



Table of Contents

1	Ove		V	
1	.1	Purj	pose	3
2	Hov	v To C	Get Started	3
2	2.1	Logi	in	3
3	Wel	come	e Screen	4
3	3.1	Bloc	ck Package	5
	3.1.	1	Authentication	7
	3.1.	2	Block Package	16
	3.1.	3	Emergency	19
	3.1.	4	View Add Package	20
	3.1.	5	Generate Override code	21
	3.1.	6	Pre-Authorization	22
3	3.2	Unb	olock Package	23
	3.2.	1	Add Unblock Package	23
	3.2.	2	View Unblock Package	24
3	3.3	Disc	charge	25
	3.3.	1	Add Discharge Package	25
	3.3.	2	View Discharge Package	
3	3.4	Gen	erate Override	
3	3.5	Pre-	-Auth	29
3	3.6	Refe	erral	30

1 Overview

Biju Swasthya Kalyan Yojana (BSKY) aims to provide Health coverage to eligible Households of Odisha especially the economically vulnerable sections. Families having BSKY Health Card can avail cashless treatment at any empaneled private hospital under BSKY within or outside the State. Card holder families can avail facilities such as registration, consultation, medical tests, pathologies, treatment, IPD and follow-up consultation for which State Government will bear the cost up to the annual coverage amount.

State Government bears the full cost of all healthcare services delivered to all patients in all State Government health care facilities starting from Sub Centre level to District Head Quarters and Government Medical College Hospital level and State Government bear the cost of healthcare services provided in the empaneled private hospitals for BSKY card holder families in the State, for an annual health coverage of **Rs. 5 Lakh per family and additional Rs. 5 lakh for the women members of the family.**

1.1 Purpose

The Purpose of the document is to provide step-by-step procedure of the Transaction Management System application to the authorized users. This application portal is centralized and integrated system for Hospital empanelment, Hospital Transaction monitoring system, Claim Monitoring, Grievance and Mobile Application etc. The document provides pathway for better understanding of the process flow of the TMS module.

2 How To Get Started

To get started with the BSKY C application, enter the website link in the browser and get directed to the login page of the website.

2.1 Login

To access the application, enter the URL in the internet browser, further the page navigate the Login screen (Refer Fig. 2-1)

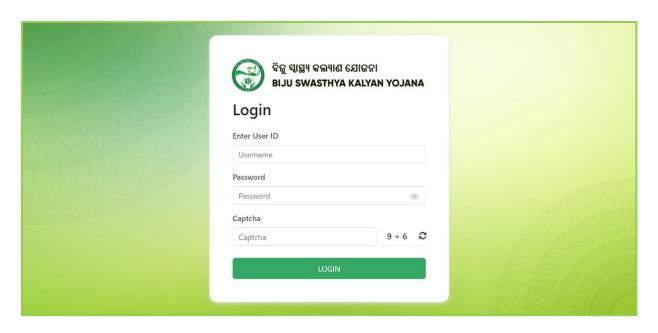


Figure 2-1 Login Screen

The authorized user enters the Login credentials which navigates to welcome screen.

3 Welcome Screen

After signing in, the page navigates to display the welcome screen.

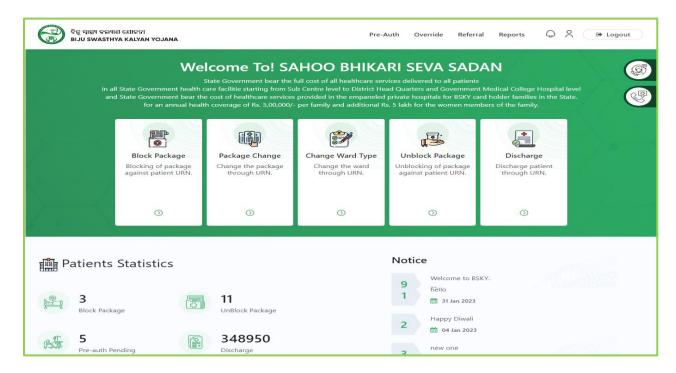


Figure 3-1 Welcome Screen

3.1 Block Package

When a patient comes to the hospital, the patient enters the Ration Card number/Aadharcard number for identification. For the treatment, the patients have to block a package according to their disease or type of treatment. The Block Package cost is calculated on basis of the package type selected for the patient which is also dynamic in nature for different categories of hospitals.

