FIG. 1

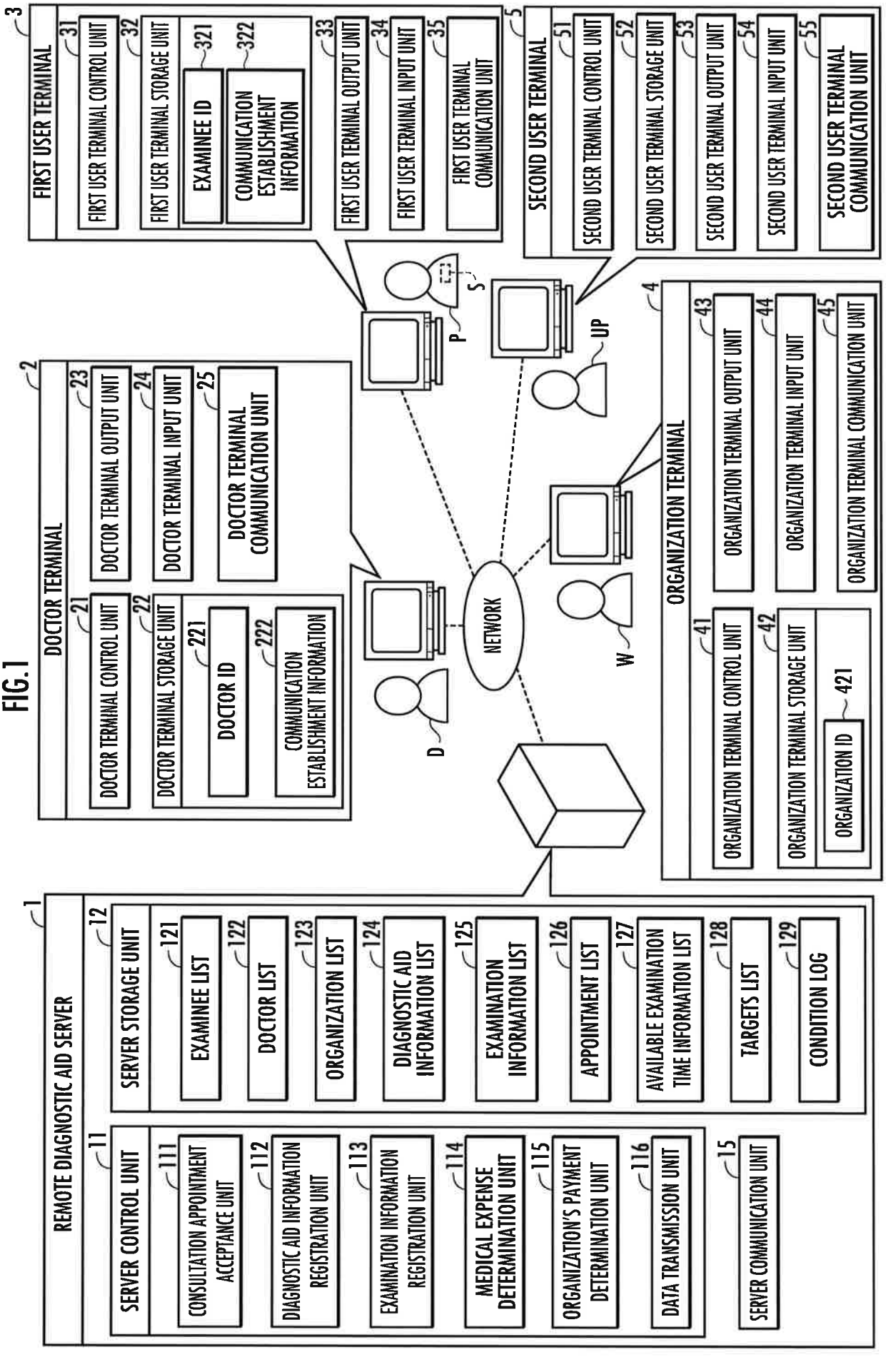

REMOTE DIAGNOSTIC AID SERVER
1
SERVER CONTROL UNIT
11
CONSULTATION APPOINTMENT ACCEPTANCE UNIT
111
DIAGNOSTIC AID INFORMATION REGISTRATION UNIT
112
EXAMINATION INFORMATION REGISTRATION UNIT
113
MEDICAL EXPENSE DETERMINATION UNIT
114
ORGANIZATION'S PAYMENT DETERMINATION UNIT
115
DATA TRANSMISSION UNIT
116
SERVER COMMUNICATION UNIT
15
SERVER STORAGE UNIT
12
EXAMINEE LIST
121
DOCTOR LIST
122
ORGANIZATION LIST
123
DIAGNOSTIC AID INFORMATION LIST
124
EXAMINATION INFORMATION LIST
125
APPOINTMENT LIST
126
AVAILABLE EXAMINATION TIME INFORMATION LIST
127
TARGETS LIST
128
CONDITION LOG
129
DOCTOR TERMINAL
2
DOCTOR TERMINAL CONTROL UNIT
21
DOCTOR TERMINAL STORAGE UNIT
22
DOCTOR ID
221
COMMUNICATION ESTABLISHMENT INFORMATION
222
DOCTOR TERMINAL OUTPUT UNIT
23
DOCTOR TERMINAL INPUT UNIT
24
DOCTOR TERMINAL COMMUNICATION UNIT
25
FIRST USER TERMINAL
3
FIRST USER TERMINAL CONTROL UNIT
31
FIRST USER TERMINAL STORAGE UNIT
32
EXAMINEE ID
321
COMMUNICATION ESTABLISHMENT INFORMATION
322
FIRST USER TERMINAL OUTPUT UNIT
33
FIRST USER TERMINAL INPUT UNIT
34
FIRST USER TERMINAL COMMUNICATION UNIT
35
ORGANIZATION TERMINAL
4
ORGANIZATION TERMINAL CONTROL UNIT
41
ORGANIZATION TERMINAL STORAGE UNIT
42
ORGANIZATION ID
421
ORGANIZATION TERMINAL OUTPUT UNIT
43
ORGANIZATION TERMINAL INPUT UNIT
44
ORGANIZATION TERMINAL COMMUNICATION UNIT
45
SECOND USER TERMINAL
5
SECOND USER TERMINAL CONTROL UNIT
51
SECOND USER TERMINAL STORAGE UNIT
52
SECOND USER TERMINAL OUTPUT UNIT
53
SECOND USER TERMINAL INPUT UNIT
54
SECOND USER TERMINAL COMMUNICATION UNIT
55
NETWORK
D
P
S
UP
W

FIG.2A

121

1211 EXAMINEE ID	1212 EXAMINEE NAME	1213 GENDER	1214 AGE	1215 DISEASE NAME	1216 MEMBER NUMBER	1217 CONTACT ADDRESS	1218 COPAYMENT RATE	1219 SETTLEMENT INFORMATION
1	BATSUO MARUTA	MALE	42	HYPERTENSION	1010001	maruta@aaa.bbb.ccc.co.jp	30%	0012-0123-1234-2345/03/18
2	KAKUKO SANKAKUYAMA	FEMALE	38	DIABETES	1020002	sankakuyama@ddd.bbb.ccc.co.jp	20%	1234-5678-9012-3456/04/19
3	MARUMI BATSUGAWA	FEMALE	46	HYPERPIESIA	1010003	batsugawa@ddd.bbb.ccc.co.jp	30%	9876-5432-1098-7654/10/20

FIG.2B

1221 DOCTOR ID	1222 DOCTOR NAME	1223 GENDER	1224 SPECIALTY	1225 CONTACT ADDRESS	1226 REMUNERATION DESTINATION INFORMATION
11	BATSUYUKI MARUISHI	MALE	HYPERTENSION, DIABETES, HYPERLIPIDEMIA	maruishi@mmddccrr.co.jp	xxxxxxx
12	KAKUTA SANKAKUGAWA	MALE	HYPERTENSION, HYPERLIPIDEMIA	sankakugawa@mmddccrr.co.jp	yyyyyyy
13	MARUKO BATSUYAMA	FEMALE	DIABETES, HYPERLIPIDEMIA	batsuyama@mmddccrr.co.jp	zzzzzzz

122

FIG.2C

1231 ORGANIZATION ID	1232 ORGANIZATION NAME	1233 SETTLEMENT INFORMATION	1234 SYSTEM UTILIZATION START DATE
101	COMPANY A	abcdefg	2015/12/15
102	COMPANY B	hijklmn	2015/12/20

123

FIG.2D

124

1241 EXAMINEE ID	1242 REGISTRATION DATE AND TIME	1243 BLOOD PRESSURE	1244 TEMPERATURE	1245 WEIGHT	1246 RECENT ILLNESSES	1247 MEDICINES TAKEN RECENTLY	1248 MESSAGE
3	2016/4/12 11:30	131～75	36.4	70.1	NONE	NONE	FEELING BETTER RECENTLY.
1	2016/4/19 15:00	150～75	36.1	65.4	COLD	COLD REMEDY, HYPERTENSION PILL	OCCASIONALLY HAVING PAIN IN THE HEART.

FIG.2E

125

1251 EXAMINEE ID	1252 CONSULTATION DATE AND TIME	1253 SYMPTOMS AND DIAGNOSIS	1254 PRESCRIPTIONS	1255 DOCTOR ID	1256 MEDICAL REMUNERATION POINTS	1257 DOCTOR'S COMMENT
3	2016/1/15 14:00	HYPERLIPIDEMIA, NO MEDICATION	NONE	12	150	PLEASE CONTINUE THE ABSTINENCE.
1	2016/2/22 13:00	HYPERTENSION, KEEP THE SAME DOSAGE	MEDICINE 1: 3 CAPSULES PER MEAL FOR 30 DAYS	11	100	PLEASE SLIGHTLY REDUCE ALCOHOL AND SALT.
2	2016/2/23 19:00	DIABETES, REDUCE THE DOSAGE	MEDICINE 2: 3 CAPSULES PER MEAL FOR 30 DAYS	13	200	PLEASE MAKE A HABIT OF EXERCISE.
1	2016/3/22 18:00	DIABETES, REDUCE THE DOSAGE	MEDICINE 1: 3 CAPSULES PER MEAL FOR 30 DAYS	11	100	PLEASE SLIGHTLY REDUCE ALCOHOL AND SALT.
3	2016/4/12 11:30	REMISSION	NONE	12	150	REMISSION HAS BEEN ACHIEVED. TREATMENT IS FINISHED. PLEASE CONTINUE THE ABSTINENCE, AND GET REGULAR MEDICAL CHECK-UPS.
1	2016/4/19 15:00	HYPERTENSION, REDUCE THE DOSAGE	MEDICINE 1: 2 CAPSULES PER MEAL FOR 30 DAYS	11	100	PLEASE CONTINUE TO AVOID ALCOHOL AND SALT. PLEASE ACTIVELY FORM AN EXERCISE HABIT.

