Aarogyasri Health Care Trust  
Government of Andhra Pradesh  
3rd floor, Municipal Complex, Beside Koti Maternity Hospital,  
Suthan Bazar, Koti, Hyderabad 500 095.

To  
The MD / CEO / Chairman / Superintendent of  
Network Hospitals

AST/583/F-116/2009-10, dt.29.9.2009

Sir,  


2) Board of Trustees Resolution No.43/2008 dated 07/01/2008.

* * * * *

On representations from several journalists and their Unions, the Govt. of AP have decided to provide medical treatment to all journalists (working/retired) in the State on the lines of Aarogyasri scheme. Further it was resolved in the Board of Trustees of Aarogyasri Health Care Trust meeting held on 07.01.2008 to extend the scheme to the accredited journalists of the State –vide Resolution No.43/2008.Govt. issued orders vide reference cited above for the implementation of the same ( a copy of the same is available as Annexure 1 and also in the spotlight section of website www.aarogyasri.org). Now it is decided by the Govt. to implement the scheme from 2.10.2009 for the benefit of working/retired journalists by issuing “Journalist Health Cards” for those journalists who are not having BPL ration card.

The salient features of the scheme are as stated below

1. Eligibility criteria

All the journalists (working and retired) and their family members whose name and photograph is present on the “Journalist Health Card”. The prefix of the card number in all these cases will be JPAP. (Sample Annexed at Annexure II).

2. Coverage

i. 942 surgeries / treatments listed in Aarogyasri-I and Aarogyasri-II schemes

ii. The sum Insured per family shall be Rs.1,50,000/- (Rupees one lakh and fifty thousand only). The benefit will be on floater basis, i.e., the total reimbursement of Rs.1,50,000/- can be availed by either the individual or by the members of the family collectively.

iii. An additional Sum not exceeding Rs.50,000/- shall be provided as buffer to take care of the expenses, if it exceeds the original sum, i.e., Rs.1,50,000/- on individual/Family. In such cases the individual/Family buffer amount will be provided on the recommendation of the committee set up by the Trust.
iv. In case of Renal Transplant Surgery with Immunosuppressive therapy for one year, an exclusive buffer amount of Rs.1,00,000 (Rupees one lakh only), will get applied automatically.

v. Cost for cochlear Implant Surgery with Auditory -Verbal Therapy (for children below 12 years old) will be reimbursed by the Trust to hospital on actual basis up to a maximum of Rs.6.50 lakhs for each case.

3. **Period of insurance:** 00:00 hrs of 2-10-2009 to 24:00 hrs of 1-10-2010. The scheme may be renewed thereafter.

4. **Registration:** Registration of the cases will be done by Aarogyamithra after due verification of name and photograph in the health card and database in the website. The Aarogyamithra shall retrieve the online data by capturing the Journalist health card number with JPAP prefix using bar code reader or manually and verify the patient details before registration. Thereafter the case will move in a workflow similar to that of CMCO referral cases. (Workflow attached at Annexure III)

All other features such as Aarogyamithra services, Implementation procedure, General ward packages, Hospital services etc., shall remain same as per Aarogyasri I and II scheme guidelines. The claims for this scheme will be paid online from a separate account maintained by Revenue (CMRF) Department.

Trust has initiated steps for online registration process of these cards from 00:00 hours of 2nd October 2009 to enable network hospitals to register these patients and send pre-authorization. Further all the network hospitals are requested to enter into MoU with the Trust and Revenue department (copy attached as Annexure IV and also available in the website www.aarogyasri.org in the spotlight section). The printouts may be obtained in a Rs 100 stamp paper and the softcopy may be uploaded in the website and the hard copy is to be send to the Trust Office. The executives of the insurer may also approach the hospitals for the same.

The Trust request you to initiate necessary steps in the hospital and instruct the staff, RAMCO and other Aarogyasri personnel accordingly to receive patients under this scheme from 2nd October 2009.

For Aarogyasri Health Care Trust

[Signature]

Chief Executive Officer

Copy to: The Principal Secretary to Government HM & FW Department.
The Principal Secretary to Government Revenue Department.
The Principal Secretary to Chief Minister.
The Executive Vice Chairman, Aarogyasri Health Care Trust.
The Commissioner I & PR.
The Financial Adviser, Aarogyasri Health Care Trust.
PS to Hon’ble Minister for Aarogyasri, H1, 108, 104 & M.I.
PS to Hon’ble Minister for Medical Education.
PS to Hon’ble Minister for Family Welfare, APVVP and Hospital Services.
PS to Hon’ble Minister for Information & Public Relations, Cinematography, FDC & Tourism.
The District Coordinators of Trust.
GM’s, DGM’s, AM’s and AAM’s of Star Health & Allied Insurance Company Ltd.
Government of Andhra Pradesh have launched community health insurance scheme by name Aarogyasri (Aarogyasri-I) in the state in a phased manner with effect from 1st April, 2007 in order to improve access of Rural people especially those living below poverty line to quality medical care. Since coverage of diseases under Aarogyasri-I was restricted a further list of 533 diseases were finalise for inclusion in Aarogyasri Scheme and named as Aarogyasri-II which was launched on 17th April, 2008 to enable many more BPL families to obtain cashless treatment of these additional diseases (389 surgical and 144 medical). Further the disease coverage under the scheme has been extended to 77 new procedures with effect from 14th November, 2008. Thus bringing the total number of diseases covered under Aarogyasri to 940. While the front end of both Aarogyasri-I & II schemes viz. network hospitals, Aarogyamitras, Health Cards etc., are one, pre-authorization and claim settlement for Aarogyasri-I scheme is done by the Insurance company, while for Aarogyasri-II, it is done by the Trust directly and funded from CM Relief Fund.

2. Several journalists and their Unions have been representing to the Government to formulate a scheme to provide medical treatment to journalists and their family members on the lines of Aarogyasri Scheme. Hon’ble CM during the 5th Governing council meeting of the Press Academy of AP on 3rd August, 2008 instructed that all the retired, working and accredited journalist would be covered under the Health Insurance Scheme. This issue was also discussed in the meeting of the Board of Trustees of Aarogyasri Health Care Trust on 7th January, 2008 wherein it was decided to extend the scheme to accredited journalists of the State along with the regular scheme in a phased manner, after the issue of Health Cards to all the Journalists of the concerned districts.
3. Government after careful examination have decided to extend the scheme to all the journalists (working/retired) and their family members of the State along with the regular scheme in a phased manner, after the issue of Health Cards to all the Journalists of the concerned districts and the modalities for providing health coverage are worked out as follows:-

(i) Spl. Commissioner, I & PR will first take steps to enumerate district wise all the journalists (working / retired) and their family members and get the iris photos and other family details as contained in the Declaration Form for obtaining pink cards in electronic format in CDs (compact discs). The DPL infrastructure available in the districts will be used for this purpose;

(ii) Working journalists should have a minimum of three years of experience in the profession. Retired journalists have to furnish a copy of the ID card issued by the Organization where last worked and proof of date of birth along with the application.

(iii) Only such journalists and their family members whose names and photos appear in the enumerated cards will be eligible to obtain medical treatment under the scheme.

(iv) The CDs containing data of the journalists and their family members will be sent by the Spl. Commr, IR&PR to Aarogyasri Health Care Trust for generating health cards. The cards will be coded with numbers specifically generated for the journalists and be distributed to them through the Spl. Commr, I&PR.

(v) On production of these cards, journalists and their family members will be eligible to receive cashless treatment in network hospitals across the State, on the same pattern as Aarogyasri patients. Choice of the hospital for treatment would be with the journalist concerned seeking treatment.

(vi) Journalists who are holding white cards are already automatically covered under Aarogyasri – I & II schemes and they will therefore, not be included under the new scheme. This is necessary to avoid duplication in payment for the same treatment.

(vii) The scheme will be implemented by the Trust directly. A new Memorandum of Understanding (MOU) will be signed by the Trust with the network hospitals for hospitals for the implementation of the scheme.

(Contd..page 3)
(viii) The Network hospital to which the journalist or his family member approach for treatment shall admit the patient after verifying from Health Card issued by the Trust and after needed investigations work out the cost of the treatment as per the package rates approved for Aarogyasri- I & II and seek pre-authorization from the Trust office through its web portal.

(ix) The Aarogyasri Trust doctors shall examine the information furnished by the referral hospital and make recommendation to CM office for sanction of assistance from the CMRF in deserving cases.