Click on the **Block Package** link and get navigated to the block package page.

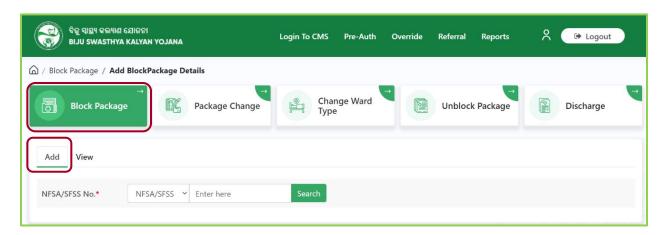


Figure 3-2 Block Package Screen (1)

- Enter the <u>NFSA/SFSS Number</u> (National Food Security Act {NFSA}/ State Food Security Scheme {SFSS} number or the Aadhaa number) in the text box field
- Click on the **Search** button.

The page further navigate to display the details of the patient and other members linked to that Ration Card.

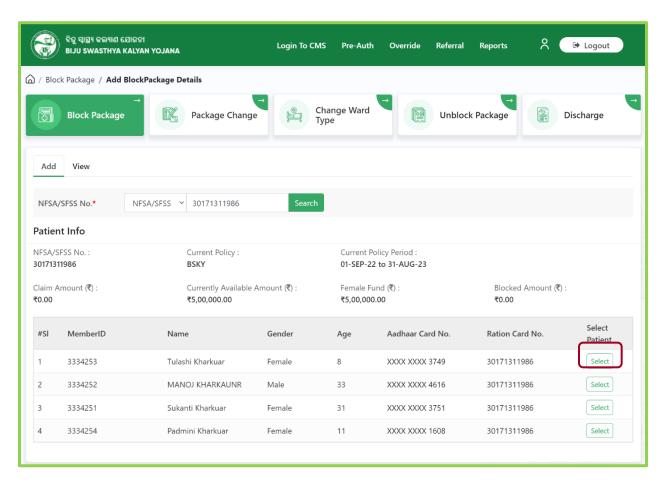


Figure 3-3 Block Package Screen (2)

After clicking on the search option, the page expands further to display the detailed information.

In the Patient Info section, NFSA/SFSS Number, Current Policy, Current Policy Period, Claim Amount, Currently Available Amount, Female Fund and Blocked Amount.

• To select a patient to block a package, click on the **Select** button as highlighted in the figure, against the Member ID

The page further expands for Authentication process.

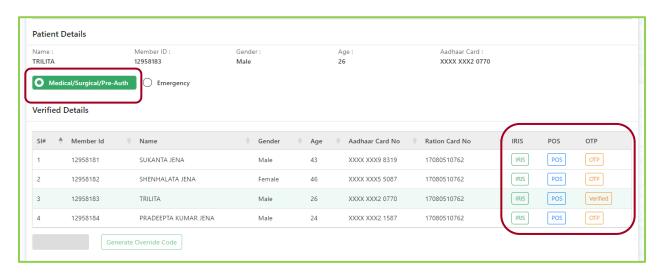


Figure 3-4 Block Package Screen (3)

Medical/Surgical/Pre-Auth section refers when a patient visit to a hospital and later the authentication process of the patient is completed. Further when a patient selects a particular package for his/her treatment, if that package requires Pre-Auth or Referral approval, After the approval procedure is completed, the patient can block that respective package for continuing the treatment procedure.

3.1.1 Authentication

When a patient visits hospital, authorized user authenticates the patient through below process.

3.1.1.1 IRIS

IRIS recognition is an automated method of biometric identification, taking unique patterns within a ring-shaped region surrounding the pupil of each eye. Click on the **IRIS** button and get navigated to Authenticate page.

