

SUMMER INTERNSHIP PROGRAM

at

Care Health Insurance, Gurugram

From 12/05/2025 to 11/07/2025

A REPORT BY

Bhavya Chawla

Master of Business Administration

MBA Hospital & Health Management

Roll no. – 1928

2024-26

under the Mentorship of

Dr. Arindam Das

Professor



July 11,2025

Ms. Bhavya Chawla

Dear Bhavya,

This is to certify that you have successfully completed your Training for Claims Medical Department of Care Health Insurance Limited.

Period of Training: May 12,2025 to July 11,2025

We wish you all the best for your future endeavours.

For Care Health Insurance Limited



(Authorized Signatory)

Rashi Ramani (Head – Human Resources)

Care Health Insurance Limited

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IRDAI Regn. No. 148 | CIN: U66000DL2007PLC161503

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 WhatsApp - **8860402452**

 Care Health - Customer App:
<https://careinsurance.app.link/3QB1xwRrNPb>

 **SELF HELP**
www.careinsurance.com/self-help-portal.html

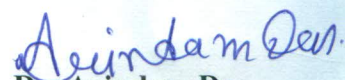
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IIHMR University Faculty Mentor Approval

This is to certify that **Dr. Bhavya Chawla** of academic year 2024-26 of **Institute of Health Management Research** has prepared a poster with respect to her summer internship held during May 2025 - July 2025.

She has carried out work as per the guidelines. Her poster is approved for presentation.

Date: 25/07/2025


Dr. Arindam Das

Professor

Name -: Dr. Bhavya Chawla

Roll Number -: 1928 (MBA HM-42)

University Mentor -: Dr. Arindam Das

Organization Mentor -: Rishav Kumar Singh

About Care Health Insurance

Formerly known as Religare Health Insurance, Care Health Insurance is a prominent speciality health insurer in India that provides a wide range of products, such as retail health insurance, top-up plans, maternity, critical illness, personal accident and travel insurance. In addition, it offers complete wellness services and group and microinsurance options.

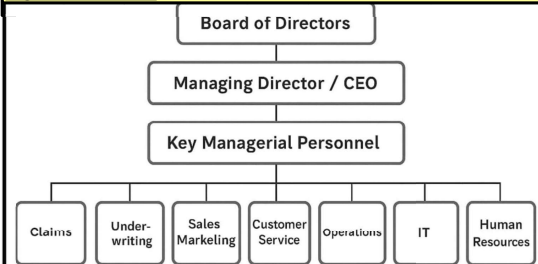
Vision

Becoming the most favored supplier of health services, which is compassionate, economical, creative, and accessible.

Mission

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

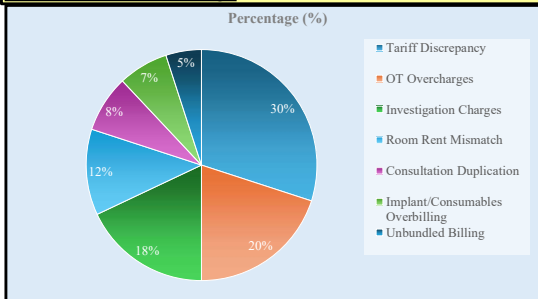
Organization Structure



Objectives

- Find overpayments brought on by discrepancies in tariffs and invoices.
- Sort the underlying reasons, such as overcharging for consultations, diagnostics, and overtime.
- Quantify excess payments and assess recovery potential.

Classification of Financial Leakages



Root Causes of Financial Analysis

The recurring financial deviations identified during the claim audit were not isolated billing errors, but symptoms of systemic process gaps and operational inefficiencies. The root causes are outlined below, backed by observed patterns in the data.

