



Medical Claims

T17

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Mentor: Dr. Puneet Goyal



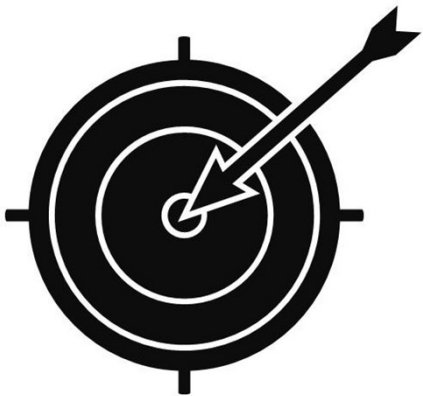
ACKNOWLEDGEMENT

We would like to express our sincere gratitude to everyone who has contributed to this project. Without the support, guidance, and assistance of our colleagues, mentors, and friends, this work would not have been possible.

We extend our appreciation to our project supervisor Dr. Puneet Goyal , who provided invaluable guidance and feedback throughout the entire process. We are grateful for their expertise, insights, and support, which greatly enriched our understanding of the subject matter and helped us to achieve our goals.

Further we would like to thank him for his constant support and encouragement for the improvement of this project. Thank you all for your contributions to this project. We are grateful for your support and proud to share this work with you.

Problem Statement & Motivation



- Medical claim reimbursement is an important process that allows patients to receive financial compensation for medical expenses incurred during the course of their treatment.
- However, the process of filing and tracking medical claims can be complex, time-consuming, and prone to errors. This can result in delayed reimbursements, denied claims, and frustration for both patients and healthcare providers.
- A medical claim reimbursement website can address these issues by providing a user-friendly platform for patients to submit and track their claims.
- The website can also automate many of the processes involved in claims processing, reducing the likelihood of errors and speeding up the reimbursement process. This can result in a more efficient and satisfactory experience for patients, while also reducing the administrative burden on healthcare providers.



