AYUSHMAN BHARAT – HARYANA HEALTH PROTECTION AUTHORITY





Ayushman Bharat-Haryana Health Protection Authority Comprehensive Cashless Health Facility (CCHF) Frequently Asked Questions (FAQs)

Qns.1. What is the objective of the Scheme?

Ans. Comprehensive Cashless Health Facility aims to reduce out of pocket healthcare expenditure by providing comprehensive cashless healthcare facilities to the Haryana Government regular employees, pensioners and their dependents for 1340 packages of indoor treatments and day care procedures through a network of DGHS Empanelled Health Care Providers (EHCPs).

- Qns. 2. Who are eligible under the scheme?
 Ans. Regular Haryana Govt. Employees, Pensioners & their dependents or any other category as approved by Govt. of Haryana from time to time.
- Qns.3. What are the prerequisites for applying CCHF card?

 For generation of Comprehensive Cashless Health Facility (CCHF) Card; an beneficiary is required to have their PPP ID and AADHAAR Card generated. Both PPP ID and AADHAAR of Employee shall be duly linked, mapped and approved in HRMS by Checker/DDO of the respective department.
- Qns. 4. How can employees, who are working in Haryana but staying in nearby States, can get their PPP IDs created, since, PPP ID can be created for Haryana Residents only?
- Ans. The employees, who are working in Haryana but staying in nearby States, can contact their DDOs for PPP ID creation.
- Qns. 5. How can one register /apply for the scheme?
 Ans. Beneficiary will login to BIS portal https://beneficiary.nha.gov.in/. There is option of Self registration by beneficiary or he/she can also apply through operator by visiting nearest Common service Centre (CSC), PMAM of Public Hospital / Designated operators.
- Qns. 6. What is the workflow of Card generation?
- Ans. Card creation workflow shall be:
 - a. Beneficiary can verify their eligibility under CCHF scheme with Payee Code, AADHAAR number or Family ID in the portal.

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- Beneficiary will enter Payee Code or AADHAR Number or Family ID and all the members will be displayed if family is eligible.
- c. If a dependent is present in two payee codes, he/she will get his/her record two times in BIS application and will get an option to choose against which payee code he/she would like to get the e-KYC done.
- d. e-KYC will take place through AADHAAR OTP, Finger Print Scanner or IRIS.
- e. After e-KYC, request for card may be submitted for approval in the portal.
- f. Card will be either auto approved if most of the details matches or will land in ISA queue for further processing of the card and will be processed in 2-3 days.
- g. Card validity shall be till Date of Retirement (DOR) for deletion in future.
- Qns. 7. Where can one see list of CCHF empanelled Hospitals?

 Ans. List of CCHF empanelled hospitals can be viewed on Ayushman Bharat website:
 https://ayushmanbharat.haryana.gov.in/
- Qns. 8. What all treatments are covered under the scheme?

 Ans. It covers all types of indoor treatments and day care procedures as defined in package master consisting of 1340 packages through a network of DGHS Empanelled Hospitals.
- Qns. 9. Are treatments taken for chronic diseases on OPD basis covered under the scheme?
- Ans. No. The expenses incurred on investigations and medications of 18 chronic illnesses as notified by the State Government shall be reimbursed to the beneficiaries as per current reimbursement mechanism and entitlement of the beneficiary.
- Qns.10. Are emergency cases, where treatment is taken in Non-Empanelled Hospitals, covered under the scheme?
- Ans. No. In case of emergency, if treatment is taken in any nonempanelled Hospital, reimbursement to the beneficiaries will be as per current reimbursement mechanism and entitlement of the beneficiary.
- Ques.11. What is Package Rate?
- Ans. Package Rate shall mean a lump sum amount charged by the empanelled hospital for packages/ procedures. This includes all charges pertaining to a particular treatment/ procedure

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including admission charges, visit fee/ consultation fee, patient's diet, monitoring charges, preoperative investigation charges, investigation charges, operation charges, anesthesia charges, operation theatre charges, procedural charges/ surgeon's fee, anesthetist's fee, cost of surgical disposals and all surgeries used during hospitalization, consumables, gas charges, surgical charges/ OT assistant charges, cost of medicine used during hospitalization, physiotherapy charges, nursing care charges for its services, routine post operative stay in ICU, blood transfusion (blood grouping, cross matching, blood or component, transfusion) and medicines for a period of 7 days after discharge from the Hospital, etc.

- Qns. 12. Is there any limit on amount of Cashless Treatment one may take on CCHF Card?
- Ans. For Employees, Pensioners and their dependents, there is no limit on the amount of cashless treatment one may take.
- Qns. 13. In what mode, the CCHF Scheme is being implemented by the Government?
- Ans. The Scheme is being implemented in Trust mode i.e. the scheme is directly being implemented by the State Health Authority without the intermediation of any Insurance Company.
- Qns. 14. What is the Helpline number of CCHF?

 Ans. Helpline number of CCHF is 1800-180-2036
- Qns. 15. Where can one register their complaint/issue?

 Ans. One can register their complaint/issue on https://cgrms.pmjay.gov.in/GRMS/loginnew.htm
- Qns. 16. What is Grievance Redressal mechanism?

 Ans. There shall be a three-tier dedicated grievance redressal mechanism inbuilt in the scheme as explained below:
 - a. District level committee to be chaired by Deputy Commissioner of the district
 - b. SHA level committee to be chaired by CEO, AB-HHPA
 - c. State level committee to be chaired by ACS-Health

The decision of State level committee shall be final and binding on all the parties. All the grievances shall be redressed by the committees in a time bound manner as specified under the scheme.