

ANNEXURE-1

GOVERNMENT OF NAGALAND
DIRECTORATE OF HEALTH AND FAMILY WELFARE
NAGALAND: KOHIMA

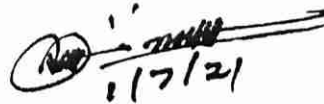
DHFW-8/AB-NHPM(PMJAY)/Misc/2018 /3810-12 Dt. Kohima 8/July 2021

CIRCULAR

As per AB-PMJAY guidelines the empanelled public hospitals will be reimbursed for the services rendered by them as per package rates as claim amount under AB-PMJAY. The claim amount earned by the public hospitals under AB-PMJAY shall be retained locally at the hospital level. The amount shall be spent on the improvement of infrastructure and services in the hospital itself whereby improving the overall infrastructure and quality of care.

Therefore, as approved by the Government vide letter no. HFW-28/AB-NHPM/2018/22 dated Kohima 17th December 2020, you are requested to utilize the claim amount as per the "Claim Amount Utilization Guideline for Public Hospitals" and submit quarterly report as per format enclosed in Annexure-1.

Enclosed: As Stated


1/7/21

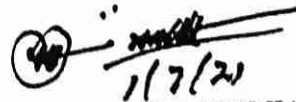
(DR. NEIKHRIELIE KHIMIAO)
Principal Director
Directorate of Health and Family Welfare
Nagaland: Kohima.

Dt. Kohima July 2021

DHFW-8/AB-NHPM(PMJAY)/Misc/2018

Copy to:

1. The Principal Secretary to the Government of Nagaland, Health & Family Welfare Department Kohima Nagaland for information.
2. The Mission Director, NHM, Directorate of Health and Family Welfare for information.
3. The Chief Medical Officers/ Medical Superintendents of all Districts, Nagaland for information and necessary actions
4. Office copy.


1/7/21

(DR. NEIKHRIELIE KHIMIAO)
Principal Director
Directorate of Health and Family Welfare
Nagaland: Kohima.



modifications, Capital Investment for starting In-House Pharmacy, Awarding Staff Incentives, Exigency Hiring of technical personnel, etc.

NB:

- The Hospital shall be solely responsible for any liability arising from the hired personnel. All Hiring of personnel shall be in conformity with extant Guideline/ Norms.
 - Hospitals may incentivize PMAMs who are on contractual/ fixed pay or for overtime duty by paying a fixed amount (suggestive- Rs 50/- only) per settled claim on a monthly basis.
 - Hospitals may also institute Award for Best Performing Staff of the Month/ Year.
 - Any Capital Investment for starting In-House Pharmacy will be on loan basis, to be recovered on installment basis.
- c. 15% of the net profit shall be utilized for the Hospital Staff Welfare Fund.
- i) Each Hospital shall establish a Hospital Staff Welfare Fund and the said fund shall be maintained in a separate bank account to be jointly operated by 2 (two) office bearer.
 - ii) The Hospital shall frame a guideline for utilization of the Hospital Staff Welfare Fund with intimation to the directorate.
7. In case of any fraud detected, SHA shall have the authority to withhold/release/withdraw the incentive component in part or entirety depending upon the extent of fraud detected.

PART B: RESPONSIBILITIES OF HOSPITAL AUTHORITY

1. General Responsibilities

- a. All public hospitals empanelled under AB-PMJAY are required to provide inpatient services (AB-PMJAY Treatment Package Cover) to the entitled beneficiaries free of cost as per AB-PMJAY Guidelines. The following is the list of benefits to be provided to the entitled beneficiaries:
 - *Pre-hospitalization:*
Consultation involving diagnostic tests and medicines before admission within the same hospital upto 3 days prior to hospitalization/ before the admission.
 - *During hospitalization:*
Medicine and medical consumables, non-intensive and intensive care services, diagnostic and laboratory investigations, procedure costs including medical implant services (where necessary), accommodation benefits (General Ward) and food services for the patient, complications/co-morbid conditions arising during treatment.
 - *Post-hospitalisation:*
Expenses upto a limit of 15 days that includes prescribed medicine to be continued following discharge of the patient from the hospital.
- b. The Hospital Authority shall ensure that requisite infrastructure, manpower and facilities including space for Helpdesk and adequate PMAM as per AB-PMJAY Guideline is put in place and is running at all times.
- c. Hospitals are to maintain Patients Record as per MCI Guideline. Necessary documents leading to the diagnosis and treatment instituted are uploaded to TMS portal wherever required as per AB-PMJAY Guideline.
- d. It shall be the responsibility of the MS/SMO/MOIC to ensure complete and timely uploading of claims for all the procedures done in respect of entitled patients and shall follow it up till the claim(s) is/are finally settled.
- e. All Empanelled Public Hospitals are to put in place AB-PMJAY Patient Identifier such as AB-PMJAY Patients stamps on the Patients Records, Prescription slips for AB-PMJAY Patients etc for easy identification and final tracking of hospital processes.