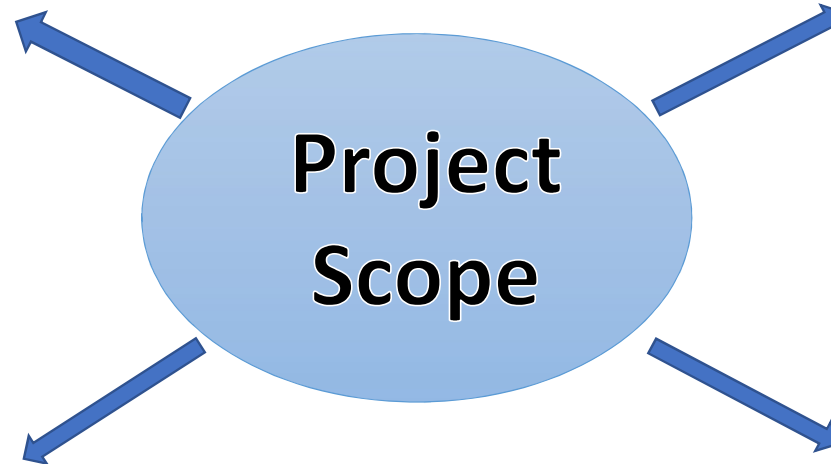
User-friendly Interface



Claims Processing



Secure



Real-time Claim Status

Website Features



1. User Authentication



3. Claim Tracking



5. Form Download



2. Claim Submission



4. Document Upload



6. Autofill Feature

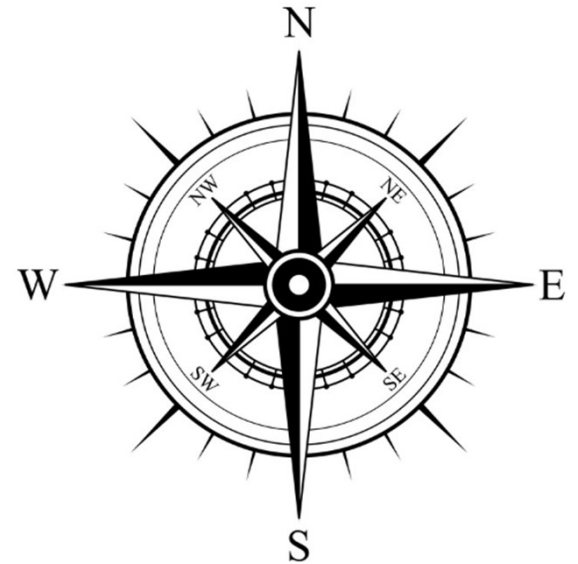
User Interface



User Friendly

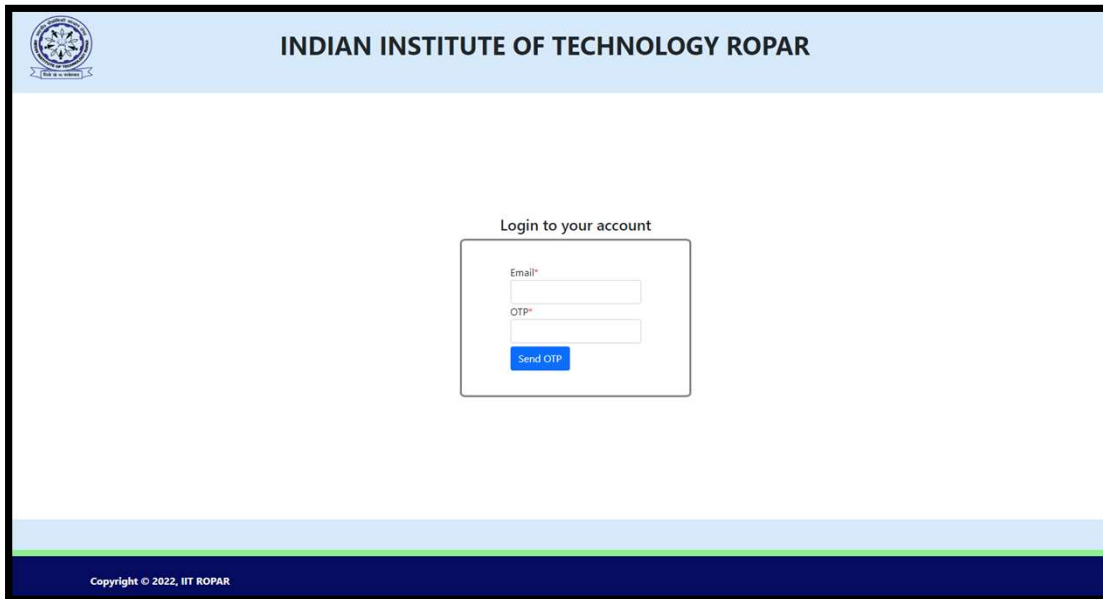


Clear Instruction

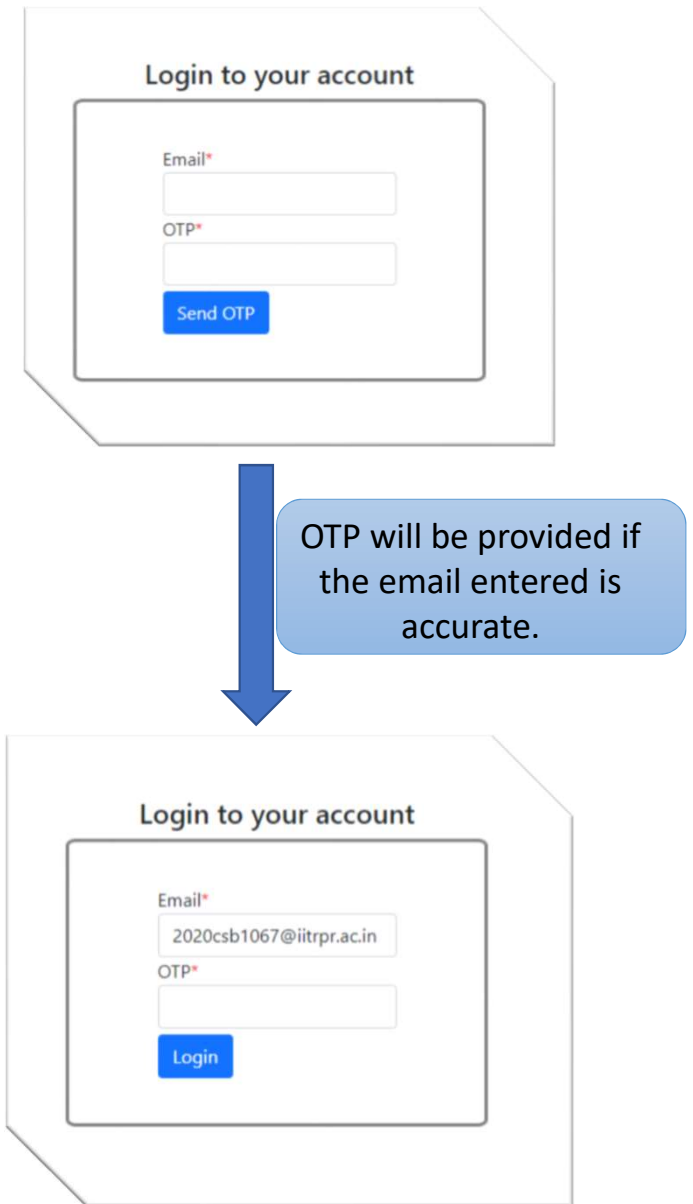


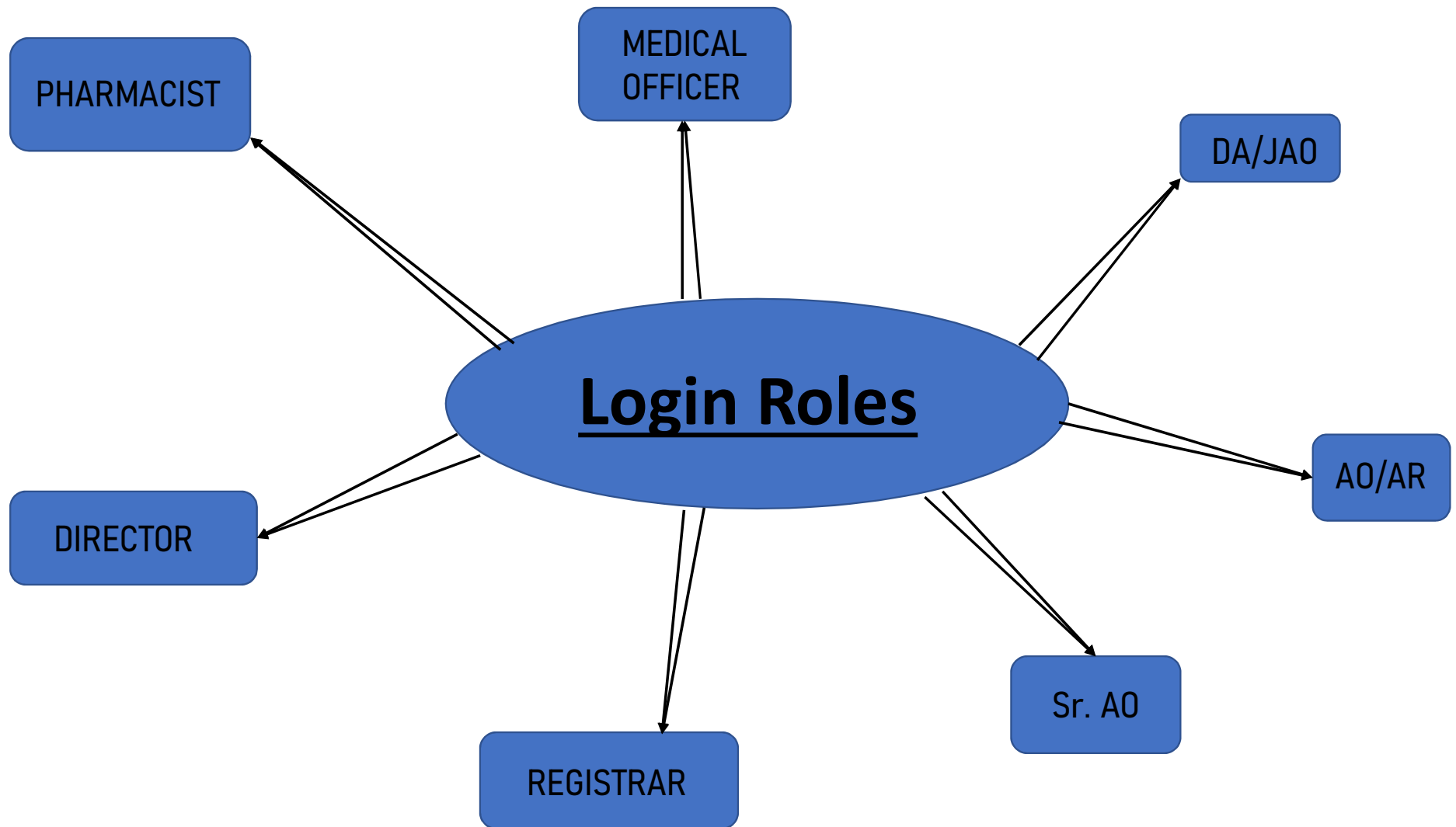
Easy Navigation

Authentication Page



The screenshot shows the authentication page of the Indian Institute of Technology ROPAR. At the top left is the IIT ROPAR logo. The header text reads "INDIAN INSTITUTE OF TECHNOLOGY ROPAR". In the center, there is a "Login to your account" form with two input fields labeled "Email*" and "OTP*", and a blue "Send OTP" button. The footer contains the text "Copyright © 2022, IIT ROPAR".





User Dashboard

Basic Instruction for Application Flow

The application can be sorted by date of filing or amount claimed.

User can apply for new Reimbursement

The user may view the

User can store basic data that will be filled up automatically while filling out new forms.

The user can view the previously accepted application.

Logout

