

Proceedings of the 22nd Executive Committee Meeting of the Suvarna Arogya Suraksha Trust under the Chairmanship of the Principal Secretary, Health & Family Welfare Department held on 10/1/2017 at 12-00 Noon in SAST Conference Hall, Bangalore.

Members Present:

1. The Principal Secretary to Government, Health & Family Welfare Department & Chairman, Suvarna Arogya Suraksha Trust Vikasa Soudha, Bangalore.
2. The Deputy Secretary to Government, Finance Dept. (Exp-V), Bangalore.
3. The Commissioner, Health & Family Welfare Services, Bangalore.
4. The Mission Director, NHM & Project Administrator, KHSDRP, Bangalore.
5. Dr. H. Sudarshan, Karuna Trust, Bangalore.
6. Representative from Medical Education Department, Bangalore.
7. The Executive Director, SAST, Bangalore.

Leave of absence :

1. The Director, Health & Family Welfare Department, Bangalore.
2. The Chief Executive Officer, Yashswini Trust, Bangalore

Others:

1. Director (MM), SAST
2. Director (Finance), SAST
3. Deputy Director (op), SAST

The Executive Director, SAST welcomed the Chairman and members to the meeting.

Subjects on the Agenda were taken up for discussion.

Subject No. 22.1

Reading and Confirmation of the proceedings of 21st EC meeting held on 30/4/2016.

The Executive Committee confirmed the proceedings of the 21st Executive Committee Meeting held on 30/04/2016.

Subject No. 22.2

Action taken Report - Review of action taken on the decision of the 21st EC meeting held on 30/4/2016

Action taken report of 21st EC Meeting held on 30/4/2017

Sl No.	Decision Point	Action Taken	Remarks of the Committee
21.5	<p>Status Report – VAS, JSS, RAB The Committee decided that</p> <p>a) the schemes can be much more publicised through mobile e-governance in 161 platform which can be accessed through ordinary mobile also.</p> <p>b) the Govt to pay beneficiaries contribution 30% of the package amount for SC/ST beneficiaries availing General ward under RAB.</p> <p>c) Government to absorb investigation charges and provide diet to one attendant of the beneficiary under RAB.</p>	<p>Under process</p> <p>OM issued to Network Hospitals - Complied</p>	<p>Chairman suggested to publish through mobile e-governance in 161 platform for RAB Scheme at the earliest and also informed to develop mobile app for all the schemes of SAST as early as possible.</p> <p>Compliance noted and closed</p>
21.6	<p>Implementation of RSBY Scheme. Committee approved:</p> <p>a) Govt to enrol selectively specific unorganised workers to saturate the existing categories using the information from different departmental sources,</p>	<p>SAST had taken a policy decision in consultation with Labour Dept in a joint workshop under the chairmanship of Prs. Secy, H&FW as to extend the policy of enrolled RSBY beneficiaries for the year 2016-17 in concurrence with Government of India.</p> <p>Weaver enrolment was initiated by GOI directive in a workshop held with Handlooms and Textiles</p>	<p>The Chairman suggested to prepare an action plan and budget requirement for enrolment of 65 lakh and start enrolment immediately. Ask them to add Aadhaar and Bank account details.</p>

	<p>b) to make mandatory all CHCs, PHCs, THs, DHs and Medical Colleges and empanelment of private hospitals restricted to selected taluks/districts,</p> <p>c) additional position of IT Consultant</p> <p>d) to transfer from SNA server to SDC server which is always functional.</p> <p>e) to take up IEC component with the support of Information Department.</p>	<p>Dept in Delhi. SAST as per the directive, initiated weaver enrolment first in Bagalkot district by IFFCO Tokio Insurance Co. It was stopped since there were many duplications with BPL card RSBY holders and also lapses in enrolment process adopted by insurance companies noticed by SAST. Due to low enrolment numbers in other districts, the insurance companies withdrew from conducting enrolment process including Iffko tokio after starting in Bagalkot district. Additionally the same issue was discussed in the meeting under the chairmanship of Hon'ble H&FW Minister on September 6, 2016 with insurance companies to give the proposal to enrol the left out beneficiaries, proceedings is enclosed at Annexure 2. But they did not submit any proposal owing to low numbers and prorata premium payment.</p> <p>Updates of the scheme is placed as Agenda for 22nd EC Meeting.</p> <p>IT Project Manager has been appointed</p> <p>Two SNA Servers which were non functional and located at KSDC shifted to SAST and made functional.</p> <p>RSBY IEC Activities has been integrated with Arogya Jagruthi Abhiyana</p>	<p>Compliance noted and closed</p> <p>Compliance noted and closed</p> <p>Compliance noted and closed</p> <p>Chairman directed to prepare simple card / IEC material for the general</p>
--	---	--	---

