

# MACHINE LEARNING BASED PRICE COMPARISON AND BILLING METHOD FOR HEALTHCARE MANAGEMENT SYSTEM

Mr. Vasudev Shahapur  
Department of Computer Science  
Engineering  
Alva's Institute of Engineering  
And Technology  
shahapurvasu@gmail.com

Lavanya  
Department of Computer Science  
Engineering  
Alva's Institute of Engineering  
And Technology  
lavanyashwetha2002@gmail.com

Pallavi K  
Department of Computer Science  
Engineering  
Alva's Institute of Engineering  
And Technology  
kotegarapallavi2002@gmail.com

Prajwal S Shetty  
Department of Computer Science  
Engineering  
Alva's Institute of Engineering  
And Technology  
shetty.prajwal2002@gmail.com

Rachana Nayak  
Department of Computer Science  
Engineering  
Alva's Institute of Engineering  
And Technology  
rachananayak03@gmail.com

## ABSTRACT:

A novel price comparison and billing system designed specifically for doctors has been developed to address the challenges of managing healthcare product costs and billing complexities. This system aims to empower doctors by offering a user-friendly platform to compare prices from various suppliers, enabling informed purchasing decisions and cost-effective choices. Integrated with electronic medical records, it facilitates streamlined billing processes, allowing doctors to generate accurate invoices efficiently. Real-time pricing data eliminates manual research, enhancing time efficiency, while its intuitive interface ensures ease of use across devices. With robust security measures safeguarding patient and financial information, this system promises to optimize cost management, negotiation with suppliers, and overall practice efficiency without compromising on quality care delivery.

## Keywords:

Transparency, Automation, Compatibility, Security, Cost Comparison, Cost Effective

## 1.INTRODUCTION:

In today's dynamic healthcare environment, the necessity for doctors to access an efficient price comparison and billing system is paramount. As medical expenses soar and insurance complexities heighten, patients rely on informed healthcare choices, while doctors require streamlined billing processes for practice management. Recognizing this need, our company proudly introduces an innovative price comparison and billing system tailored specifically for doctors.

Our system offers a user-friendly interface, empowering doctors to effortlessly compare prices of diverse healthcare products, from medications to medical devices and supplies. With intuitive navigation, doctors can swiftly access comprehensive price lists from various suppliers, optimizing both time and effort in sourcing the best deals. This not only aids doctors in making cost-effective decisions for patient care but also enhances financial management, ultimately bolstering practice profitability.

Moreover, our platform provides a secure and efficient billing system, enabling doctors to seamlessly generate and manage invoices, track payments, and monitor financial performance. Designed for integration with multiple insurance providers, our system facilitates streamlined claims processing, ensuring prompt reimbursements. Continuously updated to meet evolving industry demands, our commitment lies in delivering a seamless and efficient experience, fostering improved healthcare delivery for both doctors and patients alike.

## 2.LITERATURE REVIEW:

The study on challenges in pricing and reimbursement of medical devices sheds light on the complexities faced by healthcare systems in this domain[1]. It underscores the lack of transparency in pricing, which hinders doctors' ability to make informed decisions when selecting medical devices.[1] This finding aligns with the broader healthcare landscape, where transparency issues contribute to inefficiencies and cost disparities. Moreover, the study emphasizes the necessity of a standardized price comparison tool to mitigate these challenges, advocating for technological solutions to streamline pricing and reimbursement processes.

The comparative study of healthcare product pricing strategies provides valuable insights into the diverse approaches adopted within the industry. By examining various pricing methodologies such as cost-plus, value-based, and competition-based pricing, the study highlights the multifaceted nature of pricing decisions in healthcare [3]. It underscores the importance of considering factors such as product value, market competition, and consumer demand in setting optimal prices [2]. Furthermore, the recommendation to integrate multiple pricing strategies underscores the complexity of pricing dynamics in healthcare and the need for a nuanced approach to pricing optimization.

The exploration of information technology (IT) in medical billing elucidates the potential benefits and challenges associated with its implementation [4]. The study underscores the transformative impact of IT on billing processes, including increased efficiency and accuracy. However, it also acknowledges the barriers hindering widespread adoption, such as cost constraints and training deficiencies. [4] This highlights the importance of addressing these challenges to fully leverage the benefits of IT in streamlining billing operations and improving financial management for healthcare providers.