The screenshot shows a user dashboard with a dark sidebar menu and a light blue main content area. The menu includes 'Home', 'Auto Fill', 'Approved applications', and 'Logout'. The main content area has buttons for 'Instructions' and 'Apply for Reimbursement', a welcome message, and a table of applications. Callout boxes point to various elements: 'Basic Instruction for Application Flow' points to the 'Instructions' button; 'The application can be sorted by date of filing or amount claimed.' points to the table headers; 'User can apply for new Reimbursement' points to the 'Apply for Reimbursement' button; 'The user may view the' points to the table; 'User can store basic data that will be filled up automatically while filling out new forms.' points to the 'Auto Fill' menu item; 'The user can view the previously accepted application.' points to the 'Approved applications' menu item; and 'Logout' points to the 'Logout' menu item.

Menu

- Home
- Auto Fill
- Approved applications
- Logout

Instructions

Apply for Reimbursement

Welcome
2020 Oct 10 07:07 @ilrpracin

Home
(applications which are yet to be approved by all authority people will appear here)

Search...

ID	Amount Claimed	Date of submission	Pharmacist Status	Medical Officer Status	Account Section Status	Registrar Status
3	200	2023-04-19	approved	approved	approved	PENDING
4	120	2023-04-20	approved	approved	approved	PENDING
