MES COLLEGE OF ENGINEERING, KUTTIPPURAM DEPARTMENT OF COMPUTER APPLICATIONS 20MCA245 – MINI PROJECT

PRO FORMA FOR THE APPROVAL OF THE THIRD SEMESTER MINI PROJECT

Mini Project Proposal No:(Filled by the Department)	Academic Year : 2021-2022
L	Year of Admission : 2020
1. Title of the Project : <u>HEALTH INSURANCE CLAIM</u>	
2. Name of the Guide : Ms. Priya J	
3. Number of the Student:	MES20MCA-38
4. Student Details (in BLOCK LETTERS)	
Name	Roll Number
Signature	
1. Januar	PANCHAMI.P.M 38
Date:	
Approval Status: Approved / Not Approved	d
Signature of Committee Members	
Comments of The Mini Project Guide	Dated Signature
Initial Submission :	_
First Review :	· · · · · · · · · · · · · · · · · · ·
Second Review :	
Comments of The Project Coordinator	Dated Signature
Initial Submission:	
	
First Review	
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HEALTH INSURANCE CLAIM PANCHAMI.P.M

Introduction: Medicare plays a vital role in a real time environment. In this Project a system and method for a rules-based pre- adjudication of a benefits claim submission is disclosed. The reviewing and adjudicating medical insurance claims is done electronically. The system can handle both individual and family insurance policies. The claims processing system performs automatic adjudication on submitted claims. The payment tracking system allows health care providers to monitor the payment status of a claim after submission.

Objectives: In this project a system and method for a rules-based pre-adjudication of a benefits claim submission is disclosed. The system can handle both individual and family insurance policies. The claims processing system performs automatic adjudication on submitted claims. The payment tracking system allows health care providers to monitor the payment status of a claim after submission. Advantage associated with the system is quicker claims processing and remittance, reduced transaction fees and direct connections with service provider, trading partners and value added networks.

Problem Definition: The Medicare Claim helps us in creating the model for each registration and keeps tracking of claim management. The reviewing and adjudicating medical insurance claims is done electronically. In support medical procedure eligibility verification, patient referrals, treatment authorization, data entry editing, electronic claim submission, claim status determination and electronic remittance processing is also done.

Basic functionalities: It includes Main Modules like Member System, Service Provider Admin and Service Payer Admin. Payer processes the claim and updates the status for each claim. Claim status is either accepted or rejected. Identified Sub modules are Provider Management, Member Management, Disease Management, Drugs Management, Plan Management, Claim Processing. When the Clerk clicks on the register Provider, it will re-direct to registration form and the payer needs to fill some of the basic attributes/fields as mentioned below in requirement Provider Name, Provider Address, Provider Contact, Provider Email Id etc. Drug management modules enables only when the detail for disease is needed. The Service payer provides several plans for the member that is the member can include the other member in his family. The Member System registers his details to the payer. The claim that is submitted by the provider is viewed by the member and the status of the claim can be seen. Provider could come back into the system and look up the status of claim. Here Sub modules are Claim submission and Report Screen.

Tools / Platform, Hardware and Software Requirements:

Hardware Requirements

• Input Device : Mouse, Keyboard

• Output Device : Monitor

Memory : 4 Gb Ram(Minimum)Processor : Intel core i3 or above

Software Requirements

• Operating System : Windows 8 / 10 for Better Performance

• Front End : Python (Flask)

Back End : MysqlSoftware Used : Pycharm