(x) The assistance from Chief Minister’s Relief Fund for the sanctioned cases shall be limited to the package rate fixed for the relevant disease under Aarogyasri-I & II.

(xi) After getting sanction from the CM Office, Aargyasri Trust will authorize the referral hospital to carry out the treatment and to refer claim to the Trust as per the package rates.

(xii) The Aarogyasri Trust shall process the claim of the network hospital and make recommendation to the Revenue Department to pay to the concerned hospital, the assistance sanctioned. Revenue Department will accordingly pay to the network hospital, through electronic payment system. Trust will assist Revenue Department in setting up the payment system online. For this, the Revenue Department shall open a separate Account with electronic clearance through internet gateway.

(xiii) The expenditure incurred by the Trust for administering the Scheme, including the expenditures for referrals, pre-authorization and claim processing shall be met from the CMRF.

4. The Special Commissioner, Information and Public Relations and the Chief Executive Officer, Aarogyasri Health Care Trust shall take necessary action in the matter.
5. This order issues with the concurrence of Finance (Expr.M&HI) Department vide their U.O.No.38130-B/325/A1/Expr. M&HI/08, dt.30-12-2008.

(BY ORDER AND IN THE NAME OF GOVERNOR OF ANDHRA PRADESH)

M.SAMUEL
PRINCIPAL SECRETARY TO GOVERNMENT

To
The Special Commissioner, & Addl.EO Secretary, I&PR

The Chief Executive Officer, Aarogyasri Health Care Trust, Hyd., The Director of Medical Education, A.P., Hyderabad

All the District Collectors.

All the Network Hospitals through Chief Executive Officer, Aarogyasri Health Care Trust, Hyderabad.

All the HODs of HM&FW Department. Copy to

The Principal Secretary to C.M. The P.S.to Min (ME&HI)

The President, APUWJ, Desoddaraka Bhavan, Hyderabad The Accountant General / Director of Treasuries & Accounts The Pay and Accounts Officer, A.P., Hyderabad.


HM&FW (K2)Department. Finance (Expr.M&H)) Department. SF/SCs.

//FORWARDED BY ORDER//

SECTION OFFICER
Annexure II

Specimen copy of Health Card

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Name</th>
<th>Sex</th>
<th>DOB</th>
<th>Relationship</th>
<th>Age</th>
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<tr>
<td>1</td>
<td>Baroda Pratap Chandu</td>
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<td>7/11/1966</td>
<td>Father</td>
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<tr>
<td>2</td>
<td>Namala Pani</td>
<td>F</td>
<td>15/8/1972</td>
<td>Mother</td>
<td>37</td>
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<td>3</td>
<td>Harika Baroda</td>
<td>F</td>
<td>8/8/1996</td>
<td>Daughter</td>
<td>11</td>
</tr>
<tr>
<td>4</td>
<td>Parameswaram Baroda</td>
<td>M</td>
<td>7/7/2001</td>
<td>Son</td>
<td>8</td>
</tr>
</tbody>
</table>

*******

Name: Baroda Pratap Chandu
Address: Jagaundham, Guntur Dist.
Phone: 1800-425-7788

**Contact Information:**
- Phone: 1800-425-7788
- Fax: 1800-425-7788
- Email: aarogya@nshri.org
- Website: www.aarogya.org

**Health Card Details:**
- Health Card No: JPAI01226A00442
- District: Guntur
- Mandal: Jagaundham
- Panchayat: Guntur
- Village: Jagaundham
- Hostel: 2F-310
- Occupation: Others (REPORTER)
- Annual Income: 90,000

**Date:** 02/10/2009

**Signature:**

**Address:**
- Address: Jagaundham, Guntur Dist.
- Phone: 1800-425-7788
- Fax: 1800-425-7788
- Email: aarogya@nshri.org
- Website: www.aarogya.org
Annexure III

Work flow

Journalist (Working/Retired) Scheme under CMRF
Annexure IV

MEMORANDUM OF UNDERSTANDING
BETWEEN
AAROGYASRI HEALTH CARE TRUST, DEPARTMENT OF EVENUE(CMRF)
GOVT OF AP
AND NETWORK HOSPITALS
FOR TREATING JOURNALIST (WORKING/RETIRED) WITH CMRF ASSISTANCE