1258

FIG.2F

126

1261 EXAMINEE ID	1262 DOCTOR ID	1263 APPOINTMENT TIME
3	12	2016/4/12 12:00:00～12:15:00
1	11	2016/4/19 15:00:00～15:15:00
2	13	2016/4/18 18:00:00～18:10:00

1264

FIG.2G

127

1271 DOCTOR ID	1272 AVAILABLE CONSULTATION TIME
13	2016/4/12 9:00～18:00
11	2016/4/19 15:00～18:00,19:00～21:00
12	2016/4/18 18:00～22:00
13	2016/4/18 19:00～21:00

FIG.2H

128

1281 TARGET ID	1282 EXAMINEE ID	1283 TARGET	1284 REGISTRATION DATE AND TIME	1285 IMPORTANCE LEVEL	1286 ADHERENCE/ ACHIEVEMENT LEVEL
1001	1	HAVE AT LEAST 3 ALCOHOL-FREE DAYS PER WEEK	2016/4/12 12:00:00	100	100%
1002	1	DO EXERCISE AT LEAST 3 TIMES A WEEK, CONTINUE EXERCISE FOR 1 HOUR EACH TIME	2016/4/12 12:00:00	120	150%
1003	1	WEAR THE WEARABLE SENSOR EVERYDAY	2016/4/12 12:00:00	80	50%
1004	1	BLOOD PRESSURE: 160/100 → 150/90	2016/4/12 12:00:00	150	50%
1005	1	WEIGHT: 72 →70	2016/4/12 12:00:00	120	-50%
1006	2	. . .	. . .	. . .	. . .

FIG.2I

129

1291 TARGET ID	1292 USER INPUT INFORMATION	1293 SENSING INFORMATION	1294 DATE AND TIME
1001	HAD 3 ALCOHOL-FREE DAYS		2016/4/19 15:00:00
1002	DID EXERCISE 5 TIMES, FOR 1 HOUR EACH TIME		2016/4/19 15:00:00
1003		WORE EVERYDAY	2016/4/19 15:00:00
1004		BLOOD PRESSURE: 155/95	2016/4/19 15:00:00
1005	WEIGHT: 73		2016/4/19 15:00:00
1006	. . .	. . .	. . .

FIG.3

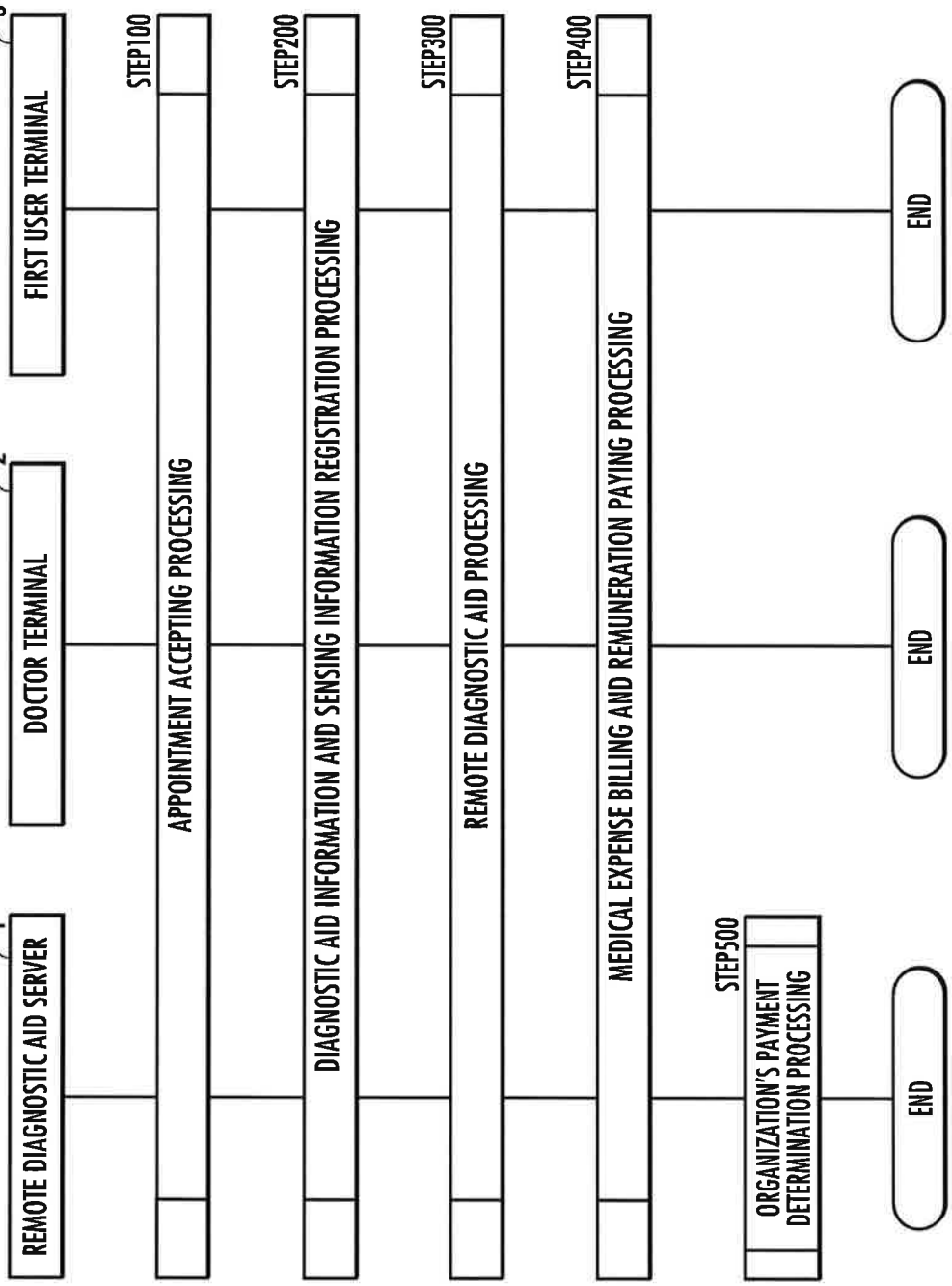

1
REMOTE DIAGNOSTIC AID SERVER
2
DOCTOR TERMINAL
3
FIRST USER TERMINAL
STEP100
APPOINTMENT ACCEPTING PROCESSING
STEP200
DIAGNOSTIC AID INFORMATION AND SENSING INFORMATION REGISTRATION PROCESSING
STEP300
REMOTE DIAGNOSTIC AID PROCESSING
STEP400
MEDICAL EXPENSE BILLING AND REMUNERATION PAYING PROCESSING
STEP500
ORGANIZATION'S PAYMENT DETERMINATION PROCESSING
END
END
END