The comprehensive review of billing and reimbursement processes in healthcare provides a holistic understanding of the financial dynamics within the industry. [3] By examining payment models like fee-for-service and value-based reimbursement, the study elucidates their implications for doctors' financial viability [5]. Moreover, it underscores the critical role of proper coding and documentation in ensuring accurate reimbursement, highlighting the intricate relationship between billing practices and financial sustainability in healthcare.

The literature review on pricing methods for healthcare services offers a nuanced examination of pricing dynamics within the industry. By analyzing different pricing approaches and their alignment with government regulations and reimbursement policies, the study emphasizes the need for transparency and fairness in pricing [4]. This resonates with broader discussions surrounding healthcare accessibility and affordability, underscoring the importance of equitable pricing practices to promote universal access to essential healthcare services.

In conclusion, the literature collectively underscores the multifaceted challenges and opportunities inherent in the healthcare industry's pricing, reimbursement, and billing processes. [5] From the complexities of pricing strategies to the transformative potential of information technology, the insights gleaned from these studies provide valuable guidance for navigating the evolving healthcare landscape and advancing toward more efficient and equitable healthcare delivery.

### 3.PROBLEMS IN THE CURRENT PRICE COMPARISON SYSTEM IN HEALTHCARE:

One pressing issue in healthcare product price comparison from the perspective of doctors is the lack of standardized and easily accessible information. Doctors often struggle to obtain accurate and up-to-date pricing data for various medical supplies, devices, and medications. This can impede their ability to make informed decisions regarding patient care and treatment options, as well as to advise patients on cost-effective solutions. Additionally, the complexity of healthcare pricing structures, including variations in insurance coverage and negotiated rates, further complicates the process.

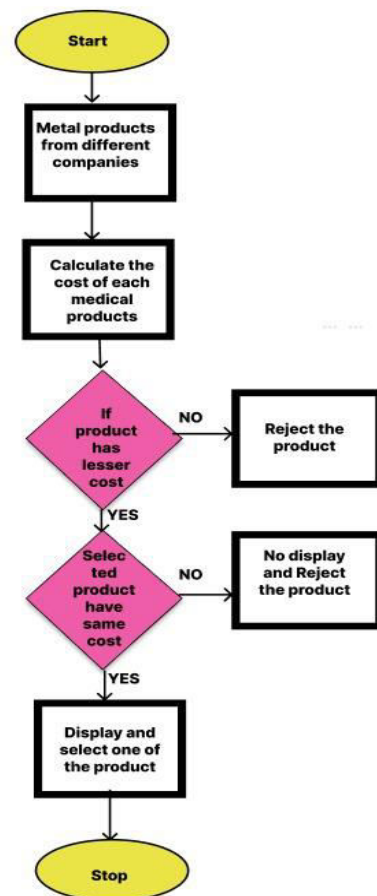


Figure 1:Flow Chart for HealthCare Management System

Without efficient tools or resources to compare prices across different vendors or pharmacies, doctors may inadvertently contribute to healthcare costs by selecting higher-priced products or services. Addressing this challenge requires collaborative efforts among healthcare providers, policymakers, and technology developers to develop transparent pricing mechanisms and user-friendly platforms for accessing price information, ultimately empowering doctors to make more cost-conscious decisions in patient care.

4.THE PROPOSED METHOD FOR PRICE COMPARISON AND BILLING SYSTEM IN HEALTHCARE:

The proposed system involves creating a centralized database encompassing all medical products and their respective costs offered by different healthcare providers. This database would enable doctors to access and compare prices when prescribing treatments, facilitating the selection of the most cost-effective options for patients. Additionally, it streamlines the billing process for doctors by providing readily available information to generate accurate bills, reducing the likelihood of errors and disputes.

By encouraging healthcare providers to offer competitive rates, the system aims to contribute to more affordable healthcare for patients while promoting transparency and efficiency in billing. Nonetheless, implementing this method may encounter challenges, such as obtaining cooperation from all healthcare providers to share pricing information and ensuring the accuracy and reliability of the database amid variations in patient needs and insurance coverage. Despite these potential obstacles, the system holds promise in enhancing the healthcare experience for both patients and doctors, underscoring the need for further research and development to realize its full potential

5.RESULT ANALYSIS:

Healthcare price comparison systems have emerged as essential tools in empowering consumers to make informed decisions regarding medical expenses. This analysis delves into the outcomes and impacts of such systems, focusing on key results and their implications. One of the primary outcomes of healthcare price comparison systems is enhanced transparency in medical pricing.

