INSETA - ASSESSMENT QUALITY PARTNER

External Integrated Summative Assessment

EXAMPLAR

OCCUPATIONAL CERTIFICATE: INSURANCE CLAIMS ASSESSOR

CLAIMS ASSESSOR: HEALTHCARE		
SAQA ID: 99668	**NQF LEVEL: 4**	**CREDITS: 131**

DATE:		**TIME:**	**09h00-12h00**
DURATION:	**3 hours (180 minutes)**	**MARKS:**	**100**
EXAMINER:		**MODERATOR:**	
INSETA PAPER SERIAL Number		**HC2024/04/25CA**	

INSTRUCTIONS TO CANDIDATES:

1. **Candidates are required to answer <u>all questions</u>**
2. **This is a closed book examination.**
3. **No written material may be brought into the examination room**
4. **ONLY reference materials supplied with the examination paper may be utilised to answer the questions.**
5. **The use of a calculator is permitted.**
6. **Write legibly and neatly.**
7. **Do not turn over this page until permitted by the invigilator.**

SECTION A

HC2024/04/25 – Short Answer Questions

You are required to answer all questions in this section. Use the provide answer books to answer questions in the correct answer space of the answer book.

Please provide Olivia's claim documentation which is being referred to in the questions HC2024/04/25-SA01

1.1 You are senior claims assessor, and a junior assessor has forwarded a claim which was rejected by the system, but the member keeps on calling and begging for the claim to be settled. What advice would you give in this instance, are there any options available when a claim has been rejected? **[3 Marks]**

1.2 Analyze the claim statement together with the excerpt from the benefit schedule which has been provided. What was the reason for the rejection of the claim? Justify why you think it is appropriate to reject such claims. **[5 Marks]**

1.3 Explain what an ex-gratia payment is. **[2 Marks]**

1.4 You need to give a call to Marcia to explain what process she must follow to apply for an ex-gratia payment according to the rules of your scheme. **[5 Marks]**

1.5 What information should be included in an ex-gratia application form? Make a rough sketch of an ex-gratia application form, indicating the exact information required to be provided by the member in order for the trustees to make an informed decision to avoid any further delay on Marcia's application. **[10 Marks]**

1.6 Give two scenarios of when members applied for ex-gratia payment from your experience as a claim assessor. **[5 Marks]**

Short Answer Questions: Total Marks = 30

SECTION B

HC2024/04/25- Scenario based questions

You are required to answer all questions in this section. Use the provide answer books to answer questions in the correct answer space of the answer book.

SCENARIO 1

HC2024/04/25

Question 1

Coincidentally you have been assigned to assess two separate claims that have some similarities. The members received medical attention from 2 different hospitals. Answer the following questions based on the two claims.

1.1 What are the notable differences in the two claims?

[4 Marks]

1.2 Clearly there is something amiss with the claim from PTD Hospital and fraud is suspected. Critically analyze the claim and state how PTD committed fraud in this case.

[5 Marks]

1.3 Describe the concept of fraud as it is applied to healthcare benefits.

[4 Marks]

1.4 What are some of the control measures that you would recommend your medical scheme to implement which would assist in reducing such cases as from PTD Hospital?

[4 Marks]

1.5 Outline the negative impact of PTD Hospital's actions on the healthcare services industry.

[5 Marks]

1.6 Now that you are sure that PTD Hospital submitted a fraudulent claim, would you go ahead and process the claim? Or what procedures do you follow according to your medical scheme?

[5 Marks]

1.7 As members, how can Peter and Kelebogile assist your medical scheme in combating fraud?

[3 Marks]

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Question 2

2.1 What is a complex claim? Include examples in your discussion.

[4 Marks]

2.2 A new colleague approaches you for advice. He has been assessing a claim and there is some complexity. Advise him where he can refer the claim to.

[3 Marks]

2.3 Name at least 4 errors that could occur when assessing a medical claim.

[4 Marks]

2.4 Outline the general route followed by a simple claim. **[4 Marks]**

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Question 2

Thandi and Jaydn are both diabetic patients and they are basically on the same medication monthly. Both patients also receive medical attention from the same provider. Analyze the two claims in the annextures that were submitted by Thandi and Jaydn and answer the questions that follow.

3.1 Based on your knowledge of the different pharmaceutical drugs in the market, why is it that the doctor prescribed different drugs for these 2 patients and yet they suffer from the same condition?

[1 Mark]

3.2 Justify why Lipitor, a brand drug is more expensive than Zocor when they are both treating the same condition.

[4 Marks]

3.3 Dr Reeds prescribed the different medications to Thandi and Jadyn, is that permissible? Justify your answer.

[3 Marks]

3.4 In what instances will such an act be permitted by the medical scheme, i.e. having Thandi using a brand drug when there is a generic available which is working perfectly for Jadyn?

[2 Marks]

Scenario-based questions: Total Marks = 55

SECTION C

HC2024/04/25 – CASE STUDY based questions

You are required to answer all questions in this section. Use the provide answer books to answer questions in the correct answer space of the answer book.

CASE STUDY 1 HC2024/04/25 CS01

1.1 Every medical scheme has rules for different aspects. As a claim's assessor, mention any 4 rules that pertain to your department in terms of assessing claims.

[4 Marks]

1.2 One of the rules according to the Medical Schemes Act is that if there is any claim rejection, communication of the rejection must be made to the client within a certain period of time, how long is this period?

[1 Mark]

1.3 Write a sample letter to a client where you are communicating that their claim has been rejected. You need to include all the necessary details to ensure that the client fully understands.

[5 Marks]

1.4 Suppose you have communicated to a client effectively in your letter, but they still dispute the rejection. Explain to the client what procedure they have to follow for their query to be resolved.

[5 Marks]

Case Study 1: Total Marks = 15

Overall Question Paper Total = 100

Short Answer Questions: 30

Scenario-based Questions: 55

Case Study Questions: 15