User Manual for Approvers in Transaction Management System

AYUSHMAN BHARAT – PRADHAN MANTRI JAN AROGYA YOJANA (AB PM-JAY)

VERSION 2.0

17-DEC-2018

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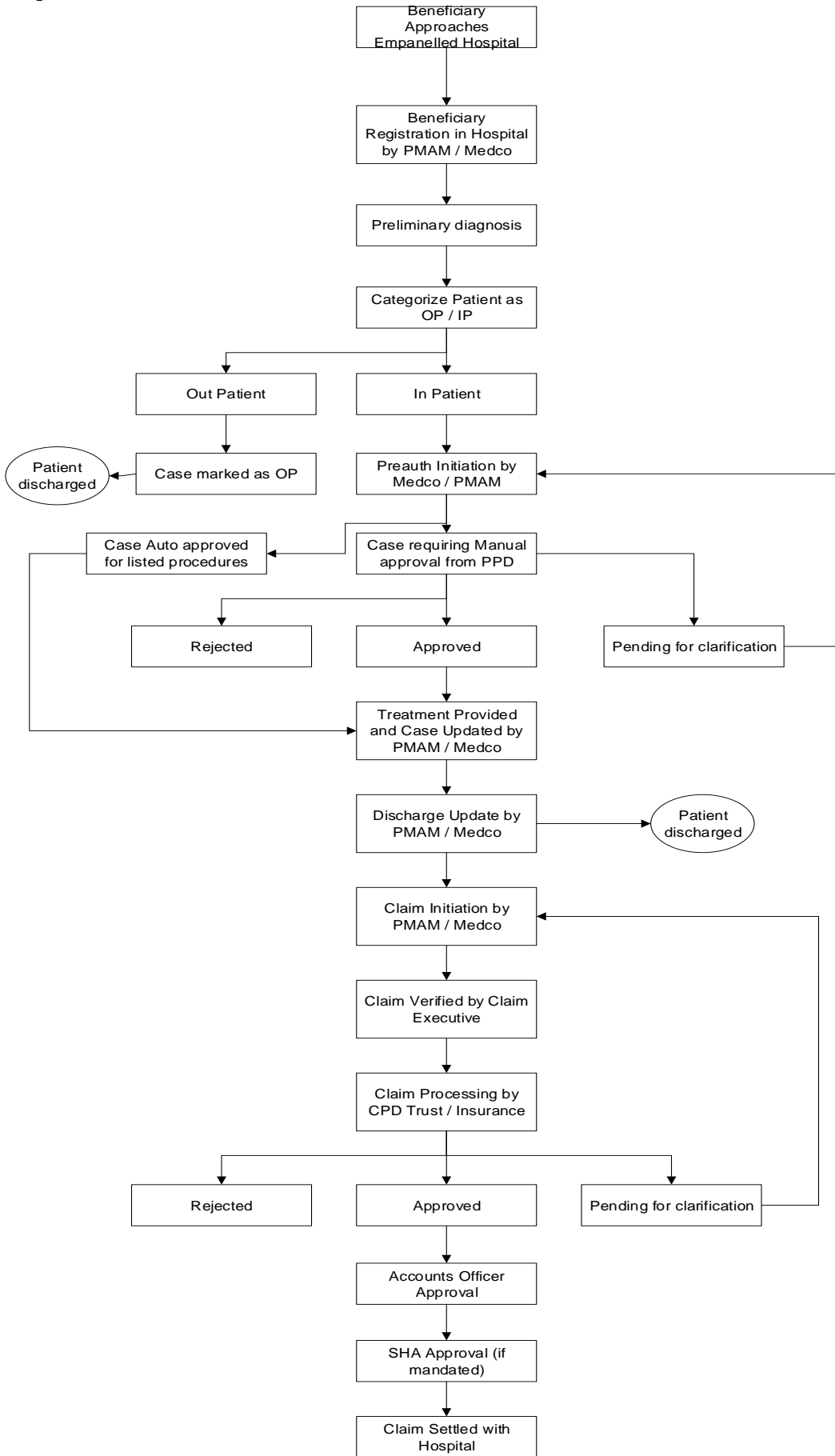
ABBREVIATION:

TERMS	DEFINITION
PMAM/ AM	Pradhan Mantri Arogya Mitra / Arogya Mitra
MEDCO	Medical Coordinator
PEX	Pre-Authorization Executive
PPD	Pre-Authorization Panel Doctor
CEX	Claim Executive
CPD	Claim Panel Doctor
AO	Account Officer
SHA	State Health Agency

Changes made in the TMS

1. The system will allow the users(except MEDCO/MITHRA) to reassign the task to either a different user within same role or a different role altogether for seeking the feedback/comment(s).This new feature will be available as "assign" in the action drop menu.

2. The system will allow CPD to make partial payment of claimed amount.

3. The system will have the separate queue for Day care procedures in PPD log-in for pre-authorization approval.

4. The system will allow the SHA-Trust to revoke cases where preauthorization or claim request has been previously rejected or approved.

5. The system will allow the users to zoom in, zoom out and rotate all the attachments.

6. The system will allow users to enter page numbers manually in the worklist and go to it directly.

7. The system will allow the PPD to reject the entire pre-authorization during first enhancement (for a Medical Case) using the case reject option in the action drop down menu.

