INSURANCE – LIFE AND HEALTH

Asia needs more data integration to improve healthcare

L-R: Messrs Joydeep Roy, Ronak Shah, Cole Sirucek and Ms Sejal Mistry

Health insurers in Asia are challenged by high medical inflation and rising claims. Speakers at the 18th Asia Conference on Healthcare and Health Insurance discussed how they can still work towards improving access to medical care despite the challenges.

By Nadhir Mokhtar

Skyrocketing medical inflation was top of mind for speakers presenting at the 18th Asia Conference on healthcare and health insurance. Healthcare inflation is expected to reach 10.2% in Asia in 2023 according to WTW.

"The cost of healthcare keeps rising by a very large, inflationary margin. The inflation of healthcare costs ranges anywhere between 1.4 to 1.9 times of the consumer or wholesale inflation index in any country. That's something which is a concern," said PwC partner and global health insurance practice leader Joydeep Roy in his opening address as chairman for the first day of the conference.

Inclusive insurance

Despite increasing healthcare costs, insurers still have the responsibility to help protect more segments of society and improve coverage for mental health and disabilities. General Insurance Association of Singapore president Ronak Shah said insurers should provide more inclusive insurance for people with disabilities.

"Insurers must provide this in a fair and reasonable manner and uphold the convention (United Nations Convention on the Rights of Persons with Disabilities). The insurance sector recognises the importance of supporting persons with disabilities. We must deal fairly and inclusively with our customers and prospects. Health insurers must improve the inclusiveness of our offerings for persons with disabilities," he said while delivering a welcome address for the conference.

He said that mental health and wellness have come to the forefront in recent years with a pandemic. Mental health issues are expanding and insurers have been challenged to offer cover for it.

"We have seen some health insurers take the lead on this, but we still need to do a lot more work with more people finding their voice and speaking openly about mental health challenges. It is crucial that insurers play a part and develop solutions to deliver improved mental health cover for our customers," said Mr Shah.

Benefits of emerging technology

While medical inflation continues to rise, advancements in technology are expected to help improve efficiency and lower costs in the health industry. He said the introduction of telehealth systems has expedited the provision of healthcare. At the same time, major breakthroughs in medical science such as gene editing have given scientists promising possibilities for faster and more accurate diagnosis of genetic diseases and disease prevention.

"We can expect new treatments and more experimental treatments to be developed. We support the adoption of new technologies and treatments to improve medical outcomes, as we have done before and earlier advancements such as robotic surgery. As new medical technologies become established, we can expect some of these new medical advancements to reduce the patient's recovery time and some costs," he said.

More data integration required

Speakers at the conference also

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shared examples of data integration in other parts of the world and how it has helped improve access to healthcare. Data integration is being led by regulators in some Middle East markets insurance such as Saudi Arabia and Dubai.

"They submit all their claims at the end of the month or by the deadline to this platform. This platform is where the TPA or the insurer picks up the claims processes that submits the remittance advices back to this information exchange and the medical service provider picks it up," said RGA Middle East vice president and head of health Dennis Sebastian.

Mr Dennis Sebastian

He shared examples of how a system known as the Health Information Exchange works in the two markets and how data is shared on a central platform between insurers, healthcare providers, third-part administrators and patients.

"I don't believe that there is any common data or place to collect data. We have more than 6,000 specialists in Singapore, Malaysia, Hong Kong and Indonesia. It took us 10 hours, from each one of our clinics to pull the data. There is no common format or architecture. Is there an institutional place for the insurance industry to collect data? This is a core problem," said DocDoc co-founder and CEO Cole Sirucek at the conference.

"Healthcare providers and health insurers navigate a vast volume of information and data exchange between them can be improved and made more efficient. More can be done to give healthcare providers, patients and insurers the information that they need so that they can make fast decisions at admission and discharge," said Mr Shah.

He said that while some insurers have implemented systems with healthcare providers, this creates a challenge for healthcare providers to integrate with each insurance platform.

"This ultimately defeats the purpose as healthcare providers have to operate multiple systems for admissions and billing. We can do a lot more to improve this and there is a clear benefit to patients, healthcare providers and insurance if the health insurance and healthcare ecosystems work together to integrate on a common platform. Achieving such an outcome will be immensely beneficial, improving patient experience and saving time, effort and money for all stakeholders," he said.

Improving access to healthcare

Universal health coverage (UHC) was another term brought up at the conference. It refers to an ambition to ensure people have access to the healthcare they need without suffering financial hardship.

"It (UHC) is basically saying very ambitiously that everyone in any country or community should have access to a good level of healthcare that they need and they shouldn't go into bankruptcy or poverty and struggle to pay for it. It doesn't mean healthcare services are free, but it shouldn't break the bank.

"Unfortunately, in Asia and in many places around the world, that's exactly what healthcare is doing. It's making people contend with life-threatening illnesses with severe morbidity and mortality and at the same time think about their financial health," said Crowell and Moring International director Sejal Mistry.

The UHC ambition is also part of the World Bank's goals of ending extreme poverty and increasing equity and the UN's Sustainable Development Goals. But what role do insurers in Asia play in achieving UHC?

"You need insurance companies to be at the heart of developing products, the risk underwriting for future financial protection and service coverage," she said.

However, it can be challenging to achieve UHC if many of the stakeholders involved, including healthcare providers and insurers, are profit oriented.

"I think that's why the stewardship of universal health coverage programmes belong to the government. It's social oriented. I think I've been somewhat disappointed with the antagonism and that it's all about the bottom line and the social good is the converse of that. I think universal health coverage programmes are not profit oriented but it doesn't mean that profits don't matter. It doesn't mean that financial sustainability does not matter.

"I think what is interesting is that there is still a lot of opportunity to make money and have growth opportunities and make profits. That's why we do see disruptions in InsurTech and new business models coming into healthcare," she said.

The 18th Asia Conference on Healthcare and Health Insurance ran from 10 to 11 March, organised by *Asia Insurance Review.*

L-R: Mr Rudolf Frei, Dr Ashish Kanakia, Messrs Pramod Veturi, Mark O'Dell, Simranjit Singh and Vipul Sud

L-R: Dr James Lam Kian Ming, Dr Carol Tan Yean Eng, Ms Shuyi Lee, Dr Sidharth Kachroo, Messrs Adrit Raha, Matt Pinckard, Ajit Rochlani, Mses Helen Shen and Vaibhavi