IIHMR UNIVERSITY

Institute of Health Management Research

MBA Hospital and Health Management

Batch-20th (2015-2017) Health Management

Health Insurance and Managed Care

Term Examination

Time - 3 Hour **MM-70**

The question paper contains 1 printed page.

(Short Notes)

Q. 1. Attempt any five of the following: **(5x4=20 Marks)**

a) Pre-authorization
b) Copayment
c) Group health insurance plans
d) Jan Arogya Bima policy
e) Frauds related to TPA
f) Point of service (POS)

(Detailed Notes)

Q. 2. Write notes on any five of the following: **(6x5=30 Marks)**

a. What is the role of health insurance in achieving social security in the community? Explain with the concept of risk-pooling.
b. What are the roles and responsibilities of apex regulatory body of insurance in India?
c. What is provider network? What is the benefit a customer gets by using the provider network of the insurance company?
d. What is 'Community based health insurance (CBHI) model with respect to target population and managing body. Give example of any two.
e. State the features of any one health insurance scheme which is fully sponsored by the state government.
f. Write short notes on moral hazard and adverse selection. Give example of each.

Q. 3. Write detailed notes on any two of the following: **(10x2=20 Marks)**

A. Write about the reasons of low penetration of health insurance in India. Discuss the existing scenario of government spending on health expenditure as a % of GDP in India. Taking example of any other country, please discuss whether is it possible to reduce Out-of-pocket expenditure on healthcare.
B. Discuss in detail the objective of implementing Rashtriya Swasthya Bima Yojana (RSBY) by government of India. What are the various features and benefits under the scheme?
C. What are the various steps involved in claim settlement process by TPA? What are the scenarios where an insurance company can deny the claim?