Health Microinsurance Emerging Lesson #7 [1]

Theme: Health Claims
Source: VimoSEWA

VimoSEWA realized once it dug into claims data that there is a high degree of inconsistency with how claims are reported, particularly for diagnosis and procedures/treatments. One of the greatest challenges is to be able to group like diagnoses and like procedures together, as they can be documented inconsistently, e.g.: at least 16 types of fever were documented in the claims data sample using various terms such as fever, acute malaria, viral fever, etc., making it challenging to create a comprehensive count of admissions due to fever. One solution implemented in more developed health care delivery environments is to use standard codes and definitions, such as the ICD10 diagnoses and procedure codes. In many developing countries such as India, claims data are very challenging to accurately assess.

More on source:

For more details, see Emerging Insight 12.[3]

Source URL: http://www.impactinsurance.org/hwg/lessons/health-microinsurance-emerging-lesson-7

Links: