

GOVERNMENT OF ANDHRA PRADESH
ABSTRACT

Andhra Pradesh Integrated Medical Attendance Rules, 1972 – Guidelines for recognition of Private hospitals as referral hospitals for the purpose of treatment to State Government employees, retired pensioners, and their dependents, M.L.As, Ex.-MLAs and other categories of persons as per said rules – Prescribing Memorandum of Understanding – Orders – Issued.

HEALTH MEDICAL AND FAMILY WELFARE (K1) DEPARTMENT

G.O.Ms.No.477

Dated the 30th August, 2005

Read the following:

1. G.O.Ms.No.162, HM&FW(K1) Department, dt.23-5-2005.
2. From the DME, A.P., Hyd., Lr.Rc.No.9626/MA-A/05, dt.4-7-2005.

ORDER:

In the G.O. first read above, Government have issued orders framing guidelines for recognition of Private Hospitals as referral hospitals for the purpose of treatment to State Government employees, Retired pensioners and their dependents, Family pensioners, M.L.As, Ex-M.L.As and other category of persons mentioned in Andhra Pradesh Integrated Medical Attendance Rules, 1972. One of the conditions prescribed therein is to enter Memorandum of Understanding (M.O.U.) by the Director of Medical Education with the concerned Private hospitals seeking to come under this scheme.

2. In the letter second read above, the Director of Medical Education has submitted draft Memorandum of Understanding for the approval of the Government.
3. Government after careful examination of the matter hereby prescribe the format of Memorandum of Understanding to be entered by the Private Hospitals with the Director of Medical Education, A.P., Hyderabad in terms of the orders issued in G.O.Ms.No.162, HM&FW(K1) Department, dt.23-5-2005, as specified in the Annexure to this order.
4. The Director of Medical Education shall take necessary action in the matter accordingly.
5. This order issues with the concurrence of Finance Department vide their U.O.No.22215/501/A2/Exp-HM&FW-I/2005, dt.25-8-2005.

**(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA
PRADESH)**

DR. I.V.SUBBA RAO
PRINCIPAL SECRETARY TO GOVERNMENT

To

The Director of Medical Education, A.P. Hyderabad
All Heads of the Departments under the control of HM&FW Department.
The Director, Nizam's Institute of Medical Sciences, A.P. Hyderabad.
The Director, Sri Venkateswara Institute of Medical Sciences, Tirupati.
The Secretary, Indian Medical Association, Hyderabad.

(through the DME, A.P., Hyderabad.)
The Secretary, A.P. Nursing Homes Association, Hyderabad.
(through the DME, A.P., Hyderabad.)
The Commissioner of Social Welfare, Masabtank, A.P., Hyderabad.
The Commissioner of Tribal Welfare, Masabtank, A.P., Hyderabad.
The Commissioner of B.C. Welfare, Masabtank, A.P., Hyderabad.
The Secretary, A.P. Social Welfare Residential Schools Society (Regd),
S.W. Office Complex, Masabtank, Hyderabad-28.
All District Collectors in the State.
All the Superintendents of Government Teaching Hospitals in the State.

Copy to:

The Registrar, High Court of Andhra Pradesh, Hyderabad.
The Registrar, A.P. Administrative Tribunal, Hyderabad.
The Pay and Accounts Officer, Hyderabad.
The Accountant General, (A&E), A.P., Hyderabad.
The Accountant General (Audit), A.P., Hyderabad.
The Finance (Exp. HM&FW.I) Department.
The Law (E) Department.
The General Administration (SC-X) Department.
The General Administration (SR/Poll.) Department.
Social Welfare Department
Social Welfare (T.W.) Department
The HM&FW (O.P.) Department.
The Special Secretary to C.M.
The P.S. to Minister (Health)

// FORWARDED :: BY ORDER //

SECTION OFFICER

**ANNEXURE TO G.O.Ms.No.477,
HEALTH, MEDICAL & FAMILY WELFARE (K1) DEPARTMENT,
DATED 30-08-2005**

Memorandum of Understanding between the Government of Andhra Pradesh Represented by
Director of Medical Education and

.....
(NAME OF HOSPITAL)

For recognised as referral hospital to treat the State Government Employees both in service
and Retired and their dependents for reimbursement purpose.

