QUEST
Professional Center

PROFESSIONAL TRAINING COURSE

Course No. 2037

Health Insurance Management & Operations Training Course

LIFE & HEALTH INSURANCE
INSURANCE & RISK MANAGEMENT

DURATION
5 Days

DELIVERY
Classroom

LOCATION
Amsterdam, Netherlands

DATES
2 – 6 Nov 2026

Scheduled Event Details

CITY	Amsterdam, Netherlands
DATE	2 – 6 Nov 2026
DELIVERY TYPE	Classroom
COURSE FEE	€5,400

Course Overview

The Health Insurance Management & Operations Training Course provides a comprehensive and practical framework for managing health insurance operations, service delivery, financial performance, regulatory requirements, and customer experience. The programme is designed to strengthen participants' ability to manage health insurance processes efficiently while balancing quality, cost, risk, and policyholder needs.

The course examines the health insurance lifecycle, including product and policy administration, enrollment, underwriting, provider network management, claims processing, medical approvals, billing, premium collection, renewals, customer service, and complaints management. Participants will explore how these functions interact and how effective operational coordination contributes to sustainable insurance performance.

Particular emphasis is placed on managing claims costs, controlling utilization, detecting fraud and abuse, monitoring medical service providers, improving claims turnaround times, and maintaining appropriate operational controls. Participants will also examine key performance indicators, service-level measures, operational risks, and data-driven approaches to improve health insurance processes.

The programme integrates management, operations, financial, risk, compliance, and customer experience perspectives. Through practical case studies and operational exercises, participants will develop the ability to identify process weaknesses, improve operational efficiency, strengthen controls, and build sustainable health insurance operating models.

Objectives

- By the end of this training course, participants will be able to:
- Analyze the structure and operating model of health insurance businesses.
- Evaluate the complete health insurance policy and service lifecycle.
- Assess health insurance operational processes and service delivery requirements.
- Develop effective approaches to policy administration and member management.
- Evaluate health insurance claims processes and operational controls.
- Analyze claims costs, utilization patterns, and major cost drivers.
- Assess medical provider network performance and service quality.
- Apply effective approaches to provider relationship management.
- Improve claims processing efficiency and turnaround times.
- Identify operational, financial, regulatory, and service-related risks.
- Apply appropriate controls to reduce errors, leakage, fraud, and abuse.
- Develop customer service and complaints management practices.
- Establish health insurance operational performance indicators.
- Use operational data to support management decisions and process improvement.
- Strengthen governance and compliance across health insurance operations.
- Develop an integrated health insurance management and operational improvement strategy.

Who Should Attend

This course is designed for health insurance managers, insurance operations managers, health insurance specialists, claims managers, underwriting professionals, policy administration teams, and customer service managers responsible for managing health insurance activities.

It is also suitable for provider network managers, medical claims specialists, risk and compliance professionals, finance and accounting personnel, internal auditors, quality professionals, business process managers, insurance analysts, and senior supervisors involved in health insurance operations.

The programme is particularly relevant to professionals working in health insurance companies,

insurance groups, healthcare insurers, third-party administrators, brokers, healthcare organizations, financial institutions, and regulatory or supervisory organizations involved in health insurance services.

Learning Outcomes

- Upon completion of the course, participants will be able to:
- Explain the major functions and operating structures of health insurance organizations.
- Map the health insurance lifecycle from enrollment through renewal and claims.
- Evaluate policy administration and member servicing processes.
- Assess underwriting and eligibility requirements within health insurance operations.
- Analyze claims workflows and identify process improvement opportunities.
- Evaluate claims performance using cost, frequency, severity, and turnaround indicators.
- Assess provider network performance and contractual service requirements.
- Identify sources of medical cost escalation and utilization inefficiency.
- Develop controls for claims leakage, inappropriate utilization, fraud, and abuse.
- Improve coordination between claims, underwriting, providers, finance, and customer service.
- Establish effective customer service and complaints management processes.
- Apply operational risk management and compliance controls.
- Develop meaningful operational dashboards and performance indicators.
- Use data and performance trends to support operational decision-making.
- Identify opportunities for digitalization and process automation.
- Prepare a comprehensive health insurance management and operational improvement plan.

Course Outline

DAY 01

Health Insurance Management Framework and Operating Model

- Fundamentals of health insurance
- Health insurance products and operating structures

DAY 01 — CONTINUED

- Key stakeholders and responsibilities
- Health insurance policy lifecycle
- Member enrollment and eligibility management
- Policy administration and documentation
- Underwriting and risk assessment fundamentals
- Premiums, coverage, benefits, exclusions, and limits
- Coordination between core health insurance functions

PRACTICAL APPLICATION

Mapping the end-to-end health insurance operating model

DAY 02

Claims Management and Medical Operations

- Health insurance claims lifecycle
- Claims registration, validation, assessment, and settlement
- Medical approvals and authorization processes
- Claims documentation and verification
- Claims cost drivers and utilization management
- Claims turnaround time and service-level management
- Medical necessity and appropriate utilization
- Claims leakage and operational inefficiencies
- Coordination between claims teams and healthcare providers

PRACTICAL APPLICATION

Evaluating and improving a health insurance claims process

DAY 03

Provider Network Management and Cost Control

- Health insurance provider networks
- Provider selection and credentialing considerations
- Contracting and service-level requirements
- Provider performance monitoring
- Healthcare cost management
- Utilization patterns and cost drivers
- Negotiation and provider relationship management
- Provider billing and payment controls
- Fraud, waste, abuse, and inappropriate utilization

PRACTICAL APPLICATION

Developing a provider performance and cost-control framework

DAY 04

Customer Experience, Risk, Compliance and Operational Controls

- Customer experience in health insurance
- Member communication and service management
- Complaints and dispute resolution
- Operational risk identification and assessment
- Regulatory and compliance requirements
- Data privacy and information management
- Internal controls and process assurance
- Fraud and financial risk controls
- Service quality and operational risk indicators

PRACTICAL APPLICATION

Developing an operational risk and customer service improvement plan

DAY 05

Performance Management, Digital Operations and Continuous Improvement

- Health insurance operational performance management
- Key performance indicators and management dashboards
- Claims, service, cost, and productivity metrics
- Data-driven operational decision-making
- Digital health insurance operations
- Automation and workflow optimization
- Process redesign and operational efficiency
- Governance and management reporting
- Continuous improvement and operating model development
- Final Integrated Workshop: Developing a comprehensive Health Insurance Management & Operations Improvement Strategy

Register or Request More Information

Course page: https://quest-training.com/courses/health-insurance-management-operations-training-course
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