By providing access to detailed cost information across various healthcare providers, these systems have effectively lifted the veil on opaque pricing practices. Patients can now compare prices for medical procedures and services, enabling them to choose providers that offer the best value for their healthcare needs. A significant result of healthcare price comparison systems is the potential for cost savings for consumers.

Armed with pricing data, patients can actively seek out lower-cost alternatives for medical care without compromising on quality. This fosters competition among providers, leading to downward pressure on prices and overall affordability of healthcare services. Healthcare price comparison systems have empowered consumers to make more informed decisions regarding their healthcare choices. Patients can now evaluate not only the quality of care offered by different providers but also the associated costs.

In conclusion, healthcare price comparison systems have yielded positive outcomes by increasing transparency, promoting cost savings for consumers, and improving decision-making in healthcare. While challenges exist, the overall impact of these systems has been significant in empowering patients and reshaping the healthcare landscape toward greater affordability and accessibility

6.COMPARISON WITH OTHER BILLING SYSTEMS:

Healthcare Price Comparison System Offers transparency by providing detailed cost information for medical procedures across various providers, empowering consumers to make informed choices.

Increases cost awareness among consumers, allowing them to compare prices and choose providers offering the best value for their healthcare needs. Empowers consumers by giving them the tools to actively manage their healthcare expenses, leading to more personalized and financially sound decision-making.Facilitates cost savings for consumers by

Comp any Name	Produ ct Name	Prod uct Desc rption	Manu factur e Date	Expir e Date	Se lli ng Pri ce (I N R)	Q u a n t i t y	Disc ount (%)	Grand Total (INR)
ABC Pharm	Pai n Rel ief Gel	Fast-actin g gel for pain relief	2023 -05- 15	2025 -05- 15	₹7 50	2	5	₹1425
XYZ MED	Allerg y Tablet s	Non-drow sy aller gy relief tablet s	2022- 11-20	2024 -11- 20	₹1 10 0	3	10	₹2970
Pharm Health	Vitam in C Capsu les	Imm une supp ort caps ules	2023- 08-10	2025 -08- 10	₹6 00	1	0	₹600
Health Well	Antaci d Liquid	Fast relief from heart burn	2022- 09-30	2024 -09- 30	₹9 00	2	7	₹1674

Figure 2:Table contains dataset samples.

fostering competition among providers and driving down prices for medical procedures. Healthcare Price Comparison System: Streamlines the process of comparing healthcare costs, saving consumers time and effort in researching and selecting providers. Promotes greater accountability and efficiency within the healthcare industry by incentivizing providers to offer competitive pricing and high-quality care.

