AAROGYASRI HEALTH CARE TRUST

The 17th Meeting of the Board of Trustees of Aarogyasri Health Care Trust held on 22.02.2016 at 3:00 P.M at Conference Hall in Aarogyasri Health Care Trust under the Chairmanship of Dr. C. Laxma Reddy, Hon’ble Minister for Health Medical & Family Welfare, Telangana State. Sri. Rajeshwar Tiwari, I.A.S. Principal Secretary to Govt., Health, Medical & Family Welfare Dept, Dr. Budda Prakash M. Jyothi, I.A.S. Commissioner of Health & Family Welfare Dept, Dr. Ramani, Director of Medical Education Dept, Dr. Lalitha Kumari, Director of Health, Dr. Veena Kumari, Commissioner, Vaidya Vidhana Parishad and Dr. Manohar, Director, NIMS, Hyderabad and other official members have attended the meeting. The list of members of the Board of Trust who were present is appended. Leave of Absence was granted to those who could not attend.

As per Bye-law 13(a) of Deed of Trust, the quorum required for the Board Meeting is four (4). Eight (8) Trustees including the Vice-Chairman and Ex –Officio Executive Vice-Chairman have attended the meeting and there was quorum.

The Chief Executive Officer and Secretary of the Board of Trustees welcomed the members on behalf of the Chairman.

The Chief Executive Officer & Secretary of the Board briefed the Board of Trustees the major developments that have taken place since last Meeting of the Board of Trustees i.e. 09.07.2014 which, inter-alia, include the following :-

1. Performance of the Trust in implementing the Aarogyasri Scheme.
2. The action taken by the Trust regarding expenditure incurred on Aarogyasri beneficiaries residing in transferred (7) Mandals of Khammam District of Telangana State to West Godavari and East Godavari Districts of Andhra Pradesh.
4. Pursuant to the re-organisation of Andhra Pradesh, the two different portals for both the Scheme i.e. Aarogyasri and Employees Health Scheme, for both States of Telangana and Andhra Pradesh came into effect from 1st Feb, 2016.

The Chief Executive Officer has explained the salient features of Mobile App developed by the Trust for use of beneficiaries of Aarogyasri Scheme, EHS and JHS.

The Chief Executive Officer and Secretary of the Board of Trustees, later explained the actions taken on the resolutions passed by the Board in the earlier Meeting (16th Meeting of Board of Trust) held on 09.07.2014 as indicated in the ‘Action Taken Report’. He has further explained the present status of the Schemes, as indicated below:

Under Aarogyasri Scheme, as on 15.02.2016, 256 Network Hospitals both under Government & Private sector have been empanelled. A total of 17,695 Health Camps conducted and 42,50,864 patients were screened. 14,39,869 Pre-authorisations were performed and 12,55,010 surgeries were done. The pre-authorised amount for the surgeries/therapies is Rs. 3,773.64 Crores. The claim paid is Rs. 2,983.32 Crores for the surgeries/therapies performed.

Under Employees Health Scheme, as on 15.02.2016, 69,976 pre-authorisations were performed. The pre-authorised amount for the surgeries/therapies is Rs.100.52 Crores. 26,437 surgeries/Therapies were done.

The Board approved the ‘Action Taken Report’ relating to the resolutions passed by the Board in the 16th Meeting held on 09.07.2014.

The following items, as per Agenda circulated, were considered by the Board of Trustees and decision taken thereon as under:

I. ITEMS FOR APPROVAL:

1. Amendments to Deeds of Trust of AHCT:

The Board observed that the Deed of Trust, Dt:24.08.2007 and Supplemental Deed of Trust, Dt: 28.09.2010 were formed for combined Trust by erstwhile Government of Andhra Pradesh and as per section 101 of A.P. Reorganisation Act, 2014 any law made before appointed day have to be adapted by making such adaptations and modifications of the law,
whether by way of repeal or amendment, and thereupon every such law shall have effect subject to the adaptations and modification so made until altered, repealed or amended by a competent Legislature or other competent authority. Hence, the Board opined that the Deeds of Trust have to be adapted for Aarogyasri Health Care Trust with necessary modifications / amendments as per section 101 of A.P. Reorganisation Act, 2014 and the with that observation, the Board resolved as follows: -

**Resolution No. 285/2016:** The Board directed the Chief Executive Officer to submit the proposal to Government for adaptation of Deed of Trust with necessary amendments for approval.

2. **Formation of Logo for Aarogyasri Health Care Trust:**

   The Board held the view that “Logo” is the symbolic representation of objective of the scheme. The models of “Logo” for AHCT were studied and discussed the relevance of components of Logo. After detailed discussion the Board resolved as follows: -

   **Resolution No. 286/2016:** The Board directed the Chief Executive Officer to submit the proposal to Government for taking decision in the matter.

3. **Change of nomenclature of the Trust:**

   In view of formation of Telangana State, the proposal for change of name of “Aarogyasri Health Care Trust” so as to reflect the ideology of the State was placed before the Board. After examining the proposed names, the Board resolved as follows: -

   **Resolution No. 287/2016 :** The Board directed the Chief Executive Officer to submit the proposal for taking a view regarding change of name of the Trust.
4. **Change of nomenclature of the Scheme:**

The Board opined that the name of the scheme “Rajiv Aarogyasri Community Health Insurance Scheme” is not relevant in light of formation of Telangana State and supported the proposal to change name of the scheme, suitably. The Board examined the alternative names proposed in this regard and resolved as follows:

**Resolution No. 288/2016:** The Board directed the Chief Executive Officer to submit the proposal to Government for taking a decision in the matter.
5. Enhancement remuneration of Contract Employees:

The Board examined the existing the remuneration of contract employees of Aarogyasri Health Care Trust in light of the orders issued by vide G.O.Ms.No.14, Dt: 19.02.2016, Finance (HRM-I) Dept., Government of Telangana. The Board discussed the financial implications involved due to enhancement of remuneration as per Government orders. The Board observed that enhancement is as per orders and accepted/approved proposed enhanced remuneration per month to each category of post given in the Table of proposal.

<table>
<thead>
<tr>
<th>Resolution No. 289/2016</th>
<th>By the authority under bye-laws of Trust Deed, the Board approved the proposal for enhancement of remuneration of Contract employees of AHCT as shown below:</th>
</tr>
</thead>
</table>

**CONTRACT EMPLOYEES**

<table>
<thead>
<tr>
<th>Sl. No</th>
<th>Category of Post in AHCT</th>
<th>Remuneration per month</th>
<th>Enhanced remuneration per month</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Chief Medical Auditor</td>
<td>Rs. 75,000/-</td>
<td>Rs. 87,130/-</td>
</tr>
<tr>
<td>2.</td>
<td>Executive Officer</td>
<td>Rs. 75,000/-</td>
<td>Rs. 87,130/-</td>
</tr>
<tr>
<td>3.</td>
<td>Joint Executive Officer (Technical)</td>
<td>Rs. 35,000/-</td>
<td>Rs. 52,500/-</td>
</tr>
<tr>
<td>4.</td>
<td>Joint Executive Officer (Non-Technical)</td>
<td>Rs. 35,000/-</td>
<td>Rs. 49,870/-</td>
</tr>
<tr>
<td>5.</td>
<td>Deputy Executive Officer (Technical)</td>
<td>Rs. 30,000/-</td>
<td>Rs. 45,000/-</td>
</tr>
<tr>
<td>6.</td>
<td>Deputy Executive Officer (Non - Technical)</td>
<td>Rs. 30,000/-</td>
<td>Rs. 42,490/-</td>
</tr>
<tr>
<td>7.</td>
<td>District Co-ordinator</td>
<td>Rs. 35,000/-</td>
<td>Rs. 52,500/-</td>
</tr>
<tr>
<td>8.</td>
<td>PMU Executives</td>
<td>Rs. 25,000/-</td>
<td>Rs. 31,460/-</td>
</tr>
<tr>
<td>9.</td>
<td>Network Administrator</td>
<td>Rs. 15,000/-</td>
<td>Rs. 17,500/-</td>
</tr>
</tbody>
</table>
6. Enhancement of remuneration of Outsourcing employees:

Board discussed the duties and responsibilities of Field staff and observed that the presences of Primary Health Centre Aarogyamithras (PHC-Mithras) in the field is insignificant and desired results are not getting from them. In view of the above, Board directed to re-organise the field staff structure and deploy on need basis.

The Board has also examined the proposal for enhancement of remuneration of staff appointed on outsource method in view the G.O.Ms.No.14, Fin. (HRM–I) Dept., Dt: 19.02.2016 and approved the proposed enhancement of remuneration per month to each category of post given in the Table of the proposal. The Board directed to implement the enhanced remuneration after re-organisation of field staff pattern and finalisation of new Job chart to each category of post.

