



ડો. એચ. કે. ભાવસાર

અધિક નિયામક (તબીબી સેવાઓ)

ક્રમાંક: - "મા" અને એ.બી.- પી.એમ.જે.એ.વાય./
લાભ/ PO (H) / ૧૯
કમિશનરશ્રી, આરોગ્ય તબીબી સેવાઓ અને તબીબી
શિક્ષણ (પ.ક.), બ્લોક નં.૪, ૧લો માળ, ડો.જીવરાજ
મહેતા ભવન, ગાંધીનગર.

તા-૦૩-૦૪-૨૦૧૯
૦૫

વિષય:- "મા" / "મા વાત્સલ્ય" યોજના અને પ્રધાનમંત્રી જન આરોગ્ય યોજના હેઠળ હોસ્પિટલ
સંલગ્ન કરવા માટેની માર્ગદર્શિકા બાબત.

સંદર્ભ:- આરોગ્ય અને પરિવાર કલ્યાણ વિભાગના તા.૨૮/૦૨/૨૦૧૯ ના ઠરાવ ક્ર:-એફપીડબલ્યુ
૧૦૨૦૧૨/ ૪૭૧ બ-પા-૧-બ-૧ સચિવાલય, ગાંધીનગર.

પરિપત્ર :-

ઉપરોક્ત વિષય પરત્વે આપશ્રીને જણાવવાનું કે, ગુજરાત રાજ્યનાં તમામ જિલ્લાઓમાં ગરીબી રેખા હેઠળ જીવતા કુટુંબો માટે મુખ્યમંત્રી અમૃતમ (મા) યોજના તા. ૦૪/૦૯/૨૦૧૨ અમલમાં મુકેલ. તેમજ યોજનાની સફળતાને ધ્યાને લઈ રાજ્ય સરકારે મુખ્યમંત્રી અમૃતમ (મા) યોજનાનો વ્યાપ વધારી વર્ષ ૨૦૧૪-૧૫ માં મધ્યમ વર્ગના પરિવારો (કુટુંબના મહત્તમ પાંચ વ્યક્તિ) માટે મુખ્યમંત્રી અમૃતમ વાત્સલ્ય યોજના તા. ૧૫/૦૮/૨૦૧૪ થી અમલી કરેલ.

આયુષ્માન ભારત - પ્રધાનમંત્રી જન આરોગ્ય યોજના હેઠળ ગ્રામ્ય વિસ્તારો તેમજ શહેરી વિસ્તારો માટે નિયત માપદંડો ધરાવતા સામાજિક, આર્થિક અને જાતિ આધારિત સર્વેક્ષણ

૨૦૧૧ની યાદીમાં સમાવિષ્ટ પરિવારોને કુટુંબ દીઠ વાર્ષિક રૂ. ૫ (પાંચ) લાખ સુધીનું આરોગ્ય કવચ પૂરું પાડવા માટે તા. ૨૩/૦૯/૨૦૧૮ થી અમલી કરેલ.

તા.૨૮/૦૨/૨૦૧૯ના રોજ રાજ્ય સરકારે “મા” અને “મા વાત્સલ્ય” યોજનાના તમામ લાભાર્થી પરિવારોને આયુષ્માન ભારત- પ્રધાનમંત્રી જન આરોગ્ય યોજના અનુસાર લાભ આપવા માટેનો નિર્ણય કરેલ છે. જેથી હવે પછી તા. ૦૧/૦૩/૨૦૧૯ થી “મા” અને “મા વાત્સલ્ય” યોજનાનાં તમામ લાભાર્થી પરિવારોને આયુષ્માન ભારત - પ્રધાનમંત્રી જન આરોગ્ય યોજના હેઠળ મળવાપાત્ર રૂ. ૫ (પાંચ) લાખ સુધીની નિયત કરવામાં આવેલી તમામ સારવારનો લાભ આપવામાં આવશે.

“મા” યોજના હેઠળ અને પી.એમ.જે.એ.વાય હેઠળ હોસ્પિટલોનો સમાવેશ કરવા માટેની ગાઇડલાઇન અલગ-અલગ નિયત કરેલ. પરંતુ, હવેથી “મા” / “મા-વાત્સલ્ય” યોજના અને આયુષ્માન ભારત - પ્રધાનમંત્રી જન આરોગ્ય યોજનાના લાભો સમાન હોઇ હોસ્પિટલ સંલગ્ન કરવા માટેના માપદંડો અને તેની માર્ગદર્શિકા પણ સમાન કરવામાં આવે છે. જેથી હોસ્પિટલોને નીચે મુજબના ગ્રુપમાં વહેંચવામાં આવે છે.

