



# Rajasthan State Health Assurance Agency Swasthya Bhawan, Tilak Marg, Jaipur

F. 1008 (20)/DoHFW/SBY/UH/2015-16 / 173

Dated: 02/03/16

## Meeting Notice

A meeting will be convened under the chairmanship of Principal Secretary Medical and Health on dated 04.03.2016 at 3:00 pm in the RHSDP Hall, Directorate of Medical and Health, Swasthya Bhawan, Jaipur to review the progress and resolve the issues of Bhamashah Swasthya Bima Yojana.

The Agenda of the meeting is enclosed at **Annexure-1**

### Following are requested to attend the meeting:

1. Superintendent , SMS Hospital, Jaipur
2. Superintendent, PBM Hospital, Bikaner
3. Superintendent, Mathura Das Hospital, Jodhpur
4. Mr. R. M. Singh, Regional Manager, New India Assurance Company Limited
5. Mr A.K. Sirohi, New India Assurance Company Limited
6. Dr. Avtar Singh Dua, General Manager, RISL.
7. Mr. Tapan Kumar, ACP and DD, DoIT.
8. Representative, Narayana Hridayalya Hospital, Jaipur
9. Representative, Apex Hospital, Jaipur
10. Representative, Geetanjali Hospital, Udaipur
11. Representative, Pacific Hospital, Udaipur
12. All concerned of BSBY State Level Team
13. Nodal Officer, BSBY , District Hospital Dholpur
14. Nodal Officer, BSBY , Raj Bahadur Memorial Govt Hospital, Bharatpur
15. Nodal Officer, BSBY , District Hospital Pratapgarh
16. Nodal Officer, BSBY, CHC Kama, Bharatpur
17. Nodal Officer, BSBY, CHC Kishangarhbas, Alwar
18. Nodal Officer, BSBY, CHC Kushalpur, Pali
19. DPM, Bharatpur
20. DPM, Bhilwara
21. Preeti Vijay, SwasthyaMargdarshak, PBM Hospital, Kota
22. Vinayak Sharma, SwasthyaMargdarshak, CHC Amer, Jaipur

  
(Naveen Jain)

Chief Executive Officer, RSHAA



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## Copy for information to:-

1. PS to Honourable Minister, Medical&Health, Govt. of Rajasthan.
2. PS to Principal Secretary, Medical & Health, Govt. of Rajasthan.
3. PS to Spl. Secretary & Mission Director, NHM.
4. PA to Add. Mission Director, NHM.
5. Superintendent , SMS Hospital, Jaipur
6. Superintendent, PBM Hospital, Bikaner
7. Superintendent, Mathura Das Hospital, Jodhpur
8. Mr. R. M. Singh, Regional Manager, New India Assurance Company Limited
9. Mr A.K. Sirohi, New India Assurance Company Limited
10. Dr. Avtar Singh Dua, General Manager, RISL.
11. Mr. Tapan Kumar, ACP and DD, DoIT.
12. Sh. M. P. Jain , SNO(M), BSBY
13. Mrs. Priyanka Kapoor, SNO(P), BSBY
14. Ms Varsha Pareek, Consultant- IEC
15. Dr. Rajendra Prasad, BSBY
16. Dr. Devendra Sondhi, BSBY
17. Dr. Vinay Aggarwal, BSBY
18. Dr Vikram Singh, BSBY
19. Mr Hemant Vyas, BSBY
20. Mr Ravikant Shukla, BSBY
21. Ms Aachu Agarwal, BSBY
22. Representative, Narayana Hridyalya Hospital, Jaipur
23. Representative, Apex Hospital, Jaipur
24. Representative, Geetanjali Hospital, Udaipur
25. Representative, Pacific Hospital, Udaipur
26. Nodal Officer, BSBY , District Hospital Dholpur
27. Nodal Officer, BSBY , Raj Bahadur Memorial Govt Hospital, Bharatpur
28. Nodal Officer, BSBY , District Hospital Pratapgarh
29. Nodal Officer, BSBY, CHC Kama, Bharatpur
30. Nodal Officer, BSBY, CHC Kishangarhbas, Alwar
31. Nodal Officer, BSBY, CHC Kushalpur, Pali
32. DPM, Bharatpur
33. DPM, Bhilwara
34. Preeti Vijay, SwasthyaMargdarshak, PBM Hospital, Kota
35. Vinayak Sharma, SwasthyaMargdarshak, CHC Amer, Jaipur