This Memorandum of Understanding is made on this _____ day of 2005 by and
between the Director of Medical Education on behalf of Government of Andhra Pradesh who
shall be the 1st party and _____ (name of the Hospital, Corporate bodies/Firm/Trust full
address), _____ who shall agree to be 2nd party under which the
Hospital/Institution shall under take the treatment of State Government Employees and their
dependents etc., and other categories of persons as per Andhra Pradesh Integrated Medical
Attendance Rules, 1972;

2. Whereas _____ (name of Hospital) has applied for recognition under revised Andhra Pradesh Integrated Medical Attendance Rules as per (G.O.Ms.No.162, H.M.&F.W.(K1)Deptt.,dt.23-5-05) for treatment of State Government Employees and their Dependents etc.,

3. And whereas the Government of Andhra Pradesh represented by Director of Medical Education had vide its G.O.Ms.No.162, HM&FW(K1)Deptt.,dt.23-5-2005 extended recognition of _____ (name of Hospital) under revised Andhra Pradesh Integrated Medical Attendance Rules for treatment of State Government Employees subject to the conditions that the schedule of charges for treatment of State Government employees shall be regularised as per schedule of approved charges of Central Government Health Scheme, Hyderabad as per G.O.Ms.No.74, HM&FW(K1)Deptt.,dt.15-03-2005 for treatment given and also subject to the conditions that _____ (name of hospital) would enter into an agreement with the Government of Andhra Pradesh to the effect that the hospital will charge State Government employees at the rate so fixed as above by the Government of Andhra Pradesh.

4. Now, therefore, the State Government and _____ (name of Hospital) hereby enter into an agreement to be mutually adhered to by both the parties whose terms, conditions and applications are stated as below:-

(i). _____ (name of hospital) is recognised under revised Andhra Pradesh Integrated Medical Attendance Rules as per G.O.Ms.No.162, HM&FW(K1)Department, dt.23-05-2005 for treatment of State Government Employees subject to the conditions that:-

(i). _____ (name of hospital) will charge A.P. State Government Employees, their dependents, retired State Government pensioners and their dependents, family pensioners, M.L.As and their family members and other categories of persons who are entitled for free medical treatment as specified in Andhra Pradesh Integrated Medical Attendance Rules, 1972, and as amended from time to time by Government. In the rates of Private hospitals are less than the Central Government Health Scheme package rates or Government rates as per annexure to the said G.O., the lowest rates of Private Hospitals shall be accepted for scrutiny and payment, Referral of patients to the private hospital should be from the Director, Nizam's Institute of Medical Sciences (NIMS), Hyderabad, Director, SriVenkateswara Institute of Medical Sciences (SVIMS), Tirupati, Superintendents of Government Teaching Hospitals and Superintendents of district headquarters hospitals and Area Hospitals in the State as per the schedule of approved rates of Central Government Health Scheme, Hyderabad and for Dental and Ophthalmic rates as given in Annexure-I and II of G.O.Ms.No.74, HM&FW(K1) Department, dt.15-03-2005.

(ii). _____ (name of hospital) shall in no event, charge an amount more than that agree to as per Central Government Health Scheme, Hyderabad rates and Annexure-I and II of G.O.Ms.No.74, HM&FW(K1) Department, dt.15-03-2005 rates, from any State Government Employees or the categories mentioned in condition (1) above, for a period of 3 years from the date of signing of this Memorandum of Understanding.

(iii). _____ (name of hospital) shall not discriminate in any way against the State Government Employees and above categories of persons mentioned in (i) above receiving treatment in the hospital as compared to any other patient.

(iv). The Hospital shall provide access to the financial and medical records for review by medical and financial auditors of Sate Government as and when necessary.

(v). The hospital shall also submit a monthly return in the prescribed format to the Director of Medical Education, A.P., Hyderabad, Below Poverty Line person, students of Government welfare hospitals treated on monthly basis.

