MERCURY

Complete Medical Insurance Management Training Course

1 – 12 February 2027
Johannesburg (South Africa)



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Ref: 15406_1063607 **Date:** 1 – 12 February 2027 **Location:** Johannesburg (South Africa) **Fees:** 9500 Euro

Introduction:

Medical insurance is one of the most important financial sources covering the cost of medical treatment in the private health sector. It is a financial contract between the person who purchases health insurance and the insurance company. The contract has conditions that the buyer so that he is fully aware of what he has and what it is.

This medical insurance management course is for family and individual insurance contracts. Small enterprises also have disclosure clauses binding on the insured so that he discloses them. They are either not covered or priced, so the insurance price rises.

Companies' and institutions' insurance is subject to the Health Insurance Council's regulations, which contain details of what it covers and what is excluded from medical insurance. Suppose she needs to explain some medical conditions that are unclear to the insured and the service provider. The insured benefits directly from the network of service providers contracted with his insurance company.

The insured goes to the service provider directly, and the service provider requests consent from the beneficiary. In this service, the beneficiary gets approval or refusal to serve based on the terms of the contract. Medical service approvals are considered one of the bottleneck points in which the three parties sometimes have disputes, and insurance is usually.

Targeted Groups:

- All managers are responsible for the insurance sector.
- All managers are responsible for social insurance.
- This medical insurance management course is for all employees of the Health Insurance Department of insurance companies.
- This medical insurance management training is for all health insurance department employees with service providers.
- Employees are working in the health insurance department in all institutions.
- Everyone who finds the need for this course and wants to develop their skills and experience.

Course Objectives:

At the end of this medical insurance management course, the participants will be able to:

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- Know the types of health insurance.
- Knowledge of medical providers and the medical network.
- Understand version and claims management.
- Health insurance file management.
- Negotiate the renewal of contracts with health insurance.
- Health insurance correspondence.
- Understand health insurance contracts and different coverages.
- Manage medical expenses, manage premiums, and finance.

Targeted Competencies:

At the end of this medical insurance management program, the participants will be able to:

- The genesis of insurance and risk management.
- Medical insurance.
- Management of the medical insurance contract.
- Technical study of medical insurance.
- Personal accident document and its significance for the medical insurance contract.
- Detection of fraud in medical insurance.

Course Content:

Unit 1: Health insurance Genesis, goals, principles:

- Insurance service providers.
- Insurance origination and risk management.
- Objectives and benefits.
- Insurance terms and principles of insurance.

Unit 2: Medical insurance:

- Types of Insurance.
- Health insurance law.
- Types of health insurance policies.
- Permanent health insurance cover.
- Preparation of health insurance programs.
- Endurance amounts and endurance ratios.

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Unit 3: Medical Insurance Contract Management:

- Health insurance correspondence.
- Versions and claims.
- Medical expense management, premium management, and financing.
- Self-financing funds for health insurance.
- Claims and methods of their calculation.
- The method of calculating the health insurance premium and the most critical factors affecting the insurer's decision Insurance Company.
- Medical service providers.

Unit 4: The technical study of medical insurance:

- Introduction to the healthcare delivery system.
- The extent of coverage in health insurance.
- Negotiating the renewal of contracts with health insurance.

Unit 5: The personal accident document and its significance for the medical insurance contract:

- Introduction to the personal accident document.
- Personal Accident Policy coverage.
- Connection of the personal accident document with medical.

Unit 6, Detection of Medical Insurance Fraud:

- Detection of medical insurance fraud.
- Fraud detection methods.

Unit 7, The concept of health insurance and its importance:

- History and development of health insurance globally.
- Types of health insurance and their importance.
- Basic principles of medical insurance.
- The concept of medical insurance and how it works.
- Objectives and principles of medical insurance.
- Different medical insurance frameworks.

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Unit 8, Types of Medical Insurance:

- Public health insurance and private health insurance.
- Supplementary health insurance.
- Health insurance for companies and institutions.
- International health insurance.

Unit 9, The challenges of health insurance:

- Financial and economic challenges.
- Technological and technical challenges.
- Legal and legislative challenges.
- Demographic and social challenges.

Unit 10, Health Insurance Department:

- The health insurance process and its components.
- Risk assessment and analysis.
- Management of Health Networks and service providers.
- Managing member files and compensation.
- Data analysis and statistics.

Unit 11, Developments and trends in health insurance:

- Recent innovations in health insurance.
- Intelligent use of technology in health insurance.
- Global trends in health insurance.
- Future challenges and expected trends.
- Health policies and health insurance.
- The role of governments in providing health insurance.
- Different health policy models.