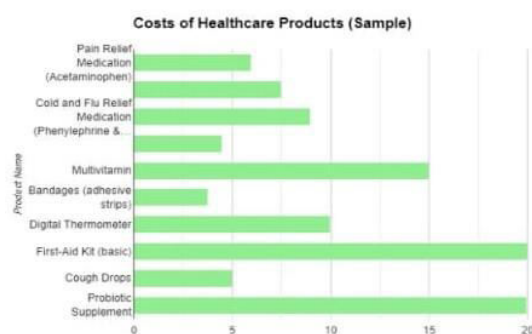


Figure 3: Comparison Of Price And Products

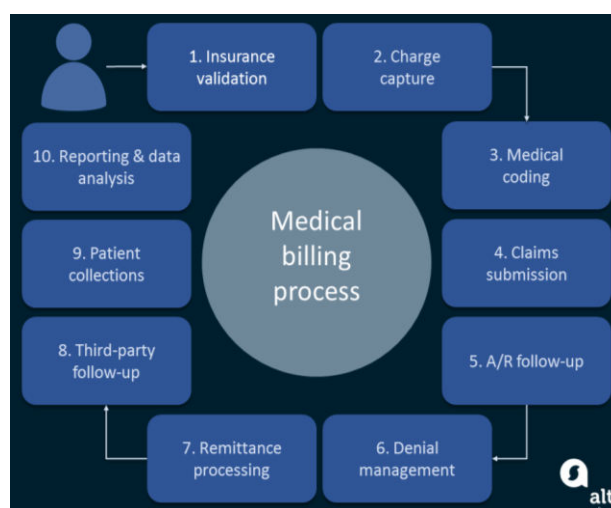


Figure 4 : Healthcare Billing Process

Overall, the healthcare price comparison system stands out for its transparency, cost awareness, consumer empowerment, and potential for cost savings compared to traditional billing systems. By revolutionizing the way healthcare costs are disclosed and evaluated, these systems have the potential to drive positive change and improve the affordability and accessibility of healthcare services for all.

## 7. CONCLUSION:

In the ever-evolving landscape of healthcare, the emergence of healthcare price comparison systems marks a pivotal shift towards transparency, consumer empowerment, and cost-conscious decision-making. By juxtaposing these innovative systems with traditional billing approaches, it becomes evident that they offer substantial advantages that can reshape the healthcare experience for both patients and providers.

Healthcare price comparison systems are beacons of transparency, illuminating the once-opaque realm of healthcare pricing. They empower consumers with invaluable tools to compare costs across providers, fostering a culture of informed decision-making. Through increased cost awareness and streamlined access to pricing information, patients can navigate the complex healthcare ecosystem with confidence, driving competition among providers and ultimately leading to cost savings. Moreover, these systems promote efficiency and accountability within the industry, catalyzing a shift towards value-based care and enhancing the overall healthcare experience.

In conclusion, the advent of healthcare price comparison systems heralds a new era in healthcare where transparency, consumer empowerment, and cost-effectiveness take center stage. By revolutionizing the way healthcare costs are disclosed and evaluated, these systems hold the potential to drive positive change and foster a healthcare ecosystem that prioritizes affordability, accessibility, and quality of care for all stakeholders. As we look towards the future, embracing and expanding the reach of healthcare price comparison systems will be crucial in realizing the vision of a more equitable and patient-centric healthcare system. By embracing healthcare price comparison systems, we embark on a journey towards a healthcare landscape where transparency, affordability, and quality of care are not just aspirations but fundamental principles guiding every interaction and decision.

## 8. REFERENCES:

1. Kaplan RS, Porter ME. How to solve the cost crisis in health care. *Harv Bus Rev* 2011;89:46-52, 54, 56-61 passim. [\[PubMed\]](#) [\[Google Scholar\]](#)
2. Porter ME. What is value in health care? *N Engl J Med* 2010;363:2477-81. 10.1056/NEJMp1011024 [\[PubMed\]](#) [\[CrossRef\]](#) [\[Google Scholar\]](#)
3. Etges APBdaS, Ruschel KB, Polanczyk CA, et al.. Advances in value-based healthcare by the application of time-driven activity-based costing for inpatient management: a systematic review. *Value Health* 2020;23:812-23. 10.1016/j.jval.2020.02.004 [\[PubMed\]](#) [\[CrossRef\]](#) [\[Google Scholar\]](#)
4. da Silva Etges APB, Cruz LN, Schlatter R, et al.. Time-Driven activity-based costing as a strategy to increase efficiency: an analyses of interventional coronary procedures. *Int J Health Plann Manage* 2022;37:189-201. 10.1002/hpm.3320 [\[PubMed\]](#) [\[CrossRef\]](#) [\[Google Scholar\]](#)
5. Martin JA, Mayhew CR, Morris AJ, et al.. Using time-driven activity-based costing as a key component of the value platform: a pilot analysis of colonoscopy, aortic valve replacement and carpal tunnel release procedures. *J Clin Med* 2018;10:314-20. 10.14740/jocmr3350w [\[PMC free article\]](#) [\[PubMed\]](#) [\[CrossRef\]](#) [\[Google Scholar\]](#)