FIG.4

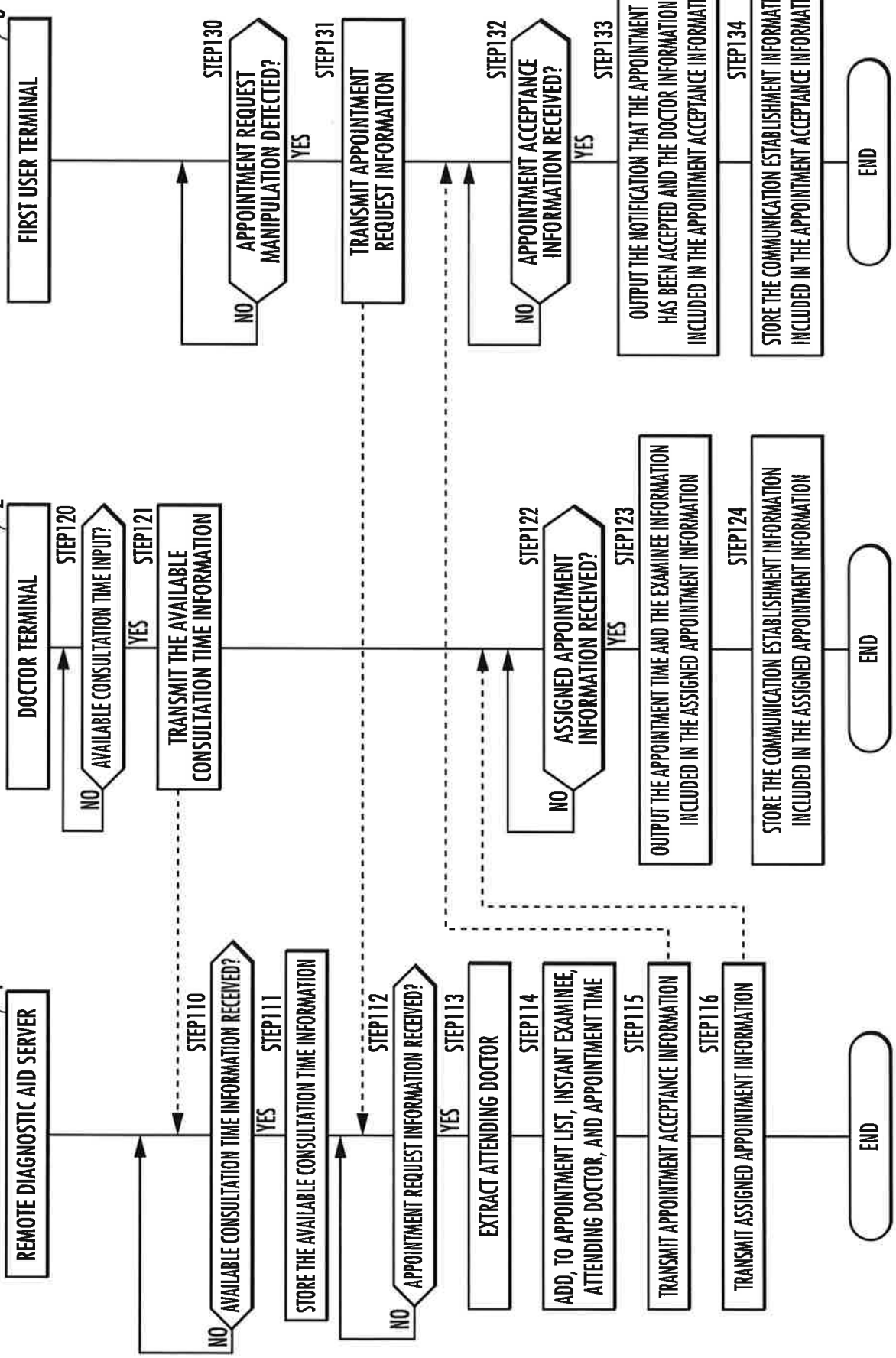
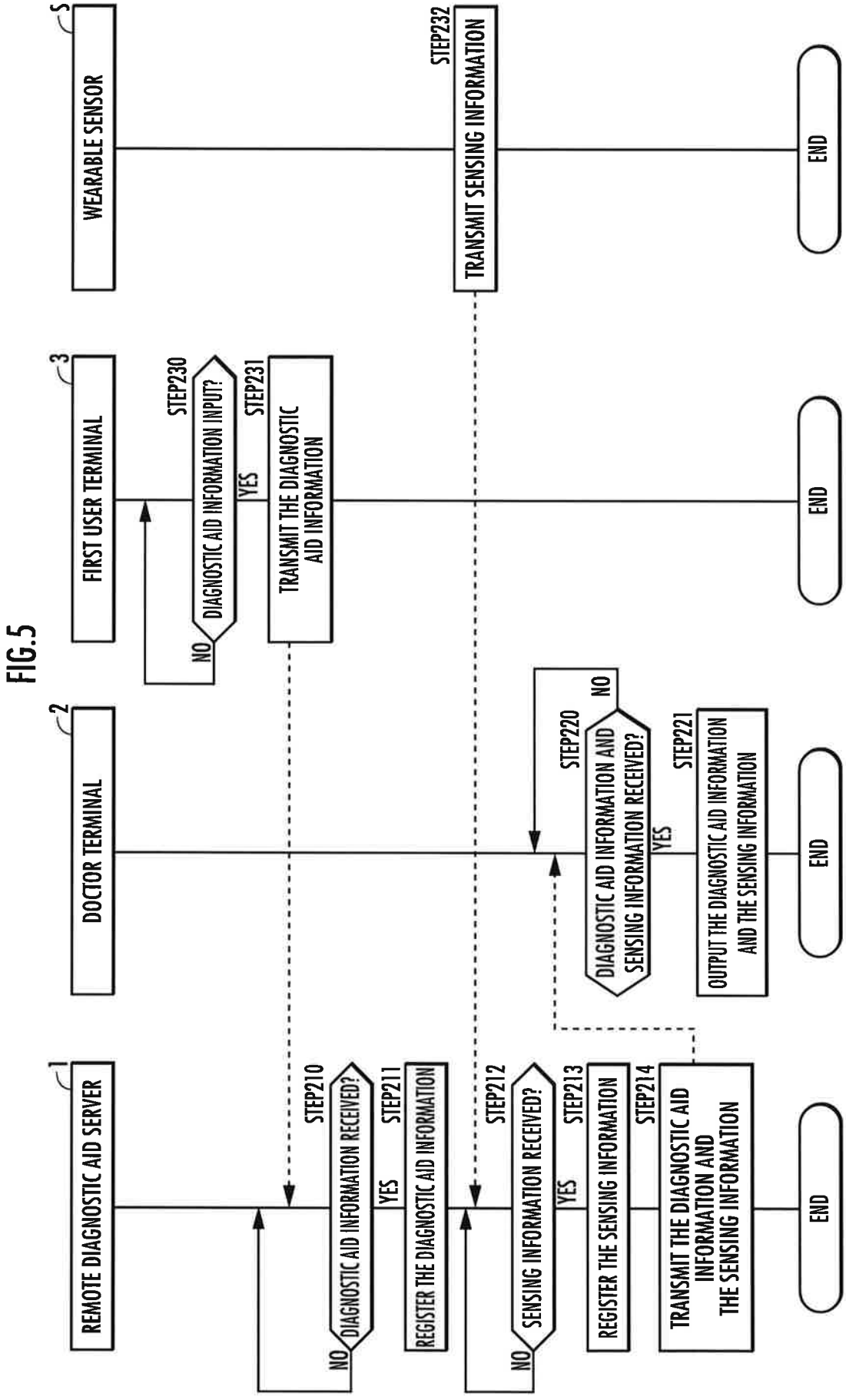

1
REMOTE DIAGNOSTIC AID SERVER
STEP110
AVAILABLE CONSULTATION TIME INFORMATION RECEIVED?
NO
YES
STEP111
STORE THE AVAILABLE CONSULTATION TIME INFORMATION
STEP112
APPOINTMENT REQUEST INFORMATION RECEIVED?
NO
YES
STEP113
EXTRACT ATTENDING DOCTOR
STEP114
ADD, TO APPOINTMENT LIST, INSTANT EXAMINEE, ATTENDING DOCTOR, AND APPOINTMENT TIME
STEP115
TRANSMIT APPOINTMENT ACCEPTANCE INFORMATION
STEP116
TRANSMIT ASSIGNED APPOINTMENT INFORMATION
END
2
DOCTOR TERMINAL
STEP120
AVAILABLE CONSULTATION TIME INPUT?
NO
YES
STEP121
TRANSMIT THE AVAILABLE CONSULTATION TIME INFORMATION
STEP122
ASSIGNED APPOINTMENT INFORMATION RECEIVED?
NO
YES
STEP123
OUTPUT THE APPOINTMENT TIME AND THE EXAMINEE INFORMATION INCLUDED IN THE ASSIGNED APPOINTMENT INFORMATION
STEP124
STORE THE COMMUNICATION ESTABLISHMENT INFORMATION INCLUDED IN THE ASSIGNED APPOINTMENT INFORMATION
END
3
FIRST USER TERMINAL
STEP130
APPOINTMENT REQUEST MANIPULATION DETECTED?
NO
YES
STEP131
TRANSMIT APPOINTMENT REQUEST INFORMATION
STEP132
APPOINTMENT ACCEPTANCE INFORMATION RECEIVED?
NO
YES
STEP133
OUTPUT THE NOTIFICATION THAT THE APPOINTMENT HAS BEEN ACCEPTED AND THE DOCTOR INFORMATION INCLUDED IN THE APPOINTMENT ACCEPTANCE INFORMATION
STEP134
STORE THE COMMUNICATION ESTABLISHMENT INFORMATION INCLUDED IN THE APPOINTMENT ACCEPTANCE INFORMATION
END

FIG.5


1
REMOTE DIAGNOSTIC AID SERVER
STEP210
DIAGNOSTIC AID INFORMATION RECEIVED?
NO
YES
STEP211
REGISTER THE DIAGNOSTIC AID INFORMATION
STEP212
SENSING INFORMATION RECEIVED?
NO
YES
STEP213
REGISTER THE SENSING INFORMATION
STEP214
TRANSMIT THE DIAGNOSTIC AID INFORMATION AND THE SENSING INFORMATION
END
2
DOCTOR TERMINAL
STEP220
DIAGNOSTIC AID INFORMATION AND SENSING INFORMATION RECEIVED?
NO
YES
STEP221
OUTPUT THE DIAGNOSTIC AID INFORMATION AND THE SENSING INFORMATION
END
3
FIRST USER TERMINAL
STEP230
DIAGNOSTIC AID INFORMATION INPUT?
NO
YES
STEP231
TRANSMIT THE DIAGNOSTIC AID INFORMATION
END
5
WEARABLE SENSOR
STEP232
TRANSMIT SENSING INFORMATION
END