This Agreement made at Hyderabad this ______day of ____________2009
between AAROGYASRI HEALTH CARE TRUST., a Trust incorporated under the
Indian Trusts Act and having its Registered Office at 3rd floor, New Municipal
Complex, Koti, Sultan Bazaar, Hyderabad-500095 hereinafter referred to as "TRUST"
which expression shall unless it be repugnant to the context or meaning thereof shall
deam to mean and include its successors and assigns of the ONE PART.
AND
Principal Secretary
Department of Revenue(CMRF)

Government of Andhra Pradesh, Secretariat, Hyderabad hereafter referred to as “REVENUE (CMRF) DEPARTMENT” which expression shall unless it be repugnant to the context or meaning thereof shall deem to mean and include its successors and assigns of the SECOND PART

AND

________________________________________________________________________________________ and having its Establishment at __________________________________________________________________________________________

Herein after referred to as PROVIDER which expression shall unless it be repugnant to the context or meaning thereof be deemed to mean and include its successors and assignee’s of the OTHER PART.

________________________________________________________________________________________ desires to join the said network of Providers and is willing to extend cashless medical facilities for the surgical /Therapeutic procedures to the journalists under the CMRF Assistance for Journalists holding Journalist Health cards (Sample at Annexure I ) issued by Aarogyasri Health care Trust.

WHEREAS, Trust is an independent nodal agency setup by the Govt. of AP, providing Health care coverage to BPL families in state through self funded scheme Aarogyasri in 23 districts for specified surgeries / Therapies as given in the booklet ‘Rajiv Aarogyasri – Surgical and Medical Treatments – List and Package Rates for Cashless Treatment of BPL Population’ (published by Trust) for which purpose Trust has created a network of service Providers.
Several journalists and their unions have represented to the Government to formulate a scheme to provide medical treatment to journalists and their family members on the lines of Aarogyasri Scheme. This issue was also discussed in the meeting of the Board of trustees of Aarogyasri Health Care Trust on 7th January 2008, wherein it was decided to extend the scheme to accredited journalists of the state along with the regular scheme after the issue of journalist Health cards to all the journalists of the concerned districts.

Government of Andhra Pradesh after careful examination have decided to extend the scheme to all the journalists (working/retired) and their family members of the state after the issue of Journalist Health cards to all the journalists of the concerned districts. The modalities for providing Health coverage are as follows:

i. On production of these cards, journalists and their family members will be eligible to receive cashless treatment in network hospitals across the state, on the same pattern as Aarogyasri patients. Choice of the hospital for treatment would be with the journalist concerned seeking treatment.

ii. Journalists who are holding white cards are already automatically covered under Aarogyasri I & II schemes and they will therefore not be included under the new scheme. This is necessary to avoid duplication in payments for the same treatment.

iii. The scheme will be implemented by the Trust directly. A new Memorandum of understanding (MOU) will be signed by the trust with the network hospitals for the implementation of the scheme.

iv. The network hospital to which the journalist or his family member approach for treatment shall admit the patient after verifying the Journalist Health card issued by the trust and after needed investigations and seek pre-authorisation from the Trust office through its web portal.
v. The Aarogyasri Trust doctors shall examine the information furnished by the referral hospital and make recommendations to CM office for sanction of assistance from the CMRF.

vi. The assistance from Chief Minister Relief Fund for the sanctioned cases shall be limited to the package rate fixed for the relevant disease under Aarogyasri I & II.

vii. After getting the sanction from CM office, Aarogyasri Trust will authorize the referral hospital to carry out the treatment and to refer claim to the trust as per the package rates.

viii. The Aarogyasri Trust shall process the claim of the network hospital and make recommendations to the revenue department to pay to the concerned hospital, the assistance sanctioned. Revenue department will accordingly pay to the network hospital, through electronic payment system. Trust will assist Revenue department in setting up the payments system online. For this, the Revenue department will open a separate Account with electronic clearance through internet gateway.

For the above purpose the Chief Executive Officer, Aarogyasri Health Care Trust is authorized by G.O.Ms.No.67 Revenue CMRF Department dated 22.1.2009 read with G.O Ms. No.224, H.M & F.W. dept dated 27.06.08, G.O Ms.No.1012 Revenue (CMRF) Dept.,dt.12.8.08 and G.O Ms.No.868, Revenue (CMRF) dept dated 11.07.08 to enter into a MOU between the network hospitals and the Trust.