6	100000	2023-04-25	approved	approved	approved	PENDING
8	100	2023-04-25	approved	approved	PENDING	PENDING

Auto Fill

reducing the time and effort required to complete the form.

quickly and easily populate form fields with their saved personal information.



Menu

- Home
- Auto Fill**
- Approved applications
- Logout

[Instructions](#)[Apply for Reimbursement](#)Welcome
2020csb1067@iitrpr.ac.in

Autofill these common details for all applications

Note: If you want to leave any field blank, Type '-' without quotes

1. Name & Designation of Govt. Servant (In Block Letters) -	Aditya Bal Gupta
(i) Whether married or unmarried -	Unmarried
(ii) If married, the place where wife / husband is employed -	NA
2. Mobile number	+91 94681-57001
3. Employees Code No., Deptt/ Section -	ADIT3108
4. Pay of Govt. Servant (Band Pay & Grade Pay) -	10000000
5. Residential address -	742-B/28, Bharat Colony

Save

Cancel

Apply for Reimbursement

Menu

Home

Auto Fill

Approved applications

Logout

भारतीय प्रौद्योगिकी संस्थान रोपड़

INDIAN INSTITUTE OF TECHNOLOGY ROPAR

रूपनगर, पंजाब-140001, Rupnagar, Punjab-140001

Medical Claim Form - For Outdoor (Part A) /Indoor (Part B) Treatment

Form of application claiming reimbursement of medical expenses incurred in connection with medical attendance and/or treatment for self and family members/dependents.

