STUDY ON INSURANCE PROCESS & TAT THROUGH CMS & OFFLINE PROCESSING RATE FOR CASHLESS INSURANCE PATIENTS AT NARAYANA HEALTH.

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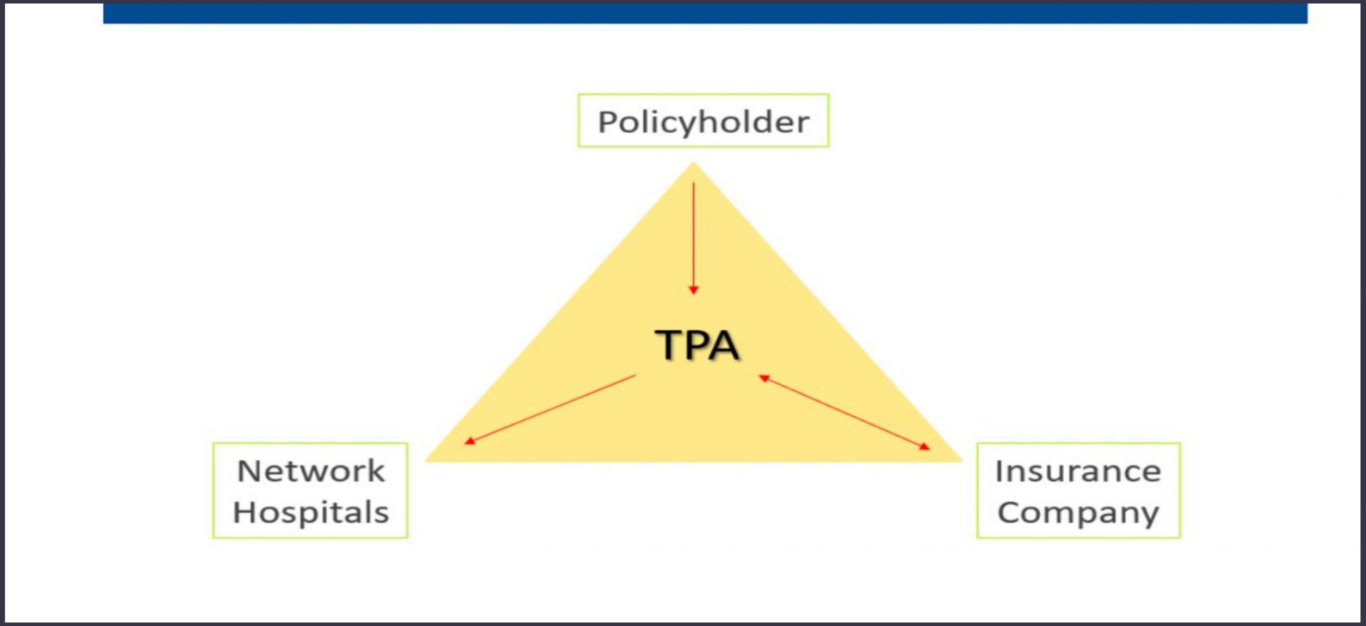
How does Cashless Health Insurance work?

- When a patient has cashless health insurance it means that he doesn’t has to pay cash at the network hospital of the insurer. Under cashless health insurance, the insurer is in direct negotiation with their network hospital to pay for the treatment availed.



RESEARCH QUESTION

What are the activities which directly or indirectly cause delay in the TPA claim process?

What is the turnaround time (TAT) of patient claims for pre-auth, Query, and Discharge submission.

OBJECTIVES

- To understand the Cashless Insurance process.
- To analyze the Pre-Auth submission, Query revert & Final Discharge submission (TAT)
- To find out the major causes for the increase in TAT throughout the insurance process.
- To suggest various ways to streamline the cashless insurance procedure.

METHODOLOGY

DESIGN: - A cross-sectional study has been done to understand TPA claim process and to find out the bottleneck related to the process.

SETTING: - TPA Insurance Department (Green Channel) at Narayana Multispecialty Hospital, Jaipur.

STUDY POPULATION - 150 Patients

Inclusion criteria: -

- Only those patients were included who opted for Insurance cashless facility.

