-Medical Claims & Coding: Value Based Payment Strategies

AGILE LEADERS
Training Center

01 - 05 Jun 2026
ميلان

Medical Claims & Coding: Value-Based Payment Strategies

المرجع: 103600472_68393 التاريخ: 01 - 05 Jun 2026 الموقع: ميلان الرسوم: Euro 5700

Course Overview

course provides an in-depth, Medical Claims & Coding Specialization: Value-Based Payment Strategies The practice-oriented understanding of how artificial intelligence and data analytics are reshaping the entire medical claims ecosystem from adjudication and coding to DRG classification and value-based reimbursement. Participants explore how automation, predictive modeling, and healthcare data analysis improve claim accuracy, streamline coding compliance, reduce fraud and denials, and support fair, value-driven payment models.

The course integrates modern techniques to detect anomalies, validate coding integrity, optimize DRG -assignments, and enhance adjudication processes using AI-powered healthcare fraud analytics. Through Gulf region and international case studies, learners gain hands-on insights into the relationship between coding accuracy, DRG integrity, and efficient value-based payments.

By the end of the program, participants will be able to design analytical frameworks, apply automation tools, and implement data-driven reimbursement strategies that strengthen transparency, compliance, and operational performance across the claims lifecycle supporting a sustainable, efficient, and accountable healthcare delivery system.

Target Audience

- Medical Claims Adjudication Officers
- Claims Automation and Process Managers
- Health Insurance Operations and Quality Auditors
- Medical Coding and Billing Specialists
- DRG and Reimbursement Analysts
- Value-Based Payment and Revenue Cycle Managers
- Healthcare Data Analysts and Compliance Professionals
- Internal Auditors and Health Informatics Managers

Targeted Organizational Departments

- Medical Claims Adjudication and Audit Units
- Medical Coding and Revenue Integrity Departments
- Data Analytics and AI Implementation Divisions
- Finance, Billing, and Reimbursement Operations
- Quality and Compliance Management Divisions
- Health Insurance and Provider Relations Departments

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Targeted Industries

- Health Insurance Companies
- Hospitals and Healthcare Provider Networks
- Third-Party Administrators TPAs
- Medical Billing and Coding Firms
- Government Health Authorities and Regulators
- Private and Public Healthcare Systems

Course Offerings

By the end of this course, participants will be able to:

- Apply automation and AI tools to medical claims adjudication and review processes
- Detect anomalies and reduce fraud in medical coding and DRG classification
- Integrate data analytics into healthcare reimbursement and audit frameworks
- Use AI models to improve claims accuracy and compliance in payment systems
- Implement value-based payment strategies aligned with outcomes and performance
- Strengthen data governance and interpretability across claims operations
- Develop dashboards and key metrics for claims integrity and reimbursement efficiency

Training Methodology

This program uses a blended, interactive learning model that includes:

- Interactive lectures
- Case simulations and scenario analysis
- Group discussions
- Hands-on analytical demonstrations

Participants analyze real healthcare claim scenarios, practice automation workflows, apply data analytics for fraud detection, and evaluate DRG and coding integrity. They explore policy-driven decisions, benchmarking techniques, and performance analytics used globally and within the Gulf region.

The methodology emphasizes:

- Data-driven scenario analysis
- Adjudication automation walkthroughs
- Interactive coding and DRG workshops
- Simulation of value-based reimbursement systems
- Real-world case applications

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Course Toolbox

Participants will work with:

- Claims adjudication workflow models
- AI-supported coding validation tools
- Coding accuracy and DRG integrity checklists
- Fraud and anomaly detection analytical frameworks
- Predictive models for payment accuracy
- Performance dashboards and KPI templates
- End-to-end adjudication-to-payment workflow maps
- Case study datasets for hands-on analysis

Course Agenda:

Day 1: Medical Claims Adjudication and Automation

- Fundamentals of Medical Claims Adjudication and Insurance Review Topic 1:
- Common Adjudication Errors, Denials, and Fraud Indicators Topic 2:
- Automating Adjudication with AI and Data Analytics Topic 3:
- Predictive Models for Claims Validation and Risk Scoring Topic 4:
- Workflow Automation and Claims Management Dashboards Topic 5:
- Compliance Integration in Automated Adjudication Systems Topic 6:
- AI Automation and Fraud Detection Reflection & Review:

Day 2: Medical Coding

- Overview of ICD, CPT, and HCPCS Coding Systems Topic 1:
- Linking Clinical Documentation to Coding Integrity and Reimbursement Topic 2:
- AI-Assisted Medical Coding Validation and Automation Topic 3:
- Detecting Upcoding and Unbundling Using Analytics Topic 4:
- Quality Assurance and Coding Audit Best Practices Topic 5:
- Natural Language Processing NLP in Coding Optimization Topic 6:
- Accurate Coding and Compliance Reflection & Review:

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Day 3: DRG Diagnosis-Related Group Systems

- Introduction to DRG Principles and Healthcare Finance Topic 1:
- DRG Grouping, Weights, and Reimbursement Methodologies Topic 2:
- AI and Analytics for DRG Accuracy and Fraud Detection Topic 3:
- Identifying DRG Upcoding and Misclassification Risks Topic 4:
- Linking DRG Data with Claims Adjudication Performance Topic 5:
- DRG Analysis for Benchmarking Cost and Quality Topic 6:
- DRG Systems and Reimbursement Reflection & Review:

Day 4: Value-Based Claims Payment

- Overview of Value-Based Healthcare and Payment Models Topic 1:
- AI in Monitoring Outcomes-Based and Bundled Payments Topic 2:
- Fraud and Anomaly Detection in Value-Based Claims Topic 3:
- Designing Performance Dashboards for Quality Metrics Topic 4:
- Predictive Analytics for Payment Accuracy and Compliance Topic 5:
- Linking Reimbursement Models to Healthcare Value Indicators Topic 6:
- Aligning Claims Integrity with Value Reimbursement Reflection & Review:

Day 5: Data Analysis for Healthcare Claims Intelligence

- Foundations of Healthcare Data Analysis and Visualization Topic 1:
- Data Collection, Cleansing, and Transformation Topic 2:
- Statistical and Predictive Techniques for Fraud Recognition Topic 3:
- Building Dashboards and Analytical Models for Claims Monitoring Topic 4:
- AI Explainability Tools SHAP, LIME for Transparency Topic 5:
- Case Study End-to-End Adjudication-to-Payment Data Flow Topic 6:
- Integrating Analytics for Continuous Improvement Reflection & Review:

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فئات الدورات التدريبية

الدورات التدريبية في مجال البيئة والاستدامة

دورات إدارة الجودة وتطوير العمليات

دورات إدارة و تحليل البيانات ودورات علم البيانات

دورات إدارة و تطوير الموارد البشرية

دورات الأمن السيبراني ودورات تقنية المعلومات

دورات الاتصال الجماهيري و السياسات والعلاقات العامة

دورات التدريب القانوني والمشتريات والتعاقدات

دورات التسويق وإدارة علاقات العملاء وإدارة المبيعات

دورات الحوكمة وإدارة المخاطر والامتثال

دورات السكرتارية و إدارة المكاتب

دورات الصحة والسلامة والأمن المهني

دورات الصيانة ودورات المجالات الهندسية المتنوعة

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فئات الدورات التدريبية

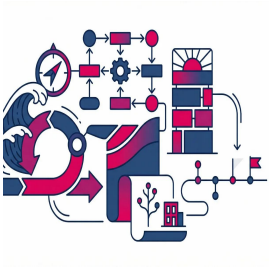
دورات المحاسبة و التمويل و دورات الإدارة المالية

دورات المهارات الشخصية وتطوير الذات

دورات في مجالات القيادة والإدارة

دورات معتمدة بشهادة CPD

دورات معتمدة من قبل هيئات دولية



دورات مكتب إدارة المشاريع وإدارة المشاريع الرشيقة

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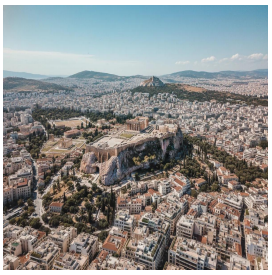
مدن التدريب



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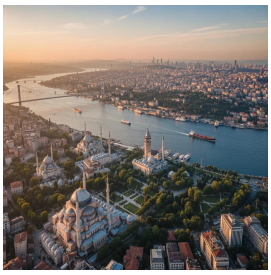
أكرا - غانا

أمستردام - هولندا



اسطنبول - تركيا

الجبيل - المملكة العربية السعودية

الدار البيضاء - المغرب

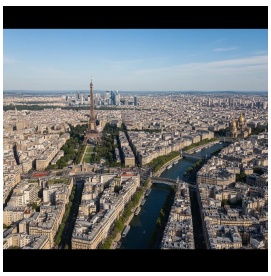
الدوحة - قطر

الرياض - المملكة العربية السعودية

القاهرة - مصر

الكويت - الكويت

المنامة - مملكة البحرين



باريس - فرنسا

باكو - أذربيجان

بالي - جمهورية إندونيسيا

بانكوك - تايلند

براغ - جمهورية التشيك

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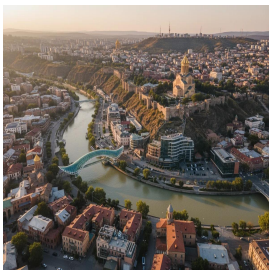
مدن التدريب

