Proceedings of the 34th Empanelment and Disciplinary Committee meeting of Suvarna Arogya Suraksha Trust held on 16th December, 2015 in the Conference Hall, Suvarna Arogya Suraksha Trust, Bangalore

Members Present

1. Dr. Sudarshan H. Secretary, Karuna Trust, Bangalore
2. Dr. P. Boregowda, Executive Director, SAST
3. Dr. Devadasan, IPH, Bangalore
4. Dr. Ashok Shenoy, Kidwai, Bangalore
5. Dr. Sadhana, Executive Director, KSHSRC, Bangalore
6. Dr. Suresh, Project Head, M/s M.D.India, Bangalore
7. Dr. Vishwaradhya, Director, Medical Management, SAST

Chairman
Co-Chairman
Member
Member
Member
Member Secretary

Members Absent

1. Director, SIHFW
2. Director, VIMS, Bellary
3. Deputy Director (Medical), DoHFW.
4. Dr. Srinath, Sri Shankara Cancer Hospital, Bangalore.

Others present

2. Dr. Sudha Chandrashekar, PM (JSS), SAST, Bangalore.
3. Dr. Anindita, PM (RAB), SAST, Bangalore.
4. Dr. Srinath Reddy, Sr. Deputy Director, SAST, Bangalore.
5. Dr. D.K. Math, Co-ordinator (STPs), SAST, Bangalore.
6. Dr. H.S. Prasad, Regional Consultant, Mysore.
7. Dr. Dhang, Regional Consultant, Belgaum
8. Dr. Alibaba, Regional Consultant, Gulbarga
10. Dr. Rohit Metrani, Consultant, Mortality Audit Cell, SAST, Bangalore.

The Director (Medical Management), Suvarna Arogya Suraksha Trust welcomed the Chairman, Co-Chairman, all Members and other invitees to the 34th Empanelment and Disciplinary Committee meeting.

Sub No. 34.1

Confirmation of the Proceedings of 33rd EDC meeting held on 14.10.2015.

The proceedings of the 33rd Empanelment Disciplinary Committee meeting was confirmed.
Sub No. 34.2

Review of action taken on the proceedings of the 33rd meeting held on 14.10.2015.

While reviewing the actions on the previous meeting proceedings, the Committee discussed and suggested to:

33.07 - mail Monthly Analyses Report of Grievance Cell to all the willing Members of the Committee.

33.08 After detailed discussions on the action taken with reference to KCH, the Committee decided to:

a) de-empanel the hospital, as it has not replied to the Show Cause Notice.

b) forfeit the amount pending for payment.

c) remind the Commissioner, HFW Services to initiate action under KPME Act.

d) file complaints against individual Doctors of KCH before KMC

e) to upload in the SAST Website regarding de-empanelment of KCH for grave irregularities.

f) to recommend to the Govt to refer the case to CID as the irregularities are grave in nature.

Other action takes were noted.

Sub No. 33.3

Empannelment of new hospitals.

The Director (MM) had brought to the Committee's notice that 1 Private Hospitals has been empanelled.

Decision:

After discussions, the Committee noted and ratified the empanelment of hospital.

Sub No. 33.4

Renewal of Network Hospitals under SAST Scheme.

The Director (MM) informed that out of 57 network hospitals due for renewal, 20 hospitals have renewed and 37 hospitals are yet to send DD for renewal.

The Chairman of the Committee appreciated the action taken for renewal. However, he suggested that henceforth we should be stringent for renewal as incidents happened in KCH should not be take place in other hospitals.

Decision:

After discussions, the Committee ratified the action taken in renewal of hospitals and suggested to provide the list of hospitals which are not renewed to the next meeting.
Super Specialists/Specialists were empanelled as treating Doctors under SAST schemes.

The Member-Secretary, EDC brought to the Committee's notice that total number of Super Specialists/Specialists empanelled as treating Doctors under SAST schemes.

Decision:

The Committee noted and ratified the action taken in empanelling Super Specialists/Specialists as treating Doctors.

Approval of additional specialities to Network Hospitals under SAST Schemes.

The Director (MM) brought to the Committee's notice that few additional specialities have been approved to 7 NWHs.

Decision:

After discussions, the Committee ratified the action taken in approving the additional specialities to network hospitals.

Inspection of all hospitals before renewal.

The Member-Secretary brought to the Committee's notice that out of 183 hospitals, 163 hospitals are inspected and remaining 20 hospitals are yet to be inspected.

Decision:

After discussions, the Committee suggested to prepare a plan to visit the pending hospitals for inspection and the Members of EDC to participate actively.

Grievance Cell Quarterly Report October and November 2015.

The Member-Secretary briefed about grievances received, description of grievance and the action taken against these grievances. As the SAST has issued Show Cause Notices against these grievances and some hospitals have refunded money and some of hospitals have treated the patients.

The Grievance Cell advised to take action to ensure that the amount collected by the NWHs are refunded in the remaining cases also.

Decision:

After discussions, the Committee noted the activities of Grievance Cell and advised to take action to ensure that the amount collected by the NWHs are refunded in the remaining cases also.
Revision of MoU.

The Member-Secretary briefed about the inconvenience of signing of separate MoU under SAST schemes by the Network Hospitals.

Decision:

The Committee suggested to make use of single MoU in future as and when the NWHs approach for renewal and the date of renewal will be considered as date of renewal for all the schemes.

Status of Mortality Audit Cell.

Dr. Rohit briefed about specialitywise/hospitalwise deaths happened.