- ગ્રુપ - એ હોસ્પિટલો (ક્લસ્ટર - ૧ થી ૧૫ માટે સારવાર આપતી હોસ્પિટલો).
- ગ્રુપ - બી હોસ્પિટલો (ક્લસ્ટર - ૧૬ થી ૨૬ માટે સારવાર આપતી હોસ્પિટલો).

ઉક્ત બંને ગ્રુપની હોસ્પિટલોએ સૌ પ્રથમ ઓનલાઇન “મા” યોજનાની વેબસાઇટ www.magujarat.com પર “Application for hospital empanelment” માં રજીસ્ટ્રેશન કરી હોસ્પિટલની તમામ વિગતો ભરી સબમિટ કરવાની રહેશે.

A. “ગ્રુપ - એ” હોસ્પિટલો સંલગ્ન કરવાની પ્રક્રિયા : - રજીસ્ટર થયેલ હોસ્પિટલો જો યોજનાના માપદંડો મુજબ લાયકાત ધરાવતી હોય તો તેની ઇમ્પ્લીમેન્ટેશન સર્પોર્ટ એજન્સી કક્ષાએથી ચકાસણી થઇ રાજ્ય કક્ષાએ આવશે. જે તે હોસ્પિટલને સીલેક્ટ કરેલ પેકેજ માટે ચકાસણી

કર્ચા બાદ હોસ્પિટલ ઇન્સ્પેક્શન કમિટી દ્વારા હોસ્પિટલની વિઝિટ કરી તેને સંલગ્ન કરવામાં આવશે.

B. “ગૃપ - બી” હોસ્પિટલો સંલગ્ન કરવાની પ્રક્રિયા : - રજીસ્ટર થયેલ હોસ્પિટલો જો યોજનાના માપદંડો મુજબ લાયકાત ધરાવતી હોય તો તેની જિલ્લા કક્ષાએથી ચકાસણી થઈ રાજ્ય કક્ષાએ આવશે અને તે હોસ્પિટલને તેમને સીલેક્ટ કરેલ પેકેજ માટે ઓનલાઇન એપૂવ કરી સંલગ્ન કરવામાં આવશે.

આમ, ઉક્ત દર્શાવેલ ક્લાસિફિકેશન મુજબ બંને ગૃપની હોસ્પિટલોને સંલગ્ન કરવા માટે ક્લસ્ટર વાઇઝ માપદંડો સહિત વિગતવાર માર્ગદર્શિકા આ સાથે સામેલ છે. જે હોસ્પિટલ સંલગ્ન કરવા માટે અનુસરવાની રહેશે. જેની નોંધ લેશો.

બિડાણ: - “મા” / “મા-વાત્સલ્ય” યોજના અને આયુષ્માન ભારત - પ્રધાનમંત્રી જન આરોગ્ય યોજના

હેઠળ હોસ્પિટલ સંલગ્ન કરવા માટેની માર્ગદર્શિકા.


અધિક નિયામક (ત.સે.)

આરોગ્ય તબીબી સેવાઓ અને

તબીબી શિક્ષણ (આ.વિ)

ગાંધીનગર.

પ્રતિ,

- મુખ્ય જિલ્લા આરોગ્ય અધિકારીશ્રી - તમામ.
- મુખ્ય જિલ્લા તબીબી અધિકારીશ્રી - તમામ.
- મ્યુનિસિપલ હેલ્થ ઓફિસરશ્રી - તમામ.
- પ્રોજેક્ટ હેડ, એમ.ડી. ઇન્ડિયા હેલ્થ ઇન્સ્યોરન્સ, ટી.પી.એ. પ્રા.લિ. ઇન્ફોસીટી, ગાંધીનગર.
- સ્ટેટ મેનેજર, ઓરિએન્ટલ ઇન્સ્યોરન્સ કંપની, ગાંધીનગર.

નકલ સવિનય રવાના:-

- મ્યુનિસિપલ કમિશ્નરશ્રી - તમામ.
- કલેક્ટરશ્રી- તમામ.
- જિલ્લા વિકાસ અધિકારીશ્રી - તમામ.
- વિભાગીય નાયબ નિયામકશ્રી, - તમામ.

નકલ રવાના:-

- અધિક નિયામકશ્રી, જા.આ., પ.ક., ત.શિ.
- મેનેજર, એન. કોડ. સોલ્યુશન્સ, એ. ડિવિઝન ઓફ જી.એન.એફ.સી., ગીફ્ટ સીટી, ગાંધીનગર.
- તમામ નેટવર્ક હોસ્પિટલો.