	<p>f) to link with NCD Project of the Directorate and to activate the cancer screening camp earlier planned.</p> <p>g) Send D.O. Letter to Additional Chief Secretary to Govt, Labour Department.</p>	<p>Discussion had with Dr. Anitha and Oncology screening already integrated with Arogya Jagruthi Abhiyana and routine health camps of SAST.</p> <p>D O Letter has been sent on 10/11/2016 and recently Executive Director interacted with ACS Labour and mtg will be scheduled post January 15.</p>	<p>public about all schemes of SAST.</p> <p>Compliance noted and closed</p> <p>Compliance noted and closed</p>
21.7	<p>Status of the Mukyamantri Saantwana Harish Scheme (MSHS). Committee approved to:</p> <ol style="list-style-type: none"> 1. make mandatory of all hospitals including those empanelled with SAST and other hospitals for empanelment. 2. CHCs empanelment by default 3. consider MSHS scheme beneficiary under other SAST schemes if relevant codes available beyond 48 hours. 4. mobilize CSR resources, from individuals, Companies, NGOs and other donors. 	<p>Except 16 hospitals all other Polytrauma hospitals empanelled under SAST are part of MSHS. The consultation meeting with non participating hospitals was held on 26/10/2016. Proceedings enclosed at Annexure 3.</p> <p>Selected CHCs with required facilities and manpower have been empanelled.</p> <p>Government Order issued Hospitals have been sent the guidelines and cases for continuation of treatment have been received.</p> <p>The proposal submitted to 3 insurance companies presently implementing RSBY and also forwarded to Prs. Secy. H&FW to compile along with departmental CSR proposal and hosted in the H&FW website.</p>	<p>Compliance noted and closed</p>
21.8	<p>Implementation of Rashtriya Bal Swasthya Karyakram by SAST. Committee perused the status</p>	<p>Funds received – Action complied</p>	<p>Compliance noted and closed</p>

	of RBSK and Chairman suggested to send a request to Mission Director, NHM to release additional funds.		
21.9	Ratification of appointments post absorption of ISA and SNA (Labour Department) Staff into SAST. Committee ratified the action taken in appointing staff of ISA and RSBY and Arogyamitras through man-power agency.	---	--
21.10	Provision of conveyance allowance and mobile charges to the District Coordinators, Field-Arogyamitras / staff of SAST. Committee keeping in mind the work load and the quality of work being rendered by the staff, approved to pay conveyance.	OM issued	--
21.11	Procurement of Laptops & Desktops due to restructuring of SAST Operations Committee ratified the action taken in procuring Desktops and Laptops.	--	--
21.12	Procurement of M & V Consulting Firm for Suvarna Arogya Suraksha Trust (Under World Bank – Pay for Results Financing).	Assignment was awarded to M/s.Vidal Health Pvt Ltd as per due procedure. Work is under progress and Final Report due January end. Preliminary findings have been	Compliance noted and closed