1. Name & Designation of Govt. Servant (In Block Letters)*

Aditya Bal Gupta

(i) Whether married or unmarried *

Unmarried

(ii) If married, the place where wife / husband is employed*

NA

2. Mobile number *

+91 94681-57001

3. Employees Code No., Deptt/ Section *

ADIT3108

4. Pay of Govt. Servant (Band Pay & Grade Pay) *

10000000

5. Residential address *

742-B/28, Bharat Colony

6. Name of the patient & his /her relationship with the Government Servant (in case of Children state age also)*

6. Name of the patient & his /her relationship with the Government Servant (in case of Children state age also)*

Apply for Reimbursement

Add Medicine And Test

Menu

- Home
- Auto Fill
- Approved applications
- Logout

(PART A- For Outdoor Patients, OPD)

Declaration

☒ I am solely responsible for any discrepancy if found in the incurred bill or if the statement is found to be incorrect in respect of following medicines/ tests:-

Insert Medicine

S.NO	Name of Medicine(s)	Price(Rs.)
1	Aspirine : 325 mg	9.00

Edit a row

Edit Medicine

Insert Test

S.NO	Name of Test(s)	Price(Rs.)
1	2D Echo	2000

Edit a row

Edit Test

Apply for Reimbursement

Add Documents And Report



Drag And Drop

All accepted document can be seen here

All Rejected document can be seen here

PLEASE ATTACH YOUR MEDICAL BILLS HERE

Drag 'n' drop some files here, or click to select files

Accepted files

- 1681466830278.jpg - [1681466830278.jpg](#)
- 1681466825078.png - [1681466825078.png](#)

Rejected files

[Upload](#)

☐ It is certified that the patient has purchased the medicines as per the prescription of the treating doctor.

[Submit](#)

Apply for Reimbursement

S.NO	Name of Medicine(s) (attach extra sheet of require)	Price(Rs.)
1	2D Echo	
2	4D Scan	
3	ACTH (Aderno Croticotropic Hormone) Test	
4	Adenosine Deaminase Test	