**Guideline for Empanelment of Hospitals under
Mukhyamantri Amrutam (MA), "MA Vatsalya" Yojana
& Ayushman Bharat – Pradhanmantri Jan Arogya Yojana
Gujarat**

Introduction of the Programme: -

Mukhyamantri Amrutam "MA" Yojana was launched to provide treatment of critical illness to BPL population on 4th September, 2012 by Government of Gujarat.

Based on feedback from various stakeholders, the Scheme was extended to families of lower income group named as **Mukhyamantri Amrutam Vatsalya Yojana** in August 2014.

To provide cashless treatment of Primary, Secondary and Tertiary care, Ayushman Bharat – Pradhanmantri Jan Arogya Yojana was launched by **Hon'ble Prime Minister** on **23rd September, 2018**.

Objective of the Scheme: -

- To improve access of beneficiaries to timely, quality medical and surgical care.
- To provide cashless treatment of Primary, Secondary and Tertiary care services.
- To provide an opportunity to scheme beneficiaries to select hospitals of his/her choice from both Private and Government hospitals for cashless hospitalization and treatment.



Beneficiaries: -

❖ "MA" Yojana: -

- BPL families of the state (As per the list of Rural and Urban development department).

❖ "MA Vatsalya" Yojana: -

- Families having an annual income up to Rs. 4.00 lakh.
- All Urban & Rural 'ASHA'.
- Accredited Journalists.
- Fix pay employees of class-3 & 4 appointed by the Gujarat Government.
- Un-organized workers holding the U-Win card.
- Senior citizens of those families with an annual income up to Rs. 6 lakh.

❖ Pradhan Mantri Jan Arogya Yojana: -

- A total 44.85 lakh families (both rural and urban) who are poor, deprived rural families and identified occupational category of urban workers' families as per the latest Socio-Economic Caste Census (SECC) 2011 data.

Card Process: -

• "MA" & "MA Vatsalya" Yojana: -

- To avail scheme benefits, every family is been issued a **QR coded card (Quick Response Coded Card)**.
- For beneficiaries' enrollment, **Taluka kiosks** and **Civic Centre kiosks** have been established at every Taluka and identified City



civic centers, where beneficiaries can enroll themselves, can get his/her card split, can do addition/deletion of family members, and can get a new card in case of lost card. **Mobile kiosks** are been provisioned for village to village enrollment drive.

- The beneficiary has to show his/her Ration card, photo ID proof, Income certificate (for “MA Vatsalya” beneficiaries) to the kiosk before the Verification of the beneficiary by Taluka Verifying Authority & issuance of “MA” / “MA Vatsalya” Card.

• **PMJAY: -**

- The name of the beneficiary and his family members must be in the list of social, economic and caste based survey 2011.
- The beneficiary has to take “MA” or “MA Vatsalya” card (if available) along with the Ration card, Aadhar card to their nearest CSC, E-Gram center, in case of emergency to the hospital empanelled under the PMJAY scheme.
- Based on documents submitted, the operator or Pradhanmantri Arogyamitra verifies / searches the beneficiaries & upload the identity proof of his/her eligibility. These details are verified by the insurance company / ISA against the SECC-2011 database and if matches, an E-card (Golden Card) of PMJAY is generated & provided to the beneficiary.

Scheme Benefits: -

- Cashless quality medical and surgical treatment for Primary, Secondary and Tertiary care services covers **1805 defined procedures** along with their follow ups.
- Health benefit cover of **Rs. 5,00,000** (Rupees Five Lakh only) per Family per annum.



- All **pre-existing conditions** are covered. The pre & post hospitalization expenses incurred for consultation, diagnostic tests & medicines before the admission of the patient in the same hospital & cost of diagnostic tests & medicines and up to 15 days of the discharge from the hospital for the same ailment of the surgery.
 - There is no cap on the family size and age.
 - **Both Private, Government /Trust/Grant-In-Aid hospitals and Medical college hospitals** are empanelled under the scheme.
 - **Rs. 300/-** is paid to the beneficiary as a **travel cost** during every hospitalization.
 - Currently, more than 3,000 Hospitals are empanelled under the scheme.
 - For encouraging Quality services, Hospitals accredited by NABH / JCI (Joint Commission International) are given **Quality Incentives** of **10% extra package** charge over and above the package rates.
- For further details of MA Yojana, there is a website www.magujarat.com & **Toll free number** is **1800-233-1022**.
- For further details of PMJAY, there is a website www.pmjay.gov.in & **Toll free number** is **14555 / 1800-233-1022**.

