Guidelines for use of claim amount earned by public hospitals under PMRSSM

Background

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

The claim amount earned by public hospitals under PMRSSM 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 claimamount. 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 PMRSSM 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 PMRSSM 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.
- 4. 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 Ayushman 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 PMRSSM is as below
 - a. Surgeon/Medical Specialist/Physician, the principal person treating the patient.
 - 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.