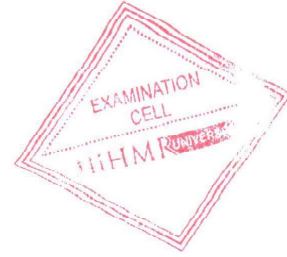


IIHMR UNIVERSITY
Institute of Health Management Research
MBA Hospital and Health Management
(2017-2019)
Health Management
Health Insurance and Managed Care



Term Examination

Time - 3 Hour

MM-70

Answer any seven questions

The question paper contains 3 printed page.

Q. 1. Explain the principles of Insurance with appropriate example

(10 marks)

Q.2. Miss. Supritha approached an insurance company through an agent for purchasing a Mediclaim Policy. After completion of formalities, she was issued a Mediclaim policy. To her ill luck, one day while returning from office, she met with an accident. She was admitted into a hospital where she underwent a surgery. After 30 days, she was discharged from hospital. Her medical bills came to Rs. 80,000. She lodged the bills with the insurance company claiming the reimbursement. After a protracted correspondence, the insurance company denied her genuine claim on flimsy grounds.

She pleaded with the insurance company that she met with the accident more due to the fault of the truck driver. She also informed that the police have registered a case against the truck driver for driving the vehicle on the wrong side of the road, that too under the influence of alcohol. Even then, the insurance people refused to honor her claim. Based on above description answer the following questions-

2a. In this context, advice Supritha if she has any redressal mechanism that she can avail of for getting her claims settled. If any redressal mechanism is available then explain the process for grievance redressal.

2b. Discuss the different components of Insurance operations

(5+5 marks)

Q.3a. What are the different types of health insurance fraud?

3b. What are the steps a Health Insurance company should take to reduce increasing number of fraudulent claims?

(4+6 marks)

Q.4. The core of any TPA organization is the claims section that performs the end to end function. Under claims how does the cashless facility work? Explain the process and role of TPA in providing cashless service.

(10 marks)

Q.5. Mr. Ranjit, an employee of NALCO, wanted to purchase a health insurance policy. He walked down to an insurance company to make enquiries. Mr. Ranjit enquired into the visitor needs and was handed over an application form to fill up with relevant information entertaining his request. Next day morning, Mr. Ranjit returned the duly filled application form at the counter. From the underwriting department Mr. Shiva went through the application and found following Information

Height	6 feet 2 inches
Weight	122.5 kg
Family Medical History	Good
Personal medical History	Slight blood pressure (80/130)
Substance or alcohol abuse	No abuse in the past one decade
Tobacco use	No tobacco use in the last 1 year

Category	Ratings
Preferred Plus	65 – 70
Preferred	75 – 80
Standard	100 – 115
Sub - Standard	130 – 150

Insured Height	Maximum Weight (in kilograms)		
Height	Preferred Plus	Preferred	Standard
6'1"	94.95	102.15	118.35
6'2"	97.20	105.30	121.95
6'3"	99.90	108.00	125.55

Overweight	25 % debit
Underweight	15% debit
Good Family History	20% credit
Unsatisfactory family history	15% debit
No tobacco use in the last one year	10% credit
No use of alcohol in last ten years	15% credit
High blood pressure	50% debit
Low blood pressure	30% debit
Slight high blood pressure	25% debit
Slight low blood pressure	10% debit



- If you were Mr. Shiva, which risk classification system would you use to classify the risks and why?
- How do you classify the risk inherent to Ranjit's insurance application?

(5 + 5 = 10 marks)

Q.6. Mr. Janardhan who is disabled, receives a current income of Rs. 5500 per month against the prior income of Rs. 13,800 per month. He has a disability income policy which promises to pay a monthly indemnity of Rs. 8,000 and accordingly, he lodged a claim with the insurance company for payment of "disability benefit"

6a. If you were in the claims department how do you process Janardhan claims?

6b. If the current income of Mr. Janardhan includes Rs. 400 as monthly dividend from IDBI bonds and Rs. 500 as monthly house rent, what will be the residual disability benefit that Mr. Janardhan is entitled to receive?

(5+5=10marks)

Q.7. Discuss the major features of Ayushman Bharat-National Health Protection Scheme?

(10 marks)

Q.8. "A good health Insurance claims system must ensure customer delight". Explain the various mechanisms in managing health claims to achieve customer service excellence.

(10 marks)

Q.9. Write short note on

- i. Deductible
- ii. Principle of Contribution
- iii. Risk pooling
- iv. Adverse Risk Selection
- v. Catastrophic Health Expenditure

(2 + 2 + 2 + 2 + 2 = 10 marks)

Q.10a. Bharat, a disabled carpenter, receives a current income of Rs. 4200 per month. His prior income was Rs. 8,700 per month that included Rs. 600 as monthly house rent and Rs. 4,600 as annual interest from fixed bank deposits. If the month indemnity is Rs. 5,000.

- i. Calculate the residual disability benefit that Bharat is entitled to receive?
- ii. If the current income of Bharat is Rs. 4,200 and prior earned income Rs. 4,800, what will be the residual disability benefit that Pradhan can collect?

10b. A healthcare policy imposes Rs. 30 co-payments for routine visits to physician's offices. In addition to co-payment a Rs. 200 deductible and 20 percent coinsurance must be made. If the insured individual spends Rs. 50 on office visit and Rs. 325 laboratory fee what will be the actual reimbursement with and without co-payment

(5 + 5 = 10 marks)