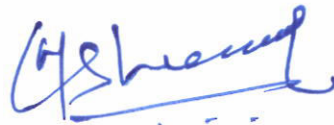


BASIC HOSPITAL SERVICES

- **Allocation of beds in Network Hospitals for Scheme Patients:** The Network Hospitals shall allocate at least 25% of their total bed capacity for admitting scheme patients.
- **Outpatient services:** Provider shall ensure free OP facilities for scheme patients.
- **Set up of Kiosk:** A hospital Kiosk (help desk) needs to be established at every hospital along with "Arogya Mitra".
 - a. Group-A Hospitals – Arogya Mitra is appointed by the ISA.
 - b. Group-B Hospitals – Pradhanmantri Jan Arogya Mitra is appointed by Hospital itself.
- **Hospital Arogya Mitra (HAM):** HAM will be a medical person Minimum MBBS who will look after the technical aspect of the Scheme at empanelled hospital.
- **Conduct of Inpatient services:** Provider should not refuse to admit any scheme patients for any services available at the hospital which is provided to the paid patients.
- **Follow-up services:** Provider shall provide cashless facility during every follow-up as defined under the scheme. The follow-up benefit includes the cost of medicines, diagnostic tests, doctors' consultations, etc..

CATEGORIZATION OF HOSPITALS: -

- Group-A Hospitals; hospitals who are empanelled under Cluster-1 to 15).
- Group-B Hospitals; hospitals who are empanelled under Cluster-16 to 26).



PROCESSES FOR EMPANELMENT OF HOSPITALS: -

❖ Group-A Hospitals. (Hospitals who want to empanel under Cluster-1 to 15).

- Hospitals have to get register first on online portal www.magujarat.com. (**“Application for hospital empanelment”**). After registration, hospital ID and password are generated which the hospital gets through E-mail on their registered E-mail ID.
- All required details along with the supporting attachments are to be uploaded online by the hospital.
- The Implementation Support Agency (ISA) then assess the hospital (online) against the scheme criteria and if the hospital fulfil the criteria then State Hospital Empanelment Committee consisting representatives of SHA, ISA & District health Authority visits the hospital for the final verification.

❖ Group-B Hospitals. (Hospitals who want to empanel under Cluster-16 to 26).

- Hospitals have to first get register on the online portal www.magujarat.com. (**“Application for hospital empanelment”**). After registration, hospital ID and password are generated which the hospital gets through an E-mail on their registered E-mail ID.
- All required details along with the supporting attachments are to be uploaded online by the hospital.
- This application is then scrutinized by the District Empanelment Committee and is processed within 15 days of its receipt from the final submission of the online application by hospital.
- The District Empanelment Committee will inspect the hospital physically and verifies the hospital details against the application details.



- District Empanelment Committee may approve / reject the hospital application as per the criteria laid down under the scheme.
- If hospital fulfills the scheme criteria then the committee approves the hospital & submits its final report to the state online.
- These hospital details along with the District Empanelment Committee remarks are once again verified by the State online and decide whether to approved / rejected / seek further clarifications from the DEC (District Empanelment Committee).
- After the approval of the State Hospital Empanelment Committee, Hospital gets the ID & Password to book claims under the scheme.

➤ **Note:** - For time being all hospitals have to apply on "MA" & PMJAY Hospital Empanelment Portal. (www.magujarat.com & www.pmjay.gov.in)

❖ **Bank Guarantee for hospitals other than Government hospitals: -**

1. **Group-A Hospital:** - Hospital is required to submit a bank guarantee of Rs. 2.5 lakh per cluster and a maximum of Rs. 10.00 lakh. (Reducing the existing bank guarantee to 8% and then gradually to 6%, 4% in subsequent renewal. A bank guarantee of minimum 4% will be ensured always.)
2. **Group-B Hospital:** - Hospital is required to submit a bank guarantee of Rs. 25,000 irrespective of the number of clusters empanelled throughout the empanelment period.
3. **If a Hospital is empanelled under Group-A & B category then Bank Guarantee shall be as per point-1.**



ELIGIBILITY CRITERIA FOR HOSPITAL EMPANELMENT

Common Criteria	Common criteria + Additional criteria for Group – A Hospitals	Common criteria + Additional criteria for Group – B Hospitals
Total Bed Capacity: - (Note - All the Beds should be in a single hospital premises)		
• Minimum 3 Beds	-	Day care specialties (ENT, Ophthalmology & Oral & Maxillo Facial Surgery)
• Minimum 10 Beds	-	Single Secondary Specialty
• Minimum 15 Beds	-	Multiple Secondary Specialties.
• Minimum 25 Beds	Single Super Specialty & Multiple Secondary Specialties.	Multiple Secondary Specialties.
• Minimum 50 Beds	All tertiary Specialties.	All Secondary Specialties.
• Standalone Dialysis Center	<ul style="list-style-type: none"> • Minimum 5 dialysis machines (4 dialysis machines + 1 dialysis machines for Positive patients) Dialysis Machine. • Single use dialyzer and tubing to be used in every session. 	
Requirement of Technical HR as per Bed Capacity: -		
• ≤ 15 Beds	-	1 Doctor & 3 Nurses.
• > 15 to 25 Beds	2 Doctors & 4 Nurses.	2 Doctors & 4 Nurses.
• > 25 to 50 Beds	4 Doctors & 7 Nurses	4 Doctors & 7 Nurses
• > 50 Beds	Per 10 Beds 1 Doctor & 3 Nurses will be added.	Per 10 Beds 1 Doctor & 3 Nurses will be added.
General Ward	<ul style="list-style-type: none"> • The provider should have separate male and female wards. • Appropriate signage & separate toilet for male 	<ul style="list-style-type: none"> • The provider should have separate male and female wards. • Appropriate signage & separate toilet for male