MONTHLY RETURN OF FREE TREATMENT

| Sl.No. | Name, Age and address of the patient | Institution / Officer who has referred | Particulars of reference | Disease or Health Problem | Treatment provided | Approximate value of treatment |
|--------|--------------------------------------|--|--------------------------|---------------------------|--------------------|--------------------------------|
| | | | | | | |

(vi) The Hospital will pay damage to the beneficiaries, if any injury, loss of part or death occurs due to gross negligence, or due to transfusion of improperly matched blood or any such injuries occur as direct consequences of treatment in the hospital.

(vii) Any legal liability coming out of such services shall be dealt by the hospital and at Hyderabad.

(viii) In case of any complaint of any mismanagement including overcharging by the hospital, the State Government may, after enquiry, de-recognise _____ (name of hospital) without any notice, and without any prejudice to any other action to be taken as per law.

(ix) The Hospital should give free treatment for outpatient and inpatient services including diagnostic, Surgical, Therapeutic and clinical services to the white card holders of the State of Andhra Pradesh or person below poverty line (BPL) to a minimum of five percent (5%) of bed strength (for inpatient services) of the hospital and provide free outpatient services to not less than 10% of their out patient census. The hospital agrees to provide free treatment to (.....) number of inpatients per month and () number of outpatients per month. The following types of diagnostic and therapeutic services shall be extended by the Hospital:-

- 1)
- 2)
- 3)
- 4)
- 5)

(x) The hospital is agreed to document the details of treatment properly in a register.

(xi). The Hospital should give free medical treatment for out patient and inpatient services including diagnosis, surgical, therapeutic and clinical to students of Andhra Pradesh Social Welfare Residential School, Tribal Welfare Residential Schools, B.C. Welfare Residential Schools, S.T. Ashram Schools, S.T. Hostels, G.V.V.K. Schools and Maabadi Schools whenever referred by the Principal of the said School/ any Government Medical Officer, District Referral Committee/ District Social Welfare Officer or P.D., I.T.D.A. or any authorised official to be notified by Government from time to time.

(xii). The private hospital should adopt at least two villages for providing better medical and health services to the rural people. This includes free diagnostic services, conducting health camps once in every month in the villages so adopted and submit a report to the Director of Medical Education, A.P., Hyderabad about the details of health camp. The names of two villages are _____ (specify names) _____ in _____ mandal of _____ dist. In the above two adopted villages, the hospital should take all steps to improve to overall health status of the population with special focus in maternal and child health. The health camps will be checked by officials not below the rank of Additional District Medical and Health Officer from time to time.

(xiii). The Hospital concerned should charge for all medical/surgical /diagnostic services including major ailments of Heart Bypass surgery, Kidney transplantation, Cancer, Neuro surgery etc., given by them under this scheme, as per the package rates prescribed by Government of India, Ministry of Health and Family Welfare for Central Government Health Scheme, Hyderabad and as adopted by the State Government in G.O.Ms.No.74, H.M.& F.W.(K1)Department, dt.15-03-2005 or as may be prescribed by the State Government or the Director of Medical Education from time to time. In respect of dental treatments and Eye ailments, the package rates shall be as prescribed in G.O.Ms.No.74, H.M.& F.W. (K1)Department, dated 15-3-2005 this Annexures I and II and as amended from time to time.

(xiv). If any of the treatment rates are not available for any condition in Central Government Health Scheme, Hyderabad list, the N.I.M.S. package rates shall be followed for the same.

(xv) The hospital shall accept the Letter of Credit (L.O.C) issued by all the heads of departments and regional and District Level Officers issued for treatment /operations to their employees and their dependents for major ailments of CABG, Kidney Transplantations, Cancer, Neuro Surgery Open Heart Surgery, Plastic Surgery etc., done secondary to accident and burn cases, based on submission of estimation, and subject to ceiling limit as per the package rates prescribed by the Government. The private hospitals should also accept letter of credit (L.O.C.) from the Departments concerned for giving treatment and also to give treatment on producing Identity card of the employee under emergency circumstances, pending issue of letter of credit. The emergency conditions are also included the following:-