8. Auto approval after six hours has been removed for the cases with unspecified surgical procedures.

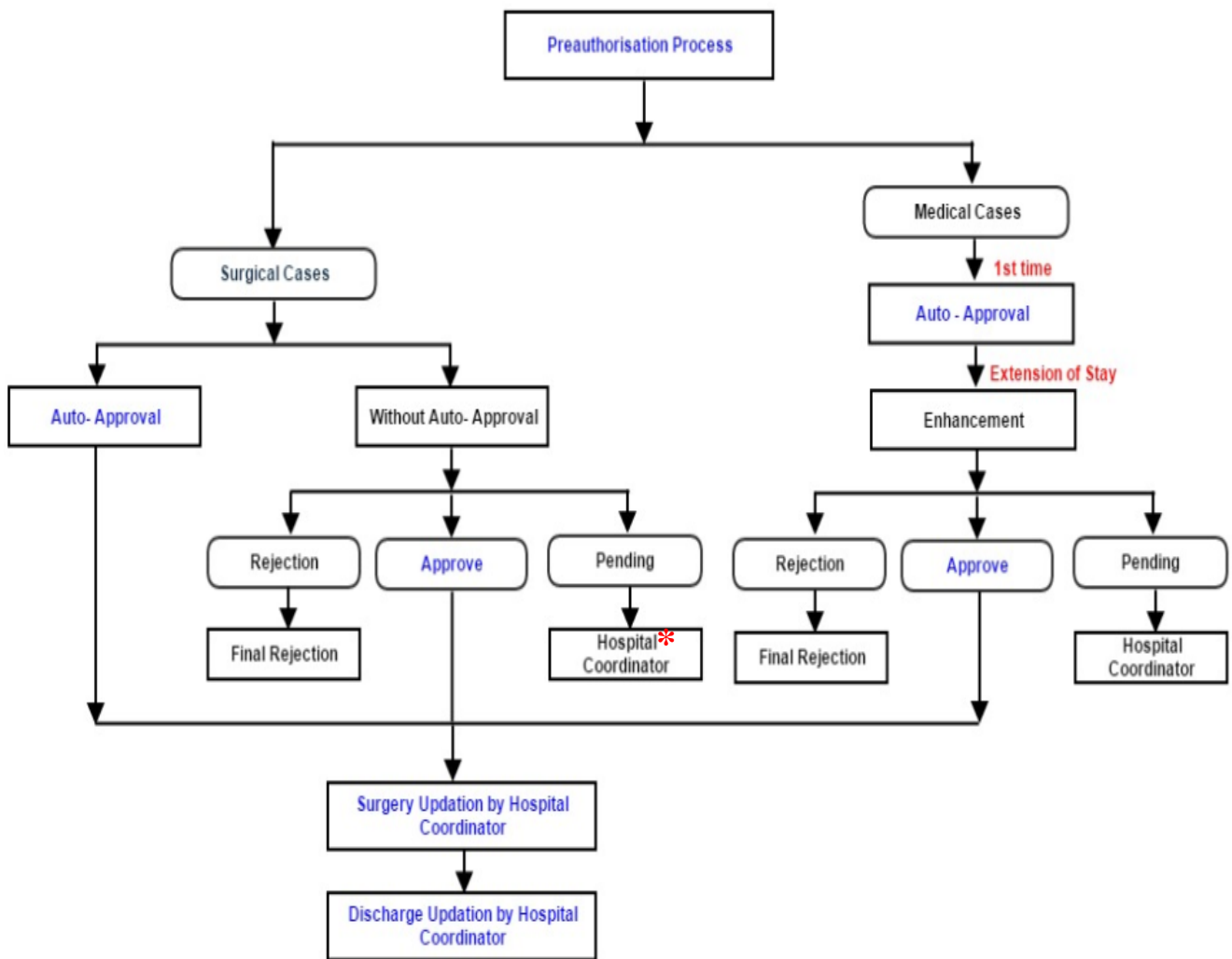9. PPD-multi and CPD-Multi login concept has been removed.

TMS Workflow

TMS Workflow explains all roles and responsibility involved in this process as mentioned below.

TMS Workflow

national
health
agency

Pradhan Mantri Jan Arogya Yojana
Ayushman Bharat
PM-JAY

```
┌─────────────────────┐
│      Beneficiary    │
│      Approaches     │
│  Empanelled Hospital│
└─────────────────────┘
          │
          ▼
┌─────────────────────┐
│      Beneficiary    │
│ Registration in     │
│ Hospital by         │
│ PMAM / Medco        │
└─────────────────────┘
          │
          ▼
┌─────────────────────┐
│ Preliminary diagnosis│
└─────────────────────┘
          │
          ▼
┌─────────────────────┐
│ Categorize Patient as│
│       OP / IP       │
└─────────────────────┘
```

Out Patient → In Patient

Case marked as OP → Patient discharged

Preauth Initiation by Medco / PMAM

Case Auto approved for listed procedures ← Case requiring Manual approval from PPD → Pending for clarification

Rejected — Approved

Treatment Provided and Case Updated by PMAM / Medco

Discharge Update by PMAM / Medco → Patient discharged

Claim Initiation by PMAM / Medco

Claim Verified by Claim Executive

Claim Processing by CPD Trust / Insurance

Rejected — Approved — Pending for clarification

Accounts Officer Approval

SHA Approval (if mandated)

Claim Settled with Hospital

Preauthorization Workflow

Preauthorization Workflow explains all roles and responsibility involved in this process as mentioned below.

* Hospital Co-Ordinator: It could be MEDCO and /or PMAM.

Menus and Sub Menus

Below are the Menus and Sub Menus involved in TMS Application.

s.no	Menus	Sub-Menus
1	Patient	Register Patient
		Register Patient View
		Telephonic Registered patients
		Out patient Regsitered cases
2	Case Search	NA
3	Pre-Auth	Pre auth Initiation
		Pre auth Updation
		Cases for Surgery Update
		Cases for discharge Update
		Cancel Pre auth
4	Claims	Claims Initiation
		Claims Updation

Case Status

Below are the Case status for all cases involved in TMS Application.

s.no	Case	Case status Current	Case status Previous	Case status Next
1	Out patient	OP case Registered	NA	NA
2	In patient	IP case registered	NA	MEDCO Pre auth initiated
3	Pre auth initiation	MEDCO Pre auth initiated	IP case registered	PPD Approve/PPD rejected/PPD pending
4	Pre auth Updation	PPD Insurer/Trust /Multi Approve	MEDCO Pre auth initiated	Surgery date updated by MEDCO
5	Pre auth Updation	PPD Insurer/Trust /Multi Pending	MEDCO Pre auth initiated	MEDCO Pending Updated
6	MEDCO Updation	MEDCO Pending Updated	PPD Insurer/Trust /Multi Pending	PPD Insurer/Trust /Multi Pending Approved
7	Pre auth Updation	PPD Insurer/Trust /Multi Pending Approved	MEDCO Pending Updated	Surgery date updated by MEDCO
8	Pre auth Updation	PPD Insurer/Trust /Multi Reject	MEDCO Pre auth initiated	NA
9	NA	Procedure Auto Approved	MEDCO Pre auth initiated	Surgery date updated by MEDCO
10	Cancel	Pre auth Cancelled	NA	NA
11	Cases for Surgery updation	Surgery date updated by MEDCO	PPD Approve	Discharge date updated by MEDCO
12	Cases for Discharge updation	Discharge Date updated by MEDCO	Surgery date updated by MEDCO	Claim initiated by MEDCO
13	Claim initiation	Claim initiated By MEDCO	Discharge Date updated by MEDCO	Claim forwarded By CEX
14	Claim Updation	Claim forwarded By CEX	Claim Initiated by MEDCO	Claim approved by Claim Panel doctor
15	Claim Updation	Claim Insurer/Trust /Multi approved by Claim Panel doctor	Claim forwarded By CEX	NA
16	Claim Updation	Claim kept Pending by CPD	Claim forwarded By CEX	Claim Pending Updated by MEDCO to CPD
17	MEDCO Updation	Claim Pending Updated by MEDCO to CPD	Claim kept Pending by CPD	Claim Pending Approved by CPD
18	Claim Updation	Claim Pending Approved by CPD	Claim Pending Updated by MEDCO to CPD	NA
19	Claim Updation	CPD Insurer/Trust /Multi Reject	Claim forwarded By CEX	Claim forwarded to Accounts Officer
20	Claim Updation	Claim forwarded to Accounts officer	CPD Insurer/Trust/Multi Reject	Claim forwarded to SHA
21	Claim Updation	Claim forwarded to SHA	Claim forwarded to Accounts Officer	NA

Pre-Authorization

Pre-Authorization process has to be approve by Pre-Auth Panel Doctor for In-patient registered patients. Before performing surgery, Network Hospital has to get approval from higher authorities whether the surgery is required or not. This process is known as Pre-Authorization.

1. Preauthorization Process Initiated by MEDCO.
2. Preauthorization Verification by Arogya Mitra.
3. Preauthorization Approval by Panel Doctor.

Preauthorization Process Initiated by MEDCO:

MEDCO (Network Hospital doctor) has to initiate the Preauthorization process by submitting all mandatory information like illness details, surgery details and total cost estimation etc. After this action, the case status will be changed to Preauthorization MEDCO Initiated.

Preauthorization Verification by Arogya Mitra*:

Arogya Mitra will verify the details which was submitted by MEDCO and forward the Preauthorization. Claim number for this case will be generated. After this action, the case status will be changed to 'Preauthorization Forwarded by Arogya Mitra'.

Note*: For some states (on request), if they are having Arogya Mitra, then it will go to Arogya Mitra pool. For the other states, after pre-auth initiation, request will go to Panel doctor directly.

Preauthorization Approval by Panel Doctor:

The Preauthorization will be processed by Panel Doctor. He will retrieve the Cases waiting for Approval based on FIFO Order. Panel Doctor will 'Approve'/'Reject'/'Pending' after checking past history and verifying the case he want to 'Approve'/'Reject'/'Pending' for Preauthorization by providing fields in Checklist.

Preauthorization Sub-Menus

Preauth Updation

Day Wise Worklist

System shall allow user to view cases of day care separately in this worklist.

Preauthorization Action Types

*Preauthorization Forward (*Trust/Insurer*)*

The system shall allow to forward cases pre authorization workflow from trust to Insurance and Vice-versa.

Forward to Trust: (*similar flow for insurance to trust also*)

Upon clicking "Submit" button, the following message is shown in case of enhancement. Otherwise it will be shown as "PPD forwarded to trust"

System shall ask for confirmation as shown below

System will show a confirmation message as shown below

Pre auth Assign Functionality

The system will allow the users (except Medco/Mithra) to reassign the task to either a different user within same role or different role altogether for seeking their feedback/Comment(s). Upon selecting re-assign, another drop down (select unit-role) where the user will be able to select the next user to whom the case is to be assigned

In case of medical Committee is selected from select user role:

PPD can select appropriate Medical Committee user shown in the "select user to assign" drop -down

In case PPD (insurer/Trust) is selected from select user role:
PPD can select appropriate user shown in the "select user to assign" drop -down

Upon submitting "Assign", the system asks for confirmation as shown below:

Upon successfully assigning the case, the following message is shown

Preauthorization Approved by PPD

Pre-Auth Panel Doctor should be able to Approve/Pending/Reject the Case verified by Mithra as shown in the screen shot.

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National Health Protection Mission

Cases Search

Preauth

Preauth Updation 1

Payments

Patient Details Case No: CASE/CON-RRY/NHPST3341

me:	Aadhaar No:	Relation with Family Head:	Card No:	NO DATA
i:	786786886767	Self	NHPS2364/01	
ase No:	Case Status:	IP No:	IP Registered Date:	
ASE/CON-RRY/NHPST3341	Preauth Mithra Forwarded		2018-07-20 16:35:11.0	
ospital Name:	Contact No:	Slab Type:	Address:	
ONTINENTAL HOSPITALS	8678678686	Semi Private Ward	54 sai angar, Amberpet, AMBERPET, HYDERABAD	

ction buttons will be enabled in :

0 : 01
inutes seconds

IP Registration Details | Past History | Clinical Notes | Preauthorization | Attachments | Case Sheet

NWH Details

Name	Address
CONTINENTAL HOSPITALS	PLOT NO3, ROAD NO 2, NANAKRAMAGUDA, GACHIBOWLI, SERILINGAMPALLY , HYDERABAD , 9948991143

Diagnosis and Treatment

Diagnosis Type	Main Category Name	Category Name
Factors influencing health status and contact with health services	Factors influencing health status and contact with health services	Body mass index [BMI] Kilograms per meters squared

Sub Category Name	Disease Name	Disease Anatomical Name
Body mass index (BMI) 40 or greater, adult	Body mass index (BMI) 70 or greater, adult	Body mass index (BMI) 70 or greater, adult

Treatment Protocol

Category Name	ICD Category Name	Procedure Name	Units	Special Investigations	Remarks	Treating Doctor Name	Procedure Amount
ENDOCRINOLOGY(592)	Disorders of other endocrine glands(405)	Hormonal therapy for Pituitary - Acromegaly(292)	-NA-	Clinical Photograph	-NA-	R. BHARATHI	₹ 12140

Comorbid Conditions

No comorbids Found

Admission Details

Admission Type *	Admission Date *	Procedure Consent *
● Planned ○ Emergency	20-07-2018	● Yes ○ No

Medical or Cardiology Clearance *
○ Yes ● No

Blood Transfusion *
○ Yes ● No

Technical CheckList

1) Is diagnosis supported by sufficient evidence?*   ○ Yes ○ No

2) Is the Suggested line of Treatment Supported by Sufficient evidence?*   ○ Yes ○ No

Total Package Amount Admissible Under the Scheme Rs *   ₹19630

Remarks *

Work Flow

S.No	Date and Time	Role Name	Remarks	Action	Amount
1	20/07/2018 16:35:11	MEDCOCON_RRY(MEDCO)	NA	IP Case Registered	19630
2	20/07/2018 17:29:45	MEDCOCON_RRY(MEDCO)	Na	Medco Preauth Initiated	19630
3	20/07/2018 18:08:16	MEDCOCON_RRY(MITHRA)	NA	Preauth Mithra Forwarded	19630

Action
--Select--   Submit

Once the timer is completed case will be notified by panel doctor as shown in the screen shot.