Exclusion criteria: -

- The OPD patients
- The patients who came for only investigation
- Those who opted for cash admissions.
- Those who were admitted though RGHS & CGHS.

ETHICAL CONSIDERATIONS

Informed consent: Patients are fully told about the research's goals, the advantages and dangers of taking part, as well as their right to decline or withdraw at any time.

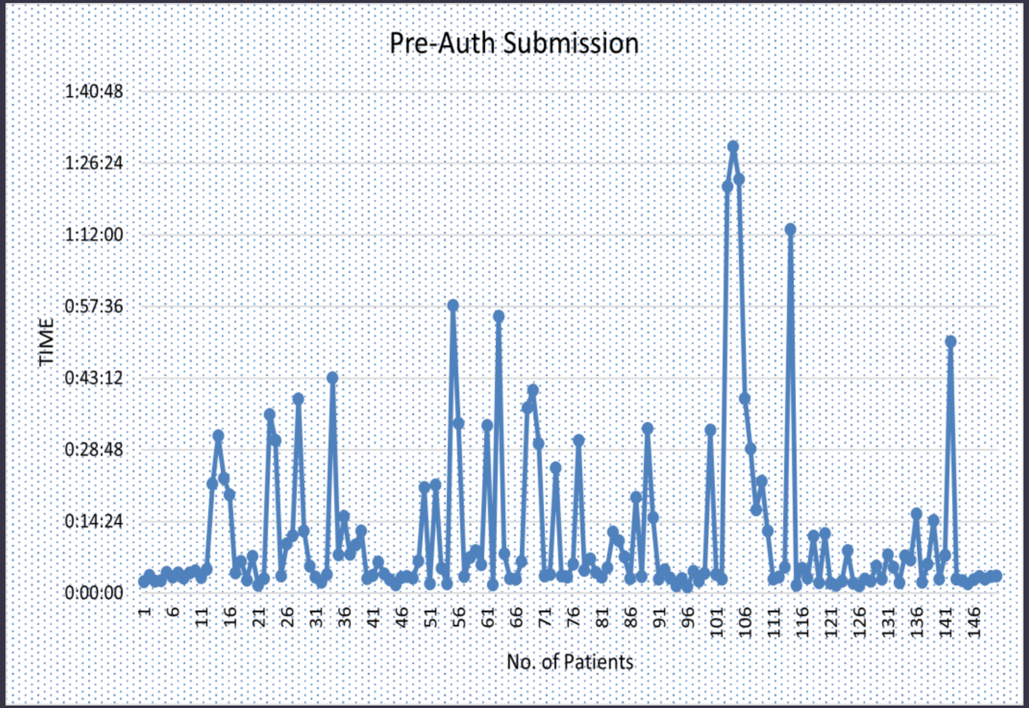
Confidentiality: Patient confidentiality must be always maintained. Researchers should ensure that patient data is stored securely and is only accessible to authorized personnel.