Accordingly Aarogyasri Health Care Trust issued Journalist Health cards (Annexure- I) as per the guidelines issued in said GO. This unique number will enable the hospitals to raise online pre-authorization and to extend the benefit under Aarogyasri Scheme.

Now this agreement witnesseth as Under
Article 1: Eligibility

1.1 Journalist Health Cards (Sample at Annexure –I) issued by the Aarogyasri Health Care Trust with name and photograph of the family members. Journalists who are holding White ration card will not be eligible for this scheme. Journalist Health Cards will be issued by Aarogyasri Health Care Trust based on the certified list furnished by the commissioner I & PR along with detailed information of Journalists and their family members as per the guidelines issued in GO Ms.No 67.

1.2 Provider agrees to take declaration from the patient at the time of admission itself on the applicability or otherwise of Aarogyasri in his/her case. In emergency/trauma cases, patients may be allowed 48 hours after admission to claim Aarogyasri benefit.

1.3 The first point of contact for all the patients (out patients and inpatients) coming under the scheme will be the Aarogyamithra positioned at Network hospital.

1.4 Provider agrees to register all the patients holding Journalist Health cards referred from Medical camp, PHC, Aarogyasri call centre, 108,104 and patients approaching the hospitals directly.

Article 2: Effective Date

2.1 This agreement will be in force for a period of one year from 02.10.2009 to 01.10.2010 or until otherwise terminated as provided for in this MOU and shall be extended by mutual consent under same terms and conditions.

Article 3: General Provisions

3.1 Provider warrants that it has all the required facilities for performing the enlisted surgeries/ procedures / therapies as specified in clause. No 3

3.2 The Network hospital should admit the patient after verifying from the photo/iris/thumb impression on the journalist Health Card and after cashless evaluation seek pre-authorization from the Trust office through its web portal.
3.3 The provider undertake to render services to the patients in accordance with the provisions of all MOUs of Aarogyasri-I & all MOUs of Aarogyasri-II signed and executed in all phases.

3.4 The provider agrees to provide treatment to the Journalist Health card holders in general ward.

**Article 4: Specialty/Specialties Empanelled for**

4.1 Provider hereby declare that the hospital has requisite infrastructure as per Aarogyasri guidelines in relation to specialty services for which empanelment is done and agrees to provided quality diagnostic and treatment services as per the standard protocols.

4.2 Provider hereby declare that hospital did not exclude any other specialty service deliberately from the scheme in spite of having such facility and agrees to empanel for all the specialties for which adequate infrastructure is available..

4.3 The Hospital hereby declare that the bed capacity of the hospital is 50 or more than 50 with adequate infrastructure and manpower as per standard guidelines and agrees to provide separate male and female wards with toilet and other basic amenities.

4.4 The Hospital declare that it has a well-equipped ICU to meet the emergency requirements of the patients belonging to all the categories empanelled for and agrees to facilitate round the clock diagnostic and specialist services as per the requirement in 3.1
## Article 5: Specialties for which empanelment is done

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<td></td>
<td>Radiation Oncology*</td>
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</table>
Article 6: Cashless Services under Package

6.1 The Provider agrees to provide total cashless transaction to the Beneficiary right from his reporting to discharge under the scheme.

6.2 Provider agrees to provide treatment as per the packages worked out by the Trust and published in the booklet ‘Rajiv Arogyasri – Surgical and Medical Treatments – List and Package Rates for Cashless Treatment of BPL Population’ (This booklet will be part and parcel of this MoU for all purposes) The package includes consultation, medicine, diagnostics, implants, food, cost of transportation, hospital charges etc. In other words the package should cover the entire cost of patient from date of reporting to his discharge from hospital 10 days after surgery, making the transaction truly cashless to the patient. And under no circumstances shall charge any money extra within the treatment period of package.

6.3 The Provider agrees to issue a test requisition slip to the patient which will empower the patient to approach the concerned diagnostic/test centers with in the hospital or otherwise and do the tests without any cash transaction. The details of the Tests done and their results will be uploaded in the portal by the Medical Officer of the Provider. (The provider shall submit an affidavit showing such agreement with diagnostic center)

6.4 Provider agrees to keep all the beneficiary admitted till 10 days of postoperative period or till the patient recovered satisfactorily in all those cases where operation was performed.

