

**Summer Training at
Fortis Hospital, Noida
(April - June, 2013)**

DELAYS IN TPA APPROVALS

**By
Kaushalendra Pratap Singh**

**Under the guidance of
Dr. Anoop Khanna**

**Post Graduate Diploma in Hospital and Health Management
2012-2014**



**Institute of Health Management Research,
Jaipur
2013**

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CERTIFICATE

This is to certify that Dr.Kaushalendra Pratap Singh student of Post Graduate Diploma in Hospital and Health Management (PGDHM) from Institute of Health Management Research, Jaipur, Batch 17th has undergone summer training in Fortis Hospital Noida and has done study on:

-Delays in TPA approvals.

The candidate has successfully carried out the mentioned study assigned to him during his summer training from 1th April 2013 to 1th June 2013 and his approach to the analysis has been sincere, scientific and analytical.

I wish him success in all his future endeavors.



Dr. Anoop Khanna
Associate Professor
Faculty and Mentor
IIHMR, Jaipur



Dr. Ashok Kaushik
Dean, Academic and Student Affairs
IIHMR, Jaipur

Manpower Development Programme

This certificate is awarded to

Dr. Kaushalendra P. Singh

In recognition of having successfully completed his
Internship in the department of

Patient Care Services

From

April 1st, 2013 – May 30th, 2013

At Fortis Hospital, NOIDA

He comes across as a committed, sincere & diligent person who has a
strong drive & zeal for learning

We wish him all the best for future endeavors.


Smita Angrish
Training & Development


Alfons Madoc
Zonal Head
Human Resources



ACKNOWLEDGEMENT

The most awaited moment of successful completion of an endeavour is always a result of persons involved explicitly therein and it is impossible without the help and guidance of people around. I would like to thank Ms. Alfons Madoc (Head HR) and Ms. Smita Roy Angrish (HR Manager) for showing keen interest in our training, helping us and guide us despite their busy schedule.

I would like to express my immense gratitude to Ms. Neeru Raina, Head of the department Patient Care Services for providing their support and guidance.

I would like to express my deep sense of gratitude to Dr.S. D. Gupta, Director IIHMR JAIPUR and to Dr.Anoop Khanna, Associate Professor IIHMR JAIPUR for his invaluable inspiration.

Mr. Shahzad Hussain for his valuable inputs and guidance.

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Introduction of Hospital :

Fortis Healthcare was established in 1996 by its founder late Dr. Parvinder Singh.

His vision of medical care is :-

“ To create a world class integrated health care delivery system in India, entailing the finest medical skills combined with compassionate patient care.”

Fortis took its first step towards becoming a world class provider of integrated healthcare delivery in India by setting up its first hospital at Mohali, Punjab.

Fortis Hospital, Noida was inaugurated on 7 Nov 2004 ,which is a center of excellence in Orthopaedics & Neurosciences with additional focus in cardiac sciences, Minimally Access Surgery and Oncology. The hospital has a built over area of 5.53 acres and the allocation of space far above the current Indian norm 800-900 sq.ft/ bed. The total built up area is 2,20,000 sq ft.

It is a hub where some of the best medical professionals provide quality medical treatment catering to the special needs of patients and their families.

- It is 1st NABH Accredited Hospital in U.P.
- It is 1st NABH Accredited Blood Bank in U.P.

The Fortis Logo :

The Fortis Healthcare Limited Logo defines the commitment to patient care. The logo reflects their endeavor to achieve excellence in healthcare delivery system by bringing together the best of technology , medical expertise and patient care.

The two nurturing hands along with a red dot on the top depicts “Nurturing hands caring for human life.”

Green is a color of healing and depicts WELLBEING and RED is symbolic of steadfast focus , dynamic zeal and enthusiasm.

Mission :

The mission of hospital is :-

- To become an integrated healthcare delivering organization guided by quality, excellence, technology and compassionate patient care.
- To establish Fortis Hospital Noida as a major corporate hospital in healthcare delivery system in the region.

Vision :-

Globally respected healthcare organization recognized for clinical excellence and distinctive patient care.

Values :-

They serve as a guideline for the routine conduct of each employee. The core values of Fortis Healthcare are-

- Patient Centricity
- Integrity
- Teamwork
- Ownership
- Innovation

Infrastructure :

The Hospital offers world class infrastructure. It is designed as a green building to allow natural light into almost all part of building specially patient care areas. The architecture allows conservation of energy. The building is earthquake resistant.

CFL lights have been used thereby reducing power consumption. The space in the various departments is sufficient to move freely. CCTV cameras installed all over the building and help in security services. An efficient Hospital Information System is used to store all medical records.

