

Self Help Guide – Enhancement of HEM Application



Are you an administrator of the hospital and wants to apply for registration under the following?

क्या आप अस्पताल के प्रशासक हैं और निम्नलिखित के तहत पंजीकरण के लिए आवेदन करना चाहते हैं?

☐ PMJAY (PMJAY)
☐ Only CGHS (केवल CGHS)
☐ Only CAPF (केवल CAPF)
☐ NO (नहीं)

Already started the Empanelment Process ? [Login](#)

Hospital / Lab Reference Number * 1

Password * 2

qvejz4 3
(Please enter visible characters in the text box)

4 LOGIN

[Forgot Hospital/ Laboratory Reference Number](#) [Forgot Password?](#)

Step 1: Enter the Hospital ID received on the time of empanelment/Account creation

Step 2: Enter the password received on the time of empanelment/Account creation


Step 3: Enter the Captcha


Step 4: Login to Access your account






Note: In Case of forgot password, please enter the hospital Id and press forgot password









Upon login this page will open

← → ↻ hospitals.pmjay.gov.in/loginForm.htm ⌂ ☆ ⚙ P Paused ⋮


PM-JAY


Pradhan Mantri Jan Arogya Yojana - Ayushman Bharat
 Hospital Empanelment Application Form






HOSP ⌵
 7/23/2021, 5:09:55 PM

 View Approved Application
  Update Application ⌵
 Certification ⌵
 Upgrade Application ⌵
 Quality Matrix ⌵
 Quality Audit ⌵
 De-Empanelment ⌵
 Enhancements Search

Hospital Basic Information Hospital Id : HOSP ⌵

Hospital Name :	Hospital PAN :	Hospital Parent Type : Group	Hospital Type : Private(For Profit)
Hospital Rohini Id : 8900080236	Application Status : Hospital Approved for Empanelment	Application Created Date : 22-09-20	Empanelment Type : PMJAY


Hospital Details
 Financial Details
 Licences and Certifications
 Speciality Services
 Civil Infrastructure
 Medical Infrastructure
 General Services
 Man Power Details
 Attachments
 Print Preview

Hospital Address

Hospital Address :	Hospital Pincode : 700094	State :
District : KOLKATA	Block : NA	Village : NA
City : KOLKATA	Latitude : 22.4805838	Longitude : 88.3942728
Hospital Registration Number : NA		

Hospital Profile

Hospital Specialty Type : Multi	Establishment Year : 1993	PAN Card Holder Name :
Private Hospital Sub Type : NA	Legal Entity Name :	Hospital Ownership Type : Private



national health authority

सत्यमेव जयते

Pradhan Mantri Jan Arogya Yojana

Ayushman Bharat

PM-JAY

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PM-JAY

View Approved Application

Update Application

Hospital Basic Information

Certification

Upgrade Application

Quality Matrix

Quality Audit

De-Empanelment

Enhancements Search

Pradhan Mantri Jan Arogya Yojana - Ayushman Bharat

Hospital Empanelment Application Form

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HOSI

7/23/2021, 5:09:55 PM

Hospital Basic Information

Hospital Id : HOSP

Hospital Name :	Hospital PAN :	Hospital Parent Type : Group	Hospital Type : Private(For Profit)
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Hospital Details

Financial Details

Licences and Certifications

Speciality Services

Civil Infrastructure

Medical Infrastructure

General Services

Man Power Details

Attachments

Print Preview

Hospital Address

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Hospital Profile

Hospital Speciality Type : Multi	Establishment Year : 1993	PAN Card Holder Name :
Private Hospital Sub Type : NA	Legal Entity Name :	Hospital Ownership Type : Private

To update details regarding Contact details, click on update details.

