



RASHTRIYA SWASTHYA BIMA YOJANA
 "Perspective Befol ds"

**Adding value to State
 Health Infrastructure & Services**

ABOUT RSBY
 Scheme Features

- Launched by Government of India on 1st October 2007.
- It is an attempt to provide health insurance to low income BPL households and protect them from major health shocks that involve hospitalisation.
- Specifically, BPL families are entitled to more than 780 in-patient procedures with a cost of up to 30,000 rupees per annum for a nominal registration fee of 30 rupees per household.
- Pre-existing conditions are covered and there is no age limit.
- Coverage extends to the head of household, spouse and up to three dependents as mentioned in BPL database provided by State Government.
- Provision of transport allowance(actual with limit of Rs.100 per visit) but annual ceiling of Rs.1000/-.

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 Scheme Features

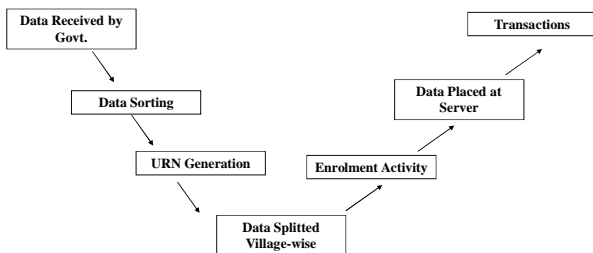
INDICATIVE LIST OF BASIC EXCLUSIONS

- Conditions that do not require hospitalization.
- Congenital external diseases.
- Drug and alcohol induced illness.
- Sterilization and fertility related procedures.
- Vaccination.
- War, nuclear invasion.
- Suicide
- Naturopathy, Unani, Siddha, Ayurveda.
- This list of exclusions will be negotiated between insurer and state government.

BIOMETRICS ENABLED POLICY IMPLEMENTATION

- Governments all over the world are increasingly experimenting with innovative solutions and one such innovation which has gained prominence in recent years is biometric enabled smart cards and card readers.
- RSBY Policy will be entirely implemented through smart card and smart card readers located at hospitals.
- In addition to offering identification and security to BPL beneficiaries, smart cards also allow data to be stored on card itself.
- Government is also working on leveraging smart cards to deliver additional services and schemes.
- Smart Cards enables data management on Pan-India Basis

Data Process chart



Publicity

Workshops

1. District Workshops

Participants: Insurance Company, TPA, Health Department District Officials, Block Representatives
Purpose: Awareness about scheme at District Level for issuance of suitable Instructions, DKM formalities, Discussion for implementation of scheme at District level

2. Block Workshops

Participants: Insurance Company, TPA, Health Department District Officials, Block Representatives, CHC & PHC Staff, Asha workers, Designated FKO
Purpose: Awareness about scheme at Block Level for issuance of suitable Instructions, Finalization of FKOs & FKO Card distribution, Discussion for implementation of scheme at Block level, Enrolment Schedule sharing

Publicity

Methods of Publicity

1. Govt. Initiatives

- Instructions from Directorate, CMO Office and CHC to generate awareness about the scheme at ground level,
- Penetration through PHCs & Asha workers
- Positive message,
- Incentive model

2. TPA Activities

- Publicity through public announcements,
- Handbill distribution,
- Wall paintings,
- Banners
- One-to-one interactions

Enrolment scheduler

Enrolment Plan - Himmatnagar Dist., Modasa Block												
District:										Block:		
S.No.	CHC	PHC	Village	BPL Population	No. of Machines	Days	Date	Date	Date	Date	FKO Name	Contact No.
1	Modasa	Jalvie	Rampur	730	1	1	1-Jun				Siema Desi	962091933
			Dhanura	23	1	1	1-Jun				Kathun Lal	992477823
			Jangi	56	1	1	1-Jun				Mohyal	943395423
			Kalihat	78	1	1	1-Jun				Nil Abid	994632222
			Dhamansa	213	1	2	1-Jun	2-Jun			Santoshi Kuman	941142123
			chakhisa	12	1	1	1-Jun				Jhandu Chand	948846242
			Sursut	79			1-Jun				Shyam Singh	0065284243
			Pahad	37	1	1	1-Jun				Anwar	979138863
			Kolepur	26			1-Jun				Amal Sharma	928461323
			Sambahi	72	1	1	1-Jun				Hira Singh	96376938

Key Management System

RSBY model works on a unique KMS System wherein every activity is controlled through keys managed broadly by Central Govt.