1. Lack of real-time tariff validation
2. Non-adherence to agreed hospital packages
3. Limited use of ICD-to-Package mapping
4. Consultation and investigation duplication
5. Blind spots in existing claim review workflows
6. Absence of data driven monitoring

Trends in Financial Leakages

Tier	Total cases reviewed	Number of cases with recovery	Total claim amount	Recovery amount	Percentage of Recovery Amount
1	311	50	25885720	293957	1.1
2	210	25	15040687	193223	1.2
3	42	4	2273192	33790	1.4

Challenges Faced

- Complicated medical terminology
- Learning curve for software
- Variability in regional processes

Key Learnings

- Tariff Benchmarking and ICD Coding
- Decision-Making from Data
- Cross-Team Communication

Key Learnings

01

Financial Deviations Quantifier

Identified ₹ 4 lakh+ in recoverable excess payments across 500+ cashless IPD claims

02

Structured Categorisation of Leakages

Classified deviations into 7 key types

03

Root Cause Mapping Developed

Identified systemic issues

04

High Value Cases Prioritised

Identified claims with recoverable amount more than 15000

05

Cross Functional Application of Finding

Insights relevant for audits, operations

06

Strengthened Internal Cost Control Practices

Project contributions can be used for long term improvements in financial governance

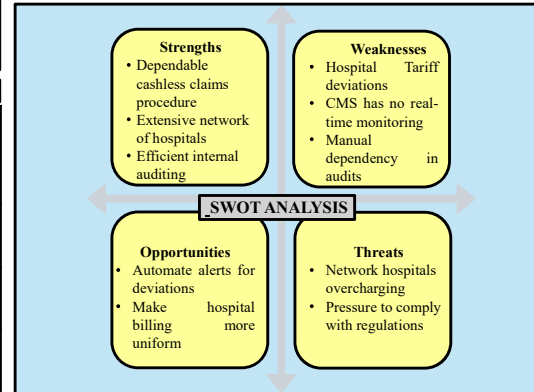
Theoretical Learning

- Structured curriculum
- Sample data
- Ideal procedures
- Hypothetical cases
- Classroom presentations
- Concept understanding



Practical Exposure

- Dynamic workflow
- Real claims data
- Case-wise variations
- Real-time decisions
- Team interaction
- Outcome delivery



Recommendations

Based on the findings from the audit, the following recommendations are proposed to improve internal controls and reduce financial leakage in claims.

- Automate Tariff Validation
- Establish ICD-to-Package Mapping SOPs
- Audit High-Risk Claims Monthly
- Escalate Repeated Overcharging



Weekly Report 1

Name of the Organization: Care Health Insurance

Area/ Department/ Project of Summer Internship Program: Claims Department –

Claims Cost Inflation Analysis

Name of the Student: Dr. Bhavya Chawla **Roll No. -:** 1928

Stream: MBA Hospital & Health
Management

From: 12-05-25 to 17-05-2025

Week no: 1

Activity Done	Holiday for buddha Purnima HR induction session, asset collection Received project objectives Orientation on health insurance NABH & IRDAI
Linking theory (Classroom learning) with practice at your organization	Applied concepts of health policies to understand claims processing Strategic management tools for PESTEL analysis to get industry overview Research methodology for project design
Gaps identified on the working area.	Limited access to real time data Initial ambiguity in scope of project Lack of detailed documentation on factors contributing to inflation
Suggestions for improvement	Clearer brief and documentation at the beginning of the project Regular interaction with different department heads to enhance understanding Provision of case studies and examples to illustrate concepts like fraud detection and claim patterns

Plan for the next week	Begin primary and secondary research on claims cost inflation in top 10 cities Conduct interviews with relevant stakeholders Compile state wise data on health infrastructure and healthcare insurance cost inflation
Signature of the Student	Finalize detailed project proposal and design framework

Weekly Report 2

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management **Roll no:** 1928

From: 19-05-25 to 24-05-2025

Week -: 2

Activity Done	Day 1: Received objectives for research. Studied PM-JAY guidelines and the Ayushman Bharat scheme. Day 2: Explored policy schemes offered by Care Insurance. Received city-wise data and got briefing. Day 3: Finalized individual research topics. Began preliminary research work. Day 4: Trained in using the claims department's main portal. Continued working on project. Day 5: Analyzed claims data, identified inflation factors, and submitted a progress report. Interacted with other team members for better understanding of internal processes.
Linking theory (Classroom learning) with practice at your organization	Classroom knowledge of health insurance schemes, healthcare financing, and data analytics was directly applied. Practical exposure to PM-JAY and real-world claim data enhanced understanding of policy implementation and operational challenges.
Gaps identified on the working area.	Limited access to some data sources. Initial learning curve for claims portal. Complexity in interpreting real-time claims and policy clauses.
Suggestions for improvement	Orientation session for claim processes and portal navigation. Access to sample claims data for learning. Structured explanation of policy terms and clauses by a mentor.