  
Chief Executive Officer, RSHAA



# Rajasthan State Health Assurance Agency

## Swasthya Bhawan, Tilak Marg, Jaipur

Annexure-1

### AGENDA POINTS

#### IT related issues:

1. **Beneficiaries identification** through only Bhamashah card from 1st April 2016.
2. **Message on Mobile and E-mail:** As decided in RFP and instruction given to DOIT, a message for different MIS reports and Activities are scheduled to be reported on mobile and Email but till date no message intimation or MIS report on E-Mail have been received which should be generated automatically by the software.
3. **MIS:** In Bhamashah Swasthya Bima Yojana software MIS is not being generated as per demanded, still we are not able to generate Institute wise status. Also the district wise report chart is no. of admitted patients are less than discharged patients.
4. **Portal is not showing following however informed long back vide letter no. 296 dated 13.04.15:**
  - Claim trend
  - Claim ratio
  - Incidence ratio
  - Anomalies
  - Average claim size top hospitals top packages
  - District and block wise trends
  - Grievance trends by demographic and region
5. **RSBY beneficiary identification:** There is no method for RSBY beneficiary identification till date. MOIC route is being used for treating such patients.
6. **Transport allowance:** The provision of Rs.100 in cash per discharge subjected to annual ceiling of Rs.500 in trauma & cardiac diseases. The entry of this field is not provided in software.
7. **Creation of Login IDs and Passwords:** To review the progress at each level i.e., State, zone, District, Block etc, login IDs and Passwords. Institute-wise information is not yet visible
8. **State level portal for BSBY:** To build a very good State level portal for BSBY in which we can give all the information about the private hospitals like;-
  - a. Name, location and Google tagging
  - b. Specialties & Packages offered by hospital
  - c. Nodal officer and help desk details
  - d. Name of Swasthya Margdarshak and his/her photographThe above Portal should give complete information of all the private hospitals empaneled in the scheme, so a common man should be able to search for facilities available on the basis of:-
  - a. Specialties / packages
  - b. location
  - c. availability of beds



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9. **Delay in Payment:**In BSBY Software, there should be a provision by which delay in payment should be classified in such a manner that we can know which part of the delay is attributable to hospital and which part is the responsibility of NIAC.
10. **Calculation of payable amount:-** Software should have a provision for calculation of payable amount to hospital after accounting for delay made by Insurance Company
11. **CountNumber of Beneficiaries :** Presently the progress based on TID generated is available in the software while there is a requirement of number of patients treated under BSBY also. Therefore it is proposed that beneficiary wise and package wise MIS report should be available in the software.
12. **Fund enhancement:** At present every case where the wallet has exhausted, is going directly for fund enhancement. There should be a pop-up window incorporated in the software, asking for MO's approval regarding fund enhancement with 'Remark' & 'Documents upload' option.

### NIA related issues:

1. **Minimum Document Protocol:**It is observed that hospitals are uploading a large no. of documents. To avoid the irrelevant documents uploading an exercise has been done for most frequently booked 125 packages. This exercise has been shared with NIA authority for further progress.
2. **Claims Pending Issues:** It is observed that so many claims raised by Institutions are still pending at the level of NIA. These are ranging between 35-50% which delaying further claims approval and consequently payments.
3. **Private Hospital Empanelment:** As per agreement Insurance Company will take up the empanelment of private hospitals, New India Assurance is delaying in empanelment. A list of 388 Private Hospitals have been provided to Medical Health Department. There are many complaints from Different Private hospitals regarding empanelment and a list of hospitals has been given which were not empaneled as they were in defaulter's list.
4. **User ID and Passwords are non-functional and nom proper response from NIAC.**
5. **Training of all The Stake holders:** NIA have to trained Private hospital officials at their level about the software and scheme. There is a need to arrange the training of SwasthyaMargdarshak& MOIC of 30 private hospitals which are ready for empanelment.

### Issues related to schemes

1. State/District/Block level committees
2. Package Anomaly Issues
3. Grievance Redressal Module