	& female.	& female.
ICU Beds	<ul style="list-style-type: none"> The ICU ward should be equipped with ventilators, defibrillators, monitors, central oxygen line, suction apparatus, Crash Cart and pulse oxymeter. The hospital should have at least 2 ICU beds. 	<ul style="list-style-type: none"> The ICU ward should be equipped with ventilators, defibrillators, monitors, central oxygen line, suction apparatus, Crash Cart and pulse oxymeter. The hospital should have at least 2 ICU beds. (if applicable)
The post-operative ward	<ul style="list-style-type: none"> The post-operative ward should be equipped with ventilators, defibrillators, monitors, central oxygen line, suction apparatus, Crash Cart and pulse oxymeter. The hospital should have at least 2 beds. 	<ul style="list-style-type: none"> The post-operative ward should be equipped with ventilators, defibrillators, monitors, central oxygen line, suction apparatus, Crash Cart and pulse oxymeter. The hospital should have at least 1 bed. (if applicable)
Legal Requirements	<ul style="list-style-type: none"> Building use permit by appropriate authority. Fire NOC from appropriate authority. License for lift and elevator (if applicable) Hospital registration under local body (C Form) - (if applicable) 	<ul style="list-style-type: none"> Building use permit by appropriate authority. Fire NOC from appropriate authority. License for lift and elevator (if applicable) Hospital registration under local body (C Form) - (if applicable)

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	<ul style="list-style-type: none"> • Registration under Pollution Control Act. (GPCB Certificate) • Certificate for Biomedical waste • AERB Approvals & BARC Radiation Protection certificate for each Radiological/imaging equipment (if applicable) • PNDD license • Drugs & Cosmetics License • Narcotic & Psychotic Substance License • Ambulance fitness certificate from RTO (In house or Tie up). 	<ul style="list-style-type: none"> • Registration under Pollution Control Act. (GPCB Certificate) • Certificate for Biomedical waste • AERB Approvals & BARC Radiation Protection certificate for each Radiological/imaging equipment (if applicable) • PNDD license (if applicable) • Drugs & Cosmetics License • Narcotic & Psychotic Substance License • Ambulance fitness certificate from RTO (In house or Tie up).
<p>Diagnostic & Laboratory Services</p> <ul style="list-style-type: none"> • Laboratory Services:- <ul style="list-style-type: none"> ○ Pathology, ○ Microbiology, ○ Bio-chemistry, ○ Blood bank, ○ Histopathology, ○ Cytopathology, ○ Genetics <p>As applicable...</p>	<p>In-house / Out-sourced as per speciality</p> <ul style="list-style-type: none"> • For Out-sourced -Tie-up letter should be as per Annexure no. 1 & 2. 	<p>In-house / Out-sourced as per speciality</p> <ul style="list-style-type: none"> • For Out-sourced - Tie-up letter should be as per Annexure no. 1 & 2.

Asst. Director

<ul style="list-style-type: none"> • Radiology / Diagnostic Services: - <ul style="list-style-type: none"> ○ X-Ray- digital / conventional, ○ Ultrasound, ○ CT Scan, ○ MRI Scan, ○ PET Scan, ○ Gamma Camera, ○ Mammography, ○ DSA lab, ○ DTPA scan for renal, ○ ECHO, ○ Audiometry <p>As applicable...</p>		
<p>Non clinical and Administrative Facilities</p> <ul style="list-style-type: none"> • Catering. • Laundry. • Pharmacy Services. • Physiotherapy (if applicable). • Ambulance Services. 	<p>In-house / Out-sourced as per speciality</p> <ul style="list-style-type: none"> • For Out-sourced – Tie-up letter should be as per Annexure no. 1 & 2. 	<p>In-house / Out-sourced as per speciality</p> <ul style="list-style-type: none"> • For Out-sourced – Tie-up letter should be as per Annexure no. 1 & 2.
<p>General Infrastructure</p>	<ul style="list-style-type: none"> • Patient registration counter / Reception area • Patient waiting area. • OPD. • IPD • Emergency room • General Ward (Separate Male / Female ward) with Toilet Facility 	<ul style="list-style-type: none"> • Patient registration counter / Reception area • Patient waiting area. • OPD. • IPD • Emergency room • General Ward (Separate Male / Female ward)

