

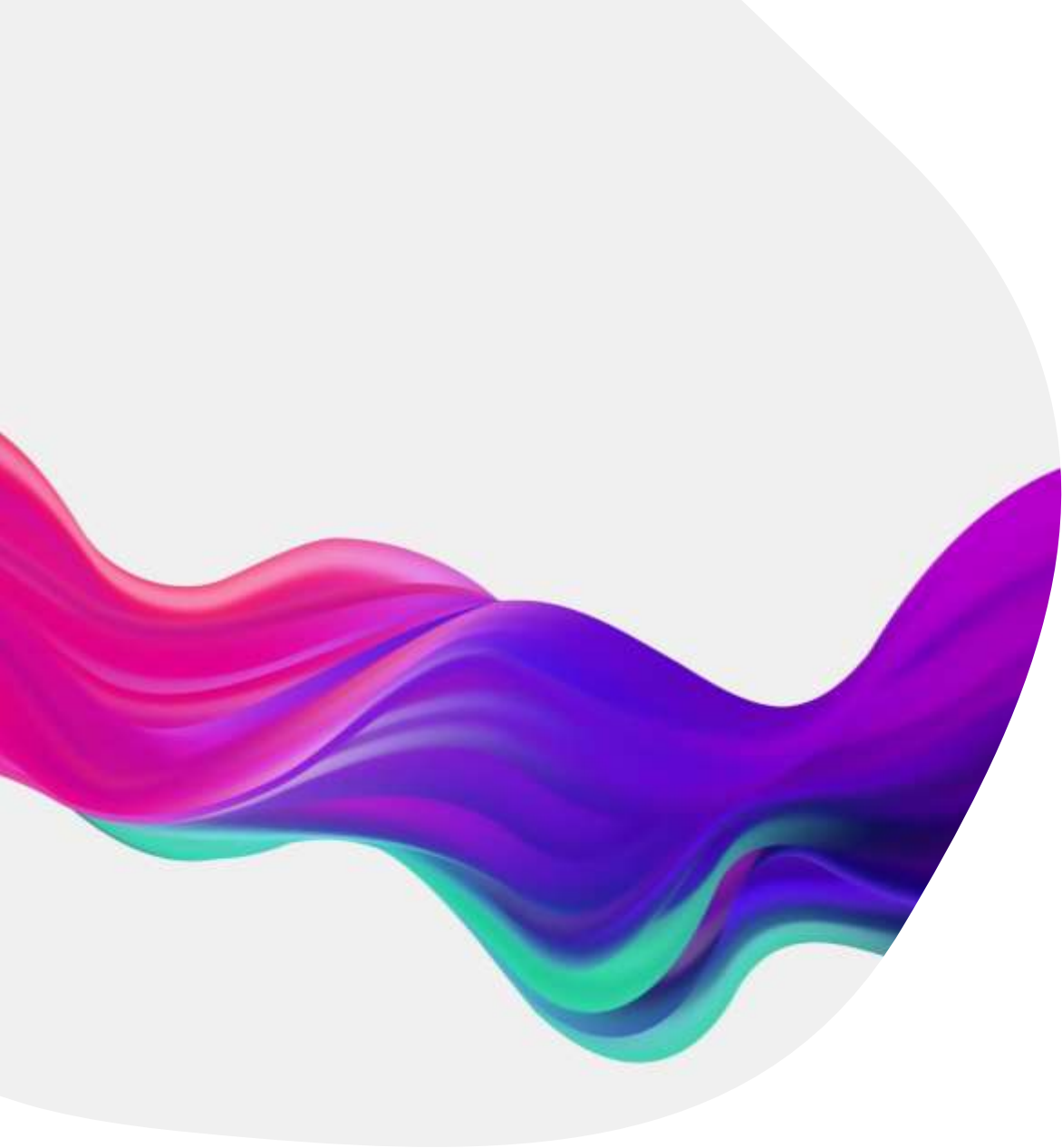
# ANALYSIS OF REJECTION OF CASHLESS MEDICAL CLAIMS IN CREDIT DEPARTMENT OF A MULTISPECIALTY HOSPITAL



## APEX HOSPITALS

PRESENTED BY :Tanya Gupta  
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FACULTY GUIDE :Dr. Susmit Jain





# INTRODUCTION

The Credit department of any Private Hospital in India is responsible for the revenue of the hospital, out of which a significant figure, approximately 75% of revenue received by the private hospital . in this survey comes from Medical Aid Schemes run by government such as RGHS, CGHS, ECHS, ESIC etc. in the form of cashless medical facility to patients.

The patients affiliated under schemes do not have to pay anything in cash to the hospital for the treatment. Their treatment charges are born by the government.(Cashless claims)

The hospitals are observing increasing levels of deductions in the claim costs from the government medical schemes.

Hence an understanding of the significance of Government Medical Aid Schemes to the health care sector and the impact of these schemes on payment of claims is integral when understanding the complexities that private hospital credit departments have to deal with in credit management.