Approve the case by verifying below details as shown in the screen shot.

After approval, message will be generated as shown in the screen shot

Query raised by PPD

If Action is Raise query as shown in the screen shot, Medco has to update the case and Mithra will forward the case and then PPD will approve.

After submitting the action type as "query raise", system will asks for confirmation as shown:

After clicking "Ok", the following message is shown

Click on OK button for pending if any additional information is needed as shown in the screen shot.

After Clicking OK, message will be generated as shown in the screen shot.

Preauthorization Rejecting by PPD

In **surgical cases**, there is only one type of reject. It will be final rejection.

S.No	Date and Time	Role Name	Remarks	Action	Amount(Rs.)
1	30/10/2018 11:23:09	BALCO MEDICAL CENTRE MITHRA(MITHRA)	NA	Patient Registered	NA
2	27/11/2018 14:31:35	BALCO MEDICAL CENTRE MEDCO(MEDCO)	--NA--	Medco Preauth Initiated(Insurance)	7000
3	27/11/2018 16:07:15	Chhattisgarh PPD-INS(PPD-INSURER)	--NA--	PPD Reject	7000
4	06/12/2018 23:13:50	SHAInsurer Insurer(SHA)	sdsd	Medco Preauth Initiated(Insurance)	NA
5	06/12/2018 23:31:20	Chhattisgarh PPD-INS(PPD-INSURER)	--NA--	PPD Reject	7000
6	11/12/2018 16:36:14	SHA INSURER(SHA)	56sd	Medco Preauth Initiated(Insurance)	NA

Action

Reject ▼

Submit

Note:Wallet balance including current package
Insurance Consumed Amount: Rs.13,750
Trust Consumed Amount: Rs.0
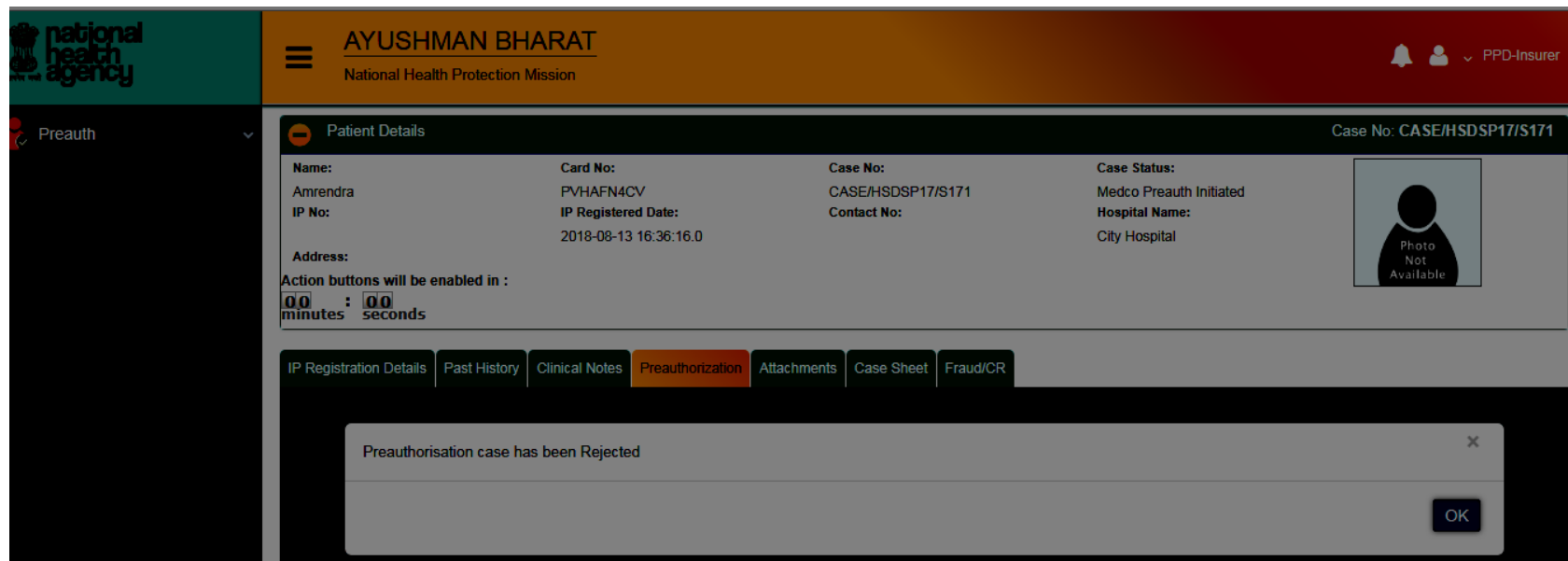Unspecified Consumed Amount: Rs.50,000

System will ask for confirmation as shown below:

Click on OK button for rejecting the case as shown in the screen shot.

After Clicking OK, message will be generated as shown in the screen shot.

In **Medical cases**, there are two type of reject functionalities.

a) **Case Reject**: This feature will allow PPD to reject the enhancement of the case.

b) **Reject**: This is similar to reject option in surgical cases, which allows the final rejection of the case.

In case the enhancement to be rejected, the following flow occurs

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PPD-Insurer

Assigned Cases	
Pendency	
Preauth	
Preauth Updation 20	
Day-Wise Worklist 5	
Cases Search	

Admission Unit
HDU

Enhancement

Admission Unit	No Of Days	Enhacement amount	Remarks	Enhancement Rejected	Attachments
HDU	1	2700	sa	N	Patient Photo, Preauth Enhancement,

Work Flow

S.No	Date and Time	Role Name	Remarks	Action	Amount(Rs.)
1	14/12/2018 15:56:08	BALCO MEDICAL CENTRE MITHRA(MITHRA)	NA	Patient Registered	NA
2	14/12/2018 17:19:47	BALCO MEDICAL CENTRE MEDCO(MEDCO)	--NA--	Medco Preauth Initiated(Insurance)	9300
3	14/12/2018 17:22:13	Chhattisgarh PPD-INS(PPD-INSURER)	--NA--	PPD Approved(Insurance)	9300
4	14/12/2018 17:24:45	BALCO MEDICAL CENTRE MEDCO(MEDCO)	sa	Enhancement Initiated (Insurer)	12000

Action
Reject

Submit

System will throw a message before rejecting enhancement as shown below:

Upon clicking "Ok", the following screen is shown:

Claims

MEDCO should be able to raise Claim after entering the date of discharge of the patient by submitting all the relevant documents. Claim Executive will verify and forward the claim. Panel Doctor has to scrutinize the documents submitted by the hospital and process the claim. Once the claim is processed, the claim amount will be directly credited into the hospital account.

