B/49779- Outsourcing/AG/ECHS/Policy

All Regional Centres

SCRUTINY OF OPD/IPD CLAIMS AT RC LEVEL


2. It is directed that the process for online bill processing at RC level to be carried out as under:-

(a) **Bills Amounting to Less than Rs 30,000/-**. For bills amounting to less than Rs. 30,000/-, 2% bills per day shall be checked by the JD (HS). The bills selected will be those having highest financial value. Additional bills can be checked as per discretion.

(b) **Bills in the Range of Rs 30,000/- to Rs 59,999/-**. For bills in the range of Rs 30,000/- to 59,999/-, 3% bills per day shall be checked by the JD (HS). The bills selected will be those having highest financial value. Additional bills can be checked as per discretion.

(c) **Bills in the Range of Rs 60,000/- to Rs 99,999/-**. For bills in the range of Rs 60,000/- to 99,999/-, 5% bills per day shall be checked by the JD (HS). The bills selected will be those having highest financial value. Additional bills can be checked as per discretion.

(d) **Bills More than Rs 1 Lakh**. 100% Bills for amount more than Rs. 1 Lakh to be checked by JD(HS) at RC.

3. The process to be put in effect immediately and respective functionaries in the Online Bill Processing chain to ensure that the above is complied.

4. The modification incorporated in the system of the online bill processing application will be such that a basket of 100 claims is presented to the JD(HS), those 100 claims will be picked up in FIFO manner out of the claims processed by BPA. There will be separate baskets for OPD, IPD and individual re-imbursement claims. The 100 claims in each basket will be strictly presented in FIFO manner. The presentation of these baskets to JD(HS) and its subsequent manner of processing for all baskets (OPD, IPD and individual re-imbursement) is described below:-

(a) **Claims less than Rs. 30,000/-**. These will be listed on top of the page and JD(HS) would have to compulsorily check 2% of such claims (number to be rounded off to the next round figure). These claims would be the one's with the highest recommended amount. The multi select option for the balance claim in this category would be available only after atleast 2% claims have been checked. JD(HS) can check additional claims also as per his discretion.
(b) **Claims between Rs. 30,000/- to Rs. 59,999/-**. A counter for the claims falling in this region would be created by BPA to reflect 3% of such claims (number to be rounded off to the next round figure) which would have to be compulsorily checked by the JD(HS). These claims would be the one’s with the highest recommended amount. The JD(HS) would have the option to check any additional claim also should he choose to do so. The multi select option for the balance claim in this category would be available only after atleast 3% claims have been checked.

(c) **Claims between Rs. 60,000/- to Rs. 99,999/-**. A counter for the claims falling in this region would be created by BPA to reflect 5% of such claims (number to be rounded off to the next round figure) which would have to be compulsorily checked by the JD(HS). These claims would be the one’s with the highest recommended amount. The JD(HS) would have the option to check any additional claim also should he choose to do so. The multi select option for the balance claim in this category would be available only after atleast 5% claims have been checked.

(d) **Claims above Rs. 1 Lakh/-**. All claims above Rs. 1 Lakh will have to be compulsorily checked by JD(HS). No multi select option will be enabled in this window.

5. Next set of 100 claims in the concerned basket will be presented to the JD(HS) only after the claims in the respective basket has been completely cleared.

6. In addition, it is highlighted that in accordance with Para 2(d) of MoD letter No. 22(A)(10/10/US(WE)(Res) dated 23 Feb 2012, “CFA will examine the bill and BPA’s worksheet prior to according sanction.” Hence, all CFAs must ensure that no violation to the above guidelines take place and the provisions brought out above are not compromised in any manner.

7. Please ensure speedy clearance of bills so that large pendencies can be reduced. Financial integrity of checks will not be compromised.