Plan for the next-week

Deepen analysis on inflation trends in claims. Refine research methodology. Connect with different departments for broader understanding. Prepare a mid-way status update report.

Weekly Report 3

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management **Roll no:** 1928

From: 26-05-25 to 31-05-2025

Week -: 3

Activity Done	Day 1: Continued working on individual research projects. Actively identified loopholes and documented them. Day 2: Shared daily updates with mentors in the organization. Engaged in discussions with senior staff to understand core insurance processes. Day 3: Progressed research further and learnt to use the company's insurance portal more efficiently. Day 4: Introduced to a new project involving the company's recovery process. Day 5: Started assisting a team of experts on a daily target basis to help recover amounts from claims passed in the last six months. Gained practical exposure to claim recovery operations.
Linking theory (Classroom learning) with practice at your organization	Theoretical understanding of insurance operations, claims management, and fraud detection linked with real-world recovery processes. The work aligned with principles learned in subjects such as Health Financing, Insurance Operations, and Data Management.
Gaps identified on the working area.	Lack of exposure to recovery process before this week. Need for more clarity on how recovery calculations are made. Initial unfamiliarity with tracking and follow-ups on old claims.
Suggestions for improvement	Detailed orientation or flowchart for recovery process. A brief training session on past claim handling and recovery protocol. Assignment of mini case studies for clarity.

Plan for the next-week	Deepen involvement in recovery project. Work towards daily recovery targets. Collect learning insights from team interactions. Begin drafting findings from initial research project alongside recovery work.
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Weekly Report 4

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management **Roll no:** 1928

From: 02-06-25 to 07-06-2025

Week -: 4

Activity Done	Day 1–5: Continued with audit and recovery work, identifying gaps and recovery amounts in past claims. Daily exposure to medical terminology, injuries, and disease patterns. Revisited 1st year human anatomy concepts for better understanding of medical reports. Interacted with team members to learn about the structural differences in claims processing across various regions. Observed regional variations and inflation trends.
Linking theory (Classroom learning) with practice at your organization	Knowledge from human anatomy and health systems helped in better comprehension of disease reports and injury assessments. Insurance claim processing concepts learned in classroom are being applied in real-time audit work. Exposure to regional variance also linked with health policy understanding from class.
Gaps identified on the working area.	Difficulty in decoding certain complex medical terms in disease reports. Lack of uniformity in regional claim processes. Variation in documentation patterns across zones leads to assessment challenges.
Suggestions for improvement	A glossary of commonly used medical terms and injury types in claims. A comparative guide explaining regional claim policies and standard inflation drivers. Conduct a short session with medical or claims expert.

Plan for the next-week	Continue active involvement in audit and recovery. Start analyzing trends behind regional inflation differences. Improve accuracy in interpreting disease claims. Explore additional training materials to strengthen medical and regional understanding.
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Weekly Report 5

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management **Roll no:** 1928