edit a row

S.no	Test Name	Price	Edit

PLEASE ATTACH YOUR MEDICAL BILLS HERE

Drag 'n' drop some files here, or click to select

+ Copy

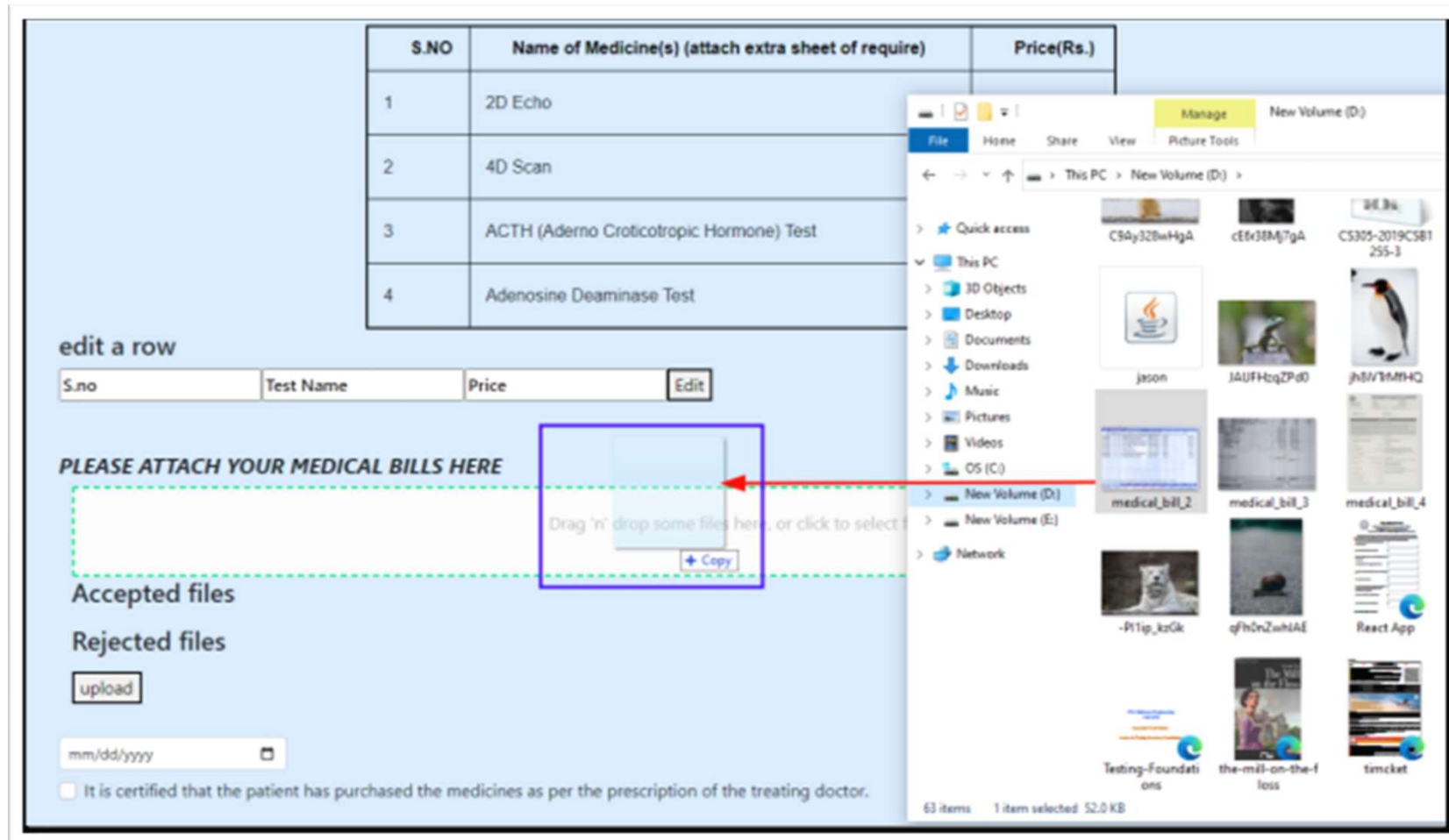
Accepted files

Rejected files

upload

mm/dd/yyyy


☐ It is certified that the patient has purchased the medicines as per the prescription of the treating doctor.



The image shows a reimbursement application form with a table for listing medicines. Below the table is a section for attaching medical bills, which includes a drag-and-drop area and an 'upload' button. A file explorer window is open over the form, showing the 'New Volume (D:)' directory. A red arrow points from the 'medical_bill_2' file in the explorer to the drag-and-drop area on the form. The file explorer also shows other files like 'medical_bill_3' and 'medical_bill_4'.

Print Application

- Before completion user can verify all the detail he/she filled and modify.
- User can take print of the current filled form



भारतीय प्रौद्योगिकी संस्थान रोपड़
INDIAN INSTITUTE OF TECHNOLOGY ROPAR
रूपनगर, पंजाब-140001, Rupnagar, Punjab-140001
Medical Claim Form - For Outdoor (Part A) /Indoor (Part B) Treatment

Form of application claiming reimbursement of medical expenses incurred in connection with medical attendance and/or treatment for self and family members/dependents.

1. Name & Designation of Govt. Servant (in Block Letters) - *	Aditya Bal Gupta
(i) Whether married or unmarried - *	Unmarried
(ii) If married, the place where wife / husband is employed - *	NA
2. Mobile number *	919468157001
3. Employees Code No., Deptt/ Section - *	ADIT3108
4. Pay of Govt. Servant(Band Pay & Grade Pay)*	1000000
5. Residential address - *	742-B/28, Bharat Colony
6. Name of the patient & his /her relationship with the Government Servant (in case of Children state age also) - *	Self
7. Place at which the patient fell ill - *	Ropar
8. Details of the amount claimed - *	10000

(I) Medical Attendance
(i) Fee for consultation indicating -

Print3 sheets of paper

DestinationMicrosoft Print to PDF

PagesAll

LayoutPortrait

ColorColor

More settings

PrintCancel

[Print application](#)[Return To Home](#)

Authority's Dashboard

Pharmacist & Medical Officer

The officer can search the application by application id

Tab to view the accepted applications.

