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

All Regional Centres, ECHS

1. Please refer this HQ letter of even reference dated 20 Nov 2015 vide Para 1(b) of which policy on NMI disposal has been laid down.

2. The online bill processing was initiated for efficient and timely settlement of hospitals claims while maintaining transparency between the ECHS beneficiaries, Hospitals, BPA and Central Org ECHS. However of late, it has been observed that empanelled hospitals are not responding to the queries raised by the BPA within stipulated time frame, thereby, delaying the final settlement of claims. Numerous empanelled hospitals are now seeking for ‘one time waiver’ for delay in query reply to NMI duly recommended by respective Regional Centres.

3. The existing policy on handling of NMI enables a provision of waiver for delay in answering queries relating to NMI by the hospital. However, it is seen that this policy of granting waiver is not yielding the desired results of initiating the hospital towards time bound response of NMI queries. It can be seen that approximately 48,000 claims amounting to Rupees 60.5 Crore are pending for NMI disposal for more than 180 days and almost 1.5 Lakh claims amounting to Rupees 262 Crore which are in NMI for less than 180 days. Such a large amount of claims being stuck in the system for want of queries which are not responded to in a time bound manner results in large pendencies of bills and misplaced expectations by hospitals. Hence, it has been deliberated at length with BPA and other stake holders to revise the existing policy on NMI disposal. The following has been recommended:

(a) The prevailing procedure of granting waiver at various intervals shall be discontinued, instead an escalation matrix for warning the hospitals aimed at obtaining time bound response to NMI queries to be instituted. Claims to progress on time bound manner to next stage (including higher authority) as
per laid down time line in case the NMI is not replied by the Hospitals. The claim to be progressed to next stage on as is where is basis in case the NMI is not responded within the stipulated time frame. As per this procedure, the following shall be implemented:-

(i) **At Verifier Stage.** The claim is received at verifier. If the claim is OK, it will move to BPA and if the query is raised at verifier stage for NMI, it will move to NMI basket within **seven** working days of receipt of physical documents. If the NMI is replied within 90 calendar days from the date of receipt of claim, the claim moves to BPA for normal processing, and if not, claim will shift to BPA for processing with whatever info is available. The flow chart is given at **Appendix A.**

(ii) **At BPA Stage.** The claim is received at BPA. If the claim is OK, it will be processed by BPA as per TAT (Turn Around Time) and move to JD(HS). If the query is raised at BPA stage for NMI, it will move to NMI basket within **seven** working days of receipt of claim at BPA stage. If the NMI is replied within 60 calendar days from the date of receipt of claim at BPA, the claim moves to JD(HS) for normal processing, and if not then claim moves to JD(HS) for processing with whatever info is available. The flow chart is given at **Appendix B.**

(iii) **At JD(HS) Stage.** The claim is received at JD(HS). If the claim is OK, it will move to CFA and if the query is raised at JD(HS) stage for NMI, it will move to NMI basket. If the NMI is replied within 30 days from the date of raising of NMI by JD(HS) the claim after processing by JD(HS) moves to CFA for approval, and if not, claim moves to CFA for processing with whatever info is available. The flow chart is given at **Appendix C.**

(iv) **E-mail Alerts.** Endeavour will be made to forward an e-mail summarizing all the pending NMI cases to the mid level & top level management of the empanelled facilities giving out details of pending NMI cases and prompting them to respond to the queries at the earliest else the claims will be processed as such with whatever info is available. This will, however, not be a mandatory requirement to clear the bills. The mails for NMI raised by verifier and BPA pending for the want of reply from the date of receipt at respective stage will be endeavoured to be sent to mid level management on 1st and 15th of every month. Subsequently the escalation mail on 1st of every month will be attempted to be sent to top management for all NMIs awaiting response. On the 90th (verifier stage) and 60th (BPA stage) day the claim will shift to the next stage with whatever info is available. Endeavour will be made to include details of NMIs raised by JD(HS) in the mail for all NMIs up to 29 calendar days. On the 30th day the claim will shift to CFA with whatever info is available. This will be included in both the mails i.e. mail to mid and top level management. Attempt will be made to include the details in a summarized manner so as to enable and facilitate hospitals in
taking the required actions promptly. A suggested format for UTI-ITSL is enclosed at Appendix D. In addition, summary of claims pending for NMI will be endeavored to be forwarded to each hospital as per format at Appendix E.

(b) The BPA shall put in place a system generated mailing workflow with an online escalation matrix for each empanelled medical facility. The inputs for escalation matrix (email id) will be updated by each empanelled hospitals online by 15 Aug 2017. The responsibility of keeping the escalation matrix updated shall be of the respective hospitals and a confirmation of the same will be rendered to respective Regional Centres by all empanelled hospitals on monthly basis.

(c) The BPA will establish the workflow for giving out the warning mails as per laid down periodicity and progressing the NMI cases as per captioned procedure by 30 Aug 2017.

4. **Individual Re-imbursement Claims.** The e-mail alerts for individual reimbursement claims will be as under:-

(a) **Individual.** On 1st and 15th of every month attempt will be made to forward an e-mail alert to all individuals whose claims are pending for want of response to NMI along with the details of action required to be taken by individual. To ensure smooth execution of this facility, OIC Polyclinic to ensure that e-mail ID of the individuals are compulsorily endorsed in the BPA’s portal while uploading the claim.