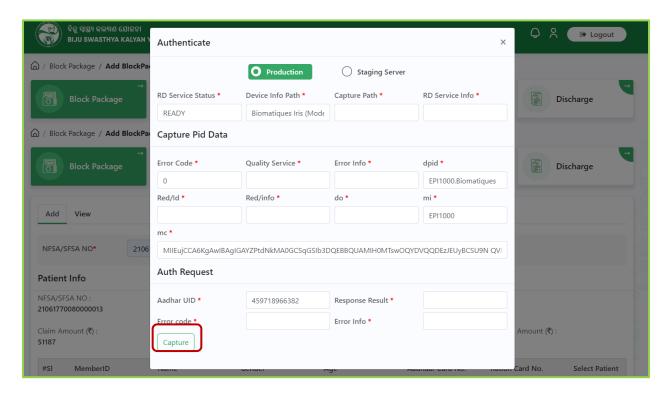


Figure 3-5 IRIS Verification Screen

The IRIS authentication of the patient or the member of the patient linked to the Ration Card. Click on the **Capture button** and further a **pop-up populates the screen**.

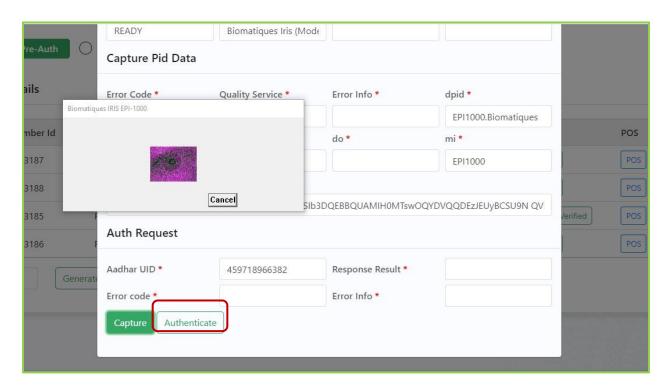


Figure 3-6 IRIS Verification Screen (2)

After the successful authentication is completed, the Authenticate button displays in green color.

Point of Sale or POS refers to the use of biometric authentication based on physical characteristics like fingerprint scanning to identify the user. Click on the POS button against the Member ID.



Figure 3-7 POS Machine Screen (1)

When patient visit the hospital and go through POS authentication process, the patient required a BSKY Card through which the number of the card will be used for the POS authentication process. Or the patient can choose the 'Read from Card Number' option, further enter the card number which will navigate to further screen.



Figure 3-8 POS Machine Screen (2)

The authorized user choose patient or any member of patient shown in the machine.

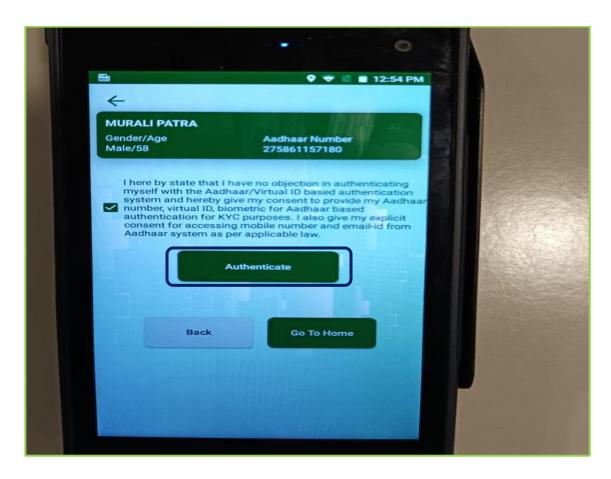


Figure 3-9 POS Machine Screen (3)

The screen further displays options for authentication. The authorized user click on the **Authenticate** button.

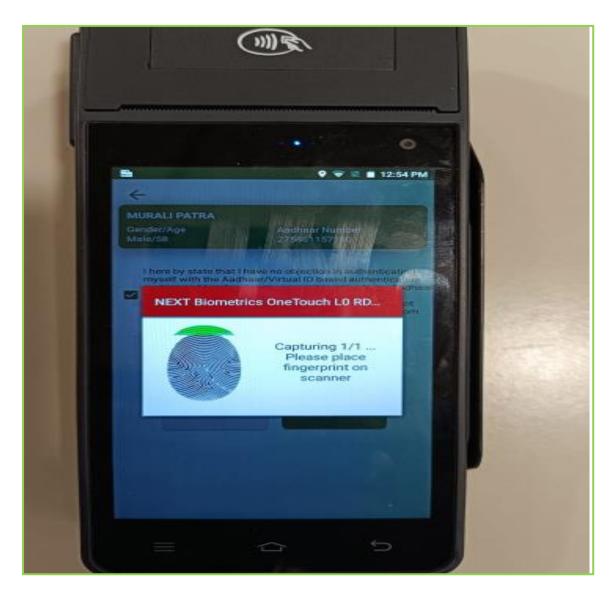


Figure 3-10 POS Machine Screen (4)