1. DKM – District Key Management System:

Managed by DKM (CMO in Chhattisgarh). Runs on a software used to issue FKO cards.

2. FKO – Field Key Officer:

Cards issued by DKM, used during enrolment by Govt. Representative to verify identity of beneficiary

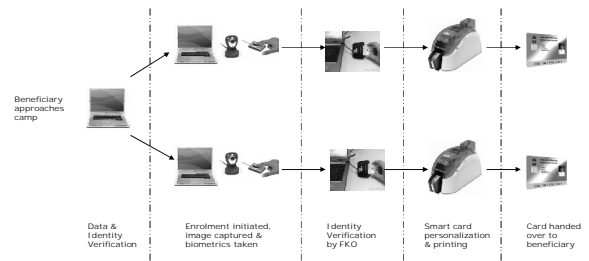
3. HAC – Hospital Authority Cards:

Issued by GoI. Used in hospitals to validate Transaction authenticity of Transaction Process

4. DKC – District Kiosk Cards:

Issued by GoI, Used at District Kiosk for validation purpose

Enrolment Process



Enrolment procedure at multiple locations with capability of issuing 300 cards per camp daily

OVERVIEW OF PRE- ENROLMENT ACTIVITIES

- State Government provides validated BPL Data to Ministry which gets uploaded on RSBY website www.rsby.in.
- This Data is downloaded by Insurer/ Emeditek using User Name and password provided to them.
- Emeditek and district administration will prepare a roster for enrolment stations/ camps at defined locations.
- Roster prepared in such a way as to cover entire district within 2-3 months from enrolment start date.
- To ensure availability of maximum number of beneficiaries at the time of enrolment, awareness campaign is carried out in consultation with State Nodal Agency.

OVERVIEW OF PRE- ENROLMENT ACTIVITIES

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- Emeditek ensures availability of sufficient enrolment stations, trained personnel with smart card providers.
- District Office with Kiosk will be set up by Emeditek/Insurer for holding enrolment data of entire district.
- Emeditek ensures availability of policy number for the district from Insurance Company.
- Emeditek ensures URN is generated, insurance policy details, validated data is placed on district server and policy start date are correctly added in data at the server.
- Emeditek ensures thorough testing of enrolment process using beneficiary data.
- Emeditek ensures that DKMA (District Key Management authority) and FKO (Field Key Officers) cards are collected well in advance from Ministry.
- Emeditek ensures that DKMA software for issuing, recharging FKO cards is installed on computer.

OVERVIEW OF ENROLMENT ACTIVITIES

- Enrolments kits are carried to each village having beneficiary data, village, state, district codes, Insurer ID, Policy start-end date and other Insurance details.
- FKO identifies every beneficiary at the enrolment station with the help of hard copy of beneficiary list available.
- Photographs of Head of family and complete family are taken.
- Two fingerprints of each of family member (right and left thumb) are captured.
- Card is issued in name of Head of family with photograph on the card.
- Any family member missed during enrolments can be subsequently added at District kiosk.
- If requested, splitting of cards can be carried out at District Kiosks.

OVERVIEW OF PERSONALISATION, ISSUANCE,ACTIVATION OF CARDS

- FKO carries Issuer authority card for personalization and activation of card.
- FKO verifies card, data on chip of cards, Head of family details.
- FKO inserts his Issuer Authority card in card reader and authenticates and activates the card.
- ID of issuer authority and details of issuance are stored in database.
- Card is issued to beneficiary after collecting Rs.30/- and a booklet giving information on list of hospitals, process, cost for re issuance of cards, helpline numbers is given to beneficiary.
- Emeditek ensures that Daily enrolment and personalization data is backed up to district server/kiosk.
- This data is then provided to State Nodal Agency/World Bank in prescribed format.

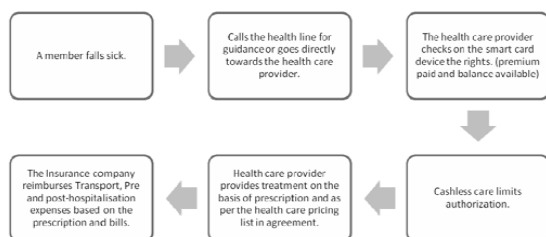
OVERVIEW OF empanel ment PROCESS

- Emeditek identifies list of government and private hospitals for entire district during pre enrolment phase.
- Both public and private providers having adequate facilities are eligible for empanelment.
- All government hospitals, CHCs & PHCs having telephone/fax, 64Kbps connectivity, computer and printer are eligible.
- Private health providers with fully equipped medical surgical facilities, OT, round the clock fully qualified doctors and nurses, registered with Income tax department, having telephone, fax, internet connectivity, agreeing to bear cost of transaction devices to be installed and agreeing to cost of packages as approved under the scheme are eligible.
- State government provides assistance in sensitizations programme for CHC and government hospitals.