- View Approved Application
- Update Application
- Hospital Basic Information**
- Certification
- Upgrade Application
- Quality Matrix
- Quality Audit
- De-Empanelment
- Enhancements Search

Update Approved Hospital Basic Information

Hospital Name :	Hospital Parent Type : Group	Hospital Type : Private(For Profit)	Status : Hospital Approved for Empanelment
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+ Hospital Address

+ Hospital Profile

- Contact Information












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Organisation Head Name * DR _____	PAN number _____	Organisation Head ID Proof Number * _____
Organisation Head Contact Number * 9903706 _____	Organisation Head FAX Number 03324620 _____	Organisation Head Email ID * _____
PMJAY- Nodal Officer Name * _____	PMJAY-Nodal Officer Number * 983117 _____	Contact Person Email ID * _____
Hospital Admission Desk Landline no * 03340111 _____		

③

UPDATE

- Click on Hospital Basic Information Page.
- Update contact information under contact information sub-menu
- Click on update button, the details will be updated

-  View Approved Application
-  Update Application ▾
-  Certification ▾
-  Upgrade Application ▾
-  Specialities Offered
-  Financial Details
-  Licenses and Certifications
-  Add Man Power
-  Specialities-Clarification Required
-  Accreditation Details
-  Bed Strength

Upgrade Bed Strength Details

 Bed Strength Details

Total Bed Strength*

Inpatient Bed Strength





SUBMIT FOR APPROVAL

To update details like Financial details, Licenses, Accreditation, bed Strength, Specialties offered, click on Upgrade application tab

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PM-JAY

Pradhan Mantri Jan Arogya Yojana - Ayushman Bharat
Hospital Empanelment Application Form

7/23/2021, 5:09:55 PM

UPGRADE SPECIALITIES CIVIL INFRA MEDICAL INFRA ADD MAN POWER VIEW CHECKLIST SUBMIT

Specialities Offered

S.No	Speciality Code	Speciality Name	Check	Admissions Done Previous Financial Year	Admissions Done Before Last Year
1	S1	General Surgery	<input checked="" type="checkbox"/>		
2	S2	ENT	<input type="checkbox"/>		
3	S3	Ophthalmology	<input type="checkbox"/>		
4	S4	Obstetrics & Gynaecology	<input type="checkbox"/>		
5	S5	Orthopaedics	<input type="checkbox"/>		
6	S7	Cardio Thoracic Surgery	<input checked="" type="checkbox"/>		
7	S8	Paediatric Surgery	<input type="checkbox"/>		
8	S9	Genitourinary Surgery	<input checked="" type="checkbox"/>		
9	S10	Neuro Surgery	<input type="checkbox"/>		
10	S11	Surgical Oncology	<input type="checkbox"/>		
11	S12	Medical Oncology	<input type="checkbox"/>		
12	S13	Radiation Oncology	<input type="checkbox"/>		

View Approved Application
Update Application
Certification
Upgrade Application
Specialities Offered
Financial Details
Licenses and Certifications
Add Man Power
Specialities-Clarification Required
Accreditation Details
Bed Strength

1. Click on Specialties offered to update specialties.
2. Fill details of specialties, Civil & Medical Infrastructure; Manpower; checklist and submit
3. DEC will conduct verification and approval will be done by SHA.

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PM-JAY Pradhan Mantri Jan Arogya Yojana - Ayushman Bharat
Hospital Empanelment Application Form

7/23/2021, 5:09:55 PM

View Approved Application
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Certification
Upgrade Application
Specialities Offered
Financial Details
Licenses and Certifications
Add Man Power
Specialities-Clarification Required
Accreditation Details

Financial Details

Name of the authorized signatory to the hospital bank account*	Name as appearing in Bank Account*
Hospital Account Number*	IFSC Code* SEARCH
Bank Name*	Branch Name*
TDS exemption ----Select----	Cancelled Cheque * Choose File No file chosen
Hospital PAN	PAN Card Attachment Choose File No file chosen

Note : Supported file types are JPG, JPEG, BMP, PNG,PDF less than 500KB [Visit Compress.com](#) to find tools to reduce file size

SUBMIT FOR APPROVAL

1. Click on financial details offered to update them.
2. Fill financial details, upload cancelled check & scanned copy of PAN card and submit for approval
3. Approval will be done after verification