Decision:

The Committee after discussions suggested to

a) get explanation from NWHs reasons for more number of deaths.
b) place the preventable death cases before the respective Consultative Committee for their opinion.
c) To provide information about specialitywise preventable deaths to the EDC in future.
d) Upload Mortality rate of each hospital in the Trust Website.
e) Complete the remaining work by 15th of January-2016.

Quality Facilitation Cell.

The Member Secretary informed the Committee about the status of hospitals regarding NABH Accreditation. The executive Director informed that to help the hospitals in achieving NABH, SAST has conducted 3 workshops and till now only 19 hospitals have got NABH Accreditation (18 full accreditation and 1 Entry Level). The Executive Director briefed that SAST has been trying to encourage hospitals to work for NABH on their own and unfortunately it is noticed that they are still going for private Consultants by paying fee of Rs. 3.00 lakhs for NABH Entry Level. This trend needs to be curbed and SAST itself can offer these services probably by charging nominal fees, as we have Dr. Sreenath Reddy who is NABH Accredited Assessor in SAST team. This would help our staff also to acquire extra knowledge in this regard.

Decision:

After detailed discussions, the Committee permitted SAST to provide technical support to NWHs for NABH Accreditation process, charging a nominal fee and Executive Director is authorised to fix the quantum of fees. Out of this amount 30% to be retained to SAST as institutional charge, and the balance 70% to be shared as incentive among the staff who will be involved in this process. This extra work shall not affect normal routine work of these staff members.
Renewal of Sri Shankara Cancer Hospital and Research Centre, Bangalore.

The Member-Secretary explained that in 2010 Sri Shankara Hospital was empanelled under Vajpayee Arogyashree scheme and since then they have treated 65 cases and they have not empanelled for JSS and RAB. He sought whether this hospital to be renewed under VAS as they have requested to renew only under VAS.

**Decision:**

**After discussions the Committee authorised Executive Director to take appropriate decision.**

Irregularities from Aster Aadhar Hospital, Kolhapur, Maharashtra.

The Member-Secretary briefed that one patient is of cardiac complications, PTCA Stent was done under Code 240 as general ward admission, the CAG stills revealed that the blockage was less than 50% and was verified through review by a Cardiologist and the treatment was done even though it was not required. He informed that against this case the claim was withheld.

**Decision:**

**After discussions, the Committee decided not to renew this hospital and to deny the claim.**

Unsatisfactory performance of ISA.

The Executive Director brought to the notice of the Committee about the gaps and lapses of Implementation Support Agency. He stated that they commit lot of mistakes in processing Preauths and claims proposals resulting in financial loss to the Trust. He pointed out that some of the cases wherein they have recommended for payment to the hospitals is more than the eligibility as per the package rates. In the MoU there is provision to terminate the Agreement but there is no provision to penalise the ISA. However, instead of taking direct action to terminate it was felt that better to penalise so as to give them an opportunity to perform better in future. The Committee noted the poor performance of ISA.

**Decision:**

**After detailed discussions, the Committee decided to impose a penalty of Rs. 200/- per case of wrong processing and it would double if it continues even after 2 months.**

Other Sub No. 33.15

The Committee noted the Circular issued to NWHs regarding the procedure to be followed while uploading the case of Chemotherapy wherein it is insisted that they will have to upload empty vials along with Batch Number. The hospitals have been expressing their difficulties in handling the vials of Chemotherapy which is hazardous and therefore requested to insist only the Batch Number which would enable SAST to verify authenticity of Chemotherapy used by cross checking with the register maintained in the hospital.
**Decision:**

The Committee after discussing the subject decided to insist only the Batch Number of the vials used for administering Chemotherapy.

**Other Sub No. 33.16**

It was brought to notice of the Committee that some of the Oncology empanelled hospitals are not providing the Histopathology Report, Slides and Cubes to the beneficiaries, which is expected of hospitals.

**Decision:**

The Committee decided to write to all NWHs to preserve one set of Histopathology Report, Slides and Cubes and to give one more set to the beneficiaries.

**Other Sub No. 33.17**

The Executive Director briefed the Committee about the review done in Karnataka Institute of Medical Sciences, Hubli. He stated that this is the only Government Medical College in Karnataka which has got all superspeciality infrastructure along with the qualified Doctors. There are 3 Cardiologists, 1 Cardio Thoracic Surgeon, 4 Neuro Surgeons, 3 Urologists and Paediatric Surgeons and only Cardiac cases are being claimed from SAST while others not even a single case has been claimed. During review the Specialists have volunteered to treat more patients and claim more number of cases if they are given OT facilities for which Executive Director has guided them to utilise OTs 10 in number outside the official timings that is 4.00 PM onwards.

He also brought to the notice of the Committee that most of these Superspecialists working in KIMS should also empanelled in the private NWHs under SAST and the irony is that they are not treating in KIMS but they are actively treating patients in private hospitals and this paradoxical situation needs to be addressed.

**Decision:**

The Committee after discussing various issues of KIMS, Hubli decided that the Superspecialists working in Government Hospitals will not be permitted to function in private hospitals unless they treat patients in Government hospitals. Further, the Doctors of Government Hospitals could do treatment in private hospitals only to the extent they treat in their parent institutions.

The meeting concluded with vote of thanks by the Member Secretary.

_Sd/-_  
(Dr. H. Sudarshan)  
Chairman  
Empanelment and Disciplinary Committee  
Suvarna Arogya Suraksha Trust  
Bangalore

(Proceedings approved by the Chairman through mail)

[Signature]

Director, Medical Management and Member Secretary, EDC  
Suvarna Arogya Suraksha Trust  
Bangalore