling of monthly admission and billing data.
- Duration of Study: January to May 2025
- Data Collection Method: Secondary data from hospital admissions and billing records
- Tools Used: MS Excel (data cleaning, percentage analysis, pivot tables, graphical representation)

SWOT ANALYSIS

STRENGTH • The policy supports the hospital's goal of being patient-friendly. • More patients are likely to get admitted due to lower deposit amounts. • Hospital is open to trying new ways to make care more affordable.	**WEAKNESS** • No proper system to recover pending dues after admission. • Big difference between estimated and final bills at discharge. • Discharge delays due to billing issues, lower bed availability, and patient satisfaction.
OPPORTUNITY • More people are looking for affordable hospitals. • Good policy can improve hospital's image and trust among patients. • Can work with insurance companies to make processes smoother.	**THREAT** • Hospital may lose money if patients don't pay the full amount later. • Insurance approvals may still take time, upsetting patients. • Competing hospitals may come up with even better pricing strategies

THEORETICAL LEARNING

- Health Economics – impact of financial barriers on access to care
- Concepts from Essentials of Hospital Services on admission process and patient flow
- Learnings from Strategic and Financial Management in healthcare policy
- Principles of Organizational Behaviour – interdepartmental communication and coordination

PRACTICAL OBSERVATION

- Understood how reducing deposits influenced patient intake and willingness to seek treatment
- Observed real-time delays in admissions due to high deposit requirements
- Recognized the administrative need for balancing affordability with financial sustainability
- Faced challenges in aligning admission, billing, and front-desk teams; identified lack of synchronized processes

CHALLENGES FACED DURING INTERNSHIP

- Managing multiple projects simultaneously made prioritization and time management difficult.
- Faced difficulty gathering data from departments, and even when obtained, it lacked consistency and required extensive cleaning.
- Maintaining work-life balance during the internship was challenging due to extended hours and multitasking demands

FINDINGS

- Admissions increased after reducing deposits, especially for cost-sensitive patients.
- No clear recovery system for pending dues post-admission.
- Frequent mismatches between estimated and final bills at discharge.
- Billing delays caused discharge hold-ups and reduced bed turnover.
- No tracking system to measure the policy's impact over time.

SUGGESTIONS

- Set up an Estimate Clarification Counter to give patients clear cost estimates and reduce last-minute billing surprises.
- Implement a dues recovery system to follow up on pending payments post-discharge.
- Standardize estimated billing formats to ensure transparency and consistency across departments.
- Conduct monthly financial audits to monitor billing accuracy and evaluate the impact of reduced deposit policies.

OTHER ACTIVITIES DONE DURING INTERNSHIP

- Analyzed insurance approval trends.
- Voice of Patient Survey and workflow analysis (TAT) in Chemo Daycare.
- Created video content for EHC patients.
- Study of deductions in robotic and non-robotic surgeries.
- Designed a TPA information booklet for patients.