	Committee approved to invite tender to finalize M & V consultancy assignment and to bear the consultancy cost.	shared regularly.	
21.13	Allocation Revision for 2016-17 - SCP & TSP Budget. Committee agreed to request the Government to revise the target and Principal Secretary directed SAST to submit a proposal to the Government.	<p>The Proposal has been submitted to Govt. through DO letter dated 14.08.2015. In which Govt. is requested to allocate the target on the basis of the % of the population of SCP/TSP. According to 2011 census % of population of SCP is 17.15 and that of TSP is 6.95. In case budget is allocated keeping the above in mind the Directorate of Health and Family Welfare should have allocated Rs. 24.01 crore for SCP and Rs. 9.73 crore for TSP. Whereas, actual amount allocated for the year 2015-16 is Rs. 35.08 crore for SCP Rs. 17.90 crore for TSP. The proposal is yet to be considered by the Govt.</p> <p>Percentage of expenditure under SCP against allocation is 57.63, against expected revised target 85.93 and against release 76.84</p> <p>Percentage of expenditure under TSP against allocation is 48.23, against expected revised target 88.67 and against release 64.30</p>	

The Chairman enquired about the Call Centre functionalities and suggested the following ;

- (i) Call Centre contact number to be of short code and not too lengthy
- (ii) linkage with 104 for more visibility
- (iii) revise voice recording of call centre and
- (iv) instruct call centre to refer beneficiaries to more Government hospitals and to prioritize government health facilities.

The Chairman suggested involving Asha workers under SAST. In response to that Director (MM) said that incentives are given to Asha workers from SAST and guidelines were framed for bringing beneficiaries to the hospitals. The Chairman directed to provide analysis of cases referred by Asha workers area wise, scheme wise and payment details and give feedback on Asha workers non performance to Dr. Rajkumar.

Subject No. 22.3

Reading and Confirmation of the 36th, 37th and 38th Empanelment & Disciplinary Committee Meeting held on 5/7/2016, 22/9/2016 and 30/12/2016.

The Executive Committee confirmed the Proceedings of the 36th, 37th and 38th EDC Meeting held on 5/7/2016, 22/9/2016 and 30/12/2016.

Subject No. 22. 4

Status Report – VAS, RAB, JSS, RSBK & MSHS

The Executive Director explained in brief to the Committee about preauth approved, claims settled since inception of the VAS, RAB, JSS, RSBK & MSHS schemes and also net work hospitals empanelled under schemes of SAST.

Decision :

The Committee noted the same.

Subject No. 22.5

Filling up of Vacancies of key posts

The Executive Director brought to the notice of the Committee that as per the decision taken in the Trust Board Meeting to fill the vacancies of key posts of Director (MM) and Director (Finance). After following selection procedure Dr. Sudha Chandrashekhar has been appointed as Director, Medical Management, she has been working since 14.11.2016.

The Executive Director also informed to the Committee that EOI called for the post of Director (Finance), in response to that 3 applications were received. Of which 2 candidates are qualified. The interview was fixed to be held on 15.12.2016, none of the candidates appeared for the interview.

Sri Mahadev Naik Chief Finance Officer, KSDLWS has been posted on 04.01.2017 and he has taken charge of post the on 05.01.2017.

Decision:

The Committee ratified the action taken to fill up the posts of Director (MM) and Director (Finance).

Subject No. 22.6

Capacity Building measures

The Executive Director explained in detail to the Executive Committee about the training programmes and workshops conducted to the field staff of SAST and officials from SAST participated in Joint Learning Network workshops and other seminars and workshops.

Decision:

The Committee noted the same.

Subject No. 22.7

Ratification of the Action taken to appoint Advocate to appear before Dakshina Kannada District Consumers' Forum, At Mangalore in complaint no. 28/10/2016

The Executive Director informed to the Committee that Sri Mohammed, Dakshina Kannada District filed complaint before Dakshina Kannada District Consumers' Forum, Mangalore claiming Rs. 54430/- compensation from SAST as he had availed treatment at Dhanavanthari Hospital, Puttur on 23.12.2013 for acute retention of Urine and after operation by Dr. Nischith D'Souza was discharged 30.12.2013 and he submit bill amounting to Rs. 24430/- for payment to SAST with relevant documents.

The proposal was rejected by the Trust, as he took treatment in an un-pannelled hospital and same has been intimated through letter dated 28.02.2014 along with documents produced for payment. The patient filed this complaint before the Forum.