Further the patient or the selected member of the patient, put his/her finger on the left side of the machine.

Note: The patient or the selected member should have Aadhaarcard linked.

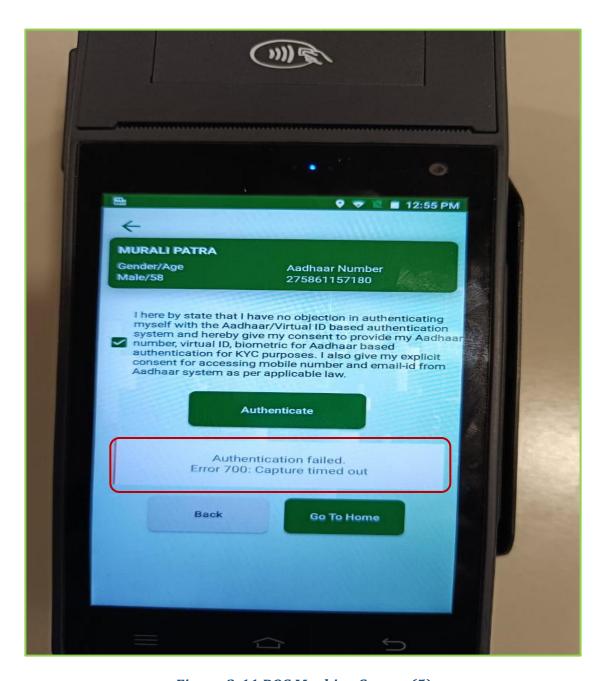


Figure 3-11 POS Machine Screen (5)

If the authentication process is done successfully, the machine displays a success pop-up message.

3.1.1.3 OTP

Click on the **OTP** button against the Member ID for Authentication. After clicking on the OTP button, an OTP is generated to the verified mobile number. Enter the **OTP Number** in the text field and click **Verify** button.

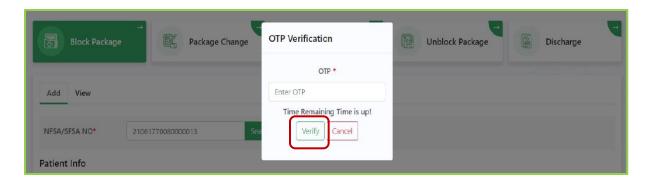


Figure 3-12 OTP Verification Screen



Figure 3-13 OTP Verification Screen (2)

Later the verification process through OTP is completed. Click \mathbf{OK} button to close the pop-up message.

After the approval procedure is completed, the patient can block that respective package for continuing the treatment procedure.

3.1.1.4 Override Code

If three authentication process- IRIS, POS and OTP is failed, then only the user can make the Authentication process through Generating Override. Click on the **Generate Override** button.

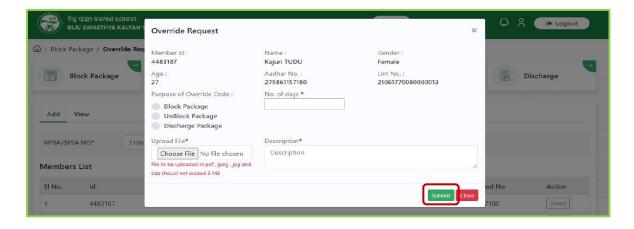


Figure 3-14 Override Request Screen

The authorized user fill up all the necessary details and click the **Submit** button to request for override code.

3.1.2 Block Package

After entering the Ration Card number or the Aadhar Card number for identification, the patient can block the package. The patient can block the package as per the disease or the type of treatment required to cure that disease.