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<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Data Processing Officer</td>
<td>Rs. 11,500/-</td>
<td>Rs. 17,500/-</td>
</tr>
<tr>
<td>2.</td>
<td>Data Entry Operator</td>
<td>Rs. 9,500/-</td>
<td>Rs. 15,000/-</td>
</tr>
<tr>
<td>3.</td>
<td>Attenders</td>
<td>Rs. 6,700/-</td>
<td>Rs. 12,000/-</td>
</tr>
<tr>
<td>4.</td>
<td>Drivers</td>
<td>Rs. 8,000/-</td>
<td>Rs. 15,000/-</td>
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</table>

Resolution No. 290/2016: By the authority under bye-laws of Trust Deed, the Board approved the proposal for enhancement of remuneration of staff working on outsource basis in Aarigyasri Health Care Trust as shown below:

**TRUST AND BRANCH OFFICE**

<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1.</td>
<td>PAM (PHC Aarogyamithra)</td>
<td>Rs. 6,776/-</td>
<td>Rs. 12,000/-</td>
</tr>
<tr>
<td>2.</td>
<td>NAM (Network Aarogyamithra)</td>
<td>Rs. 7,860/-</td>
<td>Rs. 12,000/-</td>
</tr>
<tr>
<td>3.</td>
<td>Office Associate</td>
<td>Rs. 10,720/-</td>
<td>Rs. 15,000/-</td>
</tr>
</tbody>
</table>

**FIELD STAFF**
7. Identification of Aarogyasri Scheme beneficiaries:

The Board discussed the pros and cons of evolving own mechanism for selection of Aarogyasri scheme beneficiaries. It is observed that the Aarogyasri scheme was established to provide Health Care Services to poor who are below poverty line. Adapting different criterion by each Department for deciding BPL family will create confusion and ultimately affects proper implementation of the Scheme. Hence, it is better to use the data of Civil Supplies Department created for the purpose of Food Security Cards by the Aarogyasri Health Care Trust for selection of beneficiary under Aarogyasri Scheme as the said Data was finalised after thorough scrutiny of Revenue Department. Therefore, the Board resolved as follows:

**Resolution No.291/2016:** By the authority under Bye-Laws, the Board decided to use the Data of Civil Supplies Department, Government of Telangana created for issue of Food Security Cards for selection of beneficiary under Aarogyasri Scheme in the event of present data of White Ration Card is dispensed with.

8. Extension of Service Contract of TCS:

The Chief Executive Officer, Aarogyasri Health Care Trust has informed the Board that as per permission given by the Government of Telangana vide Lr.No. 2879/A2/2015, HM& FW(A.2) Dept., Dt: 23.05.2015, the contract agreement with TCS for maintenance & development of Aarogyasri and Employees Health Scheme Web applications has been extended for a period of one year from 20.05.2015 to 19.05.2016.
Further, he appraised the Board that the NISG is assigned the work of preparing RFP for selection of new service provider through tender process. The NISG has submitted RFP recently and tenders will be floated after approval RFP by Government.

The tender process for selection of new service provider will take about six months time and in view of present contract period of TCS ends by 19.05.2016, the proposal for extension of contract for further period of six months is proposed.

Board critically examined the proposal of extension of contract of TCS for further six (06) months time i.e. beyond 19.05.2016 and directed to complete the process as early as possible. The Board resolved as follows.

**Resolution No.292/2016:** By the authority under Bye- Laws of Trust Deed, the Board approved the proposal of extension of contract of TCS for further six months period from 20.05.2016 to 19.11.2016 or till the selection of new service provider whichever is earlier.

9. **Entering into Service Contract Agreement with Hospitals located in Andhra Pradesh:**

The Board discussed the problems involved in providing services to the patients of A.P. nativity in the NWHs located in the Telangana State and vice-versa.

The Board observed that due to availability of world-class medical facilities in Hyderabad City and number of empanelled hospitals, many patients belonging to the Residuary Andhra Pradesh are getting treatments in the NWHs empanelled with Aarogyasri Health Care Trust. For providing treatments to the said patients, the infrastructure and services of technical and non-technical staff of Telangana State are being utilized at free of cost.

Similarly, people of border Districts of Telangana State are getting treatments in NWHs of Residuary of Andhra Pradesh.

It is also observed that the Chief Executive Officers of both Trusts have no authority to take action on the NWHs of other State for the grievances raised by the their patients regarding treatment taken by them in other State.