- View Approved Application
- Update Application
- Certification
- Upgrade Application
- Specialities Offered
- Financial Details
- Licenses and Certifications**
- Add Man Power
- Specialities-Clarification Required
- Accreditation Details
- Bed Strength

Licences and Certifications

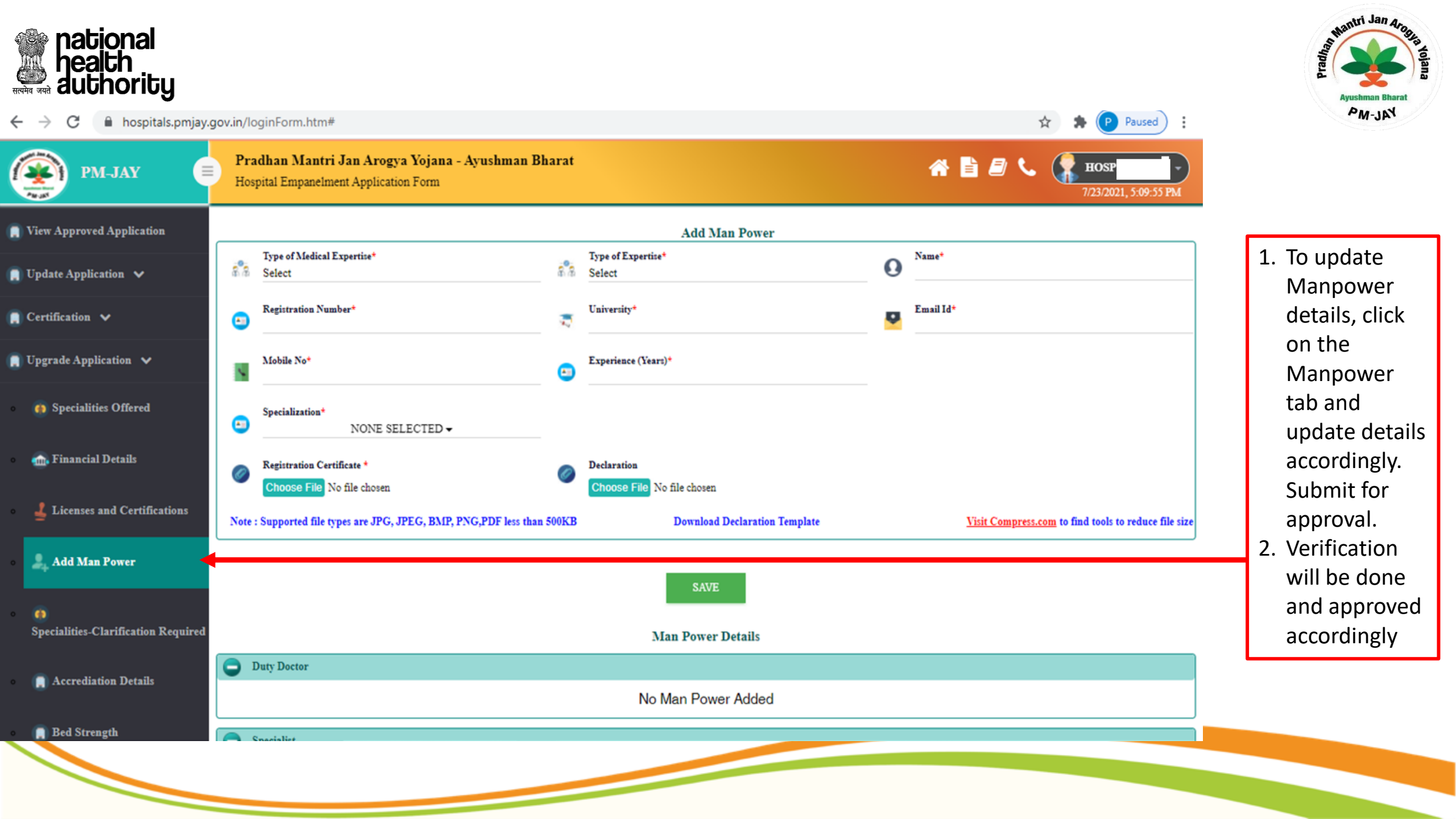
Note : Supported file types are JPG, JPEG, BMP, PNG,PDF less than 500KB