Article 7: Package Rates

7.1 The Package rates are given in the Booklet, which will be the basis and binding for the treatment cost of various procedures and forms part of the MOU.

7.2 The package rates are the maximum rate indicated for each surgical procedure. However, the settlement of the claims will be made on the basis of actual bills submitted by the provider.
7.3 Provider has agreed to the continuation of the agreed tariff for the period of this agreement.

7.4 In the event of more than one procedure is being undertaken in one sitting other than those of routine/standard components of the surgical procedure, the package amount permitted for second procedure will be 50% of the package rate any dispute in this regard will be referred to the technical committee constituted by the Trust and decision of the committee is final and binding on the hospital.

7.5 Provider under any circumstances will not refuse to undertake procedure on the ground of insufficient package.

7.6 In all other disputes related to package rates and technical approvals of pre-authorizations, the matter will be referred to a technical committee of the Trust and decision of the committee is binding on the provider.

Article 8: Cost of evaluation of patients

8.1 The cost of various treatment/tests conducted on the beneficiary or patients in journalist Health card who are evaluated but ultimately do not undergo Surgery or Therapies will be borne by the Provider themselves and the Provider will not charge any fee for consultation and investigation from the Beneficiary.

Article 9: Quality of Services.

9.1 Provider agrees to provide separate and Free OPD consultation. However there will not be any discrimination to Journalist Health Card holder vis-à-vis other paying patients in regard to quality of services.

9.2 Provider shall agree to provide free diagnostic tests and medical treatment required for beneficiaries irrespective of surgery.

9.3 The Provider will treat these Beneficiaries in a courteous manner and according to good business practices.

9.4 The Provider will extend admission facilities to the Beneficiaries round the clock.

9.5 The Provider will have themselves covered by proper indemnity policy including errors, omission and professional indemnity insurance and
agrees to keep such policies in force during entire tenure of the agreement.

9.6 Provider will ensure that the best and complete diagnostic, therapeutic and follow up services based on standard medical practices are extended to the Beneficiary.

9.7 The provider agrees to provide quality service to the beneficiary by following standard protocols of diagnosis, indications for surgery/therapy, surgical procedures and treatment.

9.8 The provider agrees to provide quality medicines, standard prosthetics, implants and disposables in treating the beneficiaries.

9.9 The provider agrees to assist and cooperate with the medical auditing team from the Trust / as and when required.

9.10 The provider agrees to provide video recorded evidence of patient counseling before surgery in order to avoid legal complications / any adverse reaction by patients or Patient’s relatives or by public in the event of unacceptable outcome.

9.11 The hospitals Morbidity and Mortality cases will be subject to scrutiny by the Trust.

Article 10. Services of Rajiv Aarogysri Medical Coordinator

The Provider agrees to facilitate the services through Rajiv Aarogyasri Medical Coordinator/s (RAMCO) for the scheme to coordinate with Trust through Aarogya Mithra as contracted in the Aarogyasri Scheme

Article 11. Documentation and MIS

11.1 Trust / reserves the right to visit the Beneficiary and check his medical data with or without intimation as and when required.

11.2 Provider will furnish periodical reports to Trust on the progress of the scheme as per the formats prescribed for this purpose.
Article 12: Pre-Authorization

12.1 Preauthorization request will be sent only after admission and the patient will be there in the hospital as inpatient till final decision on the preauthorization is made.

12.2 The Provider will submit the pre-authorization, after admitting the patient as in-patient, on the Aarogyasri Website complete in all aspects including the signed copy of consent of the Patient. All relevant test reports along with Digital photograph of the Beneficiary taken in the hospital should also be uploaded. Catheterization CD, MRI films, X-rays, biopsy reports should be uploaded. Details of medicines and other procedures for Medical Management.

12.3 Trust undertake to approve the preauthorization indicating the relevant package rates within 12 working hours of the receipt of the request for pre-authorization form in complete form as well as the required data and information online and recommend to CMO.

12.4 The CMO will give the final approval for beneficiary to undergo treatment with CMRF assistance.

12.5 However, the validity of the pre-authorization is for a period of 14 days only and hospital need to send fresh preauthorization if required after the expiry of original preauthorization giving valid reasons.

