# Advisory for Empanelled Hospitals regarding claim processing.

AB-PMJAY portal is online portal link where cases are processed in FIFO (First in First out) mode. i.e. no pick and choose option is available to the processer Hospital shall upload all mandatory documents as per package master on portal for smooth processing of claim within specified turnaround time guideline. Hospitals are also instructed to follow package master and claim adjudication manual as on NHA website <u>https://pmjay.gov.in</u>.

#### **Instructions to Hospitals:**

#### 1) General Instructions.

- I. Patient should be Aadhar verified and bioauthentication is mandatory. In case bioauthentication not done hospital shall upload clinical pic of patient in front of biometric machine along with screen shot of error shown. Hospital shall submit undertaking duly signed and stamped by Doctor/Medical superintendent / Director of Hospital justifying reason of Non-bioauthentication.
- II. Patient clinical pic before, during and after treatment should be uploaded separately. Also pic of ICU/HDU/ward booked is mandatory.
- III. No cutting/ overwriting of dates is allowed.
- IV. All documents should be signed and stamped by treating doctor, even if they arecomputer generated
- V. Hospital bill of actual stay of patient should be raised in medical management cases.
- VI. Lab reports, X ray and USG reports are usually not stamped/signed by the pathologist/ radiologist/ ultrasonologist, esp. in-house diagnostic reports. In case of any dearranged lab report final lab report must be submitted at the time of discharge.
- VII. Patient satisfaction letter must be uploaded.
- VIII. It has been observed that a few of private empanelled hospitals booked government reserved packages by means of up coding. Any such cases reported shall be rejected and penalty shall be imposed as per NHA Guidelines.
  - IX. As per NHA guidelines medical and surgical case cannot be clubbed

together.

X. Package cost is inclusive of 3 Days pre hospitalization and 15 days post hospitalization expenses.

Package rate includes patient investigation, Room charges, Medicines, Consumables, Food and procedure charges etc.

CT scan /MRI/Blood transfusion can be booked as add on package.

- XI. Hospital should adopt step down policy for patient stay once stable patient should be shifted to ward before discharge. Direct discharge from ICU is not justified.
- XII. 24 hrs. Stay will be considered as 1day.
- XIII. Appropriate reply of query raised to be submitted on time.

## 2) General Surgical Instructions

- i) Privacy of the patient must be maintained.
- ii) Post op scar pic without bandage with sutures & face of patient / HPE report/ Mesh sticker and detail OT notes with steps of surgery in readable writing / typed are mandatory in surgical cases.
- iii) PSA in TURP and CA 125 in ovarian cystectomy cases is must in pre surgery.
- iv) All sticker Mesh/ stent/ implant should be pasted on OT notes/ procedure notes/ Angioplasty report. Bill of implant must also be submitted separately.
- v) In dialysis & cataract, photos must be uploaded before during and after treatment. RFT & HB should not be more then 30days old.
- vi) Patient should be in OT dress during surgery.
- vii)In surgical cases two evidences are required i.e. Evidence of confirmed diagnosis& evidence of procedure performed.

## 3) General Medical Instructions

- a. Treatment, vital chart & clinical notes (day wise) bearing name of patient and date and type of ward along with signature and stamp of treating doctor.
- b. If patient is staying for more than 3days, new pic with date should be added by attaching clinical pic with patient holding flag of date. All documents under one heading for all dates, no random uploading of

documents specially in medical management cases.

- c. Discharge summary is must. If patient is discharged before & preauth taken for more days it should be mentioned. In case Hospital doesn't attach complete discharge summary, the claim is liable to be rejected.
- d. ICU/ HDU pics in home clothes lead to rejection of claims.
- 4) Specific
  - a. Patient signature against each cycle of date of RT given. Intra procedure pic & CT stillsduring radiotherapy are mandatory.
  - b. In pterygium & conjuctival autograft clinical pic of eye showing disease and evidence of surgery should be there.
  - c. Pre and post CAG stills should be marked with obstruction point, stent and free flow of all stents used. TropT, ECG, 2DECHO are must for all cardiology related claims.

### 5) In death cases

- a. Clinical photo of patient is must at time of admission and during procedure.
- b. Death summary
- c. Clinical notes with treatment and vital chart.
- d. Investigation reports.
- e. CPR notes
- f. Death certificate

Compliance of above instruction is mandatory .Turn Around Time guidelines should be followed strictly. Repeated auto cancellation of cases will not be considered.

**Note:** It is again reiterated that the processing of claims is through portal of NHA in FIFO mode with random assignment to processers. No manipulation of giving preference to one over other is possible. Hospitals are advised to contact via formal channel (email id. ayushmanbharatharyana@gmail.com, contact no. 0172-4084464) for any queries. It is advised that unscrupulous informal communication claiming preferential processing of submitted cases to be ignored and reported to office of CEO, AB-HHPA.