- f. Wherever feasible, all Empanelled Public Hospitals are encouraged to open In-House Pharmacy and strengthen diagnostics facilities to ensure seamless delivery of cashless services to AB-PMJAY beneficiaries and reduce dependency on Private establishments.

2. Guideline on Use of Drugs, Consumables Including Implants and Diagnostics

- a. Hospitals should maintain strict adherence to Standard Treatment Guidelines and Rational Prescriptions including Use of Drugs.
- b. To the extent possible only generic medicines shall be prescribed in conformity with MCI Guideline.
- c. Free drugs and diagnosis initiative of the NHM/ provided by the department shall be utilized at all possible times.
- d. In case of stock-out of Free drugs, the items/articles are to be procured from Jan Aushadi Store. If unavailable, then to procure from the in-house pharmacy.
Procurement from empanelled private Pharmacy will be permissible only in the case of non-availability of the article/item in the above mentioned facilities, on production of Non-Availability Certificate.
- e. In case of non-availability of Free diagnostics, the Test/ Investigation is to be procured from empanelled private Diagnostic Centres/ Laboratories, on production of Non-Availability Certificate from the Hospital Laboratory.

3. Maintenance of Accounts:

- a. All empanelled Public Hospital shall maintain books of account transaction of the hospitals claims in conformity with the extant Government Financial Code/ Rules and shall be subject to audit in conformity with the extant Rules and Regulations.
- b. All empanelled Public Hospital shall maintain a dedicated saving bank account for transaction of the hospitals claims, to be jointly operated by the MS/SMO/MOIC and the AB-PMJAY Nodal Officer of the Hospital or as nominated by the HCMC in case of PHCs.
- c. The bank account opening and maintenance shall be as per the general applicable rules in this matter and shall not require any special approval.
- d. All the expenditure from the said account shall be done by approved banking instrument (Cheque/ Draft/ Bank Order/ Electronic Transfer, etc) only. Cash payments should not be done except for petty expenses as per extant Financial Rules.
- e. MS/SMO/MOIC shall facilitate the State Health Agency (SHA) in conducting hospital audits, treatment audits and other verifications at the hospital as prescribed in AB-PMJAY guidelines.
- f. MS/SMO/MOIC shall submit the Quarterly Report(s) in the prescribed Format given at Annexure: 1 to the SHA through the respective Chief Medical Officer.

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*[Handwritten signature]*

**HOSPITAL QUARTERLY REPORT ON CLAIM UTILIZATION FORMAT**  
(To Be Submitted To SHH by email at [shh@nand.ohim@gmail.com](mailto:shh@nand.ohim@gmail.com) within 15 days following end of the Quarter)

Name of the Empanelled Public Hospital: .....

Reporting Quarter: .....

Financial Year: .....

**A. Key Performance Indicators**

| Sl. | Particulars                                                                                                    | Achievement | Remark |
|-----|----------------------------------------------------------------------------------------------------------------|-------------|--------|
| 1.  | No. of Preauthorization                                                                                        |             |        |
| 2.  | Preauthorization Raised Amount (Rs.)                                                                           |             |        |
| 3.  | No. of Claims Submitted                                                                                        |             |        |
| 4.  | Claims Amount Submitted (Rs.)                                                                                  |             |        |
| 5.  | No. of Claims Paid                                                                                             |             |        |
| 6.  | Claims Paid Amount (Rs.)                                                                                       |             |        |
| 7.  | Total Gross Income (Rs.)                                                                                       |             |        |
| 8.1 | Total Net Profit (Rs.) (Sl. No A7 - B1)                                                                        |             |        |
| 8.2 | Amount Allocated for strengthening/ replenishing the Free Drugs and Diagnosis facilities of the hospital (40%) |             |        |
| 8.3 | Amount Allocated for Strengthening Hospital Services (45%)                                                     |             |        |
| 8.4 | Amount Allocated for Hospital Staff Welfare Fund (15%)                                                         |             |        |
| 9.  | Opening Balance from Previous Quarter (Rs.)                                                                    |             |        |
| 10. | Closing Balance of Reporting Quarter (Rs.)                                                                     |             |        |

**B. Expenditure Statement**

| Sl. | Expenditure Head                                                                                                                                                                          | Amount (Rs) |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 1.  | Expenditure towards providing Cashless Services (AB-PMJAY Treatment Package Cover)                                                                                                        |             |
| 2.  | Expenditure towards strengthening/ replenishing the Free Drugs and Diagnosis facilities of the hospital (Enclose copy of Hospital/ Health Centre Management Committee Resolution and SoE) |             |
|     | • Free Drugs                                                                                                                                                                              |             |
|     | • Free Diagnosis                                                                                                                                                                          |             |
| 3.  | Expenditure towards Strengthening Hospital Services (Enclose copy of Hospital/ Health Centre Management Committee Resolution and SoE)                                                     |             |
| 4.  | Expenditure towards Hospital Staff Welfare Fund (Enclose copy of Hospital/ Health Centre Management Committee Resolution and SoE)                                                         |             |
| 5.  | Total Expenditure                                                                                                                                                                         |             |

Name, Signature, and Seal of Hospital Authority