The Hospital is equipped with :

- There are 191 beds are census beds
- 8 ICUs with 54 beds - Medical, Surgical, Neurosurgical, Liver Transplant and Kidney Transplant, Cardiac, CTVS, Neonatal ICU.
- 7 OTs
- 2 Cath Labs (Neuro Cath Lab and Cardiac Cath Lab)
- 4 Bed- Triage and 6 observation beds- ER.
- 11 Beded Dialysis center equipped with modern dialysis machines .
- Diagnostic facility comprising of 1.5 Tesla MRI scanner, 64 slice CT scan, 2 Ultrasound units, X-ray units, Mammography machine and Bone dexta scan machine.
- All laboratory services of world class standard, done by SRL Labs.
- Ambulances which transport patients to the hospital emergency.

Departments :-

The OPD (Out Patient Departments) are-

- Pulmonolgy
- Rheumatology
- Obstetrics & Gynecology
- Pediatrics
- Physiotherapy
- Orthopedics
- Psychiatry
- Ophthalmology
- Dental
- Dermatology
- Diabetes & Endocrinology
- Internal medicine
- Sports medicine
- ENT
- Emergency medicine
- Radiology
- Speech therapy
- Music therapy
- Gastroenterology
- Neurology
- Neonatology
- Infertility
- Dialysis

The surgical procedures carried out in the hospital are:-

- General surgery
- Cardiac surgery
- Laparoscopic GI
- Bariatric surgery
- Neurosurgery
- Thoracic surgery
- Vascular surgery
- Plastic and reconstructive surgery
- Liver transplant
- Bone- marrow transplant

Other services in the Hospital are –

- Blood bank
- Laboratory services
- CSSD
- Pharmacy
- Preventive health check-ups
- Patient care services
- Day care
- Clinical nutrition

International Oncology center, Noida –

International Oncology in strategic collaboration with Fortis Hospital, Noida brings to patients a state of the art cancer center equipped with cutting edge technology and offering comprehensive cancer care under one roof.

What is TPA ?

Third party administration (TPA) are basically a list of companies, where listed company provides monetary benefits or reimbursement to policy holders. It has been introduced by IRDA (Insurance Regulatory Development Authority). It is for the benefit of both , the insured and the insurer. While the insured benefited by quicker and better health service, insurers are benefited by reduction in their administrative cost, fraudulent claims and ultimately bringing down the claim ratios. An insurance company can have more than one Tpa and a Tpa can serve more than one insurance company.

Role in Practice Played by Tpa :-

As per notification of IRDA, the basic role of TPA is to function as an intermediary between the insurer and insured and facilitate cash less service to the insured. However as per practice the following is done by the TPAs or the following steps followed by TPAs from the initiation until settling the claims.

All the records of medical insurance policies of an insurer will be transferred to the TPA once the insurance company has given the business to a TPA.

The TPA will issue identity cards to all policy holders, which they have to show to the hospital authorities before availing any hospitalization services.

In case of a claim, policyholders have to inform the TPA on a 24-hour toll free line provided by the latter.

On informing the TPA, policyholder will be directed to a hospital where the TPA has a tied up arrangement. However the policy holder will have the option to join any other hospital of their choice, but in such case payment shall be on reimbursement basis.

TPA issues an authorization letter to the hospital for treatment, and will pay for the treatment.

TPA will track the case of the insured in the hospital and at the point of discharge, all the bills will be sent to TPA.

Tpa makes the payment to the hospital.

TPA sends all the documents necessary for consideration of claims, along with bills to the insurer.