3.1.2.1 Choose Package

Once the authentication process is completed, the add package page expands further. The authorized user select the package according to the treatment. Click on the **Add package** button to save the package. Further the page expands to display more details.



Figure 3-15 Add Block Package Screen (1)

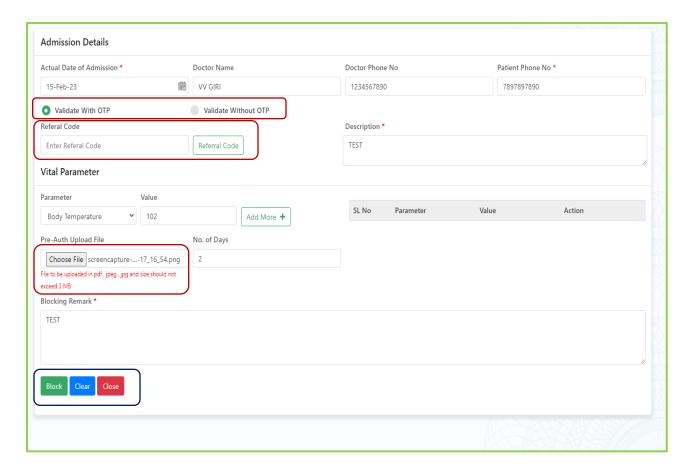


Figure 3-16 Add Block Package Screen (3)

Further the authorized user add the admission details. Here the Patient Phone Number is mandatory to fill up and can validate with OTP process.

If the referral code is mandatory against the selected package, then add the code in the Referral code text box. And if the selected package has Pre-Auth, then upload the clinical notes of the patient under Pre-Auth Upload File section.

Click on the **Block** button.

3.1.2.2 Choose Ward

A ward type (Routine/HDU/ICU (with ventilator)/ICU (without ventilator)) is selected by the authorized user, while blocking a package for a given patient. The authorized user will choose the ward type against the package. If a patient changes the ward type preauth will be required.

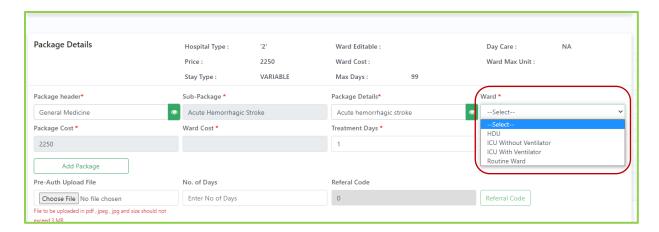


Figure 3-17 Add Block Package Screen (3)

3.1.2.3 Choose Implant

Once the package is saved, the authorized user can choose Implant against its package. The unit will be in editable format. The authorized user can change with respective to package. There are some implant, pre-auth will be required if it exceeds the unit limit.

The authorized user can delete or view the selected implant by clicking on the view (eye) icon under Action section.

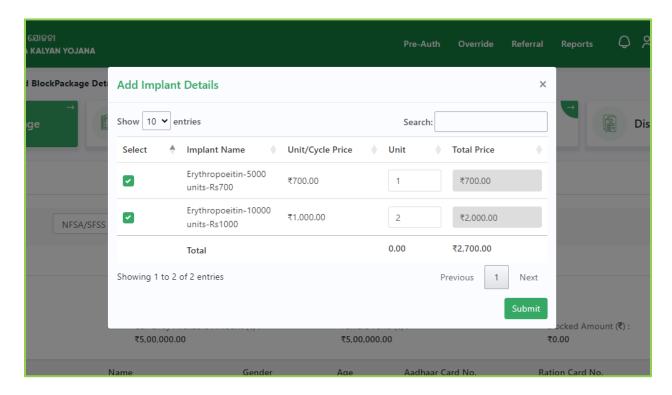


Figure 3-18 Implant Screen (2)

3.1.2.4 Choose HighEndDrugs

Once the package is saved, the authorized user can choose Highenddrugs against its package. There are some HighEndDrug, pre-auth will be required if it exceeds the unit limit

The authorized user can delete or view the selected package by clicking on the icon under Action section.