# Methodology

**STUDY DESIGN:** Qualitative Retrospective Design

**TIME PERIOD** – March 23, 2022- June 19, 2022

**LOCATION OF STUDY** - Apex Hospital, Jaipur, Rajasthan

**STUDY SUBJECTS-** All mediclaims between 31 March 2021- 31 March 2022 showing a deduction of more than 10% in claim amounts.

**SAMPLE SIZE:** 400 rejected medical claims

**SOURCE OF DATA-** HMIS, Rajasthan Government SSO portal and process tracking Secondary data of medical claim processed and medical claims rejected was collected from the accounts department HMIS and process tracking

## **SCHEMES AUDITED**

- **Mukhyamantri Chiranjeevi Swasthya Bima Yojna**
- **Rajasthan Government Health Scheme**
- **Employees' State Insurance Corporation**

*Approx 45 Lakhs deduction observed overall.*



# Mukhyamantri Chiranjeevi Swasthya Bima Yojna

- **Claims audited between March 2021- March 2022**
- **Hospitals covered-Malviya Nagar Unit and Mansarovar Unit**
- **Total deduction observed - Approx 28 Lakh**
- **Malviya Nagar Unit Deductions- 20 Lakh, Mansarovar Unit – 8 Lakh**

### 50% DEDUCTION+5% PENALTY

- The claim submission should be done within 24 hours of discharge to avoid 50% deduction on package cost.
- The query should be replied within 15 days of being raised . Failing to do so will result in 5% penalty.

**EXCERPTS FROM THE GUIDELINES**

EHCPs shall be obliged to submit their claims online within 24 hours of discharge in the format prescribed. EHCP is also required to consistently monitor the progress on claim generation, submission and claim payments.

**h. Late submission of claims will attract penalty by up to 50% of the package cost by the ESIDAA for next 30 days. After expiry of 33 days of discharge no payment of the claim will be made to the hospital**

case in ONE GO. EHCP must reply the query online on portal within a maximum period of 15 days from the date of query raised. The response can be: NO COMMENT where no changes are desired to be made to query raised or clarification where response/Additional information/Additional document is submitted as a response to the query. In case EHCP does not respond to the query within the prescribed time limit, a penalty of 5% of package cost will be imposed on EHCP and the claim will be reverted back to the Insurer. Insurer can then settle the case on merit basis. **In case the claim is approved and paid, 5% penalty will be deducted.** But if the case is rejected, no penalty will be applicable.

### WRONG PACKAGE SELECTION

The billing team should check the package selected vs. what is performed as per the discharge summary and update it on the portal accordingly.

Total deduction observed due to this reason – 3,89,900/-

Some rejection reasons as per Ayushman team:

- Package blocked for Groin Hernia Repair Inguinal but as per USG hernia at anterior abdominal wall, hence rejected
- Calculus present in upper ureter and package blocked for lower ureter, hence rejected.
- As per document diagnosis is breast mass but package blocked for Mesenteric Cyst Excision, hence rejected.

### Mention TID on barcode of Medicine box

A machine generated label with TID, Date and Patient name should be mentioned on the bar code of medicine box.

- Rejection reason found in claims from Jan 2022 onwards.
- Rejections were observed prominently in Oncology and Dialysis department claims.
- Total deduction -1,18,800/- observed between Jan 2022-Mar 2022.



### Admit Time Less Than 24 Hours

Operational team should ensure 24 hours stay of patient on day of discharge.

Total deductions observed due to this reason – Approx 40,000/-

**Discharge Photo for Radiotherapy patients**

- Patient died in between treatment or didn't revert to hospital for completion of treatment.
- Live Discharge photo ain't captured hence claim rejected
- Discharge photo to be captured after everyday procedure as a precautionary measure.

### OPERATIONAL ERRORS

The following types of Operational errors were found in the dialysis unit from March 2021-Dec 2021.

- Claim submission after 24 hours of discharge
- Patient admission time photo is captured at 3:09 pm while dialysis document states dialysis started at 3 pm. Not justified.
- Patient discharge photo captured before completion of dialysis, not justified.
- CBC report and RFT reports with sign stamp by pathologist not provided even after multiple queries raised.
- Correct Date of Admission and Date of Discharge not provided even after query.
- Patient Photo different in Pre patient and Discharge patient photo.
- Dialysis being performed before pre auth approval hence claim rejected.