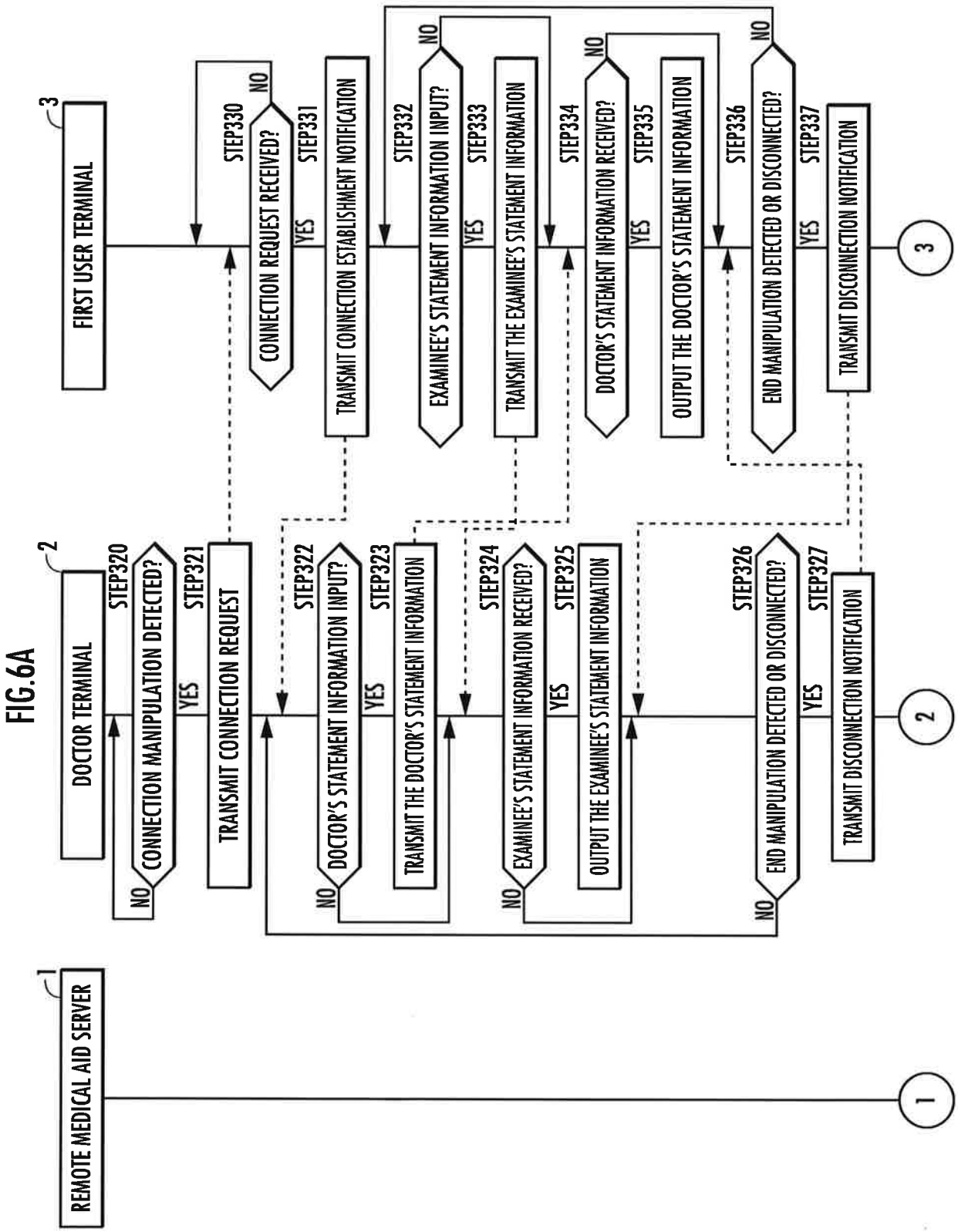

REMOTE MEDICAL AID SERVER
1
DOCTOR TERMINAL
2
FIRST USER TERMINAL
3
STEP320
CONNECTION MANIPULATION DETECTED?
NO
YES
STEP321
TRANSMIT CONNECTION REQUEST
STEP322
DOCTOR'S STATEMENT INFORMATION INPUT?
NO
YES
STEP323
TRANSMIT THE DOCTOR'S STATEMENT INFORMATION
STEP324
EXAMINEE'S STATEMENT INFORMATION RECEIVED?
NO
YES
STEP325
OUTPUT THE EXAMINEE'S STATEMENT INFORMATION
STEP326
END MANIPULATION DETECTED OR DISCONNECTED?
NO
YES
STEP327
TRANSMIT DISCONNECTION NOTIFICATION
STEP330
CONNECTION REQUEST RECEIVED?
NO
YES
STEP331
TRANSMIT CONNECTION ESTABLISHMENT NOTIFICATION
STEP332
EXAMINEE'S STATEMENT INFORMATION INPUT?
NO
YES
STEP333
TRANSMIT THE EXAMINEE'S STATEMENT INFORMATION
STEP334
DOCTOR'S STATEMENT INFORMATION RECEIVED?
NO
YES
STEP335
OUTPUT THE DOCTOR'S STATEMENT INFORMATION
STEP336
END MANIPULATION DETECTED OR DISCONNECTED?
NO
YES
STEP337
TRANSMIT DISCONNECTION NOTIFICATION
1
2
3

FIG.6A

FIG.6B

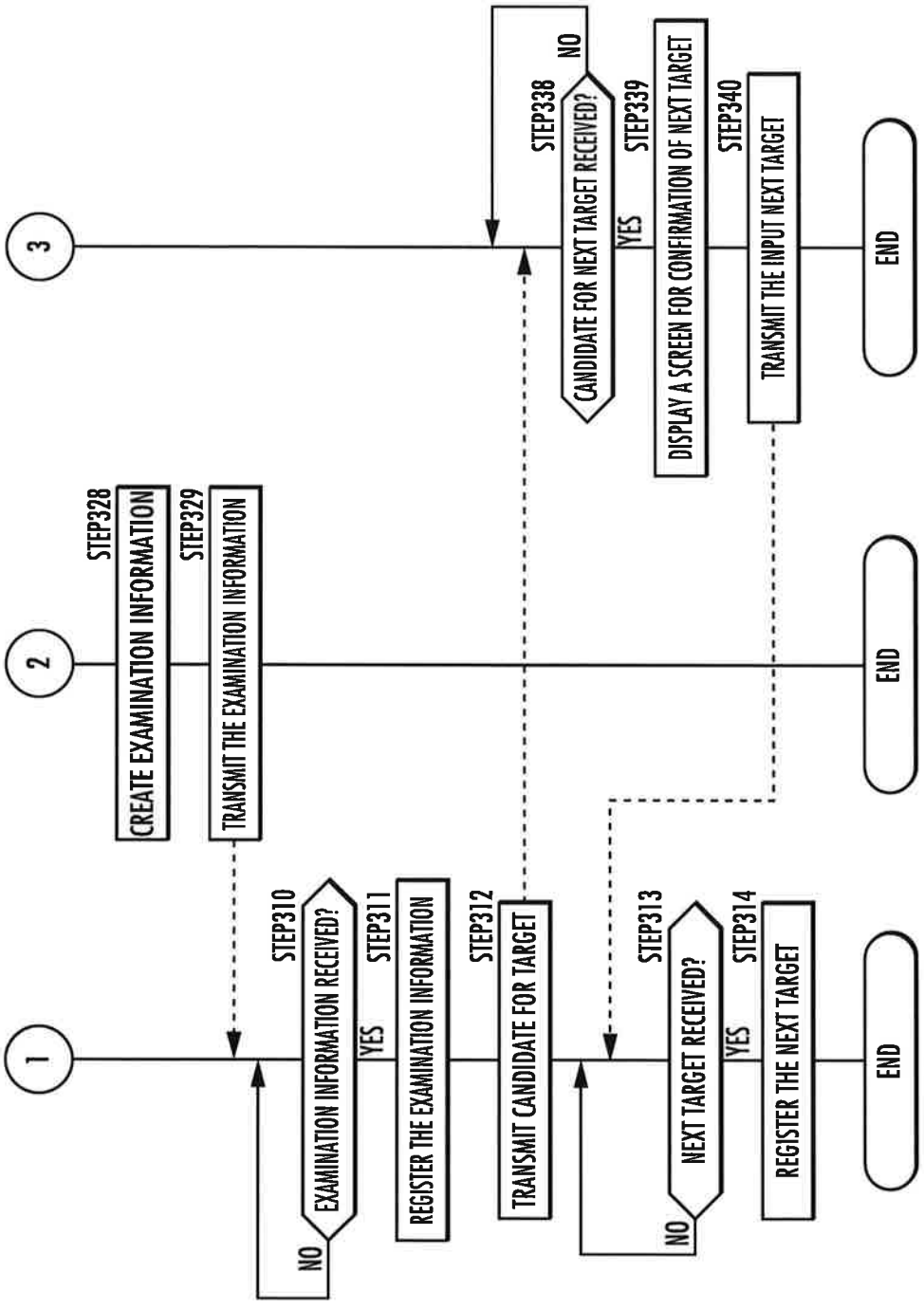

1
2
3
STEP328
CREATE EXAMINATION INFORMATION
STEP329
TRANSMIT THE EXAMINATION INFORMATION
END
STEP310
EXAMINATION INFORMATION RECEIVED?
NO
YES
STEP311
REGISTER THE EXAMINATION INFORMATION
STEP312
TRANSMIT CANDIDATE FOR TARGET
STEP313
NEXT TARGET RECEIVED?
NO
YES
STEP314
REGISTER THE NEXT TARGET
END
STEP338
CANDIDATE FOR NEXT TARGET RECEIVED?
NO
YES
STEP339
DISPLAY A SCREEN FOR CONFIRMATION OF NEXT TARGET
STEP340
TRANSMIT THE INPUT NEXT TARGET
END