1. Claim Initiated by MEDCO.
2. Claim Verification by Claim Executive.
3. Claim Approved by Claim Panel Doctor.
4. Claim Pending by Claim Panel Doctor.
5. Claim Rejected by Claim Panel Doctor.
6. Claim Forward by Accounts Officer.
7. Claim Approved by SHA/CEO

Claim Initiated by MEDCO:

MEDCO (Network Hospital Doctor) raise the claim by selecting the Discharge updated cases. He has to submit remarks and initiate the claim. After initiation, claim will come to Claim Executive.

Claim Verification by Claim Executive:

After initiation, claim will come to Claim Executive where he will verify check list and provide his remarks and update the claims. Once the claim is verified, he will forward to Panel Doctor.

Claim Processed by Panel Doctor:

After Verification, claim will come to Panel Doctor where he will verify check list and provide his remarks and update the claims. He can Approve, Pending and Reject the claims. He can keep pending option for one time only. Then hospital has to provide additional information. Once the claim is processed, the claim amount will be directly credited into the hospital account. For Rejected cases process will end.

Claim Forward by Accounts Officer:

Accounts Officer will receive the claim case after claim accepted by Panel Doctor. Accounts Officer will view the claim case and will forward the case to the SHA.

Claim Approval by SHA:

SHA will verify the claim case forwarded by Accounts Officer and will approve the claim and is the final approval.

Claim Verified by Claim Executive

CEX should be able to verify the claim process initiated by Medco in Claim Updation tab as shown in the screen shot.

Click on forward by verifying the Claim Details and giving Remarks in the Claim tab as shown in the screen shot.

After forwarding Claim, need to click on 'OK 'button as shown in the screen shot.

On clicking OK, message will be generated as shown in the screen shot.

Claim Updation
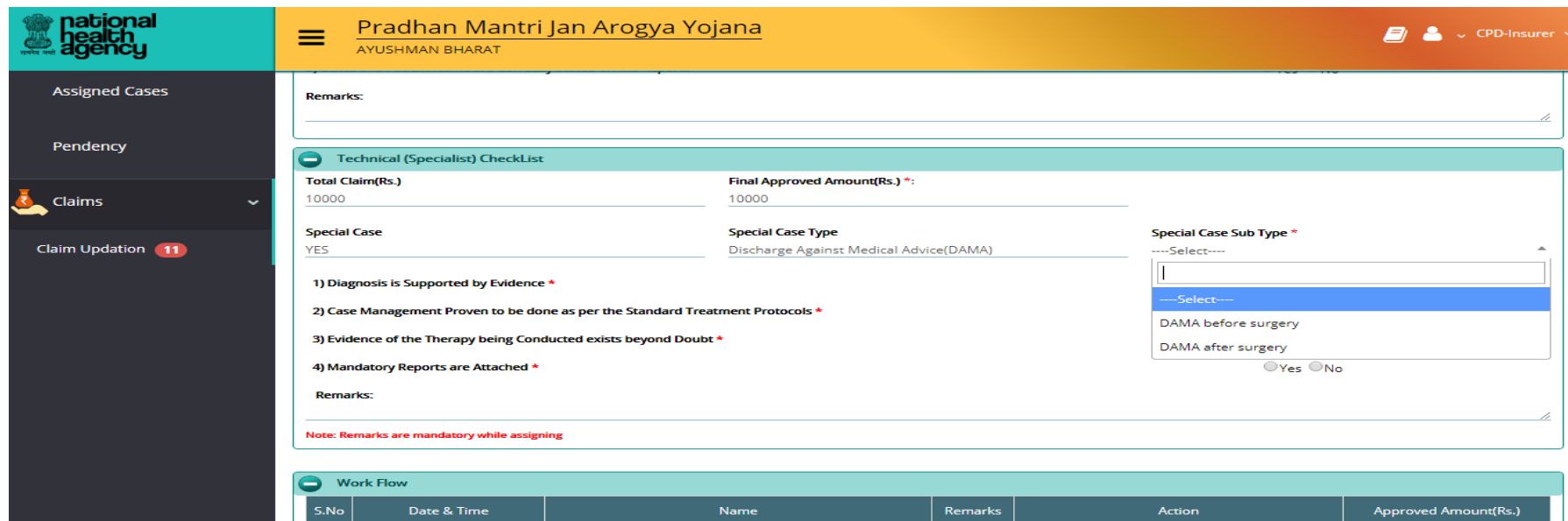
Claim Updation will show the claims worklist to CPD.

- Special Case Scenario: (for Surgical Cases)

*In case the Medco had selected Special case as "yes" in his login, then Special case details are shown in CPD login. Here CPD shall be able to select "Special case sub-type".

In case the Medco not entered any special case details in his login (i.e.: special cases is marked as "NO"), then Special case details are **Not-shown** in CPD login. Here CPD will be able to edit the "Final approved amount".

- Special Case Scenario: (for Medical Cases)

