

Ref: IRDAI/HLT/ORD/Misc/v39/03/2019

Date: 05.03.2019

## ORDER

Re: Constitution of Joint working group of IRDAI and NHA

Government of India has launched Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) for providing secondary and tertiary care cashless treatment at empanelled private and public hospitals across the country to families listed in SECC (Socio-Economic Caste Census) 2011. To support the Implementation of AB-PMJAY with the active involvement of various stakeholders and to further strengthen the health insurance ecosystem it is desired that IRDAI and NHA work on key areas of mutual interest and cooperation.

In order to work in this direction, a Joint Working Group is constituted with the following Members:

- 1. Dr Dinesh Arora, Dy. CEO,NHA, Chair
- 2. Mr. Suresh Mathur, ED, IRDAI, Co- Chair
- 3. Mr. Kunnel Prem, CEO, IIB, Member
- 4. Ms. Yegnapriya Bharath, CGM, IRDAI, Member
- 5. Mr. A.V. Rao , G M, IRDAI, Member
- 6. Mr. D V S Ramesh, G M, IRDAI, Member
- 7. Dr Arun Gupta, ED,NHA, Member
- 8. Mr. Kiran Ananndampillai, Advisor, NHA, Member
- 9. Mr. Nishant Jain, Advisor, NHA, Member
- 10. Ms. Malti Jaswal, Advisor, NHA, Member
- 11. Dr Pankaj Sharma, Manager, IRDAI, Member-Convener

Terms of reference for the Joint Working Group shall be: -

- 1. Network hospitals management: To have a National Repository of Empanelled Hospitals under Insurance/Government schemes with defined standards for quality and package rates and codes.
  - i. Defining Hospital infrastructure and Facility Audits to understand capacity of Hospitals, Specialists availability.
  - ii. Developing a roadmap to get one Common list of Accredited/ Verified hospitals for the entire Industry including ROHINI, NHRR, NIN and PMJAY Databases.
  - iii. Comparative Study of Packages and their rates and mapping to uniform codes.
  - iv. Defining Standards and Indicators for safe and quality Healthcare to Patients.

Timeline: 12 months

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- 2. Data Standardization and exchange: To create standard data formats across Health Insurance payers for analysis and policy making.
  - i. Developing standardized data tables to capture and report the data, identifying data elements common with IRDAI and PMJAY.
  - ii. Setting up a framework for capturing and exchanging data.

Timeline: 3 months

- **3. Fraud and abuse control:** To help detect and deter frauds through common repository and capacity building.
  - To develop a standard reporting format for fraud and abuse to be used across the industry and Govt. Schemes.
  - ii. Repository of fraudulent transactions, modus operandi and entities.
  - iii. Develop standards for field verification and investigation.
  - iv. Develop "name and shame" guidelines.

Timeline: 6 months

- 4. Common IT infrastructure for health Insurance claims management: To Increase service efficiency and transparency amongst stakeholders in delivery of Health Insurance services.
  - i. Defining the roadmap for electronic, paperless, codified data exchange between payer and provider, collation and analysis
  - Defining a roadmap for creation of standard electronic personal health record for insured population with a common identifier.

Timeline: 6 months

The working group may hold meetings as and when needed and submit a report with recommendations within the timelines prescribed. The working group may consult experts from the Insurance Industry, Healthcare Providers, NABH, IT, Third Party Administrators etc. in the course of their deliberations..

Sujay Banarji Member