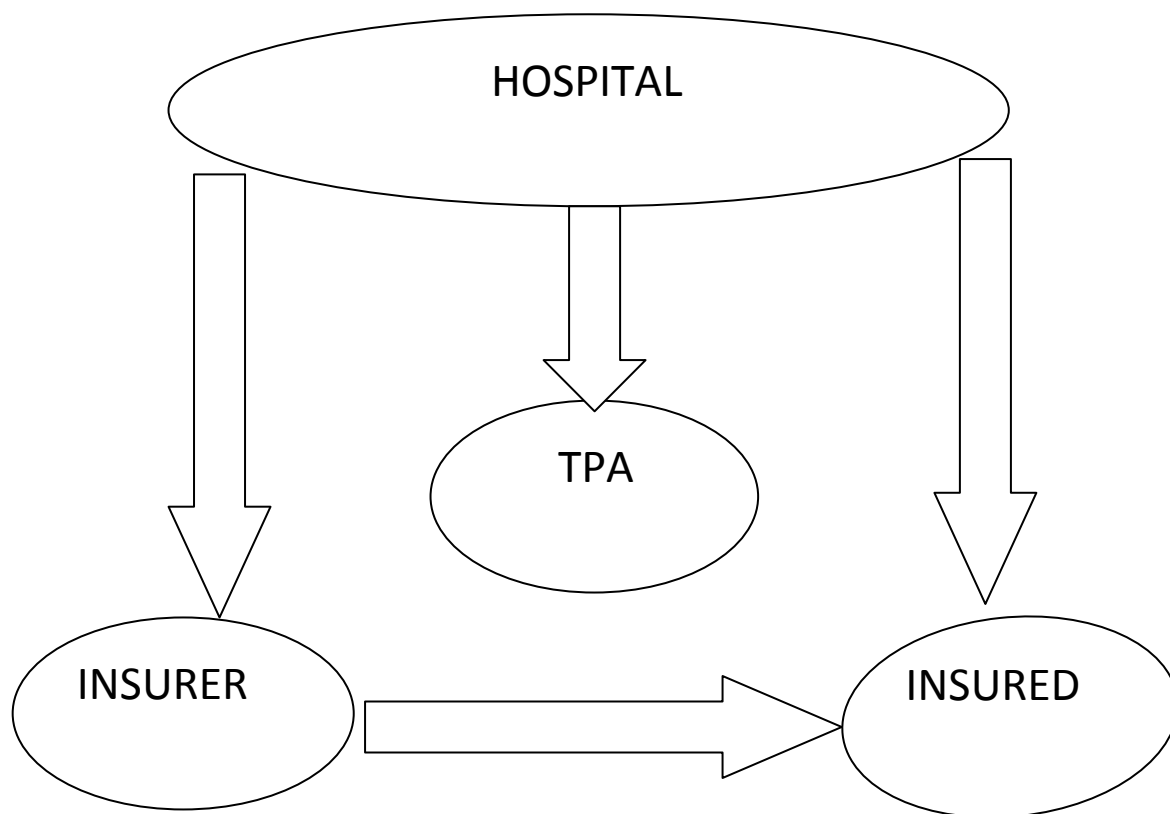
Insurer reimburses the TPA.

TPA panels in Fortis Noida :-

- Alankit
- Bajaj Allianz
- Chola mandalam
- DHS
- East West
- E-meditek
- Family health plan limited
- Future General
- Gennis
- Health India
- Heritage
- Icici Lombard
- I Health care
- I Care
- Iffco Tokio
- MD India
- Medicare
- Medi Assist
- Medsave

- Max Bupa
- Paramount
- Park Mediclaim
- Raksha
- Safeway
- Star Health
- TTK Healthcare
- United Health Care
- Vipul Medcorp

Relationship among the TPA, Insurer and Insured :-



The relation between the TPA, the insurer and insured can be studied from two perspectives. They are

- 1) TPA v/s Insurer
- 2) TPA v/s Insured

TPA v/s Insurer :-

Tpa act as complete back office set up for the insurer. All under written policies are collected by Tpa and enrolled Id cards and Guide book issued to insured.

Claims are settled by Tpa under cash less scheme and also for reimbursement and amounts are reimbursed to Tpa either on float or on single window platform.

Tpa acts as custodian of insurer fund and is responsible for timely settlement of claims ,service level delivery, cost containment and maintenance of float accounting.

Tpa provides data /MIS on enrolment, claims, call centers.

Tpa is responsible for grievance redressal.

Insurer audits the paid files and also validates service level deliveries.

Tpa provides the complete IT platform with online access given to insurer, analysis of data and claims, which acts as underwriting tools.

Tpa acts as Gate Keeper and is responsible for fraud management.

TPA v/s Insured :-

Insured obtain TPA cards, cash less service, claims settlement and support services, including 24/7 information helpline Queries on emails.

Timely grievance redressal.

All Tpa have a grievance redressal mechanism well monitored by insurer IRDA and also accountable to Consumer forums.

Corporate Help Desks, Awareness Campaign, Mobile help lines, online web access for E cards and information on enrolment, claims Network Hospitals and infrastructure.

Cashless hospitalization does it mean treatment free of cost :-

Cashless hospitalization is a facility provided by most health insurance policies and enables an insured customer to obtain admission and undergo the required treatment without a direct payment. The assigned Tpa will mediate between the healthcare service provider (hospital)and the insurance company and settle the bills on behalf of the insured customer.