FIG.7A

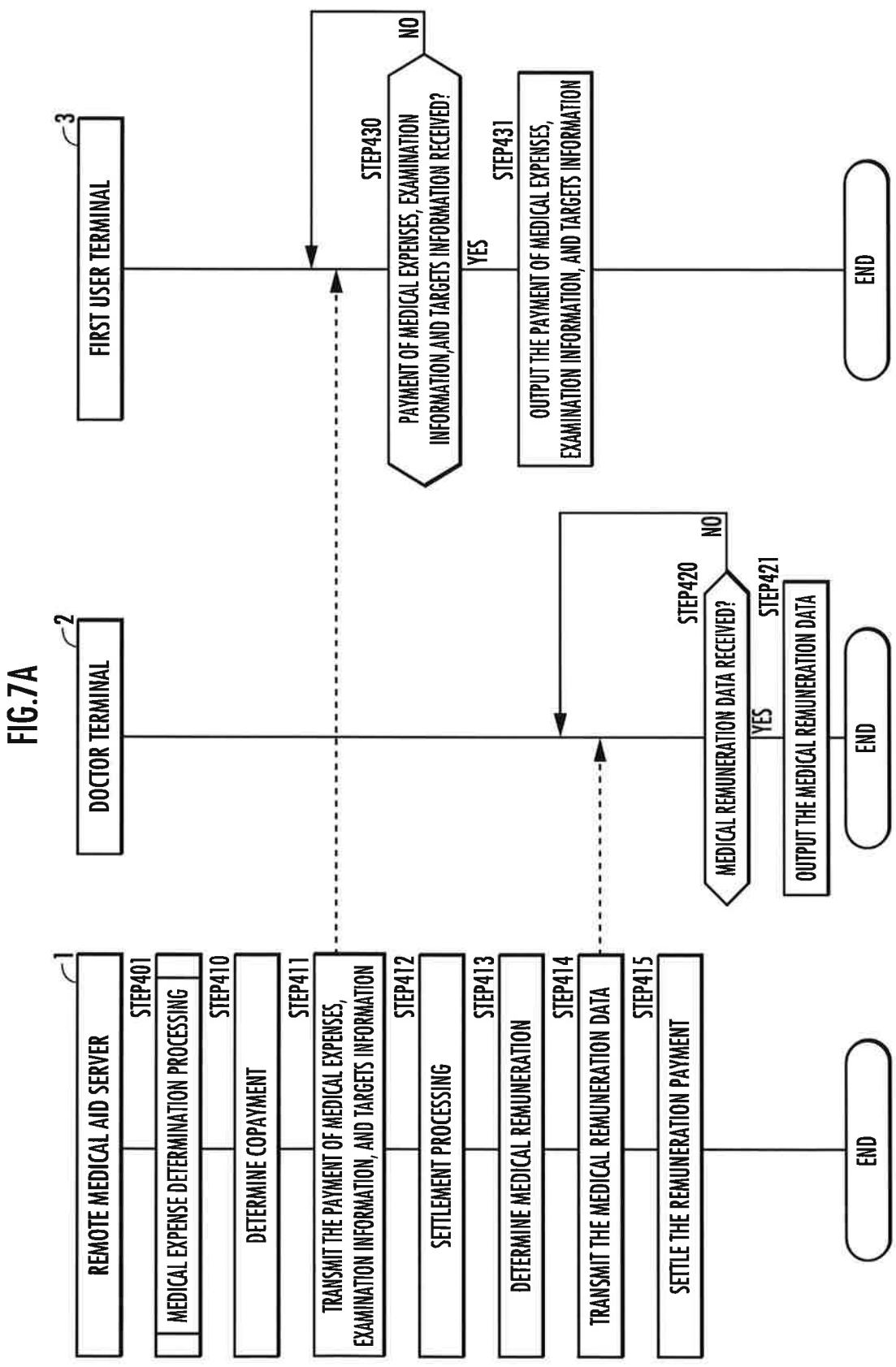

1
REMOTE MEDICAL AID SERVER
STEP401
MEDICAL EXPENSE DETERMINATION PROCESSING
STEP410
DETERMINE COPAYMENT
STEP411
TRANSMIT THE PAYMENT OF MEDICAL EXPENSES, EXAMINATION INFORMATION, AND TARGETS INFORMATION
STEP412
SETTLEMENT PROCESSING
STEP413
DETERMINE MEDICAL REMUNERATION
STEP414
TRANSMIT THE MEDICAL REMUNERATION DATA
STEP415
SETTLE THE REMUNERATION PAYMENT
END
2
DOCTOR TERMINAL
STEP420
MEDICAL REMUNERATION DATA RECEIVED?
NO
YES
STEP421
OUTPUT THE MEDICAL REMUNERATION DATA
END
3
FIRST USER TERMINAL
STEP430
PAYMENT OF MEDICAL EXPENSES, EXAMINATION INFORMATION,AND TARGETS INFORMATION RECEIVED?
NO
YES
STEP431
OUTPUT THE PAYMENT OF MEDICAL EXPENSES, EXAMINATION INFORMATION, AND TARGETS INFORMATION
END

FIG.7B

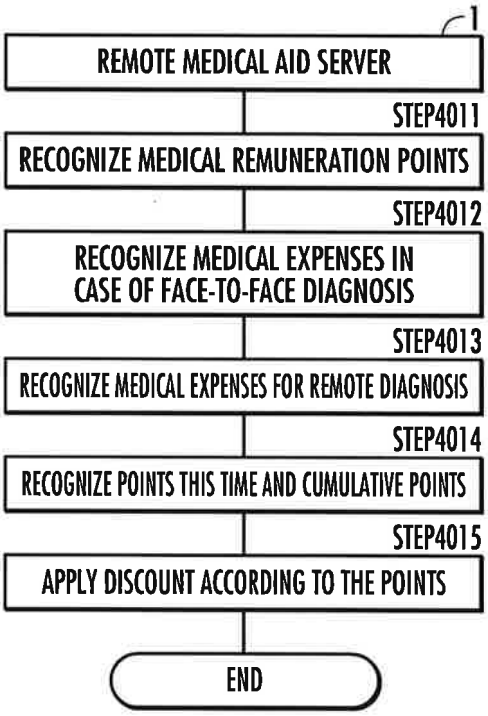

1
REMOTE MEDICAL AID SERVER
STEP4011
RECOGNIZE MEDICAL REMUNERATION POINTS
STEP4012
RECOGNIZE MEDICAL EXPENSES IN CASE OF FACE-TO-FACE DIAGNOSIS
STEP4013
RECOGNIZE MEDICAL EXPENSES FOR REMOTE DIAGNOSIS
STEP4014
RECOGNIZE POINTS THIS TIME AND CUMULATIVE POINTS
STEP4015
APPLY DISCOUNT ACCORDING TO THE POINTS
END

FIG.8

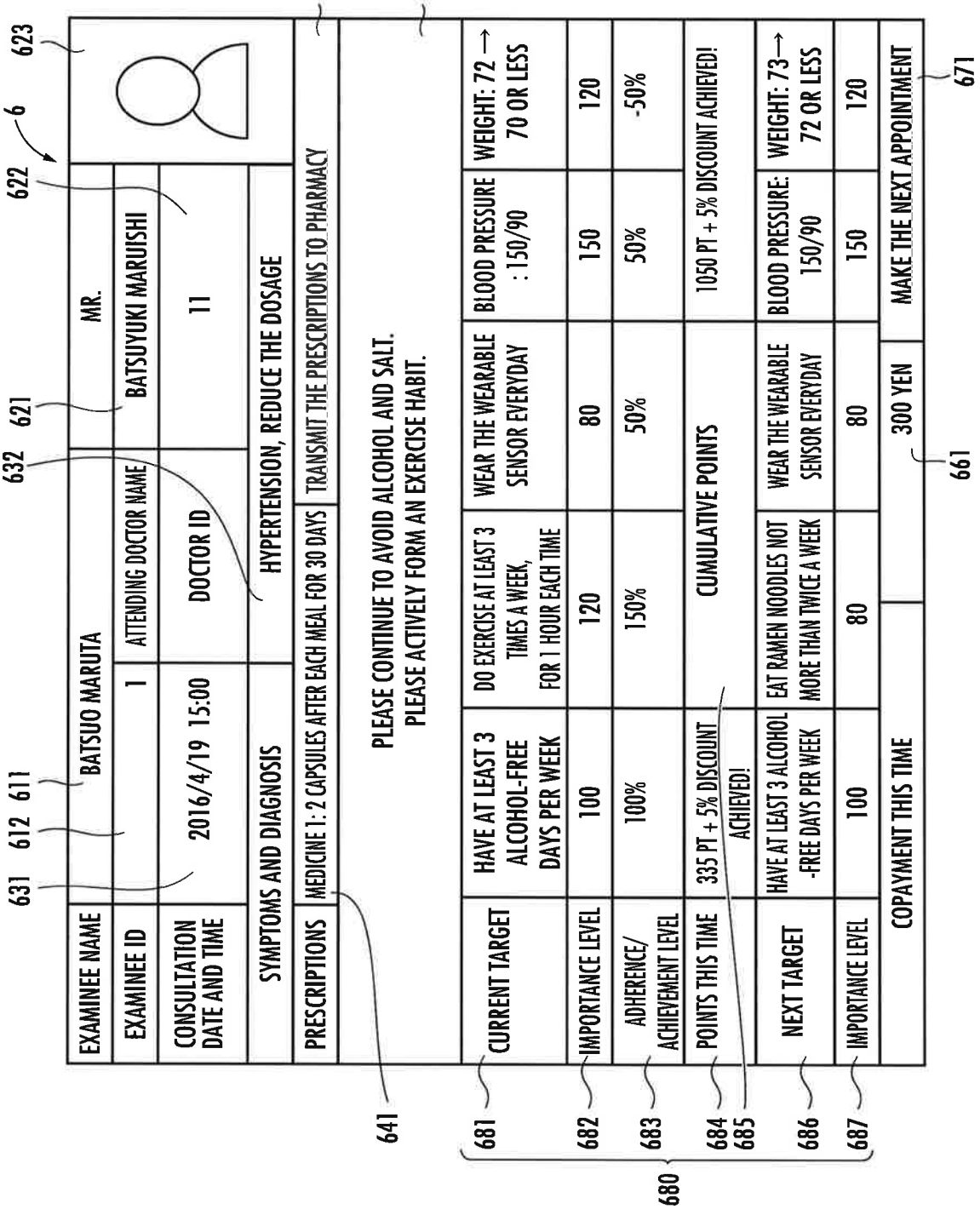

EXAMINEE NAME
BATSUO MARUTA
MR.
EXAMINEE ID
1
ATTENDING DOCTOR NAME
BATSUYUKI MARUISHI
CONSULTATION DATE AND TIME
2016/4/19 15:00
DOCTOR ID
11
SYMPTOMS AND DIAGNOSIS
HYPERTENSION, REDUCE THE DOSAGE
PRESCRIPTIONS
MEDICINE 1: 2 CAPSULES AFTER EACH MEAL FOR 30 DAYS
TRANSMIT THE PRESCRIPTIONS TO PHARMACY
PLEASE CONTINUE TO AVOID ALCOHOL AND SALT.
PLEASE ACTIVELY FORM AN EXERCISE HABIT.
CURRENT TARGET
HAVE AT LEAST 3 ALCOHOL-FREE DAYS PER WEEK
DO EXERCISE AT LEAST 3 TIMES A WEEK, FOR 1 HOUR EACH TIME
WEAR THE WEARABLE SENSOR EVERYDAY
BLOOD PRESSURE : 150/90
WEIGHT: 72 → 70 OR LESS
IMPORTANCE LEVEL
100
120
80
150
120
ADHERENCE/ ACHIEVEMENT LEVEL
100%
150%
50%
50%
-50%
POINTS THIS TIME
335 PT + 5% DISCOUNT ACHIEVED!
CUMULATIVE POINTS
1050 PT + 5% DISCOUNT ACHIEVED!
NEXT TARGET
HAVE AT LEAST 3 ALCOHOL -FREE DAYS PER WEEK
EAT RAMEN NOODLES NOT MORE THAN TWICE A WEEK
WEAR THE WEARABLE SENSOR EVERYDAY
BLOOD PRESSURE: 150/90
WEIGHT: 73→ 72 OR LESS
IMPORTANCE LEVEL
100
80
80
150
120
COPAYMENT THIS TIME
300 YEN
MAKE THE NEXT APPOINTMENT
631
611
612
632
621
622
6
623
641
642
651
661
671
680
681
682
683
684
685
686
687