6. Bodar YJL, Srinivasan AK, Shah AS, et al.. Time-Driven activity-based costing identifies opportunities for process efficiency and cost optimization for robot-assisted laparoscopic pyeloplasty. *J Pediatr Urol* 2020;16:460.e1–460.e10. 10.1016/j.jpuro.2020.05.146 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
7. French KE, Guzman AB, Rubio AC, et al.. Value based care and bundled payments: anesthesia care costs for outpatient oncology surgery using time-driven activity-based costing. *Healthc* 2016;4:173–80. 10.1016/j.hjdsi.2015.08.007 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
8. Isaacson D, Ahmad T, Metzler I, et al.. Defining the costs of reusable flexible Ureteroscope reprocessing using time-driven activity-based costing. *J Endourol* 2017;31:1026–31. 10.1089/end.2017.0463 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
9. Ilg AM, Laviana AA, Kamrava M, et al.. Time-Driven activity-based costing of low-dose-rate and high-dose-rate brachytherapy for low-risk prostate cancer. *Brachytherapy* 2016;15:760–7. 10.1016/j.brachy.2016.08.008 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
10. Dziemianowicz M, Burmeister J, Dominello M. Examining the financial impact of altered fractionation in breast cancer: an analysis using time-driven activity-based costing. *Pract Radiat Oncol* 2021;11:245–51. 10.1016/j.prro.2021.01.003 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
11. Cattel D, Eijkenaar F. Value-Based provider payment initiatives combining global payments with explicit quality incentives: a systematic review. *Med Care Res Rev* 2020;77:511–37. 10.1177/1077558719856775 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
12. Counte MA, Howard SW, Chang L, et al.. Global advances in value-based payment and their implications for global health management education, development, and practice. *Front Public Health* 2018;6:379. 10.3389/fpubh.2018.00379 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
13. Porter ME, Teisberg EO. Redefining competition in health care. *Harv Bus Rev* 2004;82:136:64–76. [[PubMed](#)] [[Google Scholar](#)]
14. Rathert C, Mittler JN, Lee YSH. Patient-Provider therapeutic connections to improve health care: conceptual development and systematic review of patient measures. *Health Care Manage Rev* 2022;47:317–29. 10.1097/HMR.0000000000000339 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
15. Zanotto BS, Etges APBdaS, Marcolino MAZ, et al.. Value-Based healthcare initiatives in practice: a systematic review. *J Healthc Manag* 2021;66:340–65. 10.1097/JHM-D-20-00283 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
16. Gibbons C, Porter I, Gonçalves-Bradley DC, et al.. Routine provision of feedback from patient-reported outcome measurements to healthcare providers and patients in clinical practice. *Cochrane Database Syst Rev* 2021;10:CD011589. 10.1002/14651858.CD011589.pub2 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
17. Jain N, Brock JL, Phillips FM, et al.. Chronic preoperative opioid use is a risk factor for increased complications, resource use, and costs after cervical fusion. *Spine* 2018;18:1989–98. 10.1016/j.spinee.2018.03.015 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
18. Rice-Townsend S, Barnes JN, Hall M, et al.. Variation in practice and resource utilization associated with the diagnosis and management of appendicitis at freestanding children's hospitals: implications for value-based comparative analysis. *Ann Surg* 2014;259:1228–34. 10.1097/SLA.0000000000000246 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
19. Fang CJ, Shaker JM, Drew JM, et al.. The cost of hip and knee revision arthroplasty by diagnosis-related groups: comparing time-driven activity-based costing and traditional accounting. *J Arthroplasty* 2021;36:e2673:2674–9. 10.1016/j.arth.2021.03.041 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
20. Fang CJ, Shaker JM, Hart P-A, et al.. Variation in the profit margin for different types of total joint arthroplasty. *J Bone Joint Surg Am* 2022;104:459–64. 10.2106/JBJS.21.00223 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
21. Wise K, Blaschke BL, Parikh HR, et al.. Variation of the inpatient cost of care in the treatment of isolated geriatric Intertrochanteric hip fractures. *Geriatr Orthop Surg Rehabil* 2020;11:215145932097653. 10.1177/2151459320976533 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
22. Keel G, Savage C, Rafiq M, et al.. Time-Driven activity-based costing in health care: a systematic review of the literature. *Health Policy* 2017;121:755–63. 10.1016/j.healthpol.2017.04.013 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
23. Hoenigl M, Lo M, Coyne CJ, et al.. 4th Generation HIV screening in the emergency department: net profit or loss for hospitals? *AIDS Care* 2021;1–5. 10.1080/09540121.2021.1995838 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
24. Zimmerman JL, Yahya-Zadeh M. *Accounting for decision making and control*. Seventh Edition. McGraw-Hill, 2011: 258–9. <http://digilib.umpalopo.ac.id:8080/jspui/handle/123456789/151> 10.2308/iace.2011.26.1.258 [[CrossRef](#)] [[Google Scholar](#)]
25. Bramer WM, Milic J, Mast F. Reviewing retrieved references for inclusion in systematic reviews using endnote. *J Med Libr Assoc* 2017;105:84–7. 10.5195/jmla.2017.111 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
26. Pérez J, Díaz J, Garcia-Martin J, et al.. Systematic literature reviews in software engineering—enhancement of the study selection process using Cohen's Kappa