The amount is editable by CPD for medical cases irrespective of "yes" or "No" options selected by MEDCO.
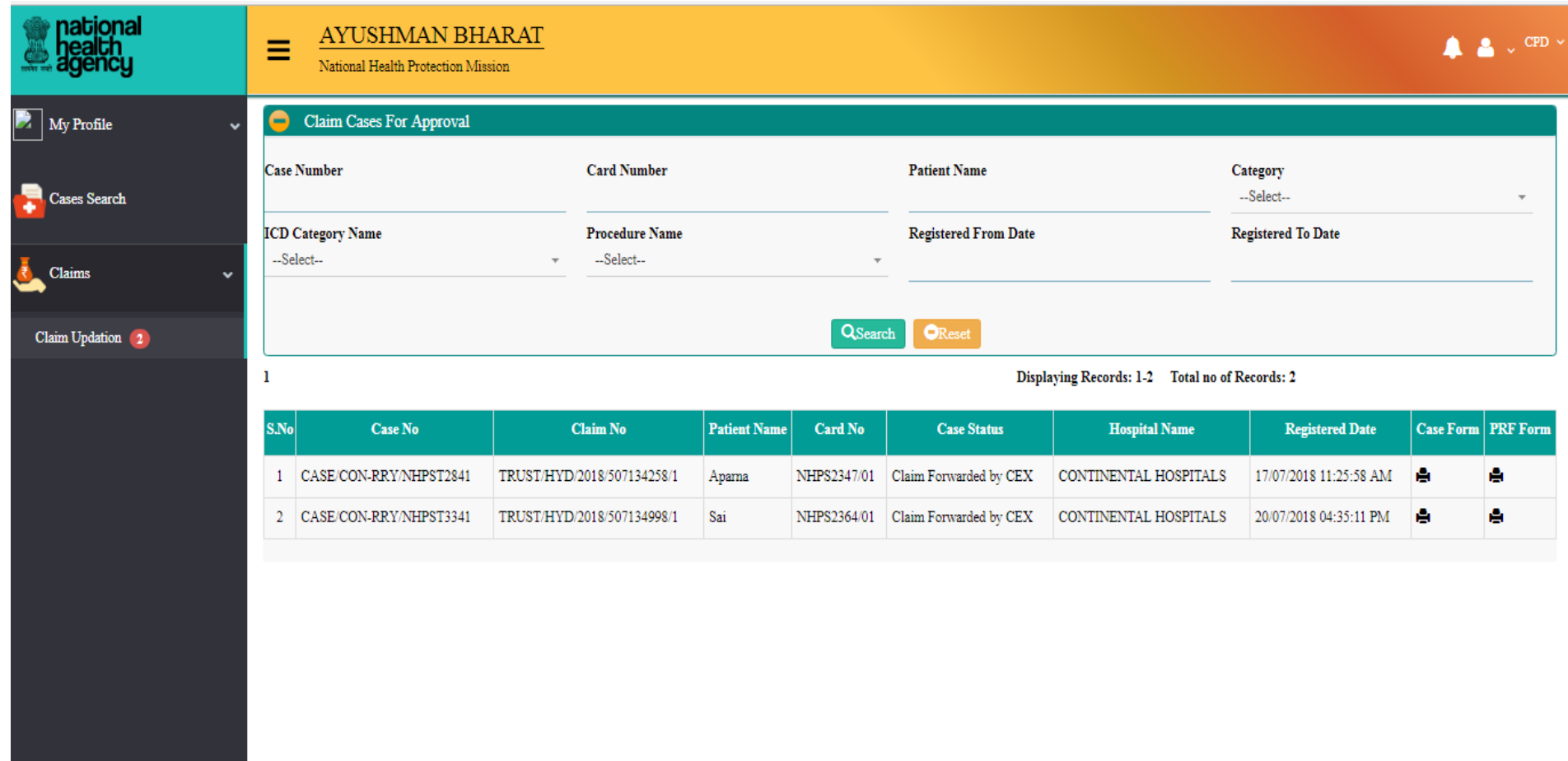

Special case sub-type:

In case of before surgery: The final approved will be "**ZERO**"

In case of after surgery: The final approved amount will be calculated according to NHA partial payment guidelines.

Claim Approved by Claim Panel Doctor

CPD should be able to view claim forwarded cases in Claim Updation tab as shown in screen short.

Claim Panel Doctor should be able to approve the Case verified by Mithra as shown in the screen shot.

After approving the case, need to click on 'OK 'button as shown in the screen shot.

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National Health Protection Mission

My Profile

Cases Search

Claims

Claim Updation **2**

Patient Details Case No: **CASE/CON-RRY/NHPST3341**

ame:	Aadhaar No:	Relation with Family Head:	Card No:	NO DATA
	786786886767	Self	NHPS2364/01	
ase No:	Case Status:	IP No:	IP Registered Date:	
ASE/CON-RRY/NHPST3341	Claim Forwarded by CEX	NA	2018-07-20 16:35:11.0	
ospital Name:	Contact No:	Slab Type:	Address:	
ONTINENTAL HOSPITALS	8678678686	Semi Private Ward	54 sai angar, Amberpet, AMBERPET, HYDERABAD	

IP Registration Details | Past History | Clinical Notes | Preauthorization | **Claims** | Attachments | Case Sheet

Claim Details

Preauth Approved Amount: | Pre | Penalty Amount:
19630 | 20 | 0

Claim Amount: | Bill
19630 | 19

Do you want to Approve? ✕

OK   Cancel

Remarks:*

NA

Non Technical CheckList

1) Name in Case Sheet and Consent Forms is Correct * ○Yes ●No

2) Gender in Case Sheet and Consent Forms is Correct * ○Yes ●No

3) Is Beneficiary Card Photo is Matching with Discharge Photo and Onbed Photo * ○Yes ●No

Date Verification

After approval, message will be shown as shown in the screen shot

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National Health Protection Mission

CPD

Patient Details Case No: CASE/CON-RRY/NHPST3341

ame:	Aadhaar No:	Relation with Family Head:	Card No:	NO DATA
ii	786786886767	Self	NHPS2364/01	
ase No:	Case Status:	IP No:	IP Registered Date:	
ASE/CON-RRY/NHPST3341	Claim Forwarded by CEX	NA	2018-07-20 16:35:11.0	
ospital Name:	Contact No:	Slab Type:	Address:	
ONTINENTAL HOSPITALS	8678678686	Semi Private Ward	54 sai angar, Amberpet, AMBERPET, HYDERABAD	

IP Registration Details | Past History | Clinical Notes | Preauthorization | **Claims** | Attachments | Case Sheet

Claim Details

Preauth Approved Amount:	Pre		Penalty Amount:
19630	20		0
Claim Amount:	Bil		
19630	196		

Claim Case has been Approved by CPD ×

OK

Remarks:*

NA

Non Technical CheckList

1) Name in Case Sheet and Consent Forms is Correct * ○ Yes ● No
2) Gender in Case Sheet and Consent Forms is Correct * ○ Yes ● No
3) Is Beneficiary Card Photo is Matching with Discharge Photo and Onbed Photo * ○ Yes ● No

My Profile

Cases Search

Claims

Claim Updation 2

javascript:fn_dashboard();

Claim Query Raised by Claim Panel Doctor

Claim case is kept as Query raised by CPD, then it will be verified by Medco

After selecting Raise Query in action type, user need to click on 'OK 'button as shown in the screen shot.

After Query raised successfully, message will be shown as shown in the screen shot

Claim Rejecting by Claim Panel Doctor

Claim Panel Doctor should be able to reject the Case verified by Mithra/MEDCO as shown in the screen shot.

Below message will be displayed after rejecting the claim and this is final rejection.

