

PGDM-IBM, 2015-17
Advanced Health Insurance Name
INS-404 B

Trimester – IV, End-Term Examination: September 2016

Time allowed: 2 Hrs 30 Min

Max Marks: 50

Roll No: _____

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 | $3 \times 5 = 15$ |
| B | 2 out of 3 (Long Questions) | 10 Marks each | $2 \times 10 = 20$ |
| C | Compulsory Case Study | 15 Marks | 15 |
| | | Total Marks | 50 |

Section A

- Q1. Cost Control is not claim control. Justify this statement
- Q2. Explain Clinical audit with examples.
- Q3. Explain the evolution of ICD coding in India.
- Q4. How cost containment is possible with ICD coding
- Q5. Classify the providers on the basis of level of care provided by them

Section B

- Q1. What are Government Sponsored Health Insurance Schemes? Explain any one of them in details.
- Q2. a) What are the factors involved in credentialing individual providers?
b) Explain the clinical indicators for assessing quality of care by hospitals
- Q3. What are the criteria for selecting the Network Hospitals by Insurance Company? Explain in details.

Section C

Q1. Mr. Raman, Sr. Vice President working at ABC public general insurance company is worried with the high claim ratios of around 120%. Earlier this was the scenario with all the insurance companies in the country having health insurance line of business. But with time, many companies and especially standalone health insurance companies have made improvements in their claim ratios. Mr. Raman is wondering to what strategies to adopt to improve the claim ratio of health insurance business.

Can you suggest some solutions to him?

Q2. Ms. Seema is working in the health insurance company and is responsible for initiating and maintaining the relationships with the Hospitals. Everything was going fine but recently she is receiving complaints from the customers w.r.t the facilities and treatment provided by the network hospitals.

Please suggest how to deal with this problem so that the relationships with the hospitals are also not hampered.