Logout

Menu

Home

Verified Applications

Logout

The application can be sorted by date of filing or amount claimed.

The Authority can view the status of the application

Welcome
pharmacistxyz901@gmail.com

Home
(applications which need your approval will appear here)

Search...

Application ID ↕	Net Amount Claimed ↕	Date of submission ↕	Status
Application 5	123	2023-04-25	rejected
Application 11	1000	2023-05-11	PENDING

Authority's Dashboard

Pharmacist & Medical Officer

Date

15-05-2022

- ☒ It is certified that, I am employed at IIT Ropar and I am not availing the medical facilities or financial / medical allowances in lieu thereof either of myself / of the members of my family from any (other) source. I hereby declare that the statements in the application are true to the best of my knowledge and belief and that the person for whom medical expenses were incurred is wholly dependent upon me. I will be solely responsible for this.

Table:1

S.NO	Name of Medicine(s)	Price(Rs.)
1	Homeocal	500
2	Pidantak Tel	250

Table:2

S.NO	Name of Test(s)	Price(Rs.)
1	X-Ray	250

Enter your Remarks (if any) -

Note: In case of any clarification click on hold and please let the applicant know by contacting him

looks fine



Approve

Hold

Reject

The remark added by the authority is also visible to the applicant.

Authority can accept the application , reject the application or can add some remark and hold the application.

Authority's Dashboard :-

DA/JAO & Above

The user can search the application by application id

The user can view the accepted application in this tab.

Logout



The DA/JAO can sort the applications by date of filing or amount claimed.

The Authority can view the status of the application

Welcome
junioracc.xyz901@gmail.com

Verified applications

(applications which are approved by you will appear here)

Search...

Application ID ↕	Net Amount Claimed ↕	Date of submission ↕
Application 3	200	2023-04-19
Application 4	120	2023-04-20
Application 6	100000	2023-04-25
Application 7	120000	2023-04-25
Application 8	100	2023-04-25

Authority's Dashboard :-

DA/JAO & Above

(For Use by Accounts Section)

Items	Amount Claimed(In rupees)	Amount Allowed(In rupees)	Remarks
Medicine			
Tests			
Room Rent			
Operation / Procedure charges etc., (Operation, Procedure, ICU / CCU/ Consultation / Others Specify)			
TOTAL			

Passed for Rs. (Rupees (in words) only.

Entered in medical reimbursement register page No.

Sr. No. Expenditure debitale.

Save Above Data

Enter your Remarks (if any) -

Note: In case of any clarification click on hold and please let the applicant know by contacting him

