Committees in respect of Health Insurance matters

Composition	Date of Constitut ion	Term/Tenure	Functions /Terms of reference	Place where the order is available
Health Insurance Forum	28.02.20	On going	The functions of the Health Insurance Forum shall be: i) to aid, advise and assist the IRDA in evolving regulations relating to health insurance business in India; ii) to facilitate the creation and adoption of standard processes and definitions in the insurance industry and in health insurance administration and in health services where applicable; iii) to aid, advise and assist the IRDA in collecting, maintaining and disseminating data required for the efficient conduct of health insurance business in India; iv) to act as a consultative forum as between insurance companies and other stakeholders; v) to aid, advise and assist the IRDA in developing regulations for rendering Health Insurance Forum more effective;	https://www.irdai.gov.in/ ADMINCMS/cms/frmOrd ers List.aspx?mid=3.4.2
Reconstitution of Health Insurance forum	29.01.20 21	On going	As above	https://www.irdai.gov.in/ ADMINCMS/cms/frmGen eral_Layout.aspx?page=P ageNo4356&flag=1

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Constitution of Joint working group of IRDAI		hospitals management- 12	(i) Network hospitals management: To have a National Repository of Empaneled Hospitals under Insurance/Government schemes with defined standards for quality and package rates and codes.	https://www.irdai.gov.in/ ADMINCMS/cms/frmGen eral Layout.aspx?page=P
and NHA		months (ii) Data Standardization	Defining Hospital infrastructure and Facility Audits to understand capacity of Hospitals, Specialists availability.	ageNo3746&flag=1
		and exchange- 3 months (iii) Fraud and	ii. Developing a roadmap to get one Common list of Accredited/ Verified hospitals for the entire Industry including ROHINI, NHRR, NIN and	
		abuse control- 6 months	PMJAY Databases.	
		(iv) Common IT infrastructure for health Insurance	iii. Comparative Study of Packages and their rates and mapping to uniform codes.	
		claims management- 6 months	iv. Defining Standards and Indicators for safe and quality Healthcare to Patients.	
			(ii) Data Standardization and exchange: To create standard data formats across Health Insurance payers for analysis and policy making.	
			i. Developing standardized data tables to capture and report the data, identifying data elements common with IRDAI and PMJAY.	
			ii. Setting up a framework for capturing and exchanging data.	
			(iii) Fraud and abuse control: To help detect and deter frauds through common repository and capacity building.	
			i. To develop a standard reporting format for fraud and abuse to be used across the industry and Govt. Schemes.	
			ii. Repository of fraudulent transactions, modus operandi and entities.	
			iii. Develop standards for field verification and investigation.	
			iv. Develop "name and shame" guidelines.	

			i.	Common IT infrastructure for health Insurance claims management: To Increase service efficiency and transparency amongst stakeholders in delivery of Health Insurance services. Defining the roadmap for electronic, paperless, codified data exchange between payer and provider, collation and analysis Defining a roadmap for creation of standard electronic personal health record for insured population with a common identifier.	
Constitution of Health Insurance Advisory Committee	13.01.20	One year	ii. iii. iv.	To examine the availability of the health insurance products in the country in the light of the need of the Indian Society and recommend suitable products and processes. To suggest approach on coverage of specific disease or an area of practice (e.g cardiology) To examine the extant health insurance product structure in terms of policy conditions to protect the interest of the policyholders. To develop strategy on treatment protocol or rate structure to improve affordability of health insurance. To examine any other matter relevant to health insurance sector.	mGen age=P