FIG.9

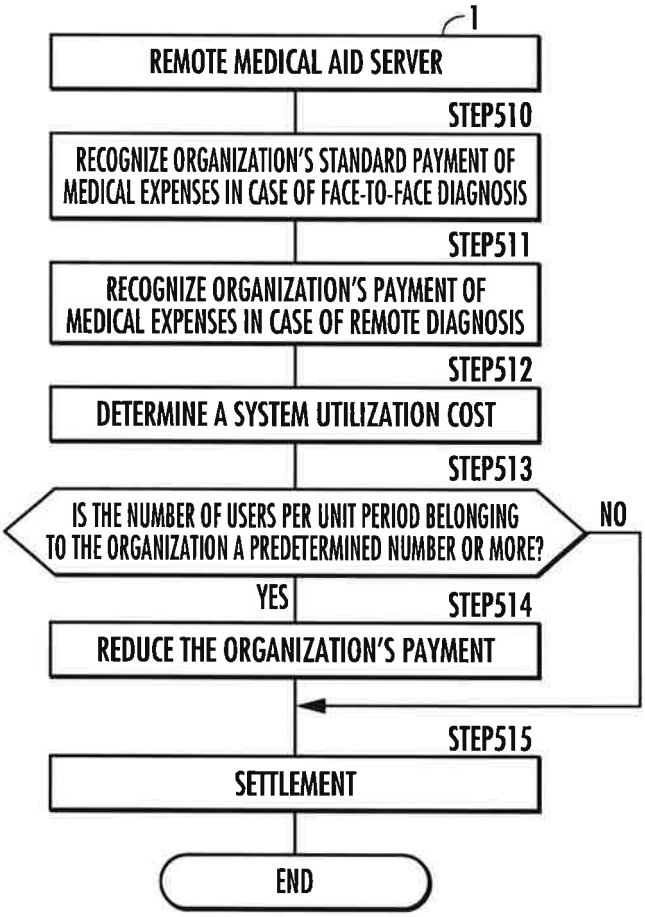

1
REMOTE MEDICAL AID SERVER
STEP510
RECOGNIZE ORGANIZATION'S STANDARD PAYMENT OF MEDICAL EXPENSES IN CASE OF FACE-TO-FACE DIAGNOSIS
STEP511
RECOGNIZE ORGANIZATION'S PAYMENT OF MEDICAL EXPENSES IN CASE OF REMOTE DIAGNOSIS
STEP512
DETERMINE A SYSTEM UTILIZATION COST
STEP513
IS THE NUMBER OF USERS PER UNIT PERIOD BELONGING TO THE ORGANIZATION A PREDETERMINED NUMBER OR MORE?
NO
YES
STEP514
REDUCE THE ORGANIZATION'S PAYMENT
STEP515
SETTLEMENT
END

FIG.10

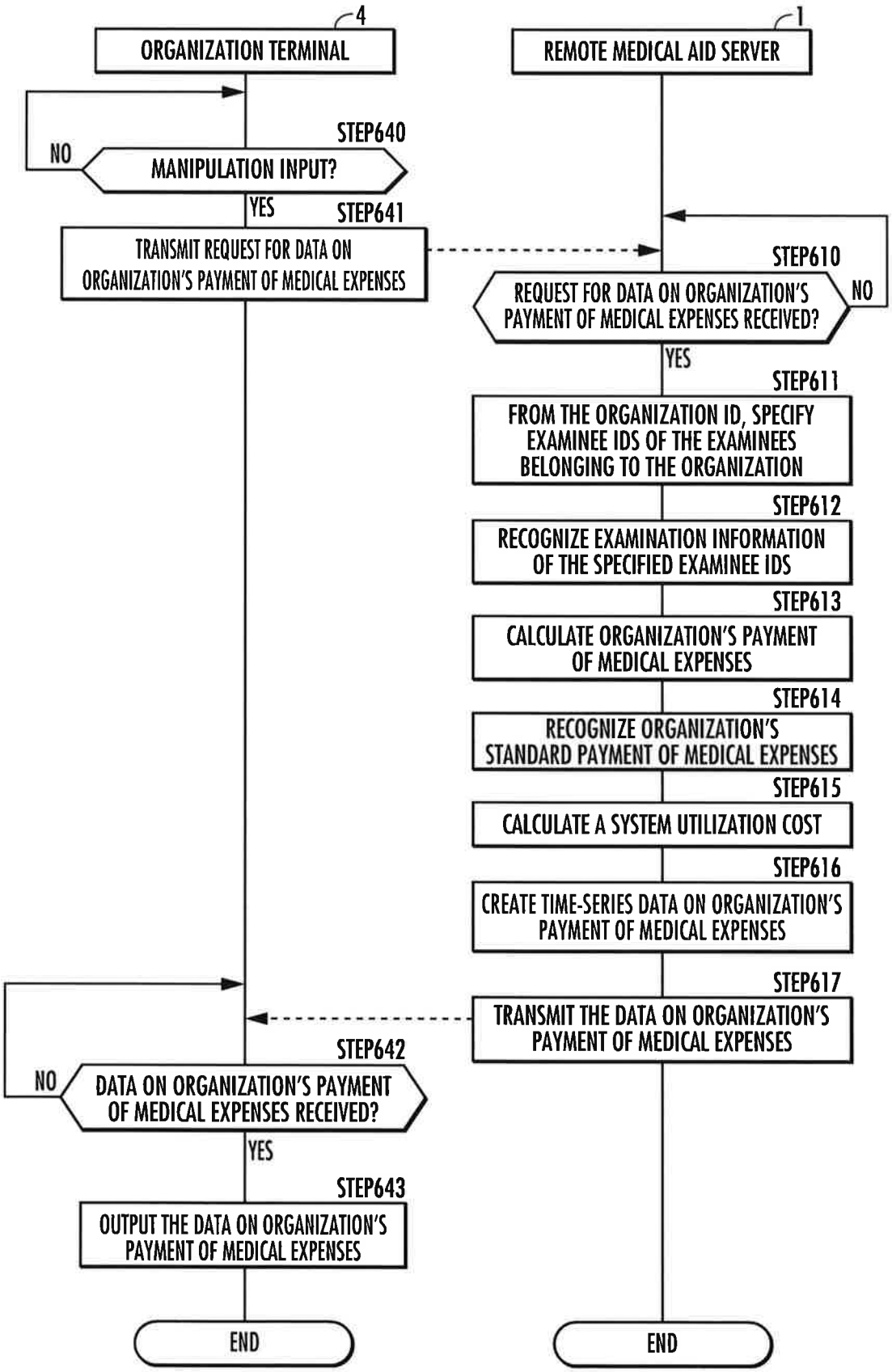

4
ORGANIZATION TERMINAL
1
REMOTE MEDICAL AID SERVER
STEP640
NO
MANIPULATION INPUT?
YES
STEP641
TRANSMIT REQUEST FOR DATA ON ORGANIZATION'S PAYMENT OF MEDICAL EXPENSES
STEP610
REQUEST FOR DATA ON ORGANIZATION'S PAYMENT OF MEDICAL EXPENSES RECEIVED?
NO
YES
STEP611
FROM THE ORGANIZATION ID, SPECIFY EXAMINEE IDS OF THE EXAMINEES BELONGING TO THE ORGANIZATION
STEP612
RECOGNIZE EXAMINATION INFORMATION OF THE SPECIFIED EXAMINEE IDS
STEP613
CALCULATE ORGANIZATION'S PAYMENT OF MEDICAL EXPENSES
STEP614
RECOGNIZE ORGANIZATION'S STANDARD PAYMENT OF MEDICAL EXPENSES
STEP615
CALCULATE A SYSTEM UTILIZATION COST
STEP616
CREATE TIME-SERIES DATA ON ORGANIZATION'S PAYMENT OF MEDICAL EXPENSES
STEP617
TRANSMIT THE DATA ON ORGANIZATION'S PAYMENT OF MEDICAL EXPENSES
STEP642
NO
DATA ON ORGANIZATION'S PAYMENT OF MEDICAL EXPENSES RECEIVED?
YES
STEP643
OUTPUT THE DATA ON ORGANIZATION'S PAYMENT OF MEDICAL EXPENSES
END
END