- statistic. *J Syst Softw* 2020;168:110657. 10.1016/j.jss.2020.110657 [[CrossRef](#)] [[Google Scholar](#)]
27. Burnett Iii RA, Yang J, Courtney PM, et al.. Costs of unicompartmental compared with total knee arthroplasty : a matched cohort study over ten years. *Bone Joint J* 2021;103-B:23–31. 10.1302/0301-620X.103B6.BJJ-2020-2259.R1 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
28. Sun L-lu, Cao D-yan, Yang J-xin, et al.. Value-Based medicine analysis on loop electrosurgical excision procedure and CO2 laser vaporization for the treatment of cervical intraepithelial neoplasia 2. *J Obstet Gynaecol Res* 2012;38:1064–70. 10.1111/j.1447-0756.2011.01832.x [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
29. Cronin KJ, Mair SD, Hawk GS, et al.. Increased health care costs and opioid use in patients with anxiety and depression undergoing rotator cuff repair. *Arthroscopy* 2020;36:2655–60. 10.1016/j.arthro.2020.05.038 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
30. Robles AJ, Kornblith LZ, Hendrickson CM, et al.. Health care utilization and the cost of posttraumatic acute respiratory distress syndrome care. *J Trauma Acute Care Surg* 2018;85:148–54. 10.1097/TA.0000000000001926 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
31. Ahluwalia R, Cook J, Raheman F, et al.. Improving the efficiency of ankle fracture care through home care and day-surgery units: delivering safe surgery on a value-based healthcare model. *Surgeon.* 2021;19:e95-e102. 10.1016/j.surge.2020.08.004 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
32. McLaughlin N, Upadhyaya P, Buxey F, et al.. Value-Based neurosurgery: measuring and reducing the cost of microvascular decompression surgery. *J Neurosurg* 2014;121:700–8. 10.3171/2014.5.JNS131996 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
33. Wise KL, Parikh HR, Okelana B, et al.. Measurement of value in rotator cuff repair: patient-level value analysis for the 1-year episode of care. *J Shoulder Elbow Surg* 2022;31:72–80. 10.1016/j.jse.2021.07.004 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
34. McLaughlin N, Martin NA, Upadhyaya P, et al.. Assessing the cost of contemporary pituitary care. *Neurosurg Focus* 2014;37:E7. 10.3171/2014.8.FOCUS14445 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
35. Vanni F, Foglia E, Pennestri F, et al.. Introducing enhanced recovery after surgery in a high-volume orthopaedic Hospital: a health technology assessment. *BMC Health Serv Res* 2020;20:773. 10.1186/s12913-020-05634-3 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
36. Jacobs K, Dewilde T, Vandoren C, et al.. Variability in hospital costs of adult spinal deformity care. *Spine* 2020;45:1221–8. 10.1097/BRS.0000000000003497 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
37. Abbott MM, Meara JG. A microcosting approach for isolated, unilateral cleft lip care in the first year of life. *Plast Reconstr Surg* 2011;127:333–9. 10.1097/PRS.0b013e3181f95af3 [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
38. Thaker NG, Boyce-Fappiano D, Ning MS, et al.. Activity-Based costing of intensity-modulated proton versus photon therapy for oropharyngeal cancer. *Int J Part Ther* 2021;8:374–82. 10.14338/IJPT-20-00042.1 [[PMC free article](#)] [[PubMed](#)] [[CrossRef](#)] [[Google Scholar](#)]
39. Kurt P, Saban M, Cankaya F. Time-Driven activity-based costing in the ophthalmology department of state Hospital: a case study. *Fresenius Environ Bull* 2019;28:2754–70. [[Google Scholar](#)]