OVERVIEW OF empanel ment PROCESS-continued...

- Emeditek enters into an agreement with hospital for providing cashless benefit to RSBY beneficiary.
- Cost of transaction devices and software is to be borne by hospitals.
- Transaction kit comprising of 2 smart card readers, 1 finger print scanner and transaction software is installed in all empanelled government and private hospitals.
- Training is imparted to hospital staff and treating doctor on utilization of transaction devices.
- User manual on transaction process and flow charts is given to hospitals.
- Acknowledgement copy after installation and training is collected from hospitals.

OVERVIEW OF CASHLESS TRANSACTION PROCESS



OVERVIEW OF CASHLESS TRANSACTION PROCESS

CASHLESS ACCESS FOR FIXED PACKAGES

- Beneficiary approaches RSBY help desk at network hospital, identity of beneficiary is verified by hospital with finger prints and smart card.
- After verification, a registration slip is given to beneficiary, directed to consult treating doctor.
- Treating doctor shall issue diagnosis sheet mentioning problem, examination carried out and line of treatment proposed.
- Beneficiary approaches help desk with diagnosis sheet.
- Help desk shall re verify the beneficiary and provisional entry is carried out on card through blocking amount for that package.
- In case, during treatment additional treatment is required due to complications, then additional package is blocked.
- Thereafter, during discharge, beneficiary shall approach Help desk with discharge summary.
- Final discharge details are entered into terminal to complete transaction.
- In case, treatment is not taken, amount is unblocked on card during discharge.

OVERVIEW OF CASHLESS TRANSACTION PROCESS

contd...

CASHLESS ACCESS FOR UNSPECIFIED PACKAGES

- Beneficiary approaches RSBY help desk at network hospital, identity of beneficiary is verified by hospital with finger prints and smart card.
- After verification, a registration slip is given to beneficiary, directed to consult treating doctor.
- Treating doctor shall issue diagnosis sheet mentioning problem, examination carried out and line of treatment proposed.
- Beneficiary approaches help desk with diagnosis sheet.
- Cashless request from is faxed to 24hrs cashless department of Emeditek with necessary medical details.
- After we are ascertained and negotiated package with provider, Authorization issued to hospital.
- In case, ailment not covered or data not sufficient to confirm eligibility, Emeditek can deny cashless.
- Report has to be submitted to Nodal Agency of every such denial.
- Amount authorized by us and authorization number are recorded while blocking amount (done manually in this case) by help desk.

OVERVIEW OF CASHLESS TRANSACTION PROCESS

contd...

CASHLESS ACCESS FOR MANUAL TRANSACTIONS

- Beneficiary approaches RSBY help desk at network hospital, identity of beneficiary is verified by hospital with any photo ID proof, for example voters ID.
- Cashless request from is faxed to 24hrs cashless department of Emeditek with necessary medical details.
- After we are ascertained and have negotiated package with provider, AL is issued to hospital.
- Hospital will retain card of beneficiary and after discharge, original claims documents along with original smart card of beneficiary is sent across to Emeditek.
- Emeditek will update transaction details on chip of cards(at kiosk) and on server(back end).
- Card can be collected by beneficiary within 7 days of receipt of claim documents from hospital.

OTHER SERVICE DELIVERABLES

- Emeditek shall set up a district office for coordination with State nodal agency.
- Emeditek will operate 24 hours call centre with toll free line in local language for handling queries related to operations of scheme, beneficiary calls, hospital calls.
- Emeditek will manage District kiosk for post issuance card modifications.
- Emeditek will provide MIS which includes collecting, collating and reporting data on real time basis.
- MIS reports related to enrolments, health service usage, claims data and customer grievance will be provided by Emeditek from time to time.
- Emeditek will help in feedback functions, collecting data in feedback formats and analyzing that data, suggesting appropriate actions.
- Emeditek will carry out regular medical audit and inspection of hospitals.

