

EMPANELMENT
OF
HOSPITALS

ORIENTAL EXPERIENCE

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PREAMBLE

- HEALTHCARE DELIVERY SYSTEM WITNESSING RAPID CHANGE
- INDIVIDUAL PAYING HOSPITALISATION BILL – INSURANCE LED COVERAGE
- INPATIENT EXPENSES
 - Current - Rs 27,000 crores.
 - 2012 - Rs 73,000 crores.

Licensing of Third Party Administrators as Service Provider

- To meet challenges of rapid growth of Health Insurance Sector.
- To evolve uniform delivery system
- Provide Cash Less Claim settlement services through empanelled Hospitals.

Empanelment Process

- TPAs short list hospitals & nursing homes as per minimum norms prescribed under Medicaid Policy.
- Screening of PSP (Preferred Service Provider).
- PSP Application Form duly filled in by the PSP and submitted along with rate list, doctors bio-data & various facilities offered by them.

Empanelment Process

- MOU with the PSP after rate negotiation.
- On site assessment of the PSP.
- Monthly / Yearly feed back system in order to decide on renewal.

Criteria for Empanelment

- Infrastructure & Facilities available.
- Quality of Service rendered.
- Patient care background.
- Bed-strength and availability.
- Management background and past track record.
- IT infrastructure / computerization.

Difficulties during Empanelment

- Lack of transparency in giving infrastructure details (bed capacity / OT / qualification of nurses and staff, etc.)
- Hospitals hesitate in handing over tariff list to TPA.
- Many hospitals do not agree to give discounts to TPA / Insurance Company.

Difficulties during Empanelment

- Due to delays / defaults by few TPAs, leading hospitals are not giving credit facility without Bank Guarantee / Deposit.
- Many hospitals charge high rate of interest upto 18% - 24% on non-payment within credit period.

Difficulties during Empanelment

- Hospitals in rural areas do not have fax machine. They are popular with local population, but do not have registration and do not confirm the bed capacity specific under mediclaim.
- Accreditation of hospitals on the lines of hotels for assessing the facilities.

Experience after Empanelment

- Different rates quoted for the same procedure on case to case basis.
- Not giving full details of patient's history at the time of submission of pre-authorization form.
- Discrepancy in clinical and path history of patient between pre-authorization form and discharge summary.

Experience after Empanelment

- Many cases of disease like diabeties or hypertension are written as either recently detected or no past history available.
- Delayed submission of bills.
- Excess visit of doctors.

Experience after Empanelment

- Patient referred to different units of check-up and consultation fee charged unit-wise.
- Putting in higher level of accommodation.
- More number of surgeons and anesthetists in case of surgery.

Advantage of Empanelment

- Data warehouse will be created related to Health Care Utilities & Providers.
- Single reasonable Tariff for various Health facilities will gradually evolve.

Advantage of Empanelment

- Standardized Billing format will help actuaries to statistically analyze spending on medical treatment.
- Data of countries health will be complied as per ICD – 10 coding.

THANK YOU