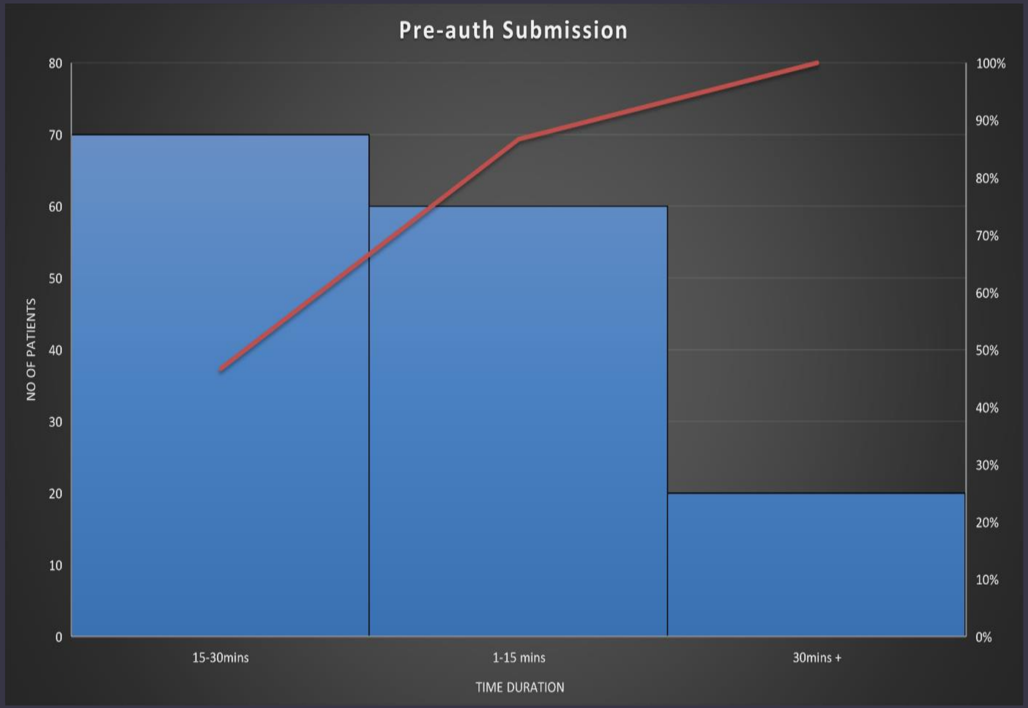
Privacy: Patients have a right to privacy, and researchers should take steps to minimize any intrusion into their personal space.

IMPLICATIONS OF RESEARCH

- Improved patient outcomes can be achieved by detecting and resolving delays in a hospital's TPA Insurance procedure.
- Efficiency can be improved by monitoring turnaround times and locating bottlenecks in a hospital's TPA insurance
- Increased staff happiness
- Patient satisfaction: By reducing turnaround time and delays.

