

**PGDM (IBM), 2019-21**

**Advanced Health Insurance**

**INS-403-A**

**Trimester-IV, End-Term Examination: September 2020**

Time allowed: 2 Hrs 30 Mins

Roll No:-----

Max Marks: 50

Instruction: Students are required to write Roll No on every page of the question paper,

Writing anything except the Roll No will be treated as Unfair Means. All other instructions on the reverse of the Admit Card should be followed meticulously.

**Please attempt all 3 questions**

**Section A-**

**30 Marks**

1.A – At the underwriting stage, it is reported that Mr. Mohit is 54 year old, healthy individual, with no adverse condition. At the time of claim, it was found that Mohit suffered from hypertension for the last one year . Interpret the above information, while accepting the proposal and also dealing with the claim. (CILO 2) **Marks-10**

Or

1B. Mr. Rafique is 44 year old, healthy individual, but at some time, suffers from severe backache . Mr. Rafique explained the same while taking the health insurance policy . The policy was issued ignoring the above fact. Explain the effect of above piece of information on claim while dealing with the above case.(CILO 2) **Marks-10**

2A –Differentiate between ICD 9 and ICD 10 . Clarify the extension in ICD 10 with example.

**CILO-1 Marks-10**

Or

2B Mention the ICD code used to specify a diagnosis of torus fracture of upper end of left ulna, initial encounter for closed fracture with explanation. CILO-1 **Marks-10**

3A . A patient while leaving the hospital found that the procedure performed on his surgery for his appendicitis did not find mention in the patient record. The patient was trying to ascertain the credential privileging. As a claim consultant, please guide the patient about the validity of the above instrument in deciding the care plan. CILO-3 **Marks-10**

Or

3B. Rohan, a hospital owner with 51 beds wants to enrol his hospital for providing the cashless benefit. As a consultant, suggest the procedure of accreditation that Rohan's hospital should follow in order to be considered for cashless facility. CILO-3 **Marks-10**

### Section-B

**Attempt both the cases**

#### CASE 1

Field Investigators registered 3,100 women in a study and followed them annually for four years to determine the incidence rate of Hepatitis A. After one year, none had a new diagnosis of Hepatitis A, but 100 had been lost to follow-up. After two years, five had a new diagnosis Hepatitis A, and another ninety five had been lost to follow-up. After three years, another ten had new diagnoses of Hepatitis A and seven hundred ninety had been lost to follow-up. After four years, another 8 had new diagnoses with heart disease, and 392 more had been lost to follow-up.

The study results could also be described as follows: No Hepatitis A was diagnosed at the first year. Hepatitis A was diagnosed in one woman at the second year, in seven women at the third year, and in eight women at the fourth year of follow-up. One hundred women were lost to follow-up by the first year, another 99 were lost to follow-up after two years, another 793 were lost to follow-up after three years, and another 392 women were lost to follow-up after 4 years, leaving 700 women who were followed for four years and remained disease free.

Calculate the incidence rate of Hepatitis A among this cohort. Assume that persons with new diagnoses of Hepatitis A and those lost to follow-up were disease-free for half the year, and thus contribute  $\frac{1}{2}$  year to the denominator. CILO-2 and 3 **Marks-10**

#### Case -2

At the age of 30, a man gets COPD (Chronic obstructive pulmonary disease) which disables him for a certain period of time, but after a surgery he has been in remission for 10 years. After 5 years he suffers from a progress of a disease which disables him substantially more. At the age of 70 years he dies.

CILO-2 and 3

- a) Calculate YLD (3 marks)
- b) Calculate YLL (3marks)
- c) Calculate DALY (4 marks)