### IMPROPER DOCUMENTS SUBMISSION

Some of the reasons for improper document submission as per Ayushman team-

- Hospital didn't provide ICU Chart hence settled the amount in routine ward. TID- T19092111515632
- Having Only 3 Days Clinical Notes Hence Payment Given According to It. TID- T28022110599775
- As per query proper documents of EPO is not provided, hence reject the claim. TID-T0702221291629
- After Query Hospital Not Provide Machine Generated Cbc & Rft Report With Sign Stamp By Pathologist, Hence Rejected

**Smitiya Margdarshak should check the queries raised by the team properly ,provide the documents being asked for and ensure timely query reply. If the same query is being raised again check if there's really a lack of proper documents from our end.**

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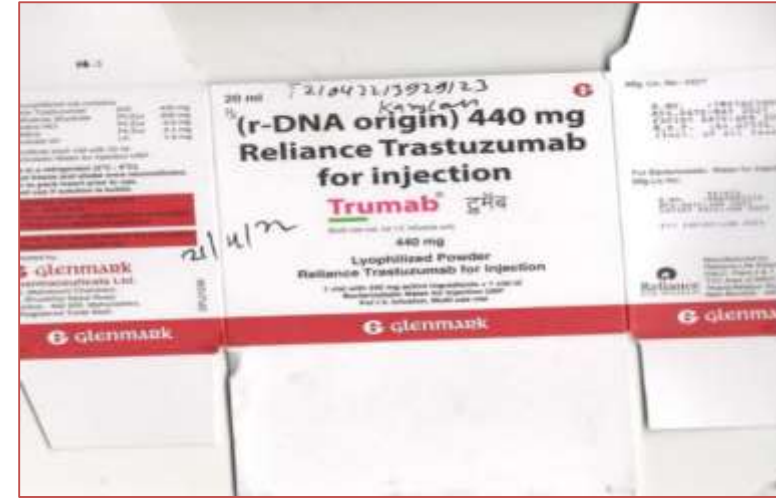


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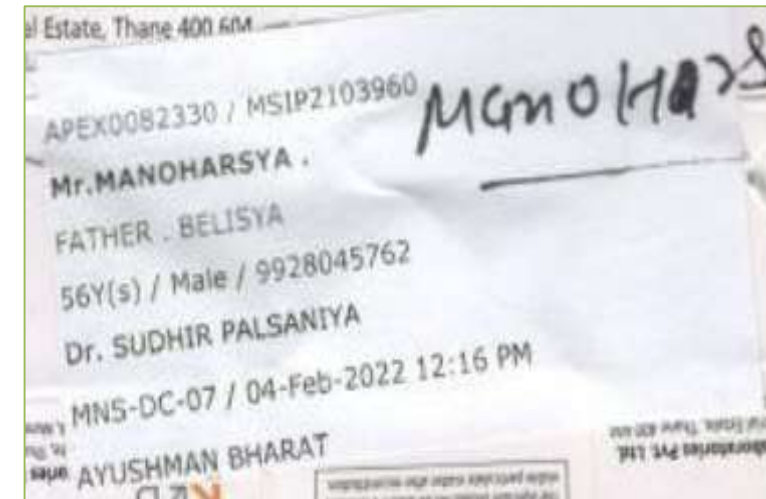
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## Current Situation



## What is to be done



## OPERATIONAL ERRORS

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# **Rajasthan Government Health Scheme (RGHS)**

**Claims audited from  
August 2021- March 2022**

**Total IPD claim deductions  
observed – Approx 7 Lakh**

# Reasons for Deductions

## **1. Billing error observed-**

Wrong Package amount listed in the bill.

## **2. Reimbursement error from RGHS team's end-**

Discrepancy in total cost of Package vs what they reimbursed.

## **3. Wrong Approval-90%**

**Deduction.** Amount to be reimbursed 190590/-,  
Reimbursed amount-19590/-

## **4. 41% Deduction observed in Implant Amount.**

Amount as per bill- 126,181/-  
Reimbursed amount-40,000/-

*A total deduction of approx 3 Lakh observed due to 2,3,4 reason.*

## **5. For claims having deductions of more than 10% -**

**Deductions observed prominently in Lab investigations .** Reason- All reports not provided. Approx 1,50,000/- deduction observed.

## **6. Last day ward and consultation charges being**

**deducted.** Approx 50000/- deduction observed

-RGHS Billing should be done separately by trained personnel.

-Proper query reply and document uploading to be ensured by the person accountable for handling the portal.

-A timely audit to be done by credit team to ensure correct reimbursement from RGHS team's end.

## \*Discrepancy in package cost

**Package Details**

| Package Code | Package Name                 | Package Rate (Rs.) | GST(%) | GST Amount | Payable Rate (Rs.) | Delete Record |
|--------------|------------------------------|--------------------|--------|------------|--------------------|---------------|
| 502          | Laparoscopic Cholecystectomy | 25094              | 0      | 0          | 25094              |               |
| Total        |                              | 25094              |        |            | 25094              |               |

**Doctor Details**

Treating Doctor Name: dr. sachin jha  
Specialty of Doctor: General Surgeon

The payable rate for Laparoscopic Cholecystectomy – 25,094/-  
What they reimbursed- 21,821/-