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	<ul style="list-style-type: none"> Well-equipped Operation theatre, ICU, Post-Operative Ward. 	<ul style="list-style-type: none"> with Toilet Facility Well-equipped Operation theatre (if applicable), ICU (if applicable), Post-Operative Ward (If applicable).
Hospital Empanelment Committee	<p>State Hospital Empanelment Committee</p> <ul style="list-style-type: none"> Two officers from SHA. One officer from ISA state project office. One Representative (CDMO / Medi. Superintendent / Specialist / Professor / RMO) of CDMO office or One Representative from Medical college of the concerned district. One Representative (CDHO / QAMO) of CDHO office from concerned district. DPC – MA & PMJAY RC & DC from ISA. DC from Insurance Company. 	<p>District Hospital Empanelment Committee</p> <ul style="list-style-type: none"> One Representative (CDHO / QAMO / THO) of CDHO office from concerned district. One Representative (CDMO / Specialist/ RMO / MO) of CDMO office or Medical college from concerned district. DPC – MA & PMJAY DC from ISA. DC from Insurance Company.
MoU signing Authority	<ul style="list-style-type: none"> Implementation Support Agency (ISA) & Insurance Company 	<ul style="list-style-type: none"> Insurance Company & Implementation Support Agency (ISA)
Period of empanelment	<ul style="list-style-type: none"> Yearly Hospital will be renewed 	<ul style="list-style-type: none"> Yearly Hospital will be renewed

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	annually after visit of district hospital empanelment committee's report.	annually after visit of district hospital empanelment committee's report.
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Speciality wise requirements	
Burns & Plastic Surgery	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Separate Burns Ward with AC. • Physiotherapy center (In-house / Out-sourced) <p>Specific HR: -</p> <ul style="list-style-type: none"> • Plastic & cosmetic Surgeon
Cardiology, Cardio-thoracic Surgery & Cardio-vascular Surgery	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Cath Lab, • ECHO machine, TMT, Holter, CT Angio. • ICCU • Fully equipped Cardiothoracic Operation theatre facility with heart Lung machine, etc... <p>Specific HR: -</p> <ul style="list-style-type: none"> • Cardiologist • Cardiothoracic Surgeon • Cardiovascular Surgeon • Cath lab Technician • Perfusionist • Cardiac Physiotherapist
Genito-urinary Surgery	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Dialysis Unit, • Lithotripsy (In house or Out Sourced), • RIRS Kit/ PCNL Kit/ Holmium Laser, • Well-equipped O.T. with C-ARM, • Uroflowmatry & Urodynamic Study • DTPA Scan Tie-up



	<p>Specific HR: -</p> <ul style="list-style-type: none"> • Genito-urinary Surgeon & Nephrologist • Qualified Dialysis Technician
Neurosurgery	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Neuro ICU • Well-equipped Neuro OT with Cath facility, C-Arm, Microscope, Neuro-surgery compatible OT table with head holding frame (Horse shoe, Mayfield / sugita or equivalent frame) <p>Specific HR: -</p> <ul style="list-style-type: none"> • Neuro Surgeon • Neuro-physician • Physiotherapist in house or tie-up
Pediatric Surgery	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Well-equipped OT • NICU / PICU <p>Specific HR: -</p> <ul style="list-style-type: none"> • Pediatric Surgeon
Poly Trauma	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Designated 24x7 trauma care facility room • Well-equipped O.T. with C-ARM, • Tie Up for NCS (Nerve Conduction Study) & EMG. • SICU <p>Specific HR: -</p> <ul style="list-style-type: none"> • Team of; Orthopedic (Full time), General surgeon (Full time), Neurosurgeon (Part time), Plastic Surgeon (Part time), Uro-surgeon (Part time) & Dental Surgeon. • Physiotherapist in house or tie-up
Medical Oncology, Radiation Oncology, Surgical Oncology	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Hospital should have Tumor Board. • Member of National Cancer Grid (NCG)

