प्रेषक,

प्रशान्त त्रिवेदी, प्रमुख सचिव, उत्तर प्रदेश शासन।

सेवा में,

- समस्त मुख्य चिकित्साधिकारी, उत्तर प्रदेश।
- निदेशक / प्रमुख चिकित्सा अधीक्षक / मुख्य चिकित्सा अधीक्षक समस्त राजकीय चिकित्सालय, उत्तर प्रदेश।

चिकित्सा अनुभाग-1

लखनऊः दिनांकः । ५ दिसम्बर, 2018

विषयः— आयुष्मान भारत—प्रधानमंत्री जन आरोग्य योजना के अन्तर्गत राजकीय चिकित्सालयों द्वारा क्लेम धनराशि के उपयोग हेतु दिशा—निर्देश।

महोदय,

उपर्युक्त विषयक मुख्य कार्यपालक अधिकारी, आयुष्मान भारत-एन०एच०पी०एम०/साचीज, लखनऊ के पत्र सं०-एन०एच०पी०एम०/पत्रा-431-0/2018-19/989 दिनांक-14.11.2018 के साथ संलग्न राजकीय चिकित्सालयों द्वारा क्लेम धनराशि के उपयोग हेतु भारत सरकार की गाइडलाइन्स को संलग्न कर प्रेषित करते हुए मुझे यह कहने का निदेश हुआ है कि कृपया प्रश्नगत प्रकरण में भारत सरकार की उक्त गाइडलाइन्स के आधार पर आवश्यक कार्यवाही करने का कष्ट करें।

भवदीय,

(प्रशान्त त्रिवेदी) प्रमुख सचिव।

संख्या एवं दिनांक उपरोक्तानुसार।

प्रतिलिपि मुख्य कार्यपालक अधिकारी, आयुष्मान भारत—एन०एच०पी०एम० / साचीज, लखनऊ को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित।

> आज्ञा से, क्रीय्य्यी (प्राणेश चन्द्र शुक्ल) अनु सुचिव।

cs.pon@nic.in; administrator-dd-dnn@nic.in; cs-mizoram <cs-mizoram@nic.in> Cc: Dinesh Arora <arora.dinesh@ias.nic.in>; hennadhawan.nha@gmail.com; anushreegoel.nha@gmail.com Subject: PMJAY Guidelines on utilisation of claim amount and upcoming PRAGATI REVIEW

Ref:No.CEO/PMJAY/PRAGATI/2018

9th November, 2018

Dear colleague,

It has been more than a month since the PM-JAY was rolled out. I congratulate the entire PM-JAY team in your State for their continuous sincere attempt to get the scheme implemented. The demand side awareness of PM-JAY is building up rapidly and so far, more than 4 lakh beneficiaries has been identified and more than 1.86 lakhs patients' procedures have been reported to have occurred cumulatively in all the States. It is imperative that higher awareness shall translate into higher

To effectively serve to this increased demand the PM-JAY must have a wider network of the healthcare service providers. As more and more private hospitals are applying for empanelment, the State Health Agency (SHA) must expedite the due diligence with the private applicant hospitals so that empanelment process can be completed within given time frame.

The PM-JAY, by its design, will be able to generate additional resource/income for public hospitals. Public hospitals including medical college hospitals. The claim money earned by the public hospitals shall be retained by their Rogi Kalyan Samitees (RKS) and can be used for their infrastructure/service delivery upgradation and other related purposes. A part of this claim received can also be provided as cash incentive to the staff of the public hospitals. I am pleased to share the suggestive guidelines on utilization of claim amount earned by public hospitals. The state can revise the guideline to suit their local needs. hope that this guideline is a more effective aid to your state in facilitating the implementation and shall result in higher motivation

Moreover, the Flon'ble Prime Minister will be taking a review of the progress of implementation of PM-JAY at the PRAGATI (Pro-Active Governance And Timely Implementation) Meeting which is slated to be held on 28th November 2018. A summary of issues to be reviewed and discussed is attached with this mail for your ready reference.

Looking forward to your support and participation in making PM-JAY a success.