He also informed that Sri Thimmaiah Local Advocate has been appointed with instruction to appear before Forum on behalf of the Trust for fee of Rs. 5000/-.

Decision:

After detailed discussion, the Committee ratified the subject.

Subject No. 22.8

Ratification of action taken for appointments and extension of services of Consultants already appointed in Suvarna Arogya Suraksha Trust.

The Executive Director brought to the notice of the Committee the action taken for appointment of District Coordinators, Drivers, Call Center Executives and Extension of services of consultants is as follows;

Sl. No.	Name	Designation	Period
1	Sri Thejas	District Co-ordinator, Kodagu	26-12-2016 to 25-12-2017
2	Sri Nandakumar	District Co-ordinator, Bidar	27-12-2016 to 26-12-2017

Extension of services of consultants:

Sl. No.	Name	Designation	Period
1	Sri Diwakar	IT Consultant	From 7-10-2016 to 6-10-2017
2	Sri S.R. Naik	Deputy Director (Op.)	From 6-11-2016 to 5-11-2017
3	Sri S. Praveen	IEC Consultant	From 26-11-2016 to 25-11-2017
4	Prasanna	Claims Manager	From 4-12-2016 to 3-12-2017

Decision :

The Committee ratified the subject.

Subject No. 22.9

Updates of Arogya Jaagruti Abhiyana - SC/ ST villages / Habitations & Special Health Camps

The Executive Director informed to the Executive Committee that Arogya Jagruthi Abhiyana and special health camps were planned to conduct in phased manner at 7202 villages across Karnataka where SC ST population is more than 40% to ensure SC/ST beneficiaries avail the scheme benefits under H&FW Department.

He also informed that the Department of Information & Public Relation was entrusted to carry out the Kala Jatha programs in all the identified **7202** villages. 1845 SC/ST people were identified and referred for further treatment in the 1st phase special health camps conducted in 2562 villages out of referred 3247 people. In the 2nd phase Arogya Jagruthi Abhiyana / Kalajatha activities are being conducted in 4615 villages and will be completed by 23rd January 2017. 57517 people were attended the camps, out of which 5485 were referred till 31/12/2016. Out of 5485, 50% (2748) were SC/ ST people identified and referred for Tertiary and Secondary further treatment.

The chairman enquired about the regular health camps conducted by SAST and plan of action and expressed displeasure at the turn out for the camps and referrals. The chairman directed to ensure there is a better coordination with all the stakeholders.

Decision:

After detailed discussion, the Chairman directed to prepare plan of action for regular camps and circulate in advance to Ashaworkers/ANMs and ensure that the campaign is made more effective.

Subject No. 22.10

Updates of New Schemes :

- (i) Cochlear Implant Scheme.**
- (ii) Journalist Scheme**
- (iii) Senior Citizen Scheme**
- (iv) Indira Suraksh Yojana**
- (v) Forest proposal**

The Executive Director briefed in detail to the Committee about the updates of the new schemes

Decision:

After detailed discussion, the Committee suggested to;

- a) link with NGOs working with senior citizens at the district level through Directorate of disabled Welfare.**
- b) send reminder letter to the Forest Dept.**

Subject No. 22.11

Rashtriya Swasthya Bhima Yojana

The Executive Director explained to the Committee that 33790 claims for an amount of Rs. 19.70 crores spent as on 31/12/2016 in 1114 empanelled hospitals. He also brought to the notice of the Committee in detail about; (i) RSBY Pending Premium to Insurance Companies (ii) Main policy and Extension policy, (iii) Premium payment Current Policy, (iv) Empanelment of Government Hospitals and (v) Claim Ratio.

Decision :

After detailed discussion, the Chairman directed to write a letter to insurance companies regarding their low performance

Subject No. 22.12

National Health Protection Scheme

The Executive Director explained to the Committee that the GOI has envisaged the launch of National Health Protection Scheme (NHPS) from next year. NHPS provides

the coverage upto Rs.1,00,000/family for BPL and unorganised workers families for secondary care with a Centre share (60%) and State share 40%.