Claim Assign functionality

In case CPD wants to assign the case to another CPD, the following flow is applicable:

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CPD-Insurer

Assigned Cases

Pendency

Claims

Claim Updation 10

Work Flow

S.No	Date & Time	Name	Remarks	Action	Approved Amount(Rs.)
1	17/12/2018 13:41:04	BALCO MEDICAL CENTRE MEDCO(MEDCO)	NA	Claim Initiated by Medco(Insurance)	2700.0
2	17/12/2018 14:48:46	CEX Insurer(CEX)	NA	Claim Forwarded by CEX(Insurance)	2700.0
3	17/12/2018 15:13:05	Chhattisgarh CPD-INS(CPD-Insurer)	NA	Claim kept pending by CPD(Insurance)	2700.0
4	17/12/2018 15:17:20	BALCO MEDICAL CENTRE MEDCO(MEDCO)	NA	Claim Pending updated by Medco(Insurance)	2700.0

Action Type
Assign

Select User Role
CPD-Insurer

Select User to Assign
---select---

---select---
Chhattisgarh CPD-INS(CHH004)
Chhattisgarh CPD-INSMULTI(CHH006)

Submit

Note:Wallet balance including current package
Insurance Consumed Amount: Rs.46,050
Trust Consumed Amount: Rs.0

In case CPD wants to assign the case to medical committee:

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CPD-Insurer ˅

Assigned Cases

Pendency

Claims ˅

Claim Updation **10**

Work Flow

S.No	Date & Time	Name	Remarks	Action	Approved Amount(Rs.)
1	17/12/2018 13:41:04	BALCO MEDICAL CENTRE MEDCO(MEDCO)	NA	Claim Initiated by Medco(Insurance)	2700.0
2	17/12/2018 14:48:46	CEX Insurer(CEX)	NA	Claim Forwarded by CEX(Insurance)	2700.0
3	17/12/2018 15:13:05	Chhattisgarh CPD-INS(CPD-Insurer)	NA	Claim kept pending by CPD(Insurance)	2700.0
4	17/12/2018 15:17:20	BALCO MEDICAL CENTRE MEDCO(MEDCO)	NA	Claim Pending updated by Medco(Insurance)	2700.0

Action Type
Assign ▼

Select User Role
Medical Committee ▼

Select User to Assign
---select--- ▼
---select---
Medical Committee Medical Committee - Insurer(CHH003497)

Submit

Note:Wallet balance including current package
Insurance Consumed Amount: Rs.46,050
Trust Consumed Amount: Rs.0

System will ask the user for confirmation as shown below:

System throws a confirmation message upon clicking "ok", as shown below

Claim Forwarded by Accounts Officer

After the Claim Panel Doctor approves the Claim, it will be viewed by Accounts officer.
Accounts officer will check the claim and will forward the claim to SHA as shown in the screen shot.

System prompts the user with a confirmation message on screen as shown

After clicking the "OK" button the claim case will be forwarded to SHA.

State Health Agency (SHA)

SHA Sub-Menus

Pre-auth: Cases for Review

SHA will be able to view all the cases rejected by PPD in this worklist as shown below.

This feature helps SHA to revoke the cases. Once SHA revoke the case, it will automatically get displayed in the PPD login where the case got rejected.

S.No	Case No	Claim No	Patient Name	Card No	Case Status	Hospital Name	Registered Date
1	CASE/HS22019003/S686	TRUST/KAN/2018/381643/1	SUBELAL DEHARI	PSAGOM3HX	PPD Reject	CHC Nawagarh	06/11/2018
2	CASE/HS22024017/P725	TRUST/KOR/2018/383667/1	BUDHNI CHAUHAN	PWE4X143F	PPD Reject	a.d vaishnav smriti chikitsalay bhatgaon	12/11/2018
3	CASE/HS22019003/S846	TRUST/DHA/2018/377799/1	PRAKASH	P5RQM19JS	PPD Reject	CHC Nawagarh	20/11/2018
4	CASE/HS22024017/P848	TRUST/KOR/2018/383801/1	BUDHNI CHAUHAN	PWE4X143F	PPD Reject	a.d vaishnav smriti chikitsalay bhatgaon	23/11/2018
5	CASE/HS22019003/S849	TRUST/DHA/2018/377802/1	PRAKASH	P5RQM19JS	PPD Reject	CHC Nawagarh	20/11/2018
6	CASE/HS22017008/S884	TRUST/DHA/2018/377842/1	PRAKASH	P5RQM19JS	PPD Reject	District hospital	29/11/2018
7	CASE/HS22017008/S885	TRUST/DHA/2018/377843/1	PRAKASH	P5RQM19JS	PPD Reject	District hospital	29/11/2018
8	CASE/HS22011221/S890	TRUST/SUR/2018/648854/1	kunti	P0VZLFL3U	PPD Reject	aaarogya hospital	29/11/2018
9	CASE/HS22019003/S913	TRUST/RAI/2018/386882/1	arjun	PK0CVOE1H	PPD Reject	CHC Nawagarh	08/12/2018

SHA can revoke the case by selecting the case ID as shown:

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SHA Inusrer ˅

Assigned Cases

Pendency

Preauth ˅

Cases For Review 15

Cases Search

Payments ˅

Claims ˅

MIS ˅

Enhancement

Admission Unit	No Of Days	Enhacement amount	Remarks	Enhancement Rejected	Attachments
HDU	1	2700	sa	Y	Patient Photo, Preauth Enhancement,
HDU	1	2700	s	N	Patient Photo, Preauth Enhancement,

Work Flow

S.No	Date and Time	Role Name	Remarks	Action	Amount(Rs.)
1	14/12/2018 15:56:08	BALCO MEDICAL CENTRE MITHRA(MITHRA)	NA	Patient Registered	NA
2	14/12/2018 17:19:47	BALCO MEDICAL CENTRE MEDCO(MEDCO)	--NA--	Medco Preauth Initiated(Insurance)	9300
3	14/12/2018 17:22:13	Chhattisgarh PPD-INS(PPD-INSURER)	--NA--	PPD Approved(Insurance)	9300
4	14/12/2018 17:24:45	BALCO MEDICAL CENTRE MEDCO(MEDCO)	sa	Enhancement Initiated (Insurer)	12000
5	17/12/2018 13:00:24	Chhattisgarh PPD-INS(PPD-INSURER)	--NA--	Enhancement Rejected by Insurer	2700
6	17/12/2018 13:06:57	BALCO MEDICAL CENTRE MEDCO(MEDCO)	s	Enhancement Initiated (Insurer)	12000
7	17/12/2018 13:11:01	Chhattisgarh PPD-INS(PPD-INSURER)	--NA--	PPD Reject	12000

Revoke

Upon clicking" Revoke" button, system asks for confirmation as shown below

System throws a confirmation message after revoking as shown below:

Claims Not updated

This worklist consists of cases which does not have Bank Account details. SHA cannot perform any action on these cases.