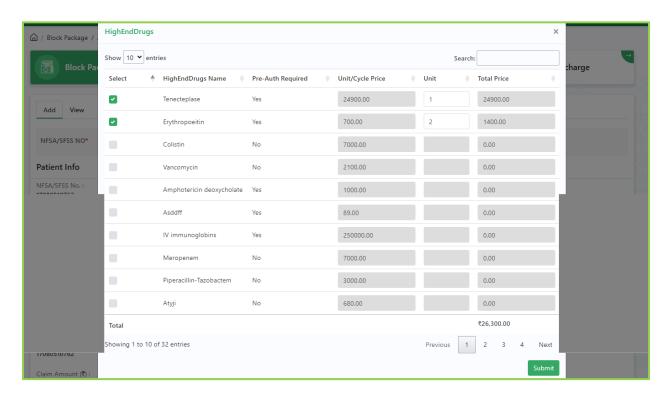


Figure 3-19 HighEndDrugs Screen (2)

3.1.3 Emergency

In case the patient is in emergency situation and requires immediate treatment, select the **Emergency** radio button.

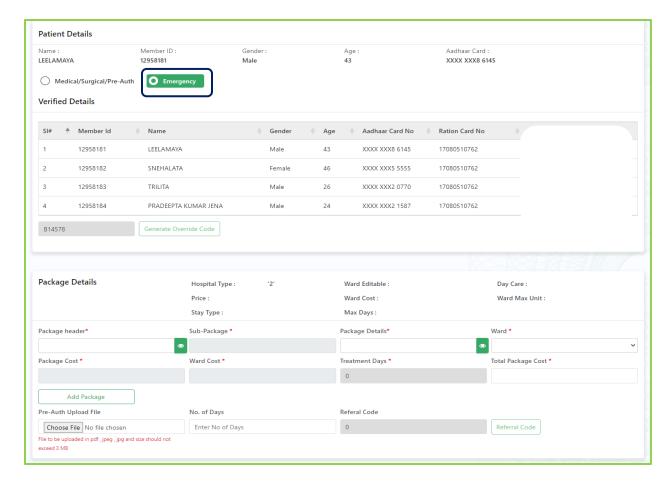


Figure 3-20 Emergency Screen

When the user selects the emergency button, no authentication process (IRIS or POS or OTP) is required.

3.1.4 View Add Package

To view the details of the Block Package, click on the **View** tab.

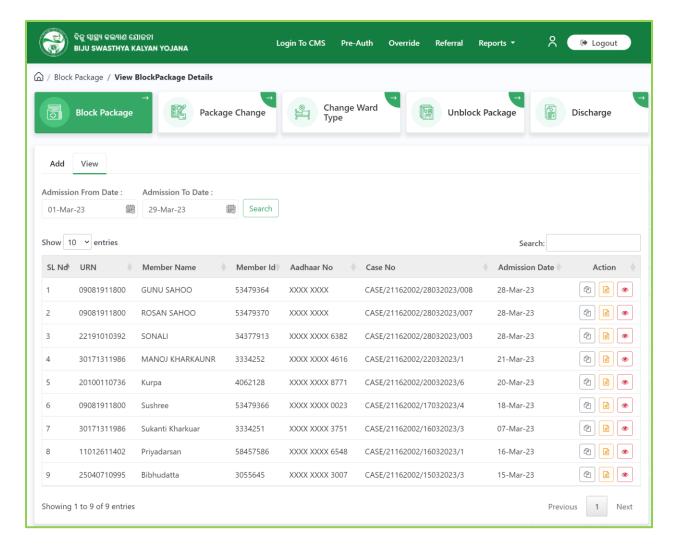


Figure 3-21 View Block Package Screen

The authorized user can print the Patient Slip, hospital Slip and View Details. To view the details of the particular block package of the patient, click on the **View Details** button.

3.1.5 Generate Override code

If three authentication process- IRIS, POS and OTP is failed, then the user can make the authentication process through generating Override. Click on the **Generate Override**. The authorized user will fill up all the details against the mandatory field and upload the clinical notes in upload file section.

After clicking on the submit button, the request is forwarded to DC (District Coordinator) for approval. Later when DC approves the request, the code will auto-reflect in the respective place.