He also informed that SAST has also contributed significantly for the design of NHPS and the Cabinet Note on National Health Protection Scheme and convergence has been submitted to Government.

Decision:

The Committee noted the subject.

Subject No. 22.13

World Bank Refinancing to SAST through KHSDRP credit

The Executive Director explained the Committee that under the Health Financing component of the IDA credit to KHSDRP, a portion of the credit was earmarked to SAST for reimbursement against fulfilment of various phase wise Tranche milestones set by the World Bank. He also explained to the Committee about the achievement of milestones submitted to the World Bank through KHSDRP and reimbursement received from KHSDRP for Tranche Milestones. He also informed that all the 11 tranche milestones have been compiled by SAST and approved by the World Bank.

Decision:

The Committee noted the action taken and suggested to release the balance credit amount from KHSDRP.

Subject No. 22.14

Ratification on the action taken to provide treatment which are not covered in existing procedures under the schemes of SAST

The Executive Director explained that some of the cases which are not covered under SAST schemes needs to be considered as a special case, the details of patients are as follows;

- (i) Bhagwan Mahaveen Jain Hospital to Patient Mr. Somashekar
- (ii) Bhagwan Mahaveen Jain Hospital to Patient Mr. Kumar
- (ii) Javadeva Institute of Cardiology - Patient Hanumanthappa
- (iii) KLE Dr. PrabhakarKore Hospital Belgaum – Patinet Jayashree

He sought approval for the same.

Decision:

After detailed discussion the Committee obtained details of all the cases and ratified the action for the patient Mr. Somashekar and approved other three cases as a special case and also informed to send details of cases referred under CM's Relief Fund to Principal Secretary, H&FW.

Subject No. 22.15

Ratification of action taken, for restructuring the staffing pattern of SAST and offer attractive remuneration

The Executive Director explained to the Executive Committee that action has to be initiated as per the decision of the 10th Trust Board meeting to revamp the whole structure of SAST staff to offer good remuneration to employees and create promotional opportunity in order to arrest attrition rate. He also said that Karnataka Institute of Public Auditors (KIPA) has carried out similar study for e- Governance department and KIPA was approached to carry out study of SAST, for which they have agreed. A formal letter has been sent to KIPA to take up the study at the earliest.

Decision :

The Committee ratified the subject.

Subject No. 22.16

Guidelines for re-empanelment of hospitals de-empanelled due to deviation from MoU with SAST:

The Executive Director explained to the Committee that the hospitals after de-empanelment acknowledge their mistakes and request re-empanelment. SAST staff also receives pressures for various influential persons. As per GOI Guidelines for RSBY de-empanelled hospitals cannot be re-empanelled for one year. Deviation in one scheme would also need to be considered for de-empanelment across schemes for SAST. This was discussed in the EDC. EDC recommended to follow the GOI guidelines.

Decision

After detailed discussion, the subject decided to add the following clause in the MoU;

"De-empanelled hospitals for any deviations of MoU shall not be re-empanelled for one year"

Subject No. 22.17

Revision of remuneration of pre-auth and claims processing doctors

The Executive Director explained in detail to the Committee that the doctors include both work from home and also those who regularly attend the Office. Doctors work from home have a target of 600 cases per month @ 60/case procedures completely including objection and reprocessing. The amount for processing per pre-auth or claim is also same irrespective of whether they have joined recently or have more experience with SAST. In addition to that the validators working from office, also monitor the correctness and timeliness of the preauthorization and claims by co-ordinating with the network hospitals, seeking clarification with treating doctors at the hospital and co-ordinating with field staff at the district level and also attend to Emergency phone duty call as per the schedule on rotational basis 24/7. Hence there is a need to bring revisions in the amount paid to doctors to ensure parity and take into the account additional responsibilities. Currently they are being paid monthly salary Rs. 35,000 + 10000 for local conveyance, for target and 550 – 700 and beyond target Rs. 50/-.