However it is important to understand the role of a hospital in cashless hospitalization. The hospital is only a facilitator and has no authority to approve or disapprove any request for cashless

hospitalization. Certain protocols laid down by the Insurance Regularity and Development Authority (IRDA) with respect to cashless hospitalization will need to be adhered to strictly.

Availing the facility of cashless hospitalization :-

Hospitalization happens under two circumstances – planned and emergency. Pre authorization of the estimated hospital expenses is a must to avail this facility.

The pre – authorization procedure is detailed below:-

Step 1: Establish contact with the corporate help desk at the hospital.

Step 2 : At the corporate help desk, you need to present the original insurance card issued to you by your Tpa.

Step 3 : Collect the pre – authorization form of your Tpa .

Step 4 : Your pre –authorization form has two sections-

- I. General details on the health insurance policy, to be filled by you.
- II. Pertains to the treatment recommended to you needs to be filled in by the doctor who is treating you.

Step 5 : Return the completed form to the corporate help desk.

Step 6 : Once the form is complete in all respects the corporate help desk will fax the form to the office of your Tpa.

Step 7 : The corporate help desk will revert to you on the approval status.

Emergency Hospitalization : In case of emergency hospitalization , the corporate help desk will take up all formalities and is likely to receive approval within 24 hours of hospitalization.

Cashless Hospitalization cover :

For complete details on the medical expenses that are covered, and those that are not covered, you need to go through your health insurance policy. However in general the expenses listed below are not reimbursable under cashless hospitalization.

- Registration /Admission fee
- Telephone charges
- Visitors / Attenders charges
- Ambulance charges
- Diet charges
- Document charges
- Toiletries

- Non medical Expenses
- Service charges

These charges need to be settled by you directly to the hospital at the time of discharge.

Benefits of TPA to the insurance world include :-

- Faster and focused claims management
- Lower overhead cost
- Immediate access to highly trained claim administrators
- Improve control over claims outcomes
- Provision of cashless services at much ease
- Protection of brand reputation
- Control over possible frauds by the private healthcare providers.

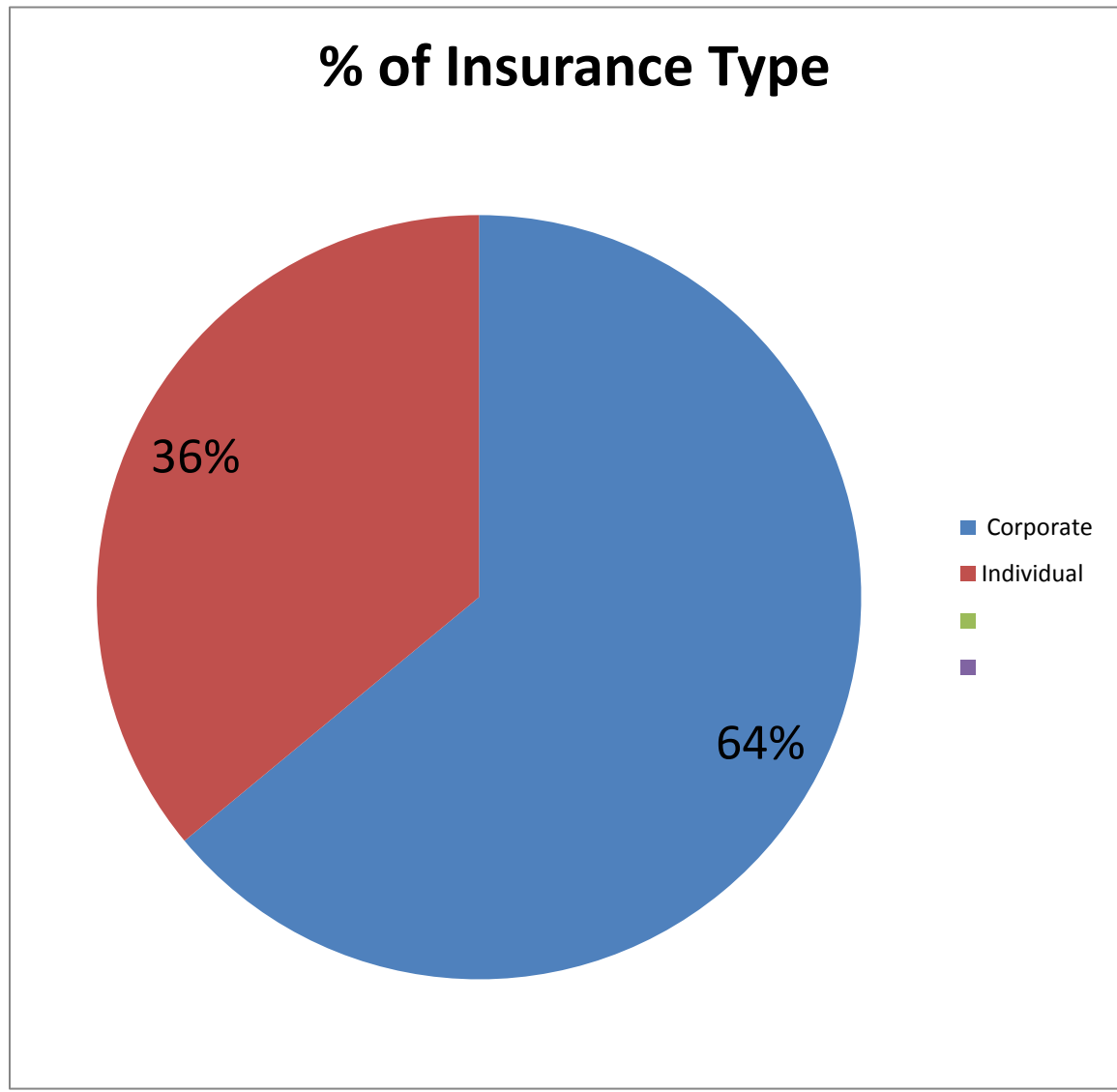
Research Methodology :