After detailed discussion in the matter, the Board resolved as follows:
Resolution No. 293/2016:
By the authority under Bye-laws of Trust Deed, the Board approved the proposal of entering into MoU by both Chief Executive Officers for providing treatments to the patients belong to Andhra Pradesh in NWHs of Telangana State and vice-versa on payment of service charges. The Mou shall include:

1). The quantum of service charges to be collected from Dr. NTR VS for the services provided to patients by the field staff of AHCT.

2). The competent Disciplinary authority to take action against NWHs of Telangana and A.P. NWHs on the grievances raised by A.P. patients for treatment availed in Telangana NWHs and Telangana patients for treatment availed in AP NWHs.

3). The DCs & Field staff of Telangana state may be authorised to monitor services provided to the A.P. patients in Telangana NWHs and vice-versa.

4). The NTR VS can appoint DCs and field staff exclusively for AP patients in the Telangana state wherever required with the consent of CEO, AHCT.

10. Empanelment of Thalassemia and Sickle Cell Society (TSCS) by relaxing the existing bed strength under Aarogyasri Scheme

The Board considered Thalassemia and Sickle Cell Society (TSCS) and resolved as follow

Resolution No. 294/2016: By the authority under Bye-laws of Trust Deed, the Board approved to relax the bed strength from 50 beds to 20 beds for hospitals applying for empanelment for providing treatment services to the Thalassemia and Sickle Cell patients.

11. Extend benefit coverage of 700 RSBY Secondary care procedures to 77.19 lakh Aarogyasri families:

The Board has reviewed the issue of extension benefit coverage of 700 RSBY Secondary Care procedures to 77.19 lakh Aarogyasri families and discussed the following points:
1. As per G.O.Ms.No.60, HM&FW (A2) Dept., dt.15.07.2015 Government orders that 700 RSBY Secondary care procedures to be extended to all the beneficiaries of Aarogyasri and reserved to Government hospitals.

2. It is further submitted that as per Memo. No. 11332/D1/2015, Dt: 20.01.2016 of the Principal Secretary to Govt., HM&FW (D1) Dept., Govt. of Telangana AHCT has attended Video conference held on 01.02.2016 at 2.00 PM by MoH&FW GOI and it was decided as follows-
   - RSBY will continue to be implemented by Insurance mode for year 2016-17 and can be moved to Trust/Society model of MoH&FW from year 2017-18.
   - Co-branding with existing state schemes will be effective from year 2017-18 and guidelines will be issued by MoH&FW, GOI.

**Resolution No. 295/2016:**
By the authority under bye-laws of Trust Deed, the Board approved the expenditure for additional 700 procedures mostly secondary care and not present in Aarogyasri to 77.19 lakh Aarogyasri families is Rs 118.16 Cr. will be borne by the State government as financial assistance from GOI will be effective from year 2017-18 after co-branding state schemes with RSBY scheme.

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12. Recoupment of Revolving Fund amount from Govt. Hospitals:

The Board has discussed in the meeting that irrespective of Revolving fund generated by Government Hospitals, amount to be released as per the requirements of the hospital following the G.O.Ms.No.6, HM&FW (A2) Dept. Dt: 09.01.2015 guidelines.

**Resolution No. 296/2016:**
By the authority under bye-laws of Trust Deed, the Board directed the CEO, AHCT that after release of amount from revolving fund, no recouping shall be made from the Hospitals.
13. Entering into Agreement with Hospitals located in AP regarding share in Revolving Fund

Board has discussed that for AP state patients taking treatment in Telangana Government hospitals the 20% revolving fund share to be credited to AHCT and 80% share to be given to treating government network hospital. The same will be applicable in case of Telangana State patients availing treatment in AP Government hospitals and Board directed the CEO, AHCT to enter agreement with Dr NTRVS.

**Resolution No. 297/2016:**
By the authority under bye-laws of Trust Deed, the Board directed the CEO, AHCT to enter agreement with Dr NTRVS.

14. Reservation of identified 42 procedures to Govt. hospitals under Aarogyasri:

CEO AHCT informed that 42 procedures from basic specialties were identified by specialists for reserving to Govt. hospitals.

**Resolution No. 298/2016:**
By the authority under bye-laws of Trust Deed, Board has agreed to reserve Long Bone Fracture and identified Ophthalmology procedures for Government and private teaching hospitals initially and other procedures will be reserved in phase wise manner.

15. Liver Transplantation Surgery:

Board was informed that presently Liver Transplantation Surgery with a package of Rs. 10.5 lakhs is reserved to Govt. hospitals.