[Download Self Declaration Template](#)

[Visit Compress.com](#) to find tools to reduce file size









Approval Name	Certificate No	Issue Date	Expiry Date	Action
Building & Infrastructure				
Building Plan Approval	Certificate No.	Date of Issue	Date of Expiry	 
Fire Department Clearance Certificate	Certificate No.	Date of Issue	Date of Expiry	 
Pollution Control Board Certificate	Certificate No.	Date of Issue	Date of Expiry	 
Lift Licence	Certificate No.	Date of Issue	Date of Expiry	 
Registrations & Certification				
Occupancy Certificate	Certificate No.	Date of Issue	Date of Expiry	 
Opium Licence	Certificate No.	Date of Issue	Date of Expiry	 
Hospital Registration Certificate	Certificate No.	Date of Issue	Date of Expiry	 
State Medical Council/Association Registration	Certificate No.	Date of Issue	Date of Expiry	 
Morphine Licence	Certificate No.	Date of Issue	Date of Expiry	 


1. To update Licenses and certificates click on the Licenses and certificates tab and update details accordingly. Submit for approval.
2. Verification will be done and approved accordingly





1. To update Manpower details, click on the Manpower tab and update details accordingly. Submit for approval.
2. Verification will be done and approved accordingly


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 **PM-JAY**  **Pradhan Mantri Jan Arogya Yojana - Ayushman Bharat**
Hospital Empanelment Application Form      **HOSP** 
7/23/2021, 5:09:55 PM


 View Approved Application


 Update Application ▾


 Certification ▾


 Upgrade Application ▾


◦  Specialties Offered

◦  Financial Details

◦  Licenses and Certifications



◦  Add Man Power

◦  **Specialties-Clarification Required**

◦  Accreditation Details

Clarification Required from Hospital

Enhancement Id

 Search  Reset

No Records Found

javascript:fn_EnhClarificationReq();fn_load_image()

1. To check and reply for Clarification for speciality upgradation, click on specialties clarification required
2. Verification will be done and approved accordingly

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Hospital Empanelment Application Form

7/23/2021, 5:09:55 PM

View Approved Application

Update Application ▾

Certification ▾

Upgrade Application ▾

Specialities Offered

Financial Details

Licenses and Certifications

Add Man Power

Specialities-Clarification Required

Accreditation Details

Bed Strength

Accreditation Details

Name of Accreditation Board*
---Select---

Valid upto*

Accreditation Level*

If Others, Name of Accreditation Board*

Accreditation Identification Number*

NABH accredited Certificate*
Choose File No file chosen

SUBMIT FOR APPROVAL

1. To update regarding Quality Accreditation/ Certification, click on accreditation details. Completely fill all information and submit.
2. Verification will be done and approved accordingly

View Approved Application

Update Application

Certification

Upgrade Application

Specialities Offered

Financial Details

Licenses and Certifications

Add Man Power

Specialities-Clarification Required

Accreditation Details

Bed Strength

Upgrade Bed Strength Details

Bed Strength Details

Total Bed Strength*	Inpatient Bed Strength
<input type="text"/>	<input type="text"/>

SUBMIT FOR APPROVAL

1. To update regarding bed strength, click on bed strength tab. Completely fill all information and submit.
2. Verification will be done and approved accordingly

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7/23/2021, 5:09:55 PM

Enhancements Search

Enhancement Id _____ Enhancement Type ---select---

Search **Reset**

1 Displaying 9 Total no of records: 9

Sno	Enhancement Id	Hospital Name	State	District	Enhancement Type	Status

Enhancements Search

1. To view submitted enhancements, click on enhancements search.
2. Enter enhancement ID & type
3. Then click on search button.

THANK YOU