- Sample Size :150
- Sampling Method: simple random sampling method
- Study design: observational and information collected from staff
- Duration: 5st May – 20th May

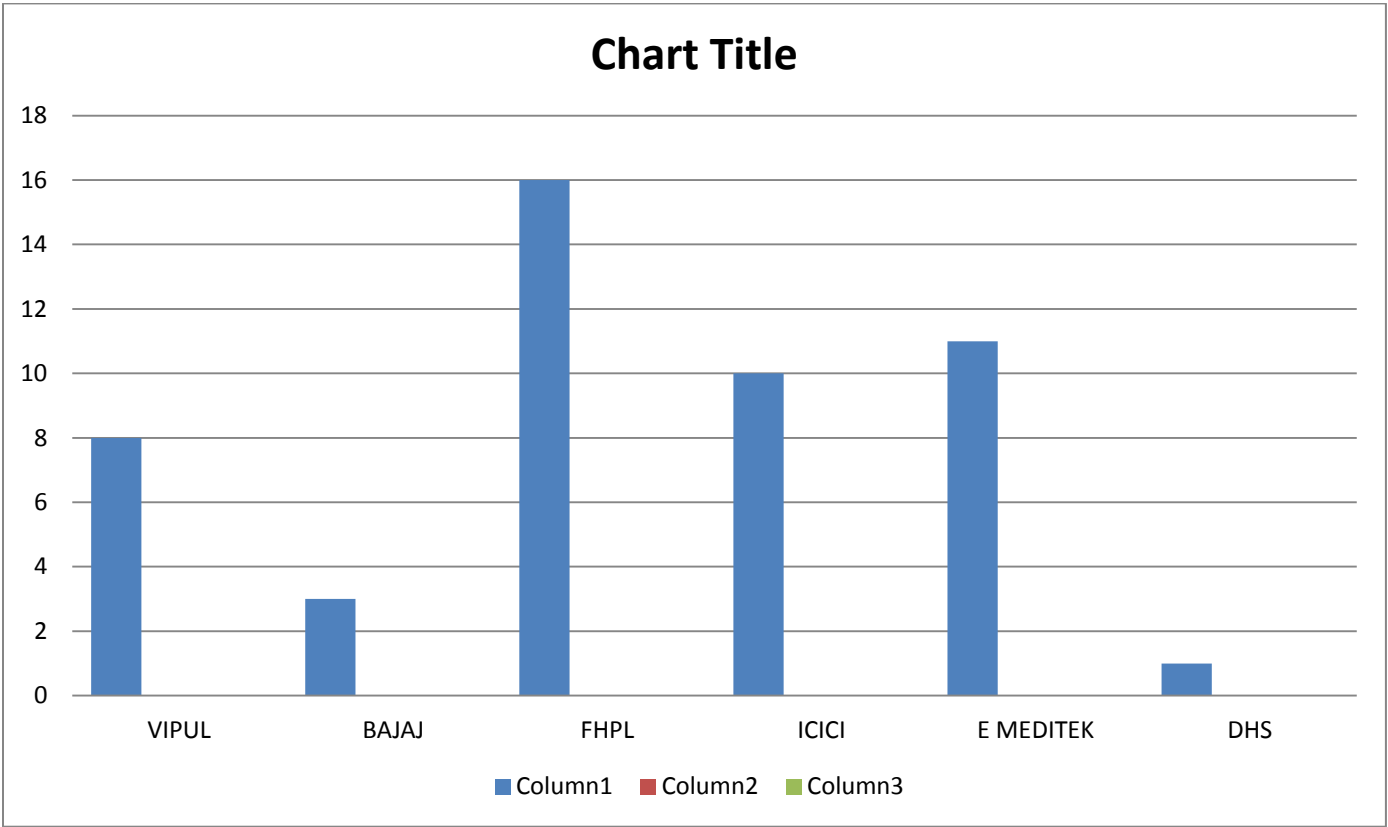
Observation :-

- Many patients come with their expired insurance policy and are unaware of that.
- Patients /relatives not having the ID proof / Insurance card/ proof at the time of admission.
- Patient not filling the pre auth form completely.