FIG.11A

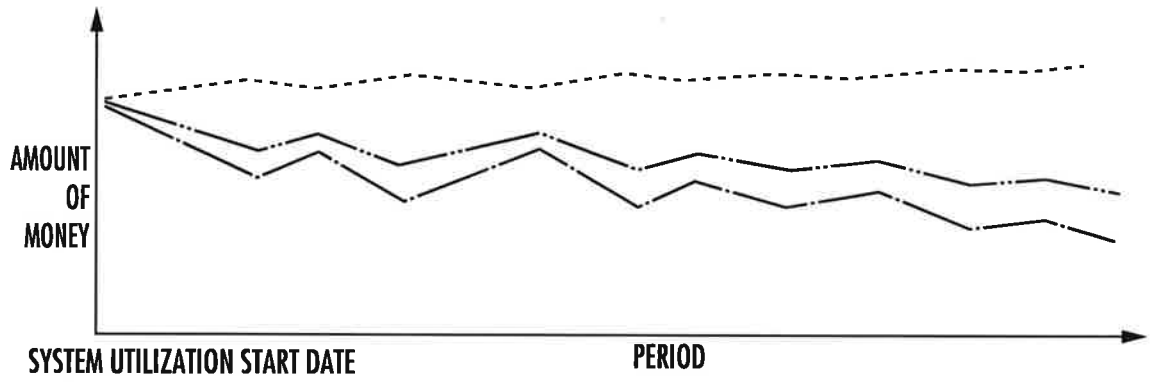


FIG.11B

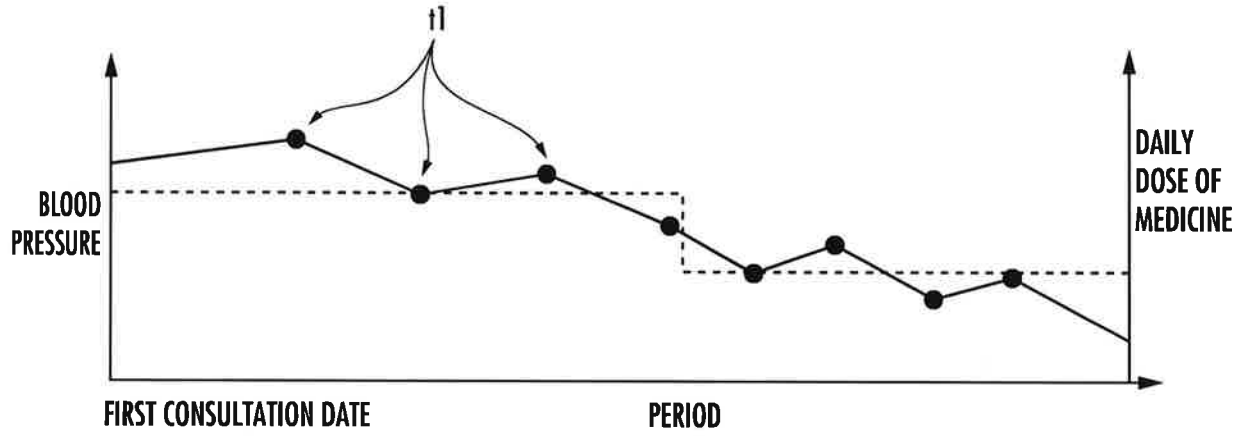


FIG.11C

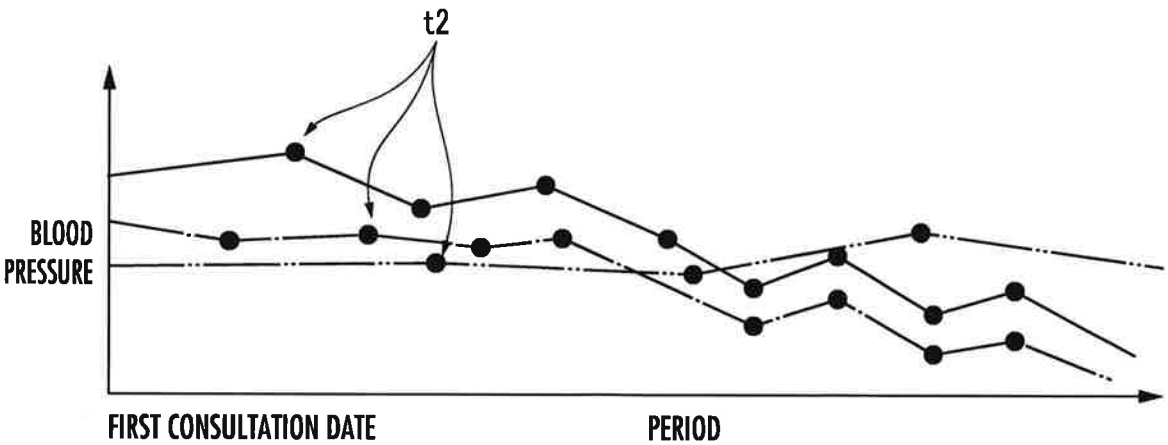


FIG.12

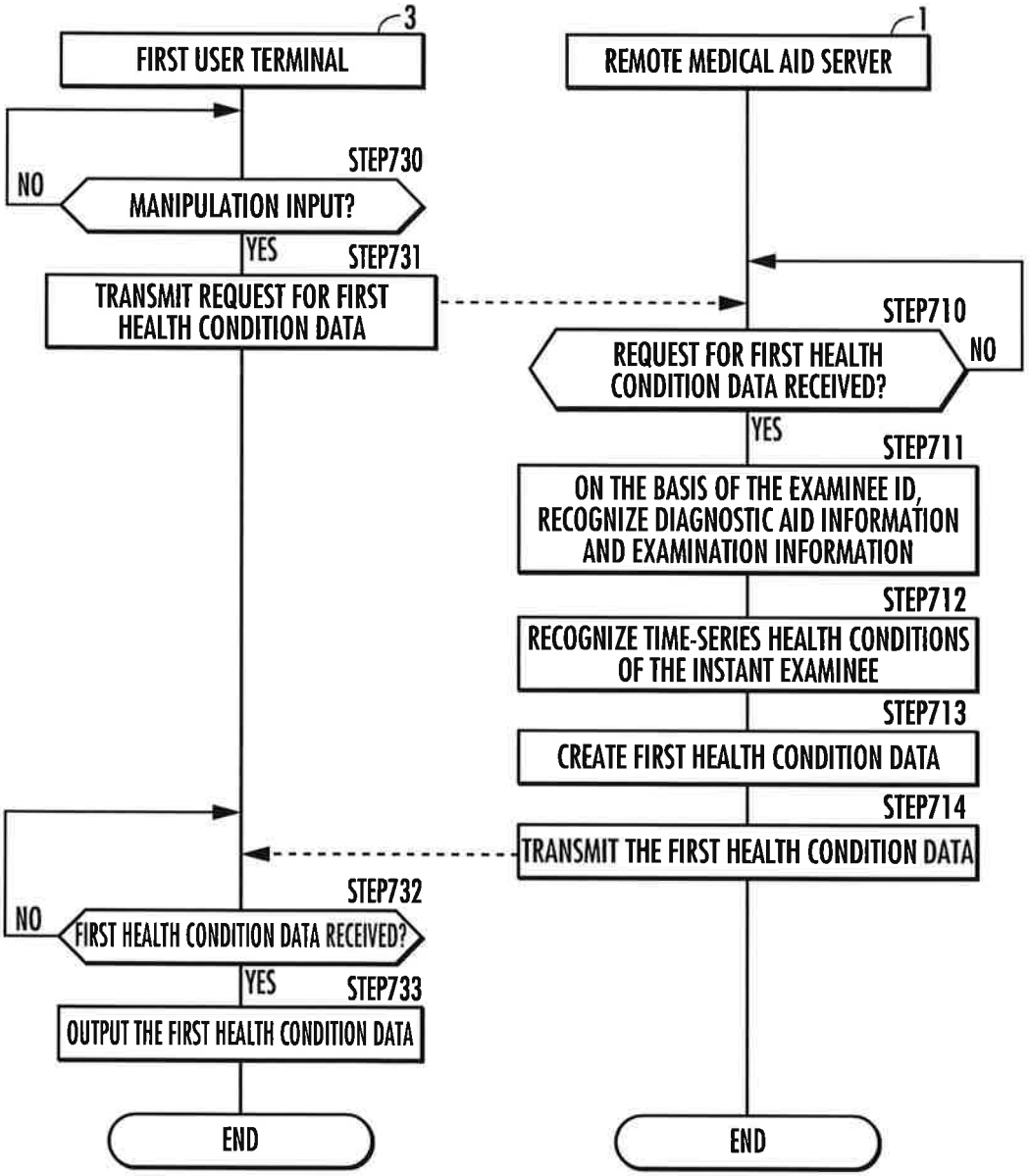

3
FIRST USER TERMINAL
1
REMOTE MEDICAL AID SERVER
STEP730
NO
MANIPULATION INPUT?
YES
STEP731
TRANSMIT REQUEST FOR FIRST HEALTH CONDITION DATA
STEP710
REQUEST FOR FIRST HEALTH CONDITION DATA RECEIVED?
NO
YES
STEP711
ON THE BASIS OF THE EXAMINEE ID, RECOGNIZE DIAGNOSTIC AID INFORMATION AND EXAMINATION INFORMATION
STEP712
RECOGNIZE TIME-SERIES HEALTH CONDITIONS OF THE INSTANT EXAMINEE
STEP713
CREATE FIRST HEALTH CONDITION DATA
STEP714
TRANSMIT THE FIRST HEALTH CONDITION DATA
STEP732
NO
FIRST HEALTH CONDITION DATA RECEIVED?
YES
STEP733
OUTPUT THE FIRST HEALTH CONDITION DATA
END
END