Yours sincerely,

(Dr.Indu Bhushan)

Chief Executive Officer

Ayushman Bharat: National Health Protection Mission

Phone: +91-11-23468908, 23468915

Swasthya Aapka, Saath Hamara

Deutsche Gesellschaft fuer Internationale Zusammenarbeit (GIZ) GmbH;

Sitz der Gesellschaft Bonn und Eschborn/Registered offices Bonn and Eschborn, Germany;

Registergericht/Registered at Amtsgericht Bonn, Germany; Eintragungs-Nr./Registration no. HRB 18384 und/and Amtsgericht Frankfurt am Main, Germany;

USI-IdNr.NAT ID no. DE 113891176;

Vorsitzender des Aufsichtsrals/Chairman of the Supervisory Board: Martin Jäger, Staatssekretaer/State Secretary;

Vorstand/Management Board: Tanja Goenner (Vorstandssprecherin/Chair of the Management Board), Dr. Christoph Beier (Stelly, Vorstandssprecher/Vice-Chair of the

Ms Sangeeta Singh Additional Chief Executive Officer, Chata Madal Agazay





Guidelines for use of claim amount earned by public hospitals under PM-JAY Background

All such public hospitals empanelled under PM JAY to provide inpatient services to the eligible beneficiary families will be reimbursed by the insurance companies/trusts for the services rendered by them as per package rates under PM-JAY as claim amount.

The claim amount earned by public hospitals under PM-JAY shall be retained locally at the hospital level. The hospital level Chikitsa Prabandhan Samiti (CPS) / Hospital Management Committee (HMC) / Rogi Kalyan Samiti (RKS) shall be responsible for utilisation of this claim amount. In principle, the amount has to be spent on improvement of the infrastructure and services in the hospital itself whereby improving the overall infrastructure and quality of care.

Guidelines for the use of claim amount by public hospitals-

- 1. Respective empanelled PM-JAY public hospital shall maintain a dedicated bank account and books for the amount accrued as claim under the scheme. The bank account opening and maintenance shall be as per the general applicable rules in this matter and shall not require any special approval.
- 2. All the withdrawals and reimbursements from the account for all PM-JAY related matters shall be done by approved banking instrument (Cheque/draft/bank order, etc) only. Cash payments should not be done.
- 3. Upto 25% of the total claim amount can be earmarked for payment of incentive to the hospital staff.
- The remaining claim can used for improving the overall infrastructure (critical gap funding), functioning of the hospital, quality of services and delivery of services.
- 5. This claim amount can be used for the following but not limited to the following:
 - a) Payment of remuneration of Pradhan Mantri Arogya Mitra.
 - b) Local purchase of consumables and medicines which is not available at the State health department stores department supply/State Medical Services Corporation supply but as per the overall guidelines of the State in regards to procurement of the medicines (to the extent possible only the generic medicines should be prescribed and procured).





- c) Local purchasing of services related to diagnostics and investigations which are not available in the hospital.
- d) Hiring of services of clinical specialists and non-clinical man power such as technicians, computer operators, etc.
- e) Any other clinical or non-clinical services of patient centric nature.

All local purchasing must be done by entering into well negotiated rates with the supplier as per the applicable rules in this matter. All hiring should be done as per the NHM rules as far as possible.

The State Health Agency (SHA can modify and add to the guidelines for specific use of the utilisation of the claim amount.

- 6. The State Health Agency shall formulate specific guidelines for utilisation of amount for payment of incentive to hospital staff. An indicative list for the team of clinical and non-clinical specialist that shall be rewarded with incentive for service delivery under PM-JAY is as below
 - a) Surgeon/Medical Specialist/Physician, the principal person treating the
 - b) Assistant Surgeon/ other medical specialist involved (such as paediatrician in delivery cases).
 - c) Anaesthetists/ Other specialists which are involved in the care
 - d) On call/ on roster physician
 - e) Staff nurse and nursing assistants
 - f) Lab technicians or technicians of imaging or rehabilitative departments
 - g) Others (such as involved in ancillary patient care).

SHA may like to formulate a state specific guideline for distribution of incentive amount based on their local condition. Any specific issues that may arise with respect to distribution of incentive amount or utilisation of this claim amount by public hospitals be presented before the SHA for their resolution.