*Actual Package cost from RGHS portal*

## \*Wrong Billing

| SAC : 999311 - Healthcare Services |             |             |                                            |      |                                   |        |           |          |           |
|------------------------------------|-------------|-------------|--------------------------------------------|------|-----------------------------------|--------|-----------|----------|-----------|
| S.No                               | From Date   | To Date     | Duration                                   | Code | Description                       | Qty    | Rate      | Discount | Am        |
| <b>Package Charges</b>             |             |             |                                            |      |                                   |        |           |          |           |
| 1                                  | 11-Aug-2021 | 11-Aug-2021 | 1 Days                                     | 426  | Ventral /Incisional Hernia Repair | 1.00   | 13,027.00 | 0.00     | 13,027.00 |
| Total :                            |             |             |                                            |      |                                   |        |           |          | 13,027.00 |
| S.No                               | Date        | Service Cd  | Service Name                               | Qty  | Rate                              | In.Qty | In.Amt    | Ex.Qty   | Ex.Amount |
| <b>Consultation Charges</b>        |             |             |                                            |      |                                   |        |           |          |           |
|                                    |             |             |                                            |      |                                   |        | 810.00    |          | 0.00      |
| <b>GENERAL AND GI SURGERY</b>      |             |             |                                            |      |                                   |        |           |          |           |
| 1                                  | 11-Aug-2021 | DM194       | Dr. VINAY MAHALA / DR RAJNEESH / DR.SACHIN | 1.00 | 270.00                            | 1.00   | 270.00    | 0.00     | 0.00      |
| 2                                  | 12-Aug-2021 | DM194       | Dr. VINAY MAHALA / DR RAJNEESH / DR.SACHIN | 1.00 | 270.00                            | 1.00   | 270.00    | 0.00     | 0.00      |
| 3                                  | 13-Aug-2021 | DM194       | Dr. VINAY MAHALA / DR RAJNEESH / DR.SACHIN | 1.00 | 270.00                            | 1.00   | 270.00    | 0.00     | 0.00      |
| <b>IMPLANT / MESH CHARGES</b>      |             |             |                                            |      |                                   |        | 0.00      |          | 4,829.00  |
| <b>GH IP PHARMACY</b>              |             |             |                                            |      |                                   |        | 0.00      |          | 4,829.00  |

*Package amount listed in bill*

**Package Details**

| Package Code | Package Name                      | Package Rate (Rs.) | GST(%) | GST Amount | Payable Rate (Rs.) | Delete Record |
|--------------|-----------------------------------|--------------------|--------|------------|--------------------|---------------|
| 426          | Ventral /Incisional Hernia Repair | 11328              | 0      | 0          | 11328              |               |

*Package amount as per RGHS portal*



# **Employees' State Insurance Corporation(ESIC)**

**Claims audited from  
Jan 2021- Jan 2022**

**Total IPD claim  
deductions observed –  
Approx 8 Lakh**

# Reason for Deductions

## Deductions prominently observed in Pharmacy

10% mandatory deduction on Pharmacy happening twice.

10% discount adjusted in pharmacy ,still extra deduction for non payable consumables

Irrelevant deductions-  
A deduction of Rs.2837/-was found on the portal for Inj. Peg filgrastim 6mg as per LSD rates but in our bill, no such injection was mentioned.

Injections are not payable.  
Average cost of maximum injections - 5000/-10,000/-. Some injections being as high as 75,000/- for Bryxta 400mg, 57,558/-for Transtuzumab440mg

**The Billing team should not give any discount on the bill from their end**

**Deductions for consumables to be monitored if legit or not.**

**A timely audit should be done whenever the amount is credited to halt any wrong deductions happening from the team's end repeatedly.**

[illegible][illegible][illegible]