12.6 If the provider is not able to conduct the operation within a reasonable time for any reason other than medical such as non availability of beds or specialists, the Provider will arrange for the operation to be conducted at any other appropriate Network Hospitals in consultation with the Trust.

12.7 Trust reserves the right to disallow the claim if the Surgery/Therapy is performed before any approval from the Trust and pre-authorization is obtained at a later date keeping the Trust in the dark about the surgery/therapy without valid reason.
Article 13: Transport of Patients

13.1 The Provider agrees to transport or bear the cost of transport charges to the hospital and back after the surgery/ Treatment done on the Beneficiary and obtain acknowledgement from the patient accordingly. The acknowledgement sheet generated from the portal need to be signed by the Patient and the signed copy should be scanned and uploaded to the Trust portal.

Article 14: Free Food to patients

14.1 The Provider agrees to provide free food to the patients as envisaged in the package rates either through in-house pantry or by making alternate arrangements like supplying from nearby tie-up canteen and under no circumstances provider shall substitute the food with money.

Article 15: Discharge and Follow up

15.1 Intimation of the impending discharge of the Beneficiary need to be advised to Aarogyasri Assistance Counter at least one day before the discharge of the patient.

15.2 The discharge has to be done in the presence of RAMCO and Aarogyamithra concerned.

15.3 At the time of Discharge the transportation cost to and fro has to be reimbursed to the Patient, if the Hospital has not provided the transportation. The acknowledgement of receiving the amount for transportation has to be generated from the Trust portal and the signed copy has to be uploaded.

15.4 Discharge summary will be generated from the Trust portal in the plain paper stationary. The Discharge summary will consist of all the treatment details of the Patient at the Hospital and the follow up regime for the Patient including consultation and medication. The discharge summary shall be signed by the patient and uploaded in the portal.

15.5 All the patients must be provided with follow-up medicines for 10 days after discharge by the provider as part of the package.
15.6 If the same Patient is coming back to the Hospital, the follow up details have to be uploaded in the Trust portal.

15.7 Satisfaction letter of the Patients has to be generated from the Trust portal and the signed copy has to be uploaded.

15.8 The RAMCO & Aarogya Mithra should counsel the patient for all precautions to be taken for the post-operative care.

15.9 All patients who require follow-up medicines will be advised by the provider to come back on 11th day of discharge for first follow-up mandatory. The date of first follow-up will be generated by the Trust portal along with the discharge summary.

15.10 The subsequent follow-ups for the cases will be as per the follow-up guidelines of Aarogyasri scheme and amendments to be communicated by the trust from time to time.

15.11 The provider will agree to provide free Follow-up consultation and routine diagnostics for follow-up patients and facilitate distribution of free follow-up drugs provided by the Trust for a period of ONE YEAR from date of surgery, irrespective of agreement period.

15.12 The provider will agree to provide free post surgical physiotherapy services, wherever required for the agreement period.

**Article 16: Billing Procedure /Checklist for the Provider at the time of Patient’s discharge.**

16.1 It is admitted and agreed that the Provider is aware that this MoU has arisen for the purpose of treating journalist (working/retired) in the State of Andhra Pradesh and accordingly the Provider will in no circumstance charge or seek any payment from the Beneficiaries but will look only to for indemnity, and that too only to the limits/schedule of fees in respect of procedures referred to earlier and agreed to under this MoU.

16.2 Signature or the LTI of the patient / Beneficiary will be obtained on final hospital bills and the discharge form.
16.3 The provider will submit the following online: Original discharge summary, original investigation reports, all original prescriptions, Procedure CD’s, MRI films, X-rays, Post Operative slides with Biopsy report, 3 Photographs of the patient taken preoperative bedside, immediate post-operative showing operation wound at the time of discharge/ clinical photograph, Case Sheet with Operation Notes, Break up of the bills (Room Rent, Investigations, procedure charges & pharmacy receipt) etc. The copies of the discharge summary signed by the Beneficiary will be uploaded in the web. A summary of the bills raised will also be uploaded. All these have to be uploaded as PDF format.

16.4 Letter of Satisfaction from the patient should also be obtained and sent along with the bills to in Prescribed format.