He also explained to the Committee to improve quality of processing preauth/claims and reduce any errors, the processing doctors will also be subject to penalties viz; (i) First time the processing charges for the particular claim/pre-auth (ii) Second time processing fees and Rs. 100/ and subsequently processing fee and compounding Rs. 200, 400 and 600.

Lacunae identified where in mandatory documents have not been verified properly team leaders will have to take explanation one to one. If repeated errors are noticed, the team leader will recommend their services to be terminated.

The Committee enquired about the work load of the doctors who work from office, in response to that it was clarified that an additional responsibility is entrusted other than regular duties viz; (i) review of cases of all schemes for clinical inputs/ second opinion/interaction with network hospitals, (ii) revision of packages/codes, preauth investigation / post-op documents etc., (iii) implementation of new

schemes/training manuals/preparation of guidelines etc. and (iv) providing inputs for quality processing of preauth and claims of all schemes.

Decision :

After detailed discussion, the Committee approved to revise the remuneration of doctors for processing of preauths and claims from the date of their renewal of the contract as follows;

	Proposed remuneration	Target for processing cases	Beyond target for processing
1) MBBS, Entry level new doctors	Rs. 60/case	600	60/case
• Work from home doctors			
• Work from office New (< 3 years ISA/SAST)	Rs. 35000 + 10000	550 - 700	65/case
2) MBBS, MD - New (< 3 years ISA/SAST)			
Work from home	Rs. 65/case	600	
Work from office	Rs. 40000 +10000	550 - 700	65/case
3) MBBS, MD Senior doctors – more than 3 years service (ISA/SAST)			
work from home	Rs. 70/-case	600	70/case
work from office	Rs. 45000 + 10000	550 - 700	70/case

- Beyond target only on the instruction of team leader or Director (MM)

Additional Subjects

Subject No. 22.18

Inclusion of RBSK Secondary care services under SAST from Yashaswini trust

The Executive Director informed the Committee that the request received from NHM to consider implementing secondary care also for RBSK beneficiaries under SAST as the MoU with Yeshaswini Trust has expired. The meeting was conducted to discuss the

same on 9/1/2017 and it was decided in the meeting if the budgetary support from RBSK, NHM provides the secondary services under SAST can start from 1/4/2017.

Decision :

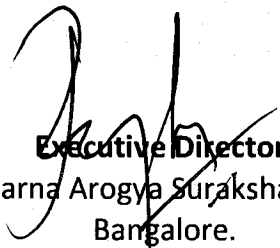
After detailed discussion, the Committee approved the subject and suggested to merge the smaller schemes from other departments through a MoU.

The Meeting concluded with vote of thanks.

**Proceedings approved by the Principal
Secretary, H&FW & Chairman, SAST**

**Sd/-
(SHALINI RAJNEESH)
Principal Secretary to Govt.,
Health & Family Welfare Dept. &
Chairman, SAST**

"COPY"


**Executive Director,
Suvarna Arogya Suraksha Trust,
Bangalore.**

Copy to:

1. The Principal Secretary to Government, Health & Family Welfare Department & Chairman of Suvarna Arogya Suraksha Trust Vikasa Soudha, Bangalore.
2. The Principal Secretary to Government (Exp.), Finance Department, Vidhana Soudha, Bangalore.
3. The Principal Secretary to Government, Medical Education Department, Vikasa Soudha, Bangalore.
4. The Commissioner Health & Family Welfare Services, Ananda Rao Circle Bangalore.
5. The Mission Director, National Health Mission/Project Administrator, KHSDRP, Sheshadri Road Bangalore.
6. The Director Health & Family Welfare Services & Vice Chairperson of Executive Committee, Ananda Rao Circle Bangalore.
7. The Chief Executive Officer, Yeshaswini Trust, MS Building, Bangalore.
8. Dr. H. Sudarshan, Karuna Trust, #686, 16th Main, 39th cross, 4th 'T' Block, Jayanagar, Bangalore-560 041.
9. All Officers, SAST, Bangalore.