- Patient / relatives not understanding the complexity of the whole process of the cashless service.
- Doctors not filling the form completely.
- Signature of the patient /attendant missing.
- No status information given to the patient , due to this reason there is always rush of patients in the department.
- Mostly discharge summary or bill received delay.
- Delay in dispatching the bills.
- Delay in getting discharge summary.
- Final bill more than the approved amount.

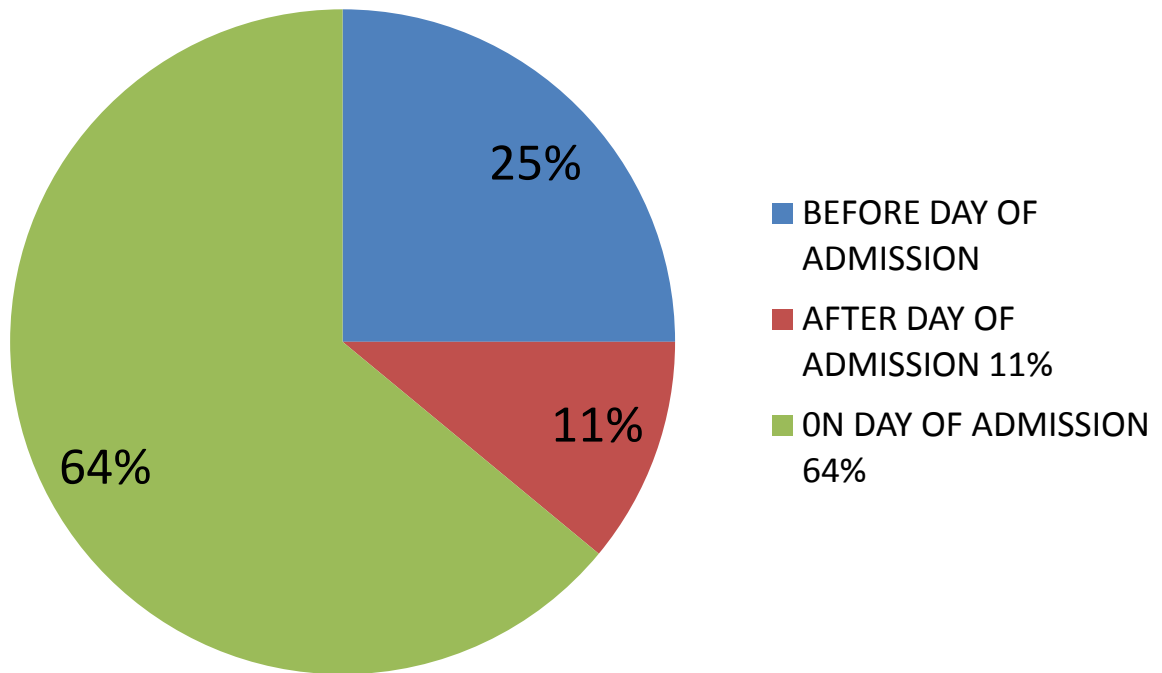
Data Analysis:



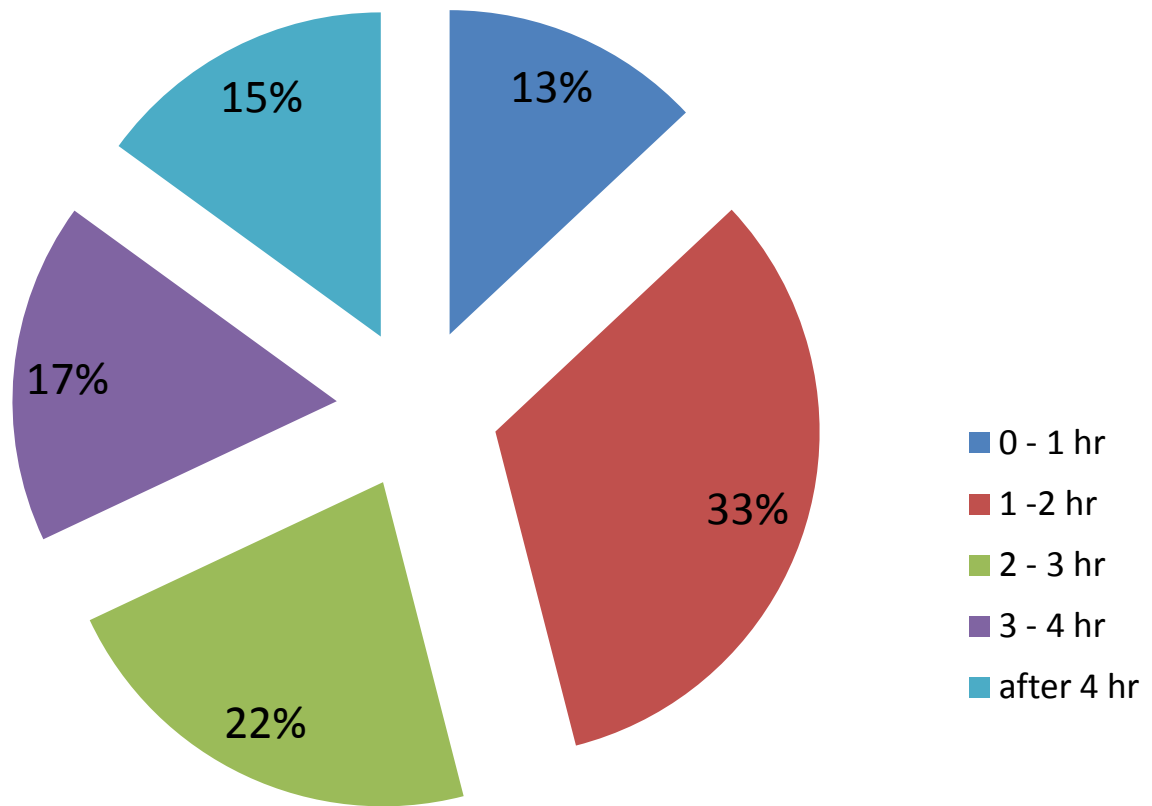
Total Number of Different cases :



Preauthorization approval Date



Time Difference in Fax Time and Approval Time



Recommendations :

- A timely message should be sent to attendant to assure them regarding the progress of TPA papers.
- Billing and discharge summary need to be on time to avoid delay in approval.
- A software should be developed for document submission which could be accessible to both the TPAs and the hospitals. Therefore all the paper work could be maintained on the web and reduce the instances of mishaps like losing the claim documents and so on.
- A checklist/ feedback form for tpa services can be provided at the time of discharge.

Conclusion :

By adhering to proper protocols or checklist while sending Pre authorization form to TPAs can actually reduce the incidence of queries from TPA and thus by this means can, avail the cashless benefit from the tpa as early as possible.

By reducing the approval time hospital revenue can be increased by increasing the flow of ipd patients.

CHECK LIST:-

- ❖ Name of the patient.....
- ❖ UHIID of the patient

To avoid the rejection / query to your claim do the following before submitting pre – authorization form.

