

**<PGDM-IBM, 2016-18>**  
**<Advanced Health Insurance-Elective>**  
**<INS-404-A>**

**Trimester – IV, End-Term Examination: September 2017**

Time allowed: 2 Hrs 30 Min

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 Admit Card should be followed meticulously.

| Sections | No. of Questions to attempt  | Marks              | Marks     |
|----------|------------------------------|--------------------|-----------|
| A        | 3 out of 5 (Short Questions) | 5 Marks each       | 3*5 = 15  |
| B        | 2 out of 3 (Long Questions)  | 10 Marks each      | 2*10 = 20 |
| C        | Compulsory Case Study        | 15 Marks           | 15        |
|          |                              | <b>Total Marks</b> | <b>50</b> |

**Section-A**

- A1. Differentiate between Single Payer Model and Multi payer system with adequate examples.
- A2. If the person gives history of TB five years ago and there is no history of relapse, and has completed at least nine months of treatment. What points would you recommend to underwrite the proposal and why?
- A3. A person reported systolic blood pressure greater than 139 but less than 160 mm Hg and diastolic blood pressure greater than 89 but less than 100 mm Hg. How would you underwrite this proposal? Give your reason for the same
- A4. In an Individual health insurance cover, Ravi asked for covering his spouse and dependant parents. The premium was charged on the basis of age and sum insured preferred. Ravi didn't mention that his wife had been suffering from severe diabetes for the last three years. Based on the declaration in the proposal form, the cover was given to Ravi for Rs. 5 lacs. Is any fraud committed here by the proposer? If so what is the nature of the same?
- A5. What aspects of Moral Hazard need to be looked at the time of underwriting? Substantiate your answer with a suitable example.

## Section-B

- B1. Describe the various types of Morbidity. While writing a group insurance proposal which type of morbidity should be taken into consideration and why?
- B2. What is meant by Medically Necessary treatment? Cite one example showing the application of medically necessary treatment.
- B3. Describe the importance of Managed Care .How does it work to minimise healthcare losses?

## Section-C

### Case Study Compulsory:-

Sh. Brij Mohan Gupta and his family were covered under a Individual Mediclaim Policy bearing no.201002/48/08/97/00000513 issued by United India Insurance Co. Ltd. for the period 21.10.08 to 20.10.09. His daughter, Divya Gupta was operated on 23.06.2009 at Mirchia Hospital for the treatment of Myopia both eyes. He had incurred expenditure of Rs. 24,612/- on her treatment. She was admitted in the hospital on 23.06.2009 and discharged on 24.06.2009. The claim was reported to Raksha TPA. But the TPA rejected the claim on the ground that the said treatment related to cosmetic surgery and aesthetic and as per policy condition 4.3 the claim is not payable.

The insurer in the repudiation letter mentioned that the claim was repudiated on the ground of violation of clause 4.3 of the policy. It has been observed from the papers submitted that patient suffered from Myopia and Lasik Laser Treatment was done as the refractive error of the patient in right eye- 3.5 Ds pt 6/6 and left eye- 7.4 spl 6/6. The treatment taken by the patient is to remove spectacles and the treatment comes under Cosmetic and Aesthetic surgery.

Q: 1 Your comment on the admissibility of the claim .

Q-2 Why can't we pay a claim when a treatment is taken through Cosmetic and Aesthetic surgery.

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