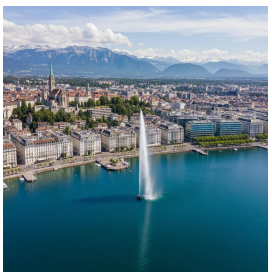
برشلونة - إسبانيا

بوكيت - تايلاند



تبليسي - جورجيا

جاكرتا - جمهورية إندونيسيا



جنيف - سويسرا

جوهانسبرغ - جنوب إفريقيا

دبي - الإمارات العربية المتحدة

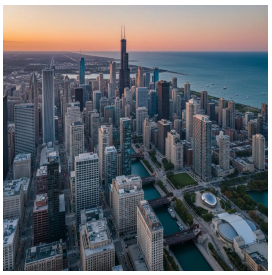
روما - إيطاليا

زنجبار - تنزانيا

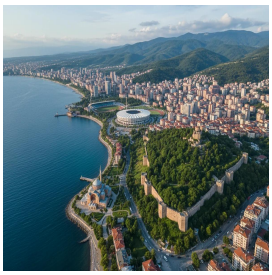
سان دييغو - الولايات المتحدة الأمريكية

سيول - كوريا الجنوبية

شرم الشيخ - مصر

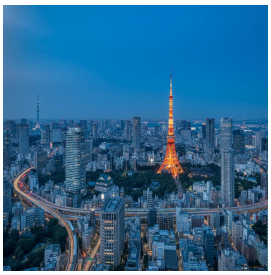


شيكاغو - الولايات المتحدة الأمريكية



طرابزون - تركيا

طشقند - أوزبكستان



طوكيو - اليابان

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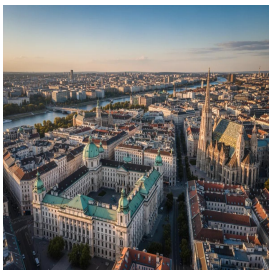
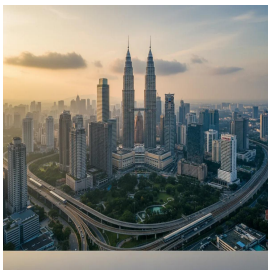
مدن التدريب

عمان - المملكة الاردنية الهاشمية

عن بعد - منصة زووم

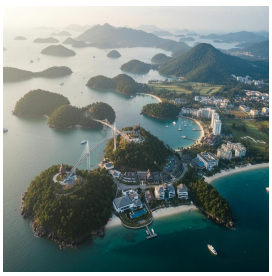


فيينا - النمسا



كوالالمبور - ماليزيا

كيب تاون - جنوب إفريقيا



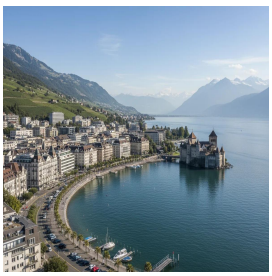
لانكاوي - ماليزيا

لندن - المملكة المتحدة

ماربيا - اسبانيا

مدريد - إسبانيا

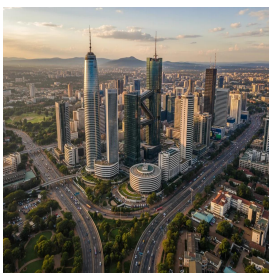
مسقط - سلطنة عمان



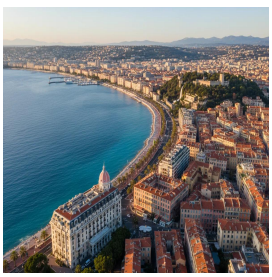
مونترو - سويسرا

ميلان - إيطاليا

ميونخ - ألمانيا



نيروبي - كينيا



نيس - فرنسا

WHO WE ARE

Agile Leaders is a renowned training center with a team of experienced experts in vocational training and development. With 20 years of industry experience, we are committed to helping executives and managers replace traditional practices with more effective and agile approaches.

OUR VISION

We aspire to be the top choice training provider for organizations seeking to embrace agile business practices. As we progress towards our vision, our focus becomes increasingly customer-centric and agile.

OUR MISSION

We are dedicated to developing value-adding, customer-centric agile training courses that deliver a clear return on investment. Guided by our core agile values, we ensure our training is actionable and impactful.

WHAT DO WE OFFER

At Agile Leaders, we offer agile, bite-sized training courses that provide a real-life return on investment. Our courses focus on enhancing knowledge, improving skills, and changing attitudes. We achieve this through engaging and interactive training techniques, including Q&As, live discussions, games, and puzzles.

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