approved

Approve

Hold

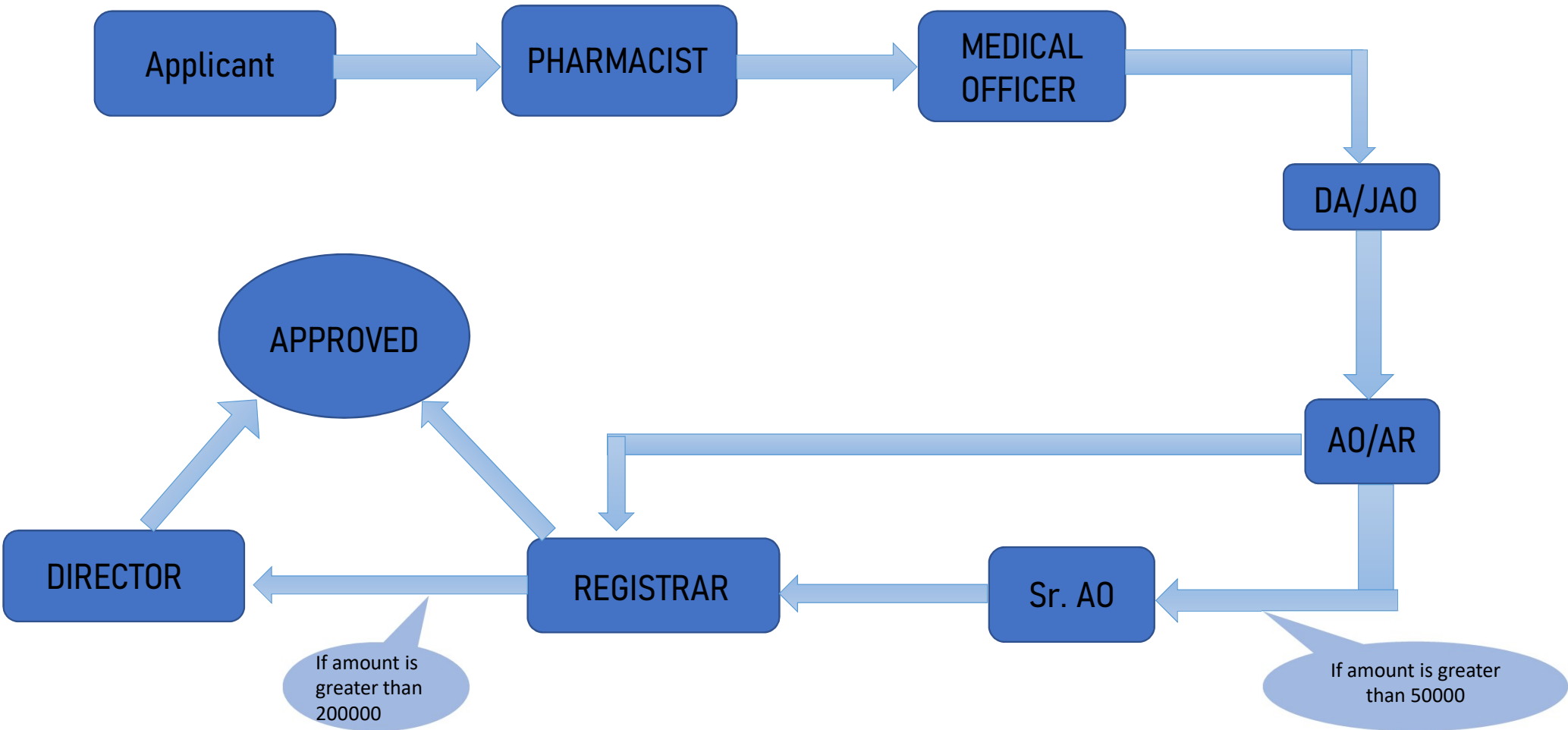
Reject

These section should be field by the JAO/DA

The remark added by the authority is also visible by the applicant so he/she can modify his/her application.

Authority can accept the application , reject the application or can add some remark and hold the application.

Application Flow



Hierarchy of application -

After filling the application by user, for its complete verification it needs to be verified by all the following persons in the given below manner.

1. Pharmacist
2. Medical officer
3. Account Section /DA/JAO
4. AO/AR
5. Sr AO (only if claimed amount $\geq 50,000$)
6. Registrar
7. Director (only if allowed amount $\geq 2,00,000$)

Note: your application will be called completely verified only if-

1. The Registrar verifies that application, and the allowed amount $< 2,00,000$.
2. The allowed amount $\geq 2,00,000$ then the Director also has to verified.

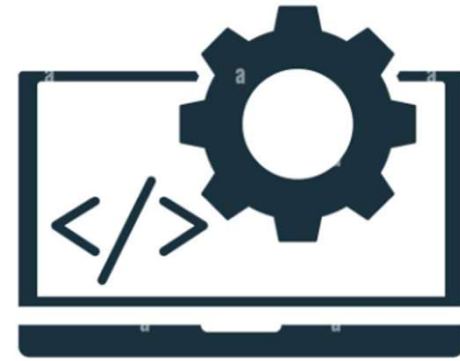
Tech Stack Used



Frontend

React

React-Bootstrap



Backend

Flask

MySQL

Firebase

DEPLOYMENT

Deployed on NETLIFY



<https://lustrous-tanuki-653cda.netlify.app/>



Team Members



Aditya
2020CSB1067



Jemee
2020CSB1091



Vaibhav
2020CSB1215



Kapil
2020CSB1093

Guided BY:
Dr. Puneet Goyal



“Thank You”

