



Entitlement checks — 214 situations and 41 unclaimed rights

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One quarter, 3,550 entries · fictional document

Fictional document — demonstration example

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Fictional document, produced for the demonstration. **Entitlements are a cover status, not health information**: the agent reads that cover exists and until when, never what it is attached to.

What is checked at every entry

Point checked	What the agent verifies	What it flags
Health insurance	Entitlements open, fund of registration	Closed or expired entitlements
Complementary insurer	Policy, cover relevant to the stay	Agreement to cover to be requested
Long-term condition status	Status and expiry date	Expiry during the stay — that is what gets forgotten

Point checked	What the agent verifies	What it flags
Means-tested complementary cover	Award and expiry date	Right open and never claimed
Foreseeable out-of-pocket amount	Calculation after health insurance and insurer	Amount given to the patient before entry

Long-term condition status is a cover status that opens full reimbursement for the care attached to it; it is read in the entitlements, never in the care record. Means-tested complementary cover is the complementary cover granted on income grounds, which many still call by its former name. The out-of-pocket amount is what remains for the patient to pay once the health insurance fund and their insurer have paid.

The quarter's results

Situation	Volume	Action taken
Patients with no open entitlements or with expired ones	214	Spotted before entry, not after the stay
of which regularised before discharge	186	The stay is billed under the right arrangement
of which left without regularisation	28	Application form filled in and the address of their fund handed over
Means-tested cover open and never claimed	41	Information letter written for each, in plain French

Those 41 situations are non-take-up avoided. *Non-take-up means a right that exists and that the person does not claim, often because they do not know it exists. 41 people paid what they did not have to pay, and will not pay it again* — that is the figure to put first before management, because it is not arguable with anyone.

The time this returns

Item	Today	With the agent	Over the year
Checking a patient's entitlements	40 % — 6 min	10 % — 1 min 30	420 hours across 5,600 unscheduled entries

Proposal awaiting approval: run the entitlements of the past year's 14,200 stays again to say how many other situations like those 41 are sleeping in the files. **The run takes one night; the list comes back with a letter ready per patient.**

For the hospital to settle

Sending the 41 information letters — approved on: _____

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