FIG.13

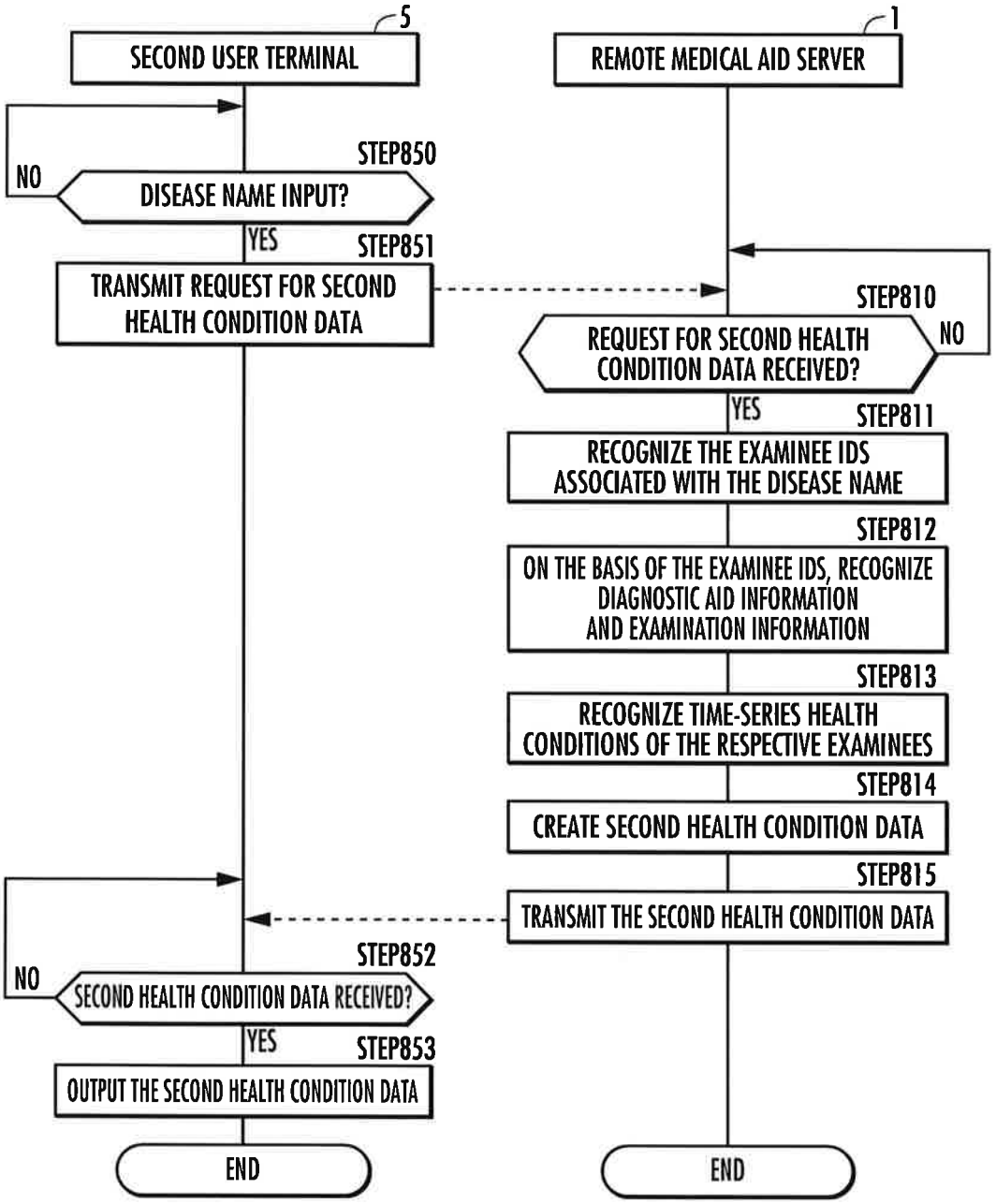

5
SECOND USER TERMINAL
1
REMOTE MEDICAL AID SERVER
STEP850
NO
DISEASE NAME INPUT?
YES
STEP851
TRANSMIT REQUEST FOR SECOND HEALTH CONDITION DATA
STEP810
REQUEST FOR SECOND HEALTH CONDITION DATA RECEIVED?
NO
YES
STEP811
RECOGNIZE THE EXAMINEE IDS ASSOCIATED WITH THE DISEASE NAME
STEP812
ON THE BASIS OF THE EXAMINEE IDS, RECOGNIZE DIAGNOSTIC AID INFORMATION AND EXAMINATION INFORMATION
STEP813
RECOGNIZE TIME-SERIES HEALTH CONDITIONS OF THE RESPECTIVE EXAMINEES
STEP814
CREATE SECOND HEALTH CONDITION DATA
STEP815
TRANSMIT THE SECOND HEALTH CONDITION DATA
STEP852
NO
SECOND HEALTH CONDITION DATA RECEIVED?
YES
STEP853
OUTPUT THE SECOND HEALTH CONDITION DATA
END
END

FIG.14

130

1301 EXAMINEE ID	1302 STANDARD PAYMENT BY INSURANCE ORGANIZATION
1	10000
2	8000
3	12000

FIG.15

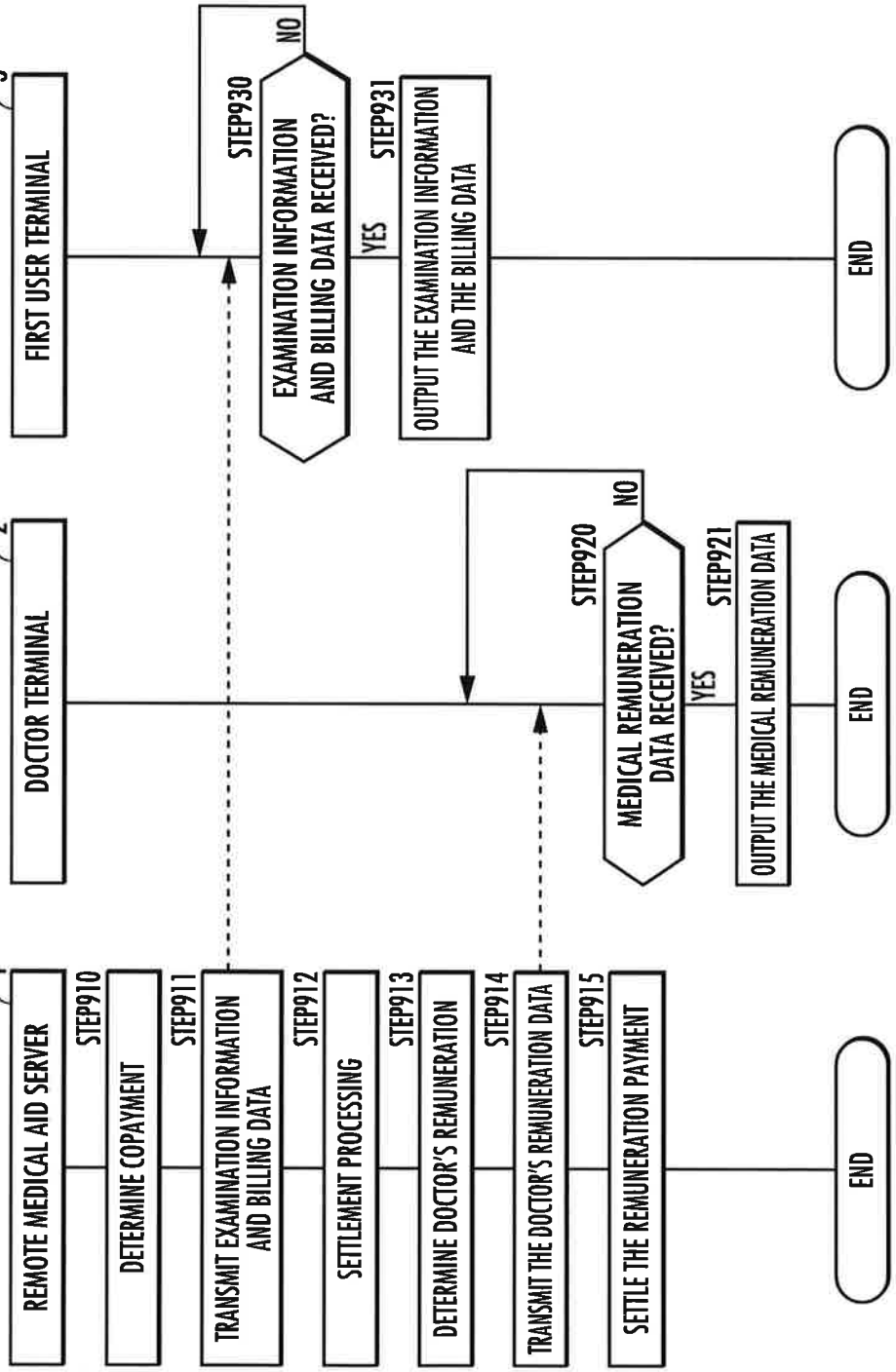
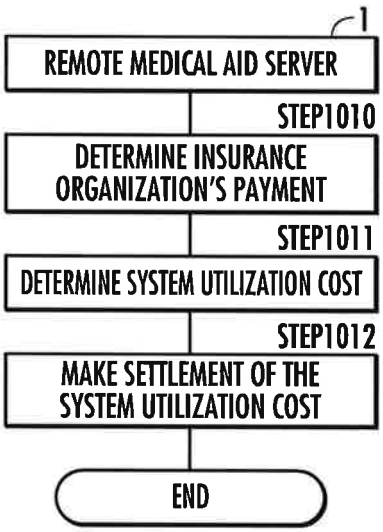

1
REMOTE MEDICAL AID SERVER
STEP910
DETERMINE COPAYMENT
STEP911
TRANSMIT EXAMINATION INFORMATION AND BILLING DATA
STEP912
SETTLEMENT PROCESSING
STEP913
DETERMINE DOCTOR'S REMUNERATION
STEP914
TRANSMIT THE DOCTOR'S REMUNERATION DATA
STEP915
SETTLE THE REMUNERATION PAYMENT
END
2
DOCTOR TERMINAL
STEP920
MEDICAL REMUNERATION DATA RECEIVED?
NO
YES
STEP921
OUTPUT THE MEDICAL REMUNERATION DATA
END
3
FIRST USER TERMINAL
STEP930
EXAMINATION INFORMATION AND BILLING DATA RECEIVED?
NO
YES
STEP931
OUTPUT THE EXAMINATION INFORMATION AND THE BILLING DATA
END

FIG.16


1
REMOTE MEDICAL AID SERVER
STEP1010
DETERMINE INSURANCE ORGANIZATION'S PAYMENT
STEP1011
DETERMINE SYSTEM UTILIZATION COST
STEP1012
MAKE SETTLEMENT OF THE SYSTEM UTILIZATION COST
END