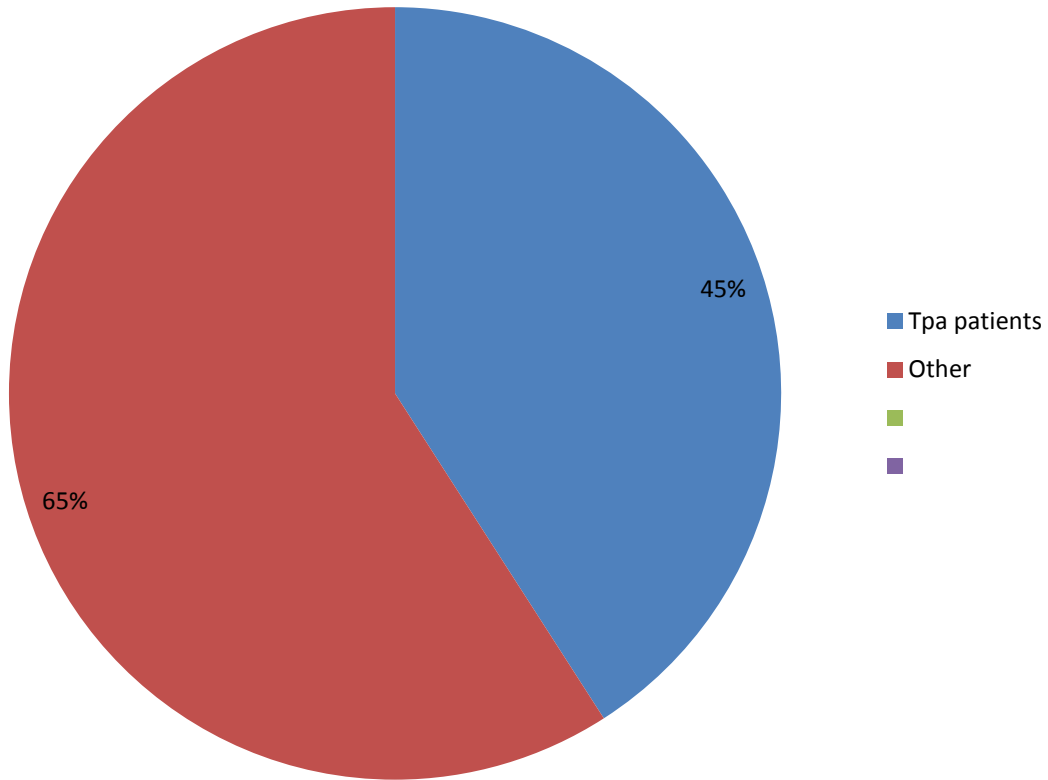
Following documents are attached :	YES	NO
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- I. Admission note :
- II. TPA card & policy documents :
- III. Investigation reports :
- IV. Id proof and address proof :
- V. Doctor's Prescription

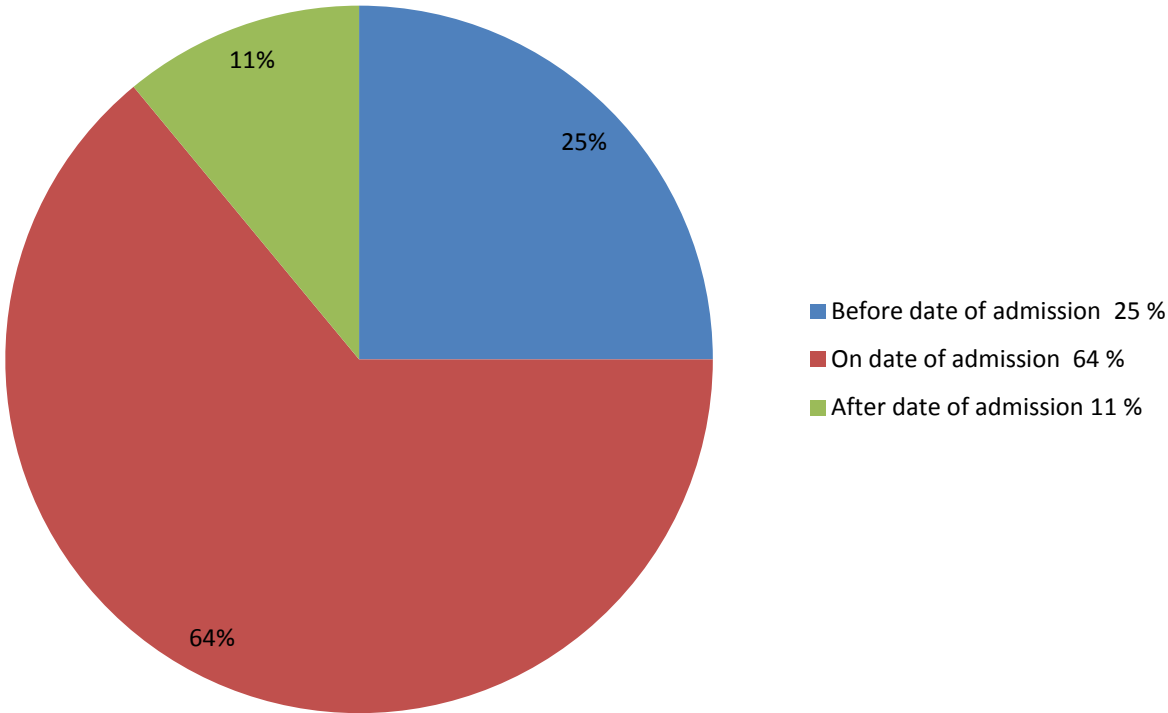
❖ Staff while accepting the pre –authorization form should check :-

Name, Date, Signature and Contact No. of Patient.

% of Patients



Preauthorization Approval Date



Time Taken in Final Approvals