|                                                                       |          |                                                                 |                      |       |         |           |
|-----------------------------------------------------------------------|----------|-----------------------------------------------------------------|----------------------|-------|---------|-----------|
| 153                                                                   | DRU3467  | RANTAC 150 MG TABLET                                            | 00.82                | 14.00 | 1.148   | 11.48     |
| 154                                                                   | DTBRI03  | BRITZILAM 50 MG TABLET                                          | 14.90                | 14.00 | 20.86   | 208.60    |
| Item Issues Total :                                                   |          |                                                                 |                      |       |         | 54,504.59 |
| Item Returns                                                          |          |                                                                 |                      |       |         |           |
| 155                                                                   | DTBRI03  | BRITZILAM 50 MG TABLET                                          | -14.90               | 2.00  | -2.98   | -29.80    |
| 156                                                                   | DIS1156  | SYRINGE 2 ML B BRAUN                                            | -11.00               | 3.00  | -3.3    | -33.00    |
| 157                                                                   | DIS1163  | SYRINGE 5 ML B BRAUN                                            | -15.00               | 6.00  | -9      | -90.00    |
| 158                                                                   | DINAC01  | NACEL 400 MG/ 2ML INJECTION                                     | -50.31               | 1.00  | -5.031  | -50.31    |
| 159                                                                   | DIDEX01  | DEXARIL 2 ML INJECTION                                          | -10.40               | 1.00  | -1.04   | -10.40    |
| 160                                                                   | DIM 201  | MANNITOL 20% 100 ML INJECTION ACULIFE                           | -33.60               | 2.00  | -6.72   | -67.20    |
| 161                                                                   | DIEUR02  | NS 500 ML INJECTION EUROLIFE ACULIFE                            | -79.31               | 3.00  | -23.793 | -237.93   |
| 162                                                                   | DINS 08  | NS 100 ML INJECTION EUROLIFE                                    | -37.94               | 5.00  | -18.97  | -189.70   |
| 163                                                                   | DRU0160  | AMIKAFINE 500 MG 2 ML INJECTION                                 | -165.00              | 1.00  | -16.5   | -165.00   |
| 164                                                                   | DRU3468  | RANTAC 2 ML INJECTION                                           | -03.60               | 1.00  | -0.36   | -03.60    |
| 165                                                                   | DRU3878  | STROCIT PLUS TABLET                                             | -74.80               | 11.00 | -82.28  | -822.80   |
| Item Returns Total :                                                  |          |                                                                 |                      |       |         | -1,699.74 |
| Sub Total :                                                           |          |                                                                 |                      |       |         | 52,804.85 |
| Radiology Charges                                                     |          |                                                                 |                      |       |         |           |
| 1                                                                     | 1608     | X-RAY CHEST BED SIDE                                            | 69.00                | 1.00  | 0       | 69.00     |
| 2                                                                     | RADCT033 | CT Scan Head                                                    | 1,035.00             | 1.00  | 0       | 1,035.00  |
| 3                                                                     | 1657     | C. T. Scan Limbs -With Contrast including CT angiography        | 2,591.00             | 2.00  | 0       | 5,182.00  |
| 4                                                                     | 1653     | C. T. Spine (Cervical, Dorsal, Lumbar, Sacral)-without contrast | 1,725.00             | 1.00  | 0       | 1,725.00  |
| 5                                                                     | 1591     | USG WHOLE ABDOMEN BEDSIDE                                       | 267.00               | 1.00  | 0       | 267.00    |
| 6                                                                     | 1637     | CT Head-Without Contrast                                        | 1,035.00             | 1.00  | 0       | 1,035.00  |
| 7                                                                     | 1608     | X-RAY CHEST BED SIDE                                            | 69.00                | 1.00  | 0       | 69.00     |
| Sub Total :                                                           |          |                                                                 |                      |       |         | 9,382.00  |
| Rupees In : Eighty Nine Thousand Nine Hundred Seventy One Rupees Only |          |                                                                 | Grand Total :        |       |         | 95,251.00 |
|                                                                       |          |                                                                 | Discount Amt :       |       |         | 5,280.00  |
| Reason : 010% dis .pharmacy-5280/-                                    |          |                                                                 | Net Amt :            |       |         | 89,971.00 |
|                                                                       |          |                                                                 | Pat Due Amt :        |       |         | 00.00     |
|                                                                       |          |                                                                 | Credit From ESIC :   |       |         | 89,971.00 |
| Patient/Attendant Signatory                                           |          |                                                                 | 100132               |       |         |           |
| Print Dt & Time : 14-May-2022 05:18 PM                                |          |                                                                 | Authorised Signatory |       |         |           |

ESIC portal image

|                              |                                                                    |                                                  |      |      |       |      |       |
|------------------------------|--------------------------------------------------------------------|--------------------------------------------------|------|------|-------|------|-------|
| 1507                         | Lab - Blood gas analysis with electrolytes                         | 6                                                | 476  | 476  | 2856  | 0    | 2856  |
| 1471                         | Lab - DptL                                                         | 1                                                | 276  | 276  | 276   | 0    | 276   |
| 1447                         | Lab - Serum Creatinine                                             | 2                                                | 63   | 63   | 126   | 0    | 126   |
| 1446                         | Lab - Blood Urea Nitrogen                                          | 1                                                | 62   | 62   | 62    | 0    | 62    |
| 1608                         | Lab - Chest PA view (one film)                                     | 2                                                | 69   | 69   | 138   | 0    | 138   |
| 1657                         | Lab - C. T. Scan Limbs -With Contrast including CT angiography     | 2                                                | 2591 | 2591 | 5182  | 0    | 5182  |
| 1653                         | Lab - C. T. Spine (Cervical Dorsal Lumbar Sacral)-without contrast | 1                                                | 1725 | 1725 | 1725  | 0    | 1725  |
| 1591                         | Lab - Abdomen USG                                                  | 1                                                | 267  | 267  | 267   | 0    | 267   |
| 1637                         | Lab - CT Head-Without Contrast                                     | 2                                                | 1035 | 1035 | 2070  | 0    | 2070  |
| 1733                         | Lab - Coagulation profile                                          | 1                                                | 573  | 573  | 573   | 0    | 573   |
| 1467                         | Lab - Rapid test for malaria(card test)                            | 1                                                | 51   | 51   | 51    | 0    | 51    |
|                              | Radiol.                                                            | 0                                                | 0    | 0    | 0     | 0    | 0     |
| Implants                     |                                                                    |                                                  |      |      |       |      |       |
|                              |                                                                    | 0                                                | 0    | 0    | 0     | 0    | 0     |
| Unlisted Procedure           |                                                                    |                                                  |      |      |       |      |       |
|                              | trackesotomy                                                       | 1                                                | N.A. | 0    | 500   | 0    | 500   |
|                              | RAPID ANTIGEN TEST                                                 | 1                                                | N.A. | 0    | 200   | 200  | 0     |
| Approver excess              |                                                                    |                                                  |      |      |       |      |       |
| Other Expenses               |                                                                    |                                                  |      |      |       |      |       |
|                              | Pharmacy & Consumable Charges                                      | N.A.                                             | N.A. | N.A. | 47526 | 4775 | 42751 |
| Scrutinizer                  | rs. 25/- for electrodes deducted as not payable                    | rs. 4750/- for pharmacy deducted as 10% discount |      |      |       |      |       |
| Validator                    | rs. 25/- for electrodes deducted as not payable                    | rs. 4750/- for pharmacy deducted as 10% discount |      |      |       |      |       |
| Approver                     | rs. 25/- for electrodes deducted as not payable                    | rs. 4750/- for pharmacy deducted as 10% discount |      |      |       |      |       |
|                              | Other Charges                                                      | N.A.                                             | N.A. | N.A. | 0     | 0    | 0     |
| Total Amount                 |                                                                    |                                                  |      |      | 89971 |      |       |
| Amount Received from Patient |                                                                    |                                                  |      |      | 0     |      |       |
| Discount (if any)            |                                                                    |                                                  |      |      | 0     |      |       |
| Net Claim Amount             |                                                                    |                                                  |      |      | 89971 | 8576 | 81395 |