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	<ul style="list-style-type: none"> • SICU for surgical Oncology • Palliative care activities carried out by the institution. <p>Specially for Radiation Cluster: -</p> <ul style="list-style-type: none"> • Facilities for Cobalt, Brachy. • Linear with Multi leaf Collimator • Facilities for SRS &SRT • Treatment Planning System <p>Specific HR: -</p> <ul style="list-style-type: none"> • Medical Oncologist • Radiation Oncologist • Surgical Oncologist • Radiation Safety officer • Radiotherapy Technician
Joint Replacement	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Modular O.T. <p>Specific HR: -</p> <ul style="list-style-type: none"> • Orthopedic Surgeon • Physiotherapist in house or tie-up
Organ Transplantation	<ul style="list-style-type: none"> • NOTTO registration. • Minimum 10 number of organ transplant performed in last 1 year. • Dialysis unit <p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Well-equipped Transplant OT. • Transplant Robot for Robotic procedure. • Post-transplant Isolation ward. <p>Specific HR: -</p> <ul style="list-style-type: none"> • Qualified & experienced team of transplant physician, surgeon, anesthetist.
Otorhinolaryngology	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Well-equipped O.T. with microscope.

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	<ul style="list-style-type: none"> • Audiometry facility (In-house / Out-sourced) <p>Specific HR: -</p> <ul style="list-style-type: none"> • ENT Surgeon.
Obstetrics & Gynecology	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Labor Room • Separate Well-equipped OT with laparoscopic facility <p>Specific HR: -</p> <ul style="list-style-type: none"> • Obstetrician & Gynecologist • Support Services of pediatrician.
Ophthalmology	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Well-equipped O.T. with microscope & phaco emulsification. • Optometry <p>Specific HR: -</p> <ul style="list-style-type: none"> • Ophthalmologist
General Surgery	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Well-equipped OT with laparoscopic facility. • Separate Septic O.T. • SICU <p>Specific HR: -</p> <ul style="list-style-type: none"> • General Surgeon
Oral & Maxillo Facial Surgery	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Dental Chair • Portable dental X-ray • OPG X-ray tie-up facility <p>Specific HR: -</p> <ul style="list-style-type: none"> • Oral & Maxillofacial Surgeons
General Medicine	<p>Instrument & Infrastructure: -</p> <ul style="list-style-type: none"> • Well-equipped ICU <p>Specific HR: -</p> <ul style="list-style-type: none"> • General Physician

C. S. Shrivastava

Mental Disorder Packages	Instrument & Infrastructure: - <ul style="list-style-type: none"> • Patient Assistant • Geropsychiatric units, alcohol and drug addiction treatment facilities • Mental health clinics Specific HR: - <ul style="list-style-type: none"> • Psychiatrist
Pediatric Medical Management	Instrument & Infrastructure: - <ul style="list-style-type: none"> • PICU Specific HR: - <ul style="list-style-type: none"> • Pediatrician.
Neo-Natal Packages	Instrument & Infrastructure: - <ul style="list-style-type: none"> • NICU • Thermo controlled overhead radiant warmer with inbuilt light & suction • Separate room for septic babies. • Each coat equipped with oxygen point, compressed air point, vacuum point, 4-6 Electric points, monitors, infusion pump, suction machine. • Resuscitation trolley. • Heating Mattresses. • Multipara Monitors. Specific HR: - <ul style="list-style-type: none"> • Neonatologist
Orthopedics	Instrument & Infrastructure: - <ul style="list-style-type: none"> • 24x7 trauma care facility • Separate Well-equipped O.T. with C-ARM, • Dedicated Modular OT for Joint Replacement. • Tie Up for NCS (Nerve Conduction Study) & EMG. • SICU • Physiotherapy tie-up

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	Specific HR: - <ul style="list-style-type: none">• Orthopedic Surgeon
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***** HR CRITERIA (MANDATORY):-**

- **Super-specialists** (M.ch., DNB, DM, Senior specialist pass out before 1994 having experience in concerned super-speciality & / degree from foreign University registered by GMC/MCI)
 - Preferable full time super specialist at the hospital not associated with any other empaneled hospital/ at least two-part time super specialists.
 - No super specialist will be allowed having tie up with more than three hospitals in the scheme.
- **Specialists** (MD, MS, DNB, Diploma PG, MDS, & / degree from foreign University registered by GMC/MCI)
 - Preferable full time specialist at the hospital not associated with any other empaneled hospital/ at least two-part time specialists.
 - No specialist will be allowed having tie up with more than three hospitals in the scheme.
- **Duty Doctor & Medical Officer** (M.B.B.S.).
- Above all doctors having registration under MCI / GMC Act, Appointment letter of doctor & Acceptance letter from doctors are required.
- **Nursing Staff – M. Sc. / B.Sc. Nursing / GNM / ANM** (GNC registration must for all)



Note: -

- All the existing "MA" & PMJAY empanelled hospitals have to fulfill the above criterias within 3 month from the issuance of this guidelines. In case any hospital is not fulfilling the aforementioned criterias then the hospital is to be de-empanelled from the scheme.
- All the Legal Licenses are to be renewed throughout the empanelment period.
- The hospitals have to take following clusters combined under the scheme.
 - Joint Replacement, Polytrauma and Orthopedic.
 - Cardiology, Cardio-thoracic Surgery & Cardio-vascular Surgery (if facilities available in hospitals).
 - Medical Oncology, Radiation Oncology & Surgical Oncology.
- The aforementioned conditions may change as and when required by the SHA after the necessary approvals.
- All other Terms and conditions will be remained as per existing guideline.