From: 09-06-25 to 14-06-2025

Week -: 5

Activity Done	Day 1–5: Continued with daily claim audits and recovery tracking. Gained proficiency in identifying and recording recovery assets. Exposed to a wide range of new medical and surgical procedures through audit work. I started self-learning and reading in-depth about medical terminologies and conditions. Interacted with Symbiosis interns after their final presentation to gather insights on structuring and delivering effective project presentations. Studied their approach to better prepare for our own report and presentation.
Linking theory (Classroom learning) with practice at your organization	Concepts of healthcare audits, insurance recovery, and medical coding from class applied during daily tasks. Continued application of first-year anatomy knowledge. Practical exposure to various treatments helps in understanding real-world application of theoretical medical and insurance concepts. Peer interaction supports learning from others' project methodologies
Gaps identified on the working area.	Lack of structured resources for some advanced surgical procedures. Inconsistencies in recovery documentation formats. Need for more clarity on how audit teams determine final recovery eligibility.
Suggestions for improvement	Internal knowledge-sharing sessions by experienced claims officers. Access to case studies on complex recovery scenarios. Standard operating procedure (SOP) documentation for audit methods.
Plan for the next-week	Start outlining the structure of final presentation and project report. Continue working on recovery cases. Begin compiling learnings and case observations. Deepen medical terminology understanding, especially around high inflation claims categories Finalize detailed project proposal and design framework

Weekly Report 6

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management **Roll no:** 1928

From: 16-06-25 to 21-06-2025

Week -: 6

Activity Done	Day 1–5: Initiated fresh work on recovery claim procedures. Reviewed many past claim cases, gaining insights into diverse medical procedures and disease profiles. Studied various insurance policy programs and the corresponding claim structures. Participated in client communication for recovery coordination. Developed negotiation and communication skills while handling recovery cases. Understood billing patterns of hospitals and refined claim interpretation skills. Improved overall efficiency in identifying recoverable amounts and billing irregularities.
Linking theory (Classroom learning) with practice at your organization	Applied classroom knowledge on health systems, policy coverage, and communication skills in real-world recovery cases. Practical learning enhanced by studying different policy structures and treatment procedures. Developed interpersonal and negotiation skills, as taught in communication and healthcare management modules.
Gaps identified on the working area.	Complexity in understanding billing formats across hospitals. Lack of standardization in policy coverage communication. Occasional difficulty in interpreting procedural codes and matching them with eligible claims.
Suggestions for improvement	Standard billing format reference guide for better understanding. Training on interpreting claim codes and coverage mapping. Develop templates for client communication to streamline recovery discussions.
Plan for the next-week	Continue with recovery claims and start categorizing cases based on complexity. Begin compiling case summaries for final report. Explore patterns in denied claims and inflation-prone procedures.

Weekly Report 7

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management **Roll no:** 1928

From: 23-06-25 to 28-06-2025

Week -: 7

Activity Done	Day 1–5 Defined clearer and more structured objectives for recovery audit. Began finalizing individual topics for the final SIP presentation. Started summarizing work done over the past few weeks into key insights and actionable findings. Focused on analyzing remarks and feedback received during the internship to guide the presentation structure. Reviewed past recovery cases and data to select meaningful highlights. Began drafting content for final report and PPT.
Linking theory (Classroom learning) with practice at your organization	Applied theoretical knowledge of project management, auditing frameworks, and health finance communication to structure the final work. Learned to convert field experience into presentable, data-supported insights. Leveraged knowledge from research methodology and healthcare operations to review and assess our internship outcomes.
Gaps identified on the working area.	Need for better tools to summarize large case volumes. Limited clarity in mapping feedback into presentation format. Some difficulty in condensing technical findings into concise, clear slides.
Suggestions for improvement	Provide a standard PPT template for project presentation. Mentor-led session on converting technical work into strategic insights. Guidelines for prioritizing content and storytelling in health-sector presentations.
Plan for the next-week	Finalize presentation and report draft. Conduct mock presentations for internal review. Add case-specific visuals or data charts. Review and polish key findings and recommendations for final submission.

Weekly Report 8

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management **Roll no:** 1928

From: 30-06-25 to 05-07-2025

Week -: 8

Activity Done	Finalized the SIP project, compiled data, and cross-checked all findings. Designed and completed the PowerPoint presentation. Drafted and reviewed the final report. Prepared structure and key discussion points for the upcoming presentation.
Linking theory (Classroom learning) with practice at your organization	Combined research, audit methodology, and policy application into a practical, result-oriented project report and presentation.
Gaps identified on the working area.	Time constraints during final report compilation. Minor challenges in condensing large data into concise insights.
Suggestions for improvement	Early structuring of final report format during the mid-internship phase. Checklist or template for PPT standardization.
Plan for the next-week	Deliver final presentation. Participate in concluding sessions and feedback discussions.