Claims Updated

SHA can approve the cases displayed in this worklist.

Cases for Review

SHA will be able to view all the cases rejected by PPD in this worklist as shown below.

This feature helps SHA to revoke the cases by submitting remarks. Once SHA revoke the case, it will automatically get displayed in the CPD login where the case got rejected.

Flagging Concept in TMS

Flagging concept provides user to raise a flag against cases which are suspicious. Flagging can be done by Trust/Insurance users. Once the case is flagged,it will be removed from work list and will be visible in Flagging Committee log in for further investigation. Once the case has been deflagged by the flagging committee, it will come back to the user worklist.

Step 1: Log-in as any trust user. Open a case and click on the Flag tab.

List of nature of cases available in the application are

1. Verification of telephonic intimation
2. Verification of Enhancement
3. Verification of Poly-trauma
4. Verification of Burns case
5. Money collection
6. Post-OP Complications
7. Follow up Package Denial
8. Death Case

Step 2: Select the nature of Flag and click on "flag" button.

Step 3: Once the user clicks on Flag button, System will throw a confirmation message as shown below:

Step 4: Once the user confirms, the case is successfully flagged as shown below

Step 5: Since the case is flagged, now the case will be visible in **Flagging committee** log under Flagged cases for approval as shown below

Step 6: The below screen is displayed upon Clicking on the case number

Here Medical Committee user shall be able to view all the details of flag.

Step 6: After the detailed investigation if the user wants to remove the flag on the case, they can use the "De flag" button available below .Then the system prompts with a confirmation message as shown below.

Step 7: upon confirming, the case is successfully de-flagged. Now the case will be shown in the user log in from where it got flagged previously

SHA can revoke the case by selecting the case ID as shown:

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AYUSHMAN BHARAT

☰   SHA Inusrer ⌄

| | 7500.0 | Approved | |

SHA Remarks

Remarks: *

fd

Note: Only %()?../ special characters are allowed for Remarks

Work Flow

S.No	Date & Time	Name	Remarks	Action	Approved Amount(Rs.)
1	17/12/2018 10:25:23	BALCO MEDICAL CENTRE MEDCO(MEDCO)	NA	Claim Initiated by Medco(Insurance)	10000.0
2	17/12/2018 10:41:48	CEX Insurer(CEX)	NA	Claim Forwarded by CEX(Insurance)	10000.0
3	17/12/2018 10:53:01	Chhattisgarh CPD-INS(CPD-Insurer)	sdf	Assigned to Medical Committee Medical Committee - Insurer	10000
4	17/12/2018 10:58:36	Medical Committee Medical Committee - Insurer(MEDICAL COMMITTEE)	NA	CPD Insurer Approved(Insurance)	7500.0
5	17/12/2018 11:03:20	aco insurer(AccountsOfficer)	Approved	Claim Forwarded by ACO Insurer(Insurance)	7500.0

Revoke

Note:Wallet balance including current package
Insurance Consumed Amount: Rs.20,000
Trust Consumed Amount: Rs.0
Unspecified Consumed Amount: Rs.0

Menu (sidebar)
- Assigned Cases
- Pendency
- Preauth
- Cases Search
- Payments
- Claims
  - Claim Not Updation **0**
  - Cases For Review **5**
  - Claim Updation **2**
- MIS

Upon clicking" Revoke" button, system asks for confirmation as shown below

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SHA Inusrer

Patient Details

Case No: **CASE/HOSP22P00544/P1051**

Name:	**Card No:**	**Registration No:**	**Case No:**
Shanti Bai	PGDJE9BAW	1248	CASE/HOSP22P00544/P1051
Case Status:	**IP No:**	**IP Registered Date:**	**Actual Registration Date:**
Claim Forwarded by ACO Insurer(Insurance)	NA	17/12/2018	17/12/2018 10:07:41
Contact No:	**Age :**	**Patient Adress:**	**Hospital Name:**
7566209700	58 years 0 months 0 days	BALOD , CHHATTISGARH	BALCO MEDICAL CENTRE
Hospital Adress:	**Family ID:**		
RAIPUR , CHHATTISGARH	22P49020856400434		

Past History | **Preauthorization** | **Treatment/Discharge** | **Claims** | **Attachments** | **Case Sheet** | **Flag**

Claim Details

Do you want to Revoke the Case ?

OK   Cancel

Preauth A
10000

Claim Am
10000

Remarks:

Non Technical CheckList

1) Name in Case Sheet and Consent Forms is Correct *   ○ Yes ○ No
2) Gender in Case Sheet and Consent Forms is Correct *   ○ Yes ○ No

Sidebar
- Assigned Cases
- Pendency
- Preauth
- Cases Search
- Payments
- Claims
  - Claim Not Updation **0**
  - Cases For Review **5**
  - Claim Updation **2**
- MIS

System throws a confirmation message after revoking as shown below:

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AYUSHMAN BHARAT

SHA Inusrer

Patient Details

Case No: **CASE/HOSP22P00544/P1051**

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7566209700	58 years 0 months 0 days	BALOD , CHHATTISGARH	BALCO MEDICAL CENTRE
Hospital Adress:	**Family ID:**		
RAIPUR , CHHATTISGARH	22P49020856400434		

Past History | Preauthorization | Treatment/Discharge | Claims | Attachments | Case Sheet | Flag

Claim Details

Preauth A
10000

Claim Am
10000

Remarks:

Claim has been Revoked Successefully

OK

Non Technical CheckList

1) Name in Case Sheet and Consent Forms is Correct *   ● Yes ○ No
2) Gender in Case Sheet and Consent Forms is Correct *   ● Yes ○ No

Sidebar

Assigned Cases

Pendency

Preauth

Cases Search

Payments

Claims
- Claim Not Updation 0
- Cases For Review 5
- Claim Updation 2

MIS

Claim case approved by SHA is the final approval.

AYUSHMAN BHARAT
National Health Protection Mission

SHA

Check Balance

Claims

Claim Updation **4**

Payments

MIS

Claim Cases For Approval

Case Nu

Procedu
--Select-

Claim Case has been Approved by SHA successfully

OK

Search   Reset

No Records Found