ANNEXURE-1

AGREEMENT BY THE HOSPITAL

Format of Affidavit (to be furnished on Rs. 100 stamp paper / Franking with notarized from the hospital about tied up diagnostic facilities/Pharmacy/ Catering/ Laundry/ Lithotripsy Unit – separately if the parties are different)

I _____ S/o. _____, age _____, Occ: _____,
R/o. _____ do hereby solemnly affirm and state on oath as follows:

That I am the MD/CEO/Superintendent of _____ Hospital and signed MOU with _____ Insurance Company, TPA & Implementing Support Agency (ISA) to implement “MA” & “MA Vatsalya” Yojana and Ayushman Bharat-PMJAY. That as per the terms of MOU it is agreed by our hospital to provide services to the scheme patients on cashless basis. Further it is also agreed to facilitate and provide services which are not available in our hospital through tie-up center for diagnostic facilities/Pharmacy/ Catering/ Laundry/ Lithotripsy Unit on cashless basis.

We have tied up with M/s. _____ to provide services to scheme patients on cashless basis for the services which are not available in our hospital. The details of tied up services are as follows:

1. _____, 2. _____, 3. _____

The above mentioned services will be provided to the scheme Patients on a cashless basis through above mentioned tied up center.

We are herewith submitting the tie-up letter issued by the centre that all the contents stated above are true and correct.

Date: _____ Place: _____ DEPONENT: _____ Attestation: _____

The contents of the affidavit are read over and explained and who after understanding the same signed before me on this ____ day of ____ 20____. Hence attested.

Date: _____ Place: _____ ATTESTOR



AGREEMENT BY THE TIED-UP FACILITY

Letter Format (to be furnished on Rs. 100 stamp paper / Franking with notarized from the tied up Center for diagnostic facilities/Pharmacy/Catering/ Laundry/ Lithotripsy Unit - separately if the parties are different)

I _____ S/o. _____, age _____, Occ: _____, R/o. _____ do hereby solemnly affirm and state on oath as follows:

I have entered in to MOU with the _____ hospital to provide the following services to Scheme beneficiaries on cashless basis.

1. _____
2. _____
3. _____

It is agreed that the Scheme patients referred to us by _____ hospital will not be charged any money for the above any services.

The bills for the above services will be submitted to the _____ hospital for payment as per the agreed terms and conditions.

Date:

Signature:

Place:

Stamp:



Name of Clusters under MA/MAV & PMJAY Scheme
CLUSTER-1 BURNS AND PLASTIC SURGERY
CLUSTER-2 CARDIOLOGY
CLUSTER-3 CARDIO THORACIC SURGERY
CLUSTER-4 CARDIO VASCULAR SURGERY
CLUSTER-5 GENITO URINARY SURGERY (RENAL)
CLUSTER-6 NEUROSURGERY/NEUROLOGY/INTERVENTIONAL NEURORADIOLOGY
CLUSTER-7 PAEDIATRIC SURGERY
CLUSTER-8 POLY-TRAUMA
CLUSTER-9 MEDICAL ONCOLOGY
CLUSTER-10 RADIATION ONCOLOGY
CLUSTER-11 SURGICAL ONCOLOGY
CLUSTER-14 PROCEDURES FOR KNEE & HIP REPLACEMENT
CLUSTER-15 ORGAN TRANSPLANT PACKAGES
CLUSTER-16 OTORINOLARYNGOLOGY
CLUSTER-17 OBSTETRICS AND GYNAECOLOGY
CLUSTER-18 OPHTHALMOLOGY
CLUSTER-19 GENERAL SURGERY
CLUSTER-20 ORAL AND MAXILLO FACIAL SURGERY
CLUSTER-21 GENERAL MEDICINE
CLUSTER-22 MENTAL DISORDER PACKAGES
CLUSTER-23 EMERGENCY ROOM PACKAGES (Care Requiring Less Than 12 hrs Stay)
CLUSTER-24 PAEDIATRIC MEDICAL MANAGEMENT
CLUSTER-25 NEO-NATAL PACKAGES
CLUSTER-26 ORTHOPEDICS

A. Shrivastava