Weekly Report 9

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management

Roll no: 1928

From: 07-07-25 to 12-07-2025

Week -: 9

Activity Done	Presented the final SIP project to mentors and team. Discussed key learnings and insights gained throughout the internship. Received valuable feedback. Concluded internship activities with closing interactions and reflections on overall growth.
Linking theory (Classroom learning) with practice at your organization	Integrated academic learning, practical exposure, and communication skills during the final presentation and feedback session.
Gaps identified on the working area.	No major operational gaps; slight nervousness during presentation phase.
Suggestions for improvement	Encourage mock presentations and mid-internship demos to build confidence.
Plan for the next-week	Internship concluded. Submit final documents to university and reflect on takeaways.

Compiled Report

Name of the Organization: Care Health Insurance

Area/ Department/Project of Summer Internship Program: Claims Management Department (Claims Cost Inflation Analysis)

Name of the Student: Dr. Bhavya Chawla

Stream: MBA Hospital & Health Management **Roll no:** 1928

Activity Done	Throughout my internship at Care Health Insurance, I actively participated in a range of activities that advanced the ongoing research project on claims cost inflation as well as my comprehension of how health insurance works. An organisational orientation and HR induction, which included in-depth discussions of IRDAI regulations and NABH standards, kicked off the internship. After learning about the project's goals, I started relating the theoretical ideas I had learnt in class to real-world health insurance applications. I thoroughly examined public health initiatives such as PM-JAY and Ayushman Bharat and examined the policy frameworks of Care Health. I was trained on the company's internal claims portal and given access to city-by-city claims data. The first research was conducted, and the goals were documented. I started working with the audit and recovery team and was given an introduction to the recovery process as my internship went on. I obtained hands-on experience with daily recovery tracking and audit workflows and helped determine recovery amounts in claims that had already been settled. I became more adept at navigating internal systems, recognised regional variations in inflation, and recorded anomalies in claims. The internship provided ongoing exposure to a range of disease profiles, surgical and medical procedures, and variations in claim processing by region. I went over basic anatomy and medical terminology again to improve my comprehension of claim documentation. In addition, I researched insurance coding schemes, hospital billing structures, and claim denial trends. My analytical and communication abilities were also improved by taking part in recovery operations, particularly when coordinating with the team members. I concentrated on compiling my learnings, organising the SIP report, and creating the final presentation in the latter part of the internship. Interactions with other interns provided me with valuable insights, and I incorporated feedback I received during the internship into my reporting. I prepared important discussion points, polished the PowerPoint, and verified the data before submitting a thorough and goal-driven report to wrap up the internship.
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Linking theory (Classroom learning) with practice at your organization	During the Care Health Insurance internship. I constantly applied ideas I had learnt in class to actual procedures and difficulties in the claims management division. My comprehension of healthcare financing, insurance policy interpretation, and operational dynamics within the health insurance industry has been greatly improved by this hands-on experience. Early on, a basic understanding of how compliance and regulation affect insurance products and claims operations was given by academic knowledge about health policy frameworks, regulatory agencies such as IRDAI, and NABH accreditation standards. I was able to evaluate how the external environment affected operational strategies and claims cost inflation thanks to theoretical insights from strategic management, especially the PESTEL analysis. Knowledge from Health Insurance & Reimbursement Systems, Insurance Product Design, and Data Analytics was essential as I moved into research and recovery work because it helped me interpret claims data, spot inflation trends, and examine the causes of cost increases. I was able to put what I had learnt about healthcare databases and digital record management systems into practice right away after receiving training on the internal claims portal and auditing procedures. Auditing previously settled claims and taking part in recovery tracking were major components of my internship. Here, concepts from healthcare auditing, fraud detection, and health economics were made tangible. I used ideas from Research Methodology and Healthcare Presentation Skills to help me organise my final report, create an effective presentation, and synthesise research findings in the last stages. Testing and applying classroom learning in a professional context directly results in the ability to transform raw data into visual insights and actionable conclusions. Overall, the internship provided a strong and engaging framework for connecting theoretical knowledge with real-world applications, enhancing my competence, industry readiness, and self-assurance.
Gaps identified on the working area.	The Care Health Insurance internship was well-structured and enriching, but during the project, a number of operational and learning gaps were found that, if filled, could improve intern involvement and departmental efficiency even more. The scope and structure of the assigned project were unclear in the first phase, which made it difficult to define the goals and direction of the research. Furthermore, confidentiality protocols limited access to real-time claims data, which in turn limited the depth of analysis in the initial phases. I noticed a steep learning curve in using digital tools and comprehending internal workflows as I started interacting with the internal claims portal and auditing systems. Technically speaking, I occasionally had trouble understanding complicated medical terms, treatment plans, and surgical techniques without the use of clinical glossaries or standardised references. Additionally, there were discrepancies in the format and level of detail of recovery documentation between teams and time periods. I observed regional differences in claim processing procedures, which resulted in irregularities in recovery trends and billing structures.