(b) **OIC Polyclinic & Dir Regional Centre.** A summarized mail for all cases awaiting disposal for the want of reply to NMI queries will be sent to concerned OIC Polyclinic on 1st and 15th of every month giving out details of all individual reimbursement claims from respective Polyclinics awaiting disposal for NMI. Mail will be sent to Dir Regional Centre on 1st of every month giving out Polyclinic wise details of all cases of NMI awaiting disposal. The format for these mails will be similar to the one being sent for hospitals as given at Appx D & E. However, there is no stage wise time restriction imposed on the individual reimbursement claims as far as reply to NMI query is concerned, but it must be ensured by OIC Polyclinics and Dir Regional Centres that no claim remains pending in the system for NMI disposal beyond 365 days. All measures must be taken by OIC Polyclinics & Dir Regional Centres to ensure that NMI queries are answered at the earliest.

5. As a special measure, a waiver window for claims awaiting waiver for delay in NMI submission has already been provided in Feb 2016 and now from 15 Jul 2017 to 15 Sep 2017. After the lapse of the said period, the NMI cases shall be progressed as per above procedure. UTI-ITSL has already been requested to flash on the hospital login screen this information immediately and activate all delay in NMI cases for this period only. In addition, forward a summarized list to all hospitals for action in NMI cases.
6. The claims considered prior to closing of previous window i.e. 29 Feb 2016 and the window now provided upto 15 Sep 2017 will not be re-considered.

7. This HQ letter No. B/49778/AG/ECHS/Claim/Policy dated 29 Dec 2014 may please be treated as cancelled. This letter supersedes all earlier instructions / guidelines on the subject. Online Bill Processing SOP may please be amended accordingly.

8. You are requested to disseminate above guidelines to all empanelled hospitals and ensure strict compliance.

9. This policy will be implemented with effect from 16 Sep 2017.

(Niranjan Kumar)
Brig
Dy MD
for MD ECHS

Encls: (Five)

Copy to:
Office of US(WE)
(Deptt of ESM Welfare)
D (Res/WE)
New Delhi – 110001

UTI-ITSL
153/1, Above Farico Show Room
First Floor, Old Madras Road
Halasuru, Bangalore – 560008

For information please.

For information and necessary action.

Internal:

Dir (Med)

Dir (Ops & Coord) { For info and necessary action.

Dir (P&FC)

Dir (C&L)
FLOWCHART FOR NMI CASES: VERIFIER STAGE

- WARNING MAIL TO MID LEVEL MANAGEMENT OF HOSPITAL ON 1\textsuperscript{st} AND 15\textsuperscript{th} OF EVERY MONTH WITH DETAILS OF NMI PENDING AS ON DATE.

- WARNING Mail TO TOP LEVEL MANAGEMENT OF HOSPITAL ON 1\textsuperscript{st} OF EVERY MONTH WITH DETAILS OF NMI PENDING AS ON DATE.

TO BE PROCESSED BY VERIFIERS AS PER LAID DOWN TAT

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<th>OK</th>
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NMI RAISED

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NMI REPLIED WITHIN 90 CALENDAR DAYS OF RECEIPT

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| NO | |

AFTER 90 DAYS THE CLAIM MOVES TO BPA FOR PROCESSING WITH WHATEVER DOCS AVBL
FLOWCHART FOR NMI CASES: BPA STAGE

- WARNING MAIL TO MID LEVEL MANAGEMENT OF HOSPITAL ON 1ST AND 15TH OF EVERY MONTH WITH DETAILS OF NMI PENDING AS ON DATE.

- WARNING MAIL TO TOP LEVEL MANAGEMENT OF HOSPITAL ON 1ST OF EVERY MONTH WITH DETAILS OF NMI PENDING AS ON DATE.

TO BE PROCESSED BY BPA AS PER LAID DOWN TAT

NO

NMI RAISED

NMI REPLIED WITHIN 60 CALENDAR DAYS OF RECEIPT

YES

JD(HS)

NO

AFTER 60 DAYS THE CLAIM MOVES TO JD(HS) FOR PROCESSING WITH WHATEVER DOCS AVBL
FLOWCHART FOR NMI CASES: JD(HS) STAGE

- WARNING MAIL TO MID LEVEL MANAGEMENT OF HOSPITAL ON 1ST AND 15TH OF EVERY MONTH WITH DETAILS OF NMI PENDING AS ON DATE.

- WARNING MAIL TO TOP LEVEL MANAGEMENT OF HOSPITAL ON 1ST OF EVERY MONTH WITH DETAILS OF NMI PENDING AS ON DATE.

FLOWCHART:

1. TO BE PROCESSED BY JD(HS) AS PER LAID DOWN TAT
   - OK
     - PROCESSED TO CFA
   - NO
     - NMI RAISED

2. NMI REPORTED WITHIN 30 CALENDAR DAYS OF RECEIPT
   - YES
     - PROCESSED TO CFA
   - NO

3. AFTER 30 DAYS THE CLAIM MOVES TO CFA FOR PROCESSING WITH WHATEVER DOCUS AVBL
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<th>No. of Claims</th>
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On click claim ID wise details of the NMI should be available in next window.