- (a) Acute Coronary syndromes (Coronary Artery By-Pass Graft/Percutaneous Transluminal Coronary Angioplasty) including Myocardial Infarction, Unstable Angina, Ventricular arrhythmias Paroxysmal Supra Ventricular Tachicardia, Cardiac Tamponade, Acute Left Ventricular Failure/Severe Congestive Cardiac Failure, Accelerated hypertension complete heart block and stroke attack, acute aortic dissection.
- (b) Acute limb ischemia, rupture of aneurism, medical and surgical shock and peripheral circulatory failure.
- (c) Cerebro vascular attack-strokes, sudden unconsciousness, head injury, respiratory failure decompensated lung disease, cerebro meningial infections, convulsions acute paralysis, acute visual loss.
- (d) Acute abdomen.
- (e) Road traffic accidents/with injuries including fall
- (f) Acute poisoning

- (g) Acute renal failure
- (h) Acute abdomen in female including acute obstrical and gynaecological emergencies.
- (i) Heart stroke.

At the time of discharge of pensioner and their dependents and family pensioners who were admitted for treatment on Letter of Credit, it is for the hospital to collect the 10% of the Central Government Health Scheme rates from them in terms of orders issued in Govt.Memo.No.7089/K1/2005-1, dt.14-6-2005

(xvi). The Hospital should submit for Scrutiny of all relevant Registers whenever the officials from the Director of Medical Education or any persons nominated by the Government ask for the same.

(xvii). The recognition so accorded will be valid for a period of three years only from the date of recognition and the Hospital should submit application to the Director of Medical Education, A.P., Hyderabad seeking renewal within three months before the date of the expiry of the said period, together with a demand draft for Rs.30,000/- (Rupees thirty thousand only) from any nationalized bank drawn in favour of Director of Medical Education, A.P., Hyderabad towards application form and inspection fees.

(xviii). The hospital will be inspected in each quarter by a team of Government doctors to be constituted by Director of Medical Education /Superintendent of Government Teaching Hospital/ Superintendent of Government Head Quarter's Hospital to ensure that the diagnostic, surgical, therapeutic services and the overall quality of care in the private hospital are satisfactory. The Director of Medical Education, A.P., Hyderabad or any officer authorised by Director of Medical Education will conduct inspection periodically to verify and ensure that the said private hospital is complying with all the conditions as stipulated above and verify the Registers and make appropriate recommendation to Government through the Director of Medical Education for necessary action.

(xix) The Director of Medical Education shall constitute a team of medical experts and Accounts Officers to do a random sample detailed scrutiny of the bills reimbursed in favour of Government servants etc for the treatment given to Government employees /retired employees and other categories of persons as per Andhra Pradesh Integrated Medical Attendance Rules, 1972. Chartered Accountants can be engaged by Director of Medical Education for this purpose to satisfy that these cases are not over billed compared to others and the services offered to Below Poverty Line persons. For this purpose, a yearly inspection fee shall be Rs.30,000/- and collected from the hospital concerned.

(xx). The permission accorded to the hospital is liable for cancellation and such other action as deemed fit, including de-recognition of the hospital and initiate criminal action as per law against the hospital, whenever the State Government forms the opinion based on inspection or enquiry into the allegations that the said private Hospital is not providing treatment to the State Government employees/ retired employees and their dependents etc. as stipulated above and violates the conditions mentioned therein, and indulge any irregularities in respect of excess/ bogus claims, cheating the patient or Government or resorting to any unlawful activities etc., after giving fifteen (15) days notice to the hospital and pass appropriate orders, after considering the representation, if any, offered by the said Hospital.

(xxi). Neither Party may assign this M.O.U. or any interest therein without the written consent of the other party. The laws of the Government of Andhra Pradesh shall govern the construction and interpretation of this M.O.U.

(xxii). The original copy of this Memorandum of Understanding (M.O.U) shall be kept at the office of First Party and a true copy shall be retained in the office of Second party signed on _____ day of _____ 2005 at _____.

In witness where of the afore mentioned points have affixed their signatures and seal on the date, month and year first above written.

For and on behalf of the Government
of Andhra Pradesh

For and on behalf of the
Hospital

Name
Designation:

Name
Designation
Address:

Witness 1.
2.

DR. I.V.SUBBA RAO
PRINCIPAL SECRETARY TO GOVERNMENT

// FORWARDED :: BY ORDER //