HEALTH INSURANCE

IC 01 - PRINCIPLES OF INSURANCE
(Revised Edition: 2011)

Objectives
This course intends to provide a basic understanding of the insurance mechanism. It explains the concept of insurance and how it is used to cover risk. How insurance is transacted as a business and how the insurance market operates is also explained. The relationship between insurers and their customers and the importance of insurance contracts are discussed. Some commonly used insurance terms are also listed out. An overview of major life insurance and general insurance products is included as well.

Contents

Chapter 1: Risk Management: Provides an understanding of risk management – different types of risks – actual and consequential losses – management of risks – loss minimization techniques.

Chapter 2: The Concept of Insurance and its Evolution: The basics and nature of insurance – evolution and nature of insurance – how insurance operates today – different classes of insurance – importance of insurance – how insurance takes care of unexpected eventualities.


Chapter 4: The Insurance Market: The various constituents of the insurance market – operations of insurance companies – operations of intermediaries – specialist insurance companies – insurance specialists – the role of regulators – other bodies connected with insurance.


Chapter 6: The Insurance Contract: Terms of an insurance contract – principles which form the foundation of insurance – significance of the principle of insurable interest – the principle of indemnity – the principle of subrogation – the principle of

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contribution – disclosure of all relevant information – principle of utmost good faith – the relevance of proximate cause – the insurance contract.

**Chapter 7: Insurance Terminology:** Common terms used in insurance – terms common to both life and non-life insurance – terms are specific to life and non-life insurance – how insurance terms are used.

**Chapter 8: Life Insurance products:** The risk of dying early – the risk of living too long – different products offered by life insurers – term plans – pure endowment plans – combinations of plans – traditional products – linked policies – features of annuities and group policies.

**Chapter 9: General Insurance Products:** Risks faced by the owner of assets – exposure to perils – features of products covering fire and allied perils – products covering marine and transit risks – products covering financial losses due to accidents – products covering financial losses due hospitalization – products covering miscellaneous risks.

**Annexure:** *A write up on the history of insurance is provided.*
IC 11 - PRACTICE OF GENERAL INSURANCE
(Revised Edition: 2011)

Objectives:
This course primarily deals with practical aspects of General insurance within the framework of prevailing legislation and aims at familiarizing the reader with the market structure, procedures and practices, coverages under various insurance policies, underwriting practices, claims management, accounting, investments and customer service.

Contents:


**Chapter 6: Rating & Premium:** Classification of risks – Discrimination – Bonus/Malus – Claims cost – Acquisition cost – Management expenses – Classification of products – Premium – Short period scales – Failure of consideration – Refund / return of premium – Advance payment of premium.


**References & recommended reading:**

1. General Insurance, John Magee & David Bicklhaupt
2. Operational Transformation of General Insurance Industry during the period 1950 to 1990 & Beyond, R. D.Samarth
3. Study on Distribution Functions in General Insurance & Role of Intermediaries, Arun Agarwal / P R Rao
4. General Insurance for Information Technology Professionals, Martin Frappoli.
IC35: Basics of Health Insurance

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Contents


CHAPTER 3: HEALTH INSURANCE IN INDIA: Social health insurance schemes - various schemes - Growth and value of Private health insurance - Value of health insurance - The legal and regulatory environment - The role of Insurance Companies - Role of Third Party Administrator (TPA) - Functions of TPAs - Role of healthcare providers - Role of agents, brokers and other distribution channels - The Customer - Challenges to health insurance penetration - The paramount role of IRDA in promoting health insurance – Annexure.


CHAPTER 5: HEALTH INSURANCE UNDERWRITING PRACTICES (NON-LIFE): Health insurance - retail underwriting - Interpreting specific medical reports - Health insurance – Group underwriting.
CHAPTER 6: HEALTH INSURANCE PRODUCTS: Classification of health insurance products - Health insurance products - fixed benefit insurance plans - Clauses in Health Policies.

CHAPTER 2: CLAIMS MANAGEMENT: Claims management in insurance - management of health Insurance Claims – Claim process – Domiciliary hospitalisation - Pre-existing illnesses - Initial time-period exclusions - conditions with respect to the claims - Payment of claim - health insurance claims - Claims Reserving - Rashtriya Swastha Bima Yojna - Claims Management - Personal Accident - Claim documentation - Claims Management- Overseas Travel Insurance - Claims: Achieving customer service excellence

CHAPTER 3: ROLE OF THIRD PARTY ADMINISTRATORS IN HEALTH INSURANCE CLAIMS: Role of Third party administrators, Definition, Concept of Third Party Administration, Regulations governing TPAs, Scope and relationship between insurer and TPA, Cashless access services, Customer Relationship and Contact Management, Functioning of the TPA, Managing relationship between TPA and service providers, Providing professional customer service, Monitoring TPAs performance.

CHAPTER 4: PROVIDER NETWORK MANAGEMENT: Services of the provider network, Economics of Patient Safety, Classification of providers, Classification according to individual based or facility based providers, Accreditation and categorisation of facilities, Provider Network Concept, Costing of healthcare in India, Network management and control.

CHAPTER 5: CLAIMS MANAGEMENT - COST CONTAINMENT: Cost control, Need for cost control, Importance, Cost Control Measures, Clinical audit, Scope of Clinical Audit, Scope of Medical Management, Concept of Medical Management for Health Insurance, Tools for Medical Management, Suitability of case management, Healthcare management.

CHAPTER 6: MEDICAL CODING: Definition, Types of Medical Coding, Benefits, Importance of Medical Coding for co-morbidity, International Classification of diseases, Diagnostic codes, Procedure codes used in Indian healthcare practice, Relevance of medical coding.
CHAPTER 7: FRAUD AND ABUSE CONTROL: Fraud and abuse in health insurance, Definition, Reasons behind fraud, Types of fraud, Parties involved in fraud and abuse, Detection, treatment and prevention of fraud and abuse, Verification and investigation.
IC37: HEALTH INSURANCE OPERATIONS

Year of Edition: 2013

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CHAPTER 1: POLICY ADMINISTRATION AND ACCOUNTING: Policy issuance and administration activities, Classification of proposals, Policy renewals, Reasons for endorsements, premium accounting, Modes of premium payment, Reserving and solvency margins, unearned premium reserve, Solvency Margin.


CHAPTER 3: DATA MANAGEMENT & WAREHOUSING: Data warehousing concepts, Definition, Components of a Data Warehouse, types of data warehouses, Designing a Data Warehouse, Importance of data for health insurance, Requirement of data by various stakeholders, Outstanding claims data, Collection and collation of Health Insurance data, Examples of material facts, Standardisation work done by FICCI and CII.


CHAPTER 6: GOVERNMENT AND SOCIAL HEALTH INSURANCE SCHEMES IN INDIA: The social healthcare scenario in India, Important Health Insurance Scheme, Implementation Mechanism, Medical Benefits, Product Feature, Management of the scheme, Aarogyashri Health Insurance Scheme, Benefit under the scheme, Chief Ministers Compressive Health Insurance Schemes, ESIC - Employees’ State Insurance Corporation, Medical care after retirement and leaving employment, Central Government of Health Scheme.


Updated on 23rd April, 2015