16.5 Provider should ensure that Chemo Therapy Drugs are physically administered to the Patients. Provider should produce bills by coating batch no. and attaching empty vials & ampoules with intact labels.

**Article 17: Payment Terms and conditions**

Trust agrees to process all the eligible bills within 7 working days and recommend for payment by Revenue Department, subject to submission of all supporting documents including post-operative investigations and reports as required online. Photocopies of daily progress report and ICU charts along with case sheet should be uploaded online. **The Aarogyasri Trust shall process the claim of the network hospital and make recommendation to the Revenue Department to pay to the concerned hospital, the assistance sanctioned. Revenue Department will accordingly pay to the network hospital, through electronic payment system. Trust will assist Revenue Department in setting up the payment system online.**
Article 18: Technical Liability

The provider admits and understands the liability of the trust are limited to the extent of online technical processing of the cases and any dispute in this regard shall be referred to Technical committee, the decision of which is final and binding.

Article 19: Financial Liability

The Revenue (CMRF) Department is the final authority in sanctioning financial assistance for cases and payment of claims.

Article 20: Limitations of liability and indemnity

20.1 The Provider will be responsible for all commissions and omissions in treating the patients referred under the scheme and will also be responsible for all legal consequences that may arise. Trust will not be held responsible for the outcome of the treatment or quality of the care provided by the Provider and should any legal complications arise and is called upon to answer, the provider will pay all legal expenses and consequent compensation, if any.

20.2 The Provider admits and agrees that if any claim arises out of alleged deficiency in service on their part or on the part of their men or agents, then it will be the duty of the Provider to answer such claim. In the unlikely event of Trust being proceeded against for such cause of action and any liability was imposed on them, only by virtue of its relationship with the Provider, then the Provider will step in and meet such liability on their own.

20.3 Notwithstanding anything to the contrary in this Agreement, neither Party will be liable by reason of failure or delay in the performance of its duties and obligations under this Agreement if such failure or delay is caused by non Co-operation by the patient, acts of God, Strikes, lock-outs, embargoes, war, riots, civil commotion, any orders of Governmental, Quasi-Governmental or local authorities, or any other similar cause beyond its control and without its fault or negligence.
Article 21: Confidentiality

21.1 All the stakeholders undertake to protect the secrecy of all the data of Beneficiaries and trade or business secrets of and will not share the same with any unauthorized person for any reason whatsoever within or without any consideration.

Article 22: Termination

22.1 Any deficiency in service by the empanelled hospitals will be looked into by the technical committee of the Trust and if anything is found wanting, such hospitals will be de-listed and their decision of the committee will be final.

Article 23: Jurisdiction

23.1 Any dispute arising of this MoU will be subject to arbitration as per Arbitration Act and subject to the jurisdiction of Andhra Pradesh courts only.

23.2 Any amendments in the clauses of the Agreement can be effected as an addendum, after the written approval from both the parties.

Article 24: Non-exclusivity

24.1 Trust reserves the right to shift any patient at any point of time with the consent of the patient to other service provider if the services of institution are not as per the medical standards or causing undue delay in providing service to patients on other than medical grounds to the detriment of the patient. And in such event hospital cannot claim for the services either from the patient or from the Trust.

Witness thereof this agreement was executed by or on behalf of the parties the day and year first before written.
Signed and delivered by within named:
Provider

Through Sri/Smt
________________________Sign________________________

In the presence of Sri/Smt -
____________________Sign_______________________

Trust
Aarogyasri Health care Trust

Through EO
Sri/Smt____________________________Sign__________________

In the presence of Sri/Smt
____________________________Sign________________________

Revenue Department

Through Principal Secretary/Authorised Representative

Sri/Smt
____________________________Sign________________________

Department of Revenue (CMRF)
Government of Andhra Pradesh
In the presence of

Sri/Smt____________________________Sign__________________
Annexure I

Specimen Copy of Journalist Health Card

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<th>No.</th>
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<td>1</td>
<td>Baroda Prajap Chandra</td>
<td>F / H</td>
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<tr>
<td>2</td>
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<td>15/8/1972</td>
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<td>Daughter</td>
<td>8/8/1980</td>
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<tr>
<td>4</td>
<td>Pavanamshchandra Baroda</td>
<td>Son</td>
<td>5/7/2001</td>
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