|                                                     |                 |                                        |          |                    |   |           |
|-----------------------------------------------------|-----------------|----------------------------------------|----------|--------------------|---|-----------|
|                                                     |                 |                                        |          | Sub Total :        |   | 30,718.09 |
| Radiology Charges                                   |                 |                                        |          |                    |   |           |
| 1                                                   | S-11011 Dt 11/0 | HRCT CHEST                             | 2,000.00 | 1.00               | 0 | 2,000.00  |
| 2                                                   | 1591            | USG WHOLE ABDOMEN                      | 267.00   | 1.00               | 0 | 267.00    |
| 3                                                   | 1643            | C. T. Scan Whole Abdomen With Contrast | 4,658.00 | 1.00               | 0 | 4,658.00  |
|                                                     |                 |                                        |          | Sub Total :        |   | 6,925.00  |
| Other Investigation                                 |                 |                                        |          |                    |   |           |
| 1                                                   | 592             | 2D ECHO                                | 1,242.00 | 1.00               | 0 | 1,242.00  |
|                                                     |                 |                                        |          | Sub Total :        |   | 1,242.00  |
| Rupees In : Seventy One Thousand Eighty Rupees Only |                 |                                        |          | Grand Total :      |   | 74,152.00 |
|                                                     |                 |                                        |          | Discount Amt :     |   | 3,072.00  |
| Reason : 10% Dis. pharmacy-3072/-                   |                 |                                        |          | Net Amt :          |   | 71,080.00 |
|                                                     |                 |                                        |          | Pat Due Amt :      |   | 00.00     |
|                                                     |                 |                                        |          | Credit From ESIC : |   | 71,080.00 |

## Current situation-

Total Pharmacy amount-30,718/-

10% mandatory discount 3,072/-

| Expense For The Patient |                                                                                                           |      |      |                              |       |       |       |
|-------------------------|-----------------------------------------------------------------------------------------------------------|------|------|------------------------------|-------|-------|-------|
| Validator               | rs;437/- for viral markers not justified.                                                                 |      |      |                              |       |       |       |
| Approver                | rs;437/- for viral markers not justified.                                                                 |      |      |                              |       |       |       |
| 1510                    | Lab - Hb A1 C                                                                                             | 1    | 150  | 150                          | 150   | 0     | 150   |
| 1736                    | Lab - Basic studies including cell count protein sugar gram stain India Ink preparation and smear for A/P | 2    | 276  | 276                          | 552   | 0     | 552   |
| 1739                    | Lab - Bacterial culture and sensitivity                                                                   | 2    | 207  | 207                          | 414   | 214   | 200   |
| Approver                | As per AIIMS rates.                                                                                       |      |      |                              |       |       |       |
| 1480                    | Lab - Serum Magnesium                                                                                     | 1    | 115  | 115                          | 115   | 0     | 115   |
| 1438                    | Lab - Body fluid for Malignant cells                                                                      | 1    | 155  | 155                          | 155   | 0     | 155   |
| 1591                    | Lab - Abdomen USG                                                                                         | 1    | 267  | 267                          | 267   | 0     | 267   |
| 1643                    | Lab - C. T. Scan Whole Abdomen With Contrast                                                              | 1    | 4658 | 4658                         | 4658  | 0     | 4658  |
|                         | Radio, -                                                                                                  | 0    | 0    | 0                            | 0     | 0     | 0     |
| Implants                |                                                                                                           |      |      |                              |       |       |       |
|                         |                                                                                                           | 0    | 0    | 0                            | 0     | 0     | 0     |
| Unlisted Procedure      |                                                                                                           |      |      |                              |       |       |       |
|                         | COVID-19 TEST                                                                                             | 1    | N.A. | 0                            | 500   | 0     | 500   |
|                         | NT-ProBNP                                                                                                 | 1    | N.A. | 0                            | 2070  | 0     | 2070  |
|                         | HRCT CHEST -                                                                                              | 1    | N.A. | 0                            | 2000  | 0     | 2000  |
| Other Expenses          |                                                                                                           |      |      |                              |       |       |       |
|                         | Pharmacy & Consumable Charges                                                                             | N.A. | N.A. | N.A.                         | 27646 | 11000 | 16646 |
| Scrutinizer             | rs;475/- for ecg leads,rs;260/- for cotton,rs;2087/- for under pad,rs;505/- for urometer not payable.     |      |      |                              |       |       |       |
| Validator               | rs;475/- for ecg leads,rs;260/- for cotton,rs;2087/- for under pad,rs;505/- for urometer not payable.     |      |      |                              |       |       |       |
| Approver                | Rs.11000/- deducted for non payable consumables after 10% discount adjusted.                              |      |      |                              |       |       |       |
|                         | Other Charges                                                                                             | N.A. | N.A. | N.A.                         | 0     | 0     | 0     |
|                         |                                                                                                           |      |      | Total Amount                 | 71080 |       |       |
|                         |                                                                                                           |      |      | Amount Received from Patient | 0     |       |       |
|                         |                                                                                                           |      |      | Discount (if any)            | 0     |       |       |
|                         |                                                                                                           |      |      | Net Claim Amount             | 71080 | 17718 | 53362 |

ESIC team adjusted this discount and took 27,646/- (30,718-3072) as final pharmacy amount and deducted 11,000/- consumable charges (*mentioned in the ECIS portal image*) on this in turn paying 16,646/-

### What should have been done-

30,718-11,000= 19,718/- (instead of 27,646/-)

Now a 10% discount 1972/- to be imposed on this .

Amount that should have been reimbursed for pharmacy = 19718-1972= 17,746/- instead of 16,646/-



| Pharmacy Charges    |         |                                             |          |       |   |          |
|---------------------|---------|---------------------------------------------|----------|-------|---|----------|
| Item Issues         |         |                                             |          |       |   |          |
| 1                   | DRU0235 | APRECAP 125/80 CAPSULE                      | 1,001.00 | 1.00  | 0 | 1,001.00 |
| 2                   | DRU0332 | AZEE 500 MG TABLET                          | 23.78    | 5.00  | 0 | 118.90   |
| 3                   | DRU1395 | ENDOXAN N 1 GM INJECTION                    | 280.70   | 1.00  | 0 | 280.70   |
| 4                   | DRU0455 | BIODEXONE 4 MG TABLET                       | 04.90    | 6.00  | 0 | 29.40    |
| 5                   | DRU1371 | EMEGRAN 3 ML INJECTION                      | 92.60    | 1.00  | 0 | 92.60    |
| 6                   | DRU1376 | EMESET 8 MG TABLET                          | 10.90    | 10.00 | 0 | 109.00   |
| 7                   | DIS0571 | I.V. SET PLAIN ROMSONS                      | 151.00   | 1.00  | 0 | 151.00   |
| 8                   | DIS1163 | SYRINGE 5 ML B BRAUN                        | 15.00    | 5.00  | 0 | 75.00    |
| 9                   | DIALR01 | ALRUBICIN 150 MG INJECTION                  | 2,903.00 | 1.00  | 0 | 2,903.00 |
| 10                  | DRU2367 | LUPIFIL P 0.6 ML INJECTION                  | 4,505.75 | 1.00  | 0 | 4,505.75 |
| 11                  | DIDEX01 | DEXARIL 2 ML INJECTION                      | 10.40    | 1.00  | 0 | 10.40    |
| 12                  | DIDNS02 | DNS 0.9 % 500 ML INJECTION EUROFLEX ACULIFE | 76.71    | 1.00  | 0 | 76.71    |
| 13                  | DINS 05 | NS 100 ML PB INJECTION ACULIFE              | 17.66    | 1.00  | 0 | 17.66    |
| 14                  | DIEUR02 | NS 500 ML INJECTION EUROFLEX ACULIFE        | 78.89    | 2.00  | 0 | 157.78   |
| 15                  | DIS1355 | VENEPROT NO-22                              | 208.00   | 1.00  | 0 | 208.00   |
| 16                  | DRU1525 | EVERFRESH 100 ML GARGLE                     | 97.40    | 1.00  | 0 | 97.40    |
| Item Issues Total : |         |                                             |          |       |   | 9,834.30 |
| Sub Total :         |         |                                             |          |       |   | 9,834.30 |

Bill image

Image from ESIC Portal

|                                                              |                                                                           |                                                                                                                                                                                                         |      |      |       |      |
|--------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------|-------|------|
| Major -                                                      | 0                                                                         | 0                                                                                                                                                                                                       | 0    | 0    | 0     | 0    |
| Hospital Charges(Where Package Deal Rates Are Not Specified) |                                                                           |                                                                                                                                                                                                         |      |      |       |      |
| IS 1277                                                      | Proc - Multiple drugs                                                     | 1                                                                                                                                                                                                       | 928  | 835  | 835   | 0    |
| Us 1512                                                      | Lab - Kidney Function Test.                                               | 1                                                                                                                                                                                                       | 233  | 233  | 233   | 0    |
| Int 1513                                                     | Lab - Liver Function Test.                                                | 1                                                                                                                                                                                                       | 259  | 259  | 259   | 0    |
| Int 1531                                                     | Lab - Chloride.                                                           | 1                                                                                                                                                                                                       | 62   | 62   | 62    | 0    |
| Int 1401                                                     | Lab - Serum Sodium                                                        | 1                                                                                                                                                                                                       | 58   | 58   | 58    | 0    |
| Doc Approver                                                 | Including in Kidney Function Test.                                        |                                                                                                                                                                                                         |      |      |       |      |
| Doc 1402                                                     | Lab - Serum Potassium                                                     | 1                                                                                                                                                                                                       | 52   | 52   | 52    | 0    |
| Doc Approver                                                 | Including in Kidney Function Test.                                        |                                                                                                                                                                                                         |      |      |       |      |
| NEU 1394                                                     | Lab - Complete Haemogram/CBC HbRBC count and indices TLC DLC Platelet ESR | 1                                                                                                                                                                                                       | 155  | 155  | 155   | 0    |
| Rev                                                          | Peripheral smear examination                                              |                                                                                                                                                                                                         |      |      |       |      |
|                                                              | Radio. -                                                                  | 0                                                                                                                                                                                                       | 0    | 0    | 0     | 0    |
| Implants                                                     |                                                                           |                                                                                                                                                                                                         |      |      |       |      |
|                                                              |                                                                           | 0                                                                                                                                                                                                       | 0    | 0    | 0     | 0    |
| Unlisted Procedure                                           |                                                                           |                                                                                                                                                                                                         |      |      |       |      |
|                                                              |                                                                           | 0                                                                                                                                                                                                       | N.A. | 0    | 0     | 0    |
| Other Expenses                                               |                                                                           |                                                                                                                                                                                                         |      |      |       |      |
| Deal                                                         | Pharmacy & Consumable Charges                                             | N.A.                                                                                                                                                                                                    | N.A. | N.A. | 8834  | 3760 |
| Used                                                         | Scrutinizer                                                               | Rs.226/- for consumables deducted as included in chemo charges. Rs.961/- for pharmacy deducted as 10% discount as per ESIC guidelines.                                                                  |      |      |       |      |
| Upd                                                          | Validator                                                                 | Rs.226/- for consumables deducted as included in chemo charges. Rs.961/- for pharmacy deducted as 10% discount as per ESIC guidelines.                                                                  |      |      |       |      |
| Upd                                                          | Approver                                                                  | Rs.434/- for consumables deducted as included in chemo charges. Rs.480/- for pharmacy deducted as 10% discount as per ESIC guidelines. Rs.2877/- deducted for 3ml, 8mg filgrastim 8mg as per LSO rates. |      |      |       |      |
|                                                              | Other Charges                                                             | N.A.                                                                                                                                                                                                    | N.A. | N.A. | 0     | 0    |
| Total Amount                                                 |                                                                           |                                                                                                                                                                                                         |      |      | 11988 |      |
| Amount Received from Patient                                 |                                                                           |                                                                                                                                                                                                         |      |      | 0     |      |
| Discount (if any)                                            |                                                                           |                                                                                                                                                                                                         |      |      | 0     |      |
| Net Claim Amount                                             |                                                                           |                                                                                                                                                                                                         |      |      | 11988 | 8118 |

## *Recommendations*

The person responsible for submitting the claims should have thorough knowledge about the guidelines.(Who's responsible- Billing team or credit team)

A Standard Operating Procedure to be implemented for timely query reply

Proper document upload

Training should be given to the staff that operates the portal

For query replies wherein a doctor's justification letter is to be attached , prefer a typed one with Doctor's signature than a handwritten one. The rejection rate for typed ones was less.

Timely audits should be done when payment is received to avoid same deductions happening repeatedly.



# CONCLUSION

Rejections faced is one of the significant and critical parameters for the credit department in any hospital as the credit department directly impacts the revenue generation and in turn the efficiency of the hospital.

Unnecessary deductions and rejections lead to heavy losses to the hospital revenue, hence timely audits should be done to account for the reasons. According to IRDA, a hospital maintaining a rejection rate of 2% or less is considered to have an efficient claim settlement process.

Processes to enhance the rejection rates should be implemented by the hospital.

This study focused on this aspect and gave suggestions for process improvement through

- Orientation and Training of Staff
- Standard Operating Protocol for timely query replies
- Timely audits to account for errors in deductions
- Billing team to check with the doctors for the packages selected vs procedures performed





Delivered a presentation in the boardroom to the director – Dr. Sheenu Jhawar and Unit head –Mr. Manish Sinha about the findings and gave recommendations on the same to improve the process flow.



# APEX HOSPITALS

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