

## PROCESS AND CRITERIA FOR EMPANELMENT OF HOSPITALS FOR CASHLESS FACILITY

Ref: IRDAI Circular 'Standard and Benchmarks for Hospitals in the Provider Network' vide Circular no: IRDAI/HLT/CIR/MISC/150/7/2022, dated 20th July 2022

## Hospital Empanelment criteria

IRDAI circular on 'Standards and Benchmarks for the Hospitals in the Provider Network' dated 20<sup>th</sup> July 2022, specifies that "with an objective to enhance the scope of Cashless facility across the nation, insurers are now empowered to empanel the network providers that meet the standards and benchmarks criteria as specified by their respective Boards." Circular further stipulates the following conditions for the insurers:

- While specifying the criteria, Board shall, amongst others, consider especially the minimum manpower and healthcare infrastructure facilities
- While empanelling network providers for cashless facility, insurers are also advised to focus on the delivery of quality healthcare services

Empanelment Process with Raheja QBE:

We empanel our hospitals through our partner TPAs (e.g. Mediassist, Paramount TPA etc.)

The decision to freshly empanel a specific hospital/group is taken on the basis of the following:

- A request for empanelment of a particular hospital from the internal department (e.g. distribution or marketing team)
- A request for empanelment of a hospital in a specific geography to cater to any specific need from our customers or group policyholders, corporate partners etc.
- Expansion of existing network undertaken by TPA time to time to increase the cashless penetration on an India basis.
- A direct empanelment request from a specific hospital/provider.

## Hospital Empanelment criteria

Empanelment criteria for Hospitals with Raheja QBE:

There are primarily two principal criteria we follow during the empanelment process.

- 1. Healthcare infrastructure facilities and
- 2. Minimum manpower requirement

Category	Minimum Criteria for Empanelment
Infrastructure facilities	A certificate of registration from applicable authorities
	A minimum of 15 beds in tier 1 and tier 2 cities. However, for tier 3 and tier 4 cities, this criterion has been relaxed to a minimum of 10 beds, excluding day care centres.
	Classification of Cities: Tier 1 cities: Population of > 1 lakh, Tier 2: Population between 50 Thousand to 9999 Thousand, Tier 3: Population between 20 Thousand to 49,999 Thousand, Tier 4: Population of 10 Thousand to 19,999 Thousand
	The hospital must have a fully equipped operation theatre of its own where surgical procedures are conducted. (Not applicable for non-surgical units).
	Bio-Medical Waste Management certificate (active) from appropriate agencies authorised by respective state government /State Pollution Control Board / PCC (Pollution Control Committee) under BMWM Rules, 2016 for collection and transportation of biomedical waste.
	ROHINI registration A hospital must maintain its daily records of each of its patients and makes these accessible to the Insurance Company's authorized personnel on request.
	Safe and hygienic environment (Usually checked/verified during hospital Audits).
	Registration with PCPNDT (Pre-Conception and Pre-Natal Diagnostic Techniques Act) if USG (Ultrasound / Sonography) services are available.
Minimum Manpower	The hospital must have qualified nursing staff as per the Indian Nursing Council Act, 1947 and applicable norms of the respective state government (e.g. Midwifery, ANM, GNM, BSC Nursing etc.) under its employment.
	The hospital must have qualified medical practitioner(s) (e.g. MBBS and other specialities as applicable / authorised by respective state government / State Medical Council / Medical Council of India / National Medical Commission / Ministry of AYUSH) in charge round the clock.