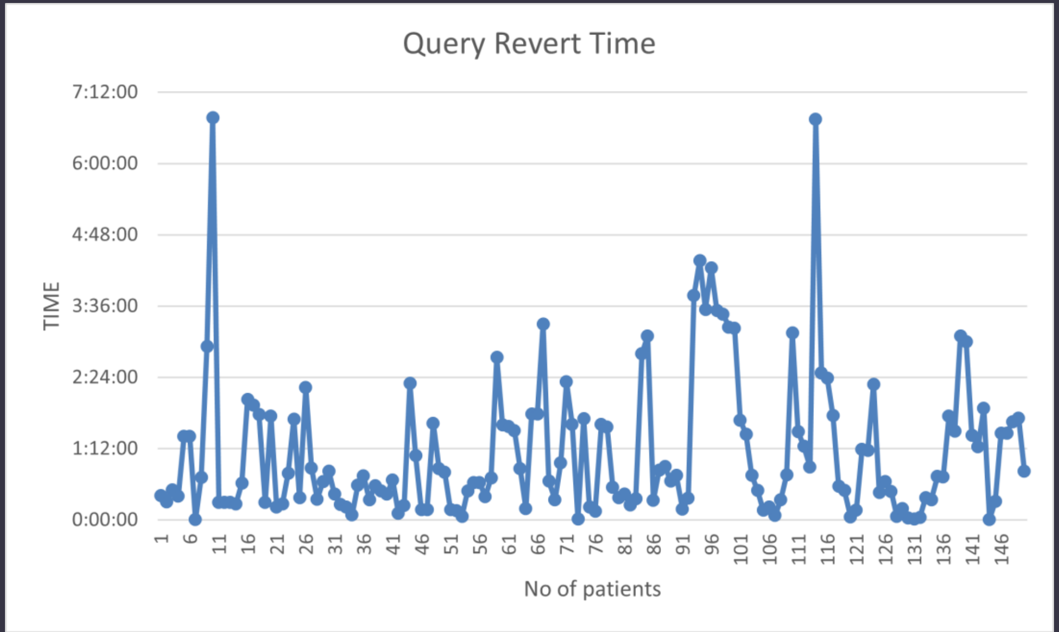
Pre-Auth TAT

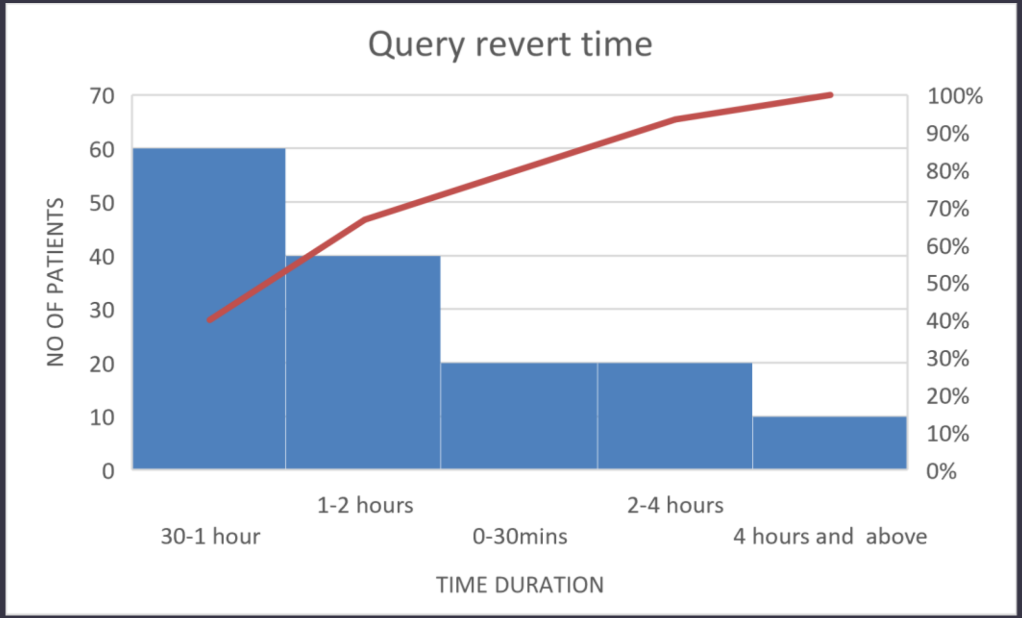




- **The average time taken TAT (Turn Around Time) is 00:16:55 Mins.**

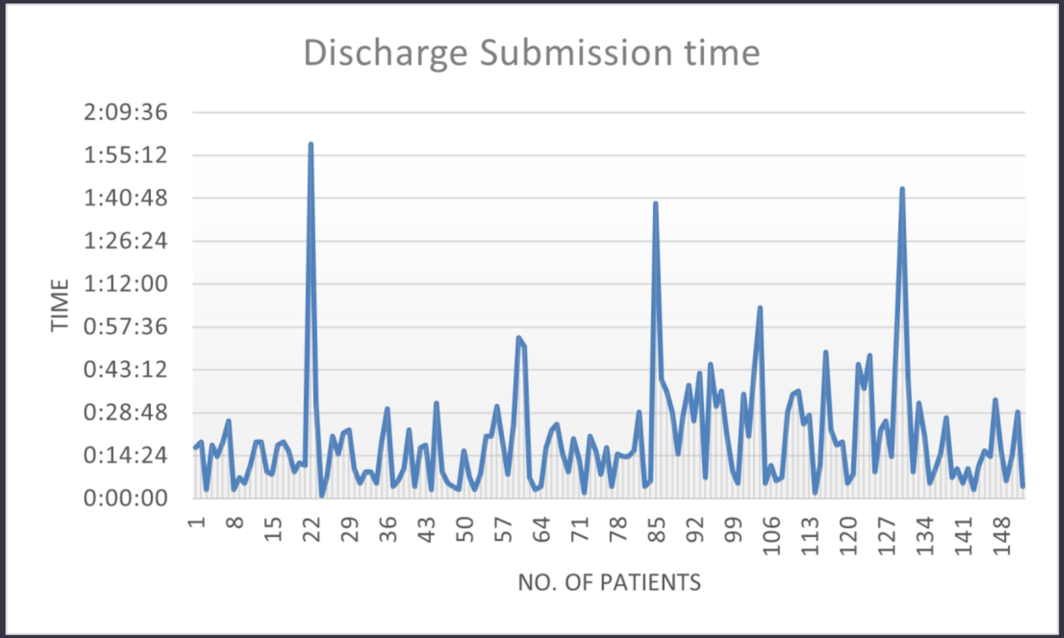
Query Revert TAT-

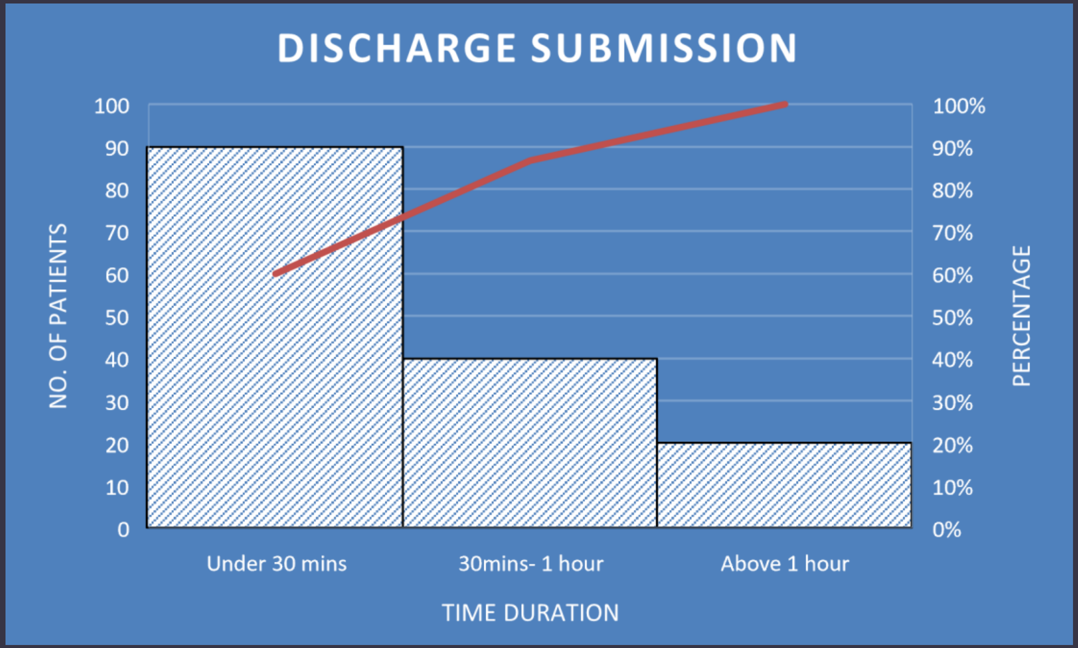




- The average time taken TAT (Turn Around Time) is 01:09:17Mins.

Discharge Submission TAT





The average time taken TAT (Turn Around Time) is 00:19:47 Mins.

Average Turnaround Time (TAT)

- Pre-auth Submission time- **00:16:55 Mins.**
- Query Revert time **- 01:09:17Mins.**
- Discharge Submission time**- 00:19:47 Mins.**

Conclusion-

The process of the TPA cashless claim process is a vital part of patient satisfaction and financial addressal thus it possess a utmost need in its reform and proper efficient working for better handling the patients care in term of financial assistance.

Recommendations-

- To make the pre-auth process more efficient there could be a process to inform the patients of the required documents beforehand so that they could be ready with the formalities from their end to reduce the processing time.

- Hospitals must pay attention to how long it takes the discharge report to go to the internal TPA department. They can actually choose technology options like "electronic discharge system," which can make the typing, reviewing, revising, and submitting processes easier to the internal TPA department.

- Hospitals should gather information about the inquiries sent by the external TPA and use Pareto analysis to identify the key categories that account for the greatest number of queries. By doing this, they can create a tool like a checklist that, when used in its proper form and spirit, will significantly reduce time and effort spent.

- Optimum use of human resource, for better efficiency and deliverance towards exceptional patient satisfaction and smooth processing of TPA Insurance cashless claims.

- Better training to employees to refine their communication skills as it is of utmost importance during their financial counselling to make the process more transparent and to reduce the hassle of miscommunication and interpretation.