Suggestions for improvement	My observations and experiences from my internship at Care Health Insurance led me to make a number of recommendations that could improve the Claims Management Department's operational efficiency and future interns' educational opportunities. Structured Project Briefing: To help interns better coordinate their efforts, it would be beneficial to start with a comprehensive and well-defined project brief that includes goals, anticipated deliverables, and deadlines. A kick off meeting with departmental mentors and HR could minimise early confusion and set the correct course. Portal Training & System Orientation: The learning curve would be greatly lowered with a brief, practical training session or tutorial on using the claims management portal. Video tutorials or flowcharts outlining the main portal features and data access protocols may fall under this category. Access to Sample or Anonymised Data: In order to get around confidentiality restrictions, interns could be given sample or anonymised datasets to use for training and preliminary analysis. Better engagement with the research objectives would be possible without sacrificing data privacy thanks to this. Frequent Mentor Feedback & Interaction: Setting up weekly feedback meetings with the departmental mentor would help interns stay on track with project objectives and give them a chance to ask questions, exchange ideas, and get helpful criticism all through the internship.
Key Learnings	My understanding of health insurance operations, claims management, and financial auditing has greatly improved as a result of the internship at Care Health Insurance, which offered a thorough platform for applying academic knowledge in a practical setting. Among the most important lessons learnt are: Comprehensive Knowledge of Claims Procedures: I acquired firsthand knowledge of the procedures used to process, audit, and approve health insurance claims. I was better able to comprehend the difficulties in confirming medical necessity, documentation, and policy compliance after being exposed to actual cases. I gained a practical understanding of the main causes of claims cost inflation through structured data analysis and claim audits. These factors include hospital billing practices, regional treatment disparities, medical advancements, and policy design elements. Communication and Interpersonal Development: My ability to communicate, negotiate, and form relationships was improved by working with cross-functional teams and interacting with clients during recovery calls. Success in corporate healthcare settings requires these soft skills. Adaptability and Self-Learning: Due to the ever-changing nature of the work, it was necessary to continuously learn new things on your own, whether it was decoding complicated cases, researching medical codes, or reading through new policy provisions. This fostered proactive problem-solving skills and flexibility in novel situations. Important Recovery Cases: 26 cases had recovery sums greater than ₹10,000, suggesting that efficient audits have a great chance of reducing cash leaks.

Trends by City: Kolkata (7 instances) and Pune (9 cases) were identified as major contributors to the high recovery, indicating potential problems with hospital tariff compliance in these locations.

Regarding Zero Recoveries: Nine of the 12 cases that had no recovery came from Navi Mumbai alone, indicating the need to reevaluate the efficacy of audits or billing procedures in that area.

Needed Targeted Audit Strategy:

The disparity between cities emphasises how crucial it is to have a location-specific audit and recovery strategy.

Process Improvement Scope: Variations in recovery results point to inconsistent recovery efforts, highlighting the necessity of standardising and fortifying internal procedures.

Signature of the Student – Dr. Bhavya Chawla

Approved by the IIHMR University's Mentor – D. Arindam Das