**Resolution No. 299/2016:**
By the authority under bye-laws of Trust Deed, Board has directed to de-reserve the Liver Transplantation Surgery procedure and open to Private hospitals with a package of Rs. 10.5 lakhs.
16. Implementation of STEMI India Project as Pilot Study in Medak and Warangal District:

Board has discussed the following points:

1. Inclusion of 4 packages for STEMI project.
2. Guidelines for implementation of STEMI project as following
   - Aarogyasri to changing of criteria for empanelling hospitals involved in the STEMI Telangana Programme (for example, relaxing the criterion requiring that a cardiologist be present in the hospital for allowing thrombolysis claims).
   - Aarogyasri shall develop a comprehensive package for all possible variations of treatment through the STEMI Programme.
   - STEMI India will ensure that training at all the STEMI India-accredited hospitals allows for good practices and safe and effective thrombolysis. This training shall be periodic and will continue through the operation of the programme. Regular audits will also be conducted.

**Resolution No. 300/2016:**
By the authority under bye-laws of Trust Deed, Board has agreed to start STEMI project in Warangal and Medak District as pilot project and directed the CEO, AHCT to frame guidelines.

17. Establishment of AVT centres in Government hospitals:

Board has discussed regarding establishment of AVT centers initially in four districts i.e., Mahabubnagar, Karimnagar, Warangal and Nizamabad on pilot basis in District Headquarters hospitals and Government General Hospital, Nizamabad.

**Resolution No. 301/2016:**
By the authority under bye-laws of Trust Deed, Board has agreed for establishment of AVT centers in GGH-Mahaboobnagar, GGH-Nizamabad, District Hospital-Karimnagar and MGM Hospital-Warangal as pilot project. The First AVT shall be provided by the concerned hospital where the patients have undergone Cochlear Implant Surgery and the other three AVTs can be taken in any of the established AVT center in Government hospitals. Board has directed the CEO, AHCT to frame guidelines.
18. Establishment of Regional Cancer Centers:

Board has discussed regarding establishment of Regional Cancer centers initially in four districts i.e., RIMS Adilabad, DH-Khammam, DH-Karimnagar and DH-Medak on pilot basis in District Headquarters hospitals and Government General Hospital, Nizamabad.

Resolution No. 302/2016:
By the authority under bye-laws of Trust Deed, Board has agreed for establishment of Regional Cancer Centers in RIMS Adilabad, DH Khammam, DH Karimnagar and DH Medak on pilot basis and directed the CEO, AHCT to frame guidelines.

19. Evaluation of Aarogyaasri scheme:

Board has discussed that the AHCT have prepared a MoU to be entered with CGG for evaluation of Aarogyaasri as per the revised Terms of Reference and also incur an expenditure of Rs. 23,09,593/- towards project cost to be paid to CGG.

Resolution No. 303/2016:
By the authority under bye-laws of Trust Deed, Board has directed the CEO, AHCT to submit the Terms of Reference to the Principal Secretary to Govt., HM & FW Dept., Govt. of Telangana for taking further necessary action.

II. ITEMS FOR RATIFICATION

The Board, thereafter, considered the items placed before it for ratification and passed resolutions against each item, as indicated below:

<table>
<thead>
<tr>
<th>S.No</th>
<th>Item</th>
<th>Resolution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Ratification of the action of CEO in having grant of extension of Service Contract with TCS for further period of one year from 20.05.2015 to 19.05.2016.</td>
<td>Resolution No. 304/2016</td>
</tr>
<tr>
<td></td>
<td>By the authority under the bye-laws of Trust Deed, the Board ratified the action of the CEO for sanction of extension of Service Contract of TCS for further one year period from 20.05.2015 to 19.05.2016.</td>
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</tr>
<tr>
<td>2.</td>
<td>Ratification of the action of the CEO in having given extension of contract</td>
<td>Resolution No. 305/2016</td>
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<tr>
<td></td>
<td>Resolution No.</td>
<td>Text</td>
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<tr>
<td>3</td>
<td>306/2016</td>
<td>By the authority under the bye-laws of Trust Deed, the Board ratified the action taken by the Chief Executive Officer to the extent of extension of contract of M/s. Padma Nandi Travels upto 31.04.2016. Fresh tenders shall be called for before expiry of extended period of contract.</td>
</tr>
<tr>
<td>4</td>
<td>307/2016</td>
<td>By authority under the bye-laws of Trust Deed, the Board ratified the action taken by the Chief Executive Officer to the extent of extension of contract of M/s. Medi Assist Health Care Services upto 30.06.2016. Fresh tenders shall be called for before expiry of extended period of contract.</td>
</tr>
<tr>
<td>5</td>
<td>308/2016</td>
<td>By authority under the bye-laws of Trust Deed, the Board ratified the action taken by the Chief Executive Officer to the extent of extension of contract of M/s. Jyothi Computers upto 30.06.2016. Fresh tenders shall be called for before expiry of extended period of contract.</td>
</tr>
<tr>
<td>6</td>
<td>309/2016</td>
<td>By authority under the bye-laws of Trust Deed, the Board ratified the action taken by the Chief Executive Officer to the extent of extension of contract of M/s. Adithya Enterprises for providing service.</td>
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<tr>
<td>No.</td>
<td>Item Description</td>
<td>Resolution No.</td>
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<tr>
<td>7</td>
<td>Extension of contract of M/s. Krishna Constructions for providing House Keeping Services.</td>
<td><strong>310/2016</strong></td>
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<tr>
<td>8</td>
<td>Extension of contract of M/s. Himalaya Graphics for supply of printing material.</td>
<td><strong>311/2016</strong></td>
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<tr>
<td>9</td>
<td>Extension of contract of M/s. Balaji Enterprises for supply by Stationery items.</td>
<td><strong>312/2016</strong></td>
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### III. ITEMS FOR INFORMATION:

The Board, thereafter perused the items placed before it for information and passed the following resolution:

**Resolution No. 313/2016:** The Board noted the information placed before in respect of the following items.

3. Details of staff engaged on Deputation /Contract basis.
There being no further business to come before the Board, the meeting concluded with a vote of thanks to the Chair.

Dr. C. Laxma Reddy,
Hon’ble Minister, for Health
Medical & Family Welfare,
Telangana State.

Sri. Rajeshwar Tiwari, I.A.S.
Principal Secretary to Government,
Health, Medical & Family Welfare Dept.

Dr. Budda Prakash M. Jyothi, I.A.S.
Commissioner of Health &
Family Welfare Dept.

Dr. Ramani,
Director of Medical Education

Dr. Lalitha Kumari,
Director of Health.

Dr. Veena Kumari,
Commissioner, Vaidya Vidhana Parishad

Dr. Manohar, Director,
NIMS, Hyderabad.

Dr. M. Chandrasheker, M.D., D.A.
Chief Executive Officer,
Aarogyasri Health Care Trust.
<table>
<thead>
<tr>
<th>S.No</th>
<th>Name of the Trustee</th>
<th>Status</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Sri. K. Chandrashekar Rao, Hon’ble Chief Minister Telangana State</td>
<td>Chairman</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Sri Dr. C. Laxma Reddy, Hon’ble Minister for Health Medical &amp; Family Welfare, Telangana State</td>
<td>Vice Chairman-I</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Sri. Rajeshwar Tiwari, I.A.S. Principal Secretary to Govt., Health, Medical &amp; Family Welfare Dept., Telangana State</td>
<td>Vice Chairman –II</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Sri K. Ramakrishna Rao, I.A.S. Secretary to Govt. (FP), Finance Dept., Government of Telangana</td>
<td>Trustee</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Sri S.P. Singh, I.A.S. Special Chief Secretary to Govt., Panchayath Raj &amp; Rural Development Dept., Government of Telangana</td>
<td>Trustee</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Dr. Budda Prakash M. Jyothi, I.A.S. Commissioner, Health &amp; Family Welfare Dept Govt of Telangana</td>
<td>Trustee</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Dr. Ramani, Director Medical Education, Government of Telangana</td>
<td>Trustee</td>
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<tr>
<td>8</td>
<td>Dr. Lalitha Kumari, Director of Health, Government of Telangana</td>
<td>Trustee</td>
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</tr>
<tr>
<td>9</td>
<td>Dr. Veena Kumari, Commissioner, Vaidya Vidhana Parishad Government of Telangana</td>
<td>Trustee</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Dr. Manohar, Director, NIMS, Hyderabad</td>
<td>Trustee</td>
<td></td>
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<tr>
<td>11</td>
<td>Financial Advisor to be nominated by Government of Telangana</td>
<td>Trustee</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Dr. M. Chandrasheker, M.D., D.A. Chief Executive Officer, Aarogyasri Health Care Trust</td>
<td>Secretary of the Trust</td>
<td></td>
</tr>
</tbody>
</table>