8. These instructions are issued with approval of MD ECHS.

(DM Anand)
Col
Dir (Stats & Automation)
for MD ECHS

**Copy to:**

**DoESW**
- Please refer your letter No 18(80)/2017/WE/D(Res-1) dated 12 Jul 2018

**CGDA**
- With refer to your UO No. AT-IV/4807/UTI/Vol-IV dated 09 Nov 2017

**M/s UTI-ITSL**
UTI Bhawan, Plot No.3, Sector 11
CBD Belapur, Navi Mumbai
Maharashtra - 400 614
- For information and immediate action.
Telecon between Dir (S&A) and Mr. Koshy Thomas of date refers. Please confirm.

**Internal**

Dir (Medical), Dir (Ops & Coord), Dir (P&FC), Dir (C&L)
SCRUTINY OF OPD/IPD CLAIMS AT RC LEVEL


2. It is directed that the process for online bill processing at RC level to be carried out as under:-

(a) **Bills Amounting to Less than Rs 5000/-.** For bills amounting to less than Rs. 5000/-, 5% bills per day shall be checked by the JD (HS). The bills selected will be those having highest financial value. Additional bills can be checked as per discretion.

(b) **Bills in the Range of Rs 5000/- to Rs 30000/-.** For bills in the range of Rs 5000/- to 30000/-, 10% bills per day shall be checked by the JD (HS). The bills selected will be those having highest financial value. Additional bills can be checked as per discretion.

(c) **Bills More than Rs 30000/-** 100% Bills for amount more than Rs. 30000/- to be checked by JD(HS) at RC.

3. The process to be put in effect immediately and respective functionaries in the Online Bill Processing chain to ensure that the above is complied.

4. Shortly, UTI-ITSL will modify the online bill processing application such that a basket of 100 claims is presented to the JD(HS), those 100 claims will be picked up in FIFO manner out of the claims processed by BPA. The basket of these 100 claims will have mix of both IPD and OPD as processed by the BPA strictly in FIFO order. The presentation of this basket to JD(HS) and its subsequent manner of processing is described below:-

(a) **Claims less than Rs. 5000/-**. These will be listed on top of the page and JD(HS) would have to compulsorily check 5% of such claims (number to be rounded off to the next round figure). These claims would be the one’s with the highest recommended amount. The multi select option for the balance claim in this category would be available only after atleast 5% claims have been checked. JD(HS) can check additional claims also as per his discretion.
(b) **Claims between Rs. 5000/- to Rs. 30000/-**. A counter for the claims falling in this region would be created by BPA to reflect 10% of such claims (number to be rounded off to the next round figure) which would have to be compulsorily checked by the JD(HS). These claims would be the one's with the highest recommended amount. The JD(HS) would have the option to check any additional claim also should he choose to do so. The multi select option for the balance claim in this category would be available only after atleast 10% claims have been checked. JD(HS) can check additional claims also as per his discretion.

(c) **Claims above Rs. 30000/-**. All claims above Rs. 30000/- will have to be compulsorily checked by JD(HS). No multi select option will be enabled in this window.

5. Next set of 100 claims will be presented to the JD(HS) only after the current basket has been completely cleared. Certain changes in the CFA window will also be incorporated soon. The technical work associated with the modification in the Online Bill Processing system will take sometime.

6. In addition, it is highlighted that in accordance with Para 2(d) of MoD letter No. 22(A)(10/10/US(WE)(Res) dated 23 Feb 2012, “CFA will examine the bill and BPA’s worksheet prior to according sanction.” Hence, all CFAs must ensure that no violation to the above guidelines take place and the provisions brought out above are not compromised in any manner.

7. Please ensure speedy clearance of bills so that large pendencies can be reduced. Financial integrity of checks will not be compromised.

8. These instructions are issued with approval of MD ECHS.

[Signature]

(BR Salgotra)
Lt Col
Jt Dir (Stats & Automation) for Dir (Stats & Automation)

Copy to:

**M/s UTI-ITSL**
UTI Bhawan, Plot No.3, Sector 11
CBD Belapur, Navi Mumbai
Maharashtra - 400 614

Internal Copy to:

Dir (Medical)
Dir (Ops & Coord)
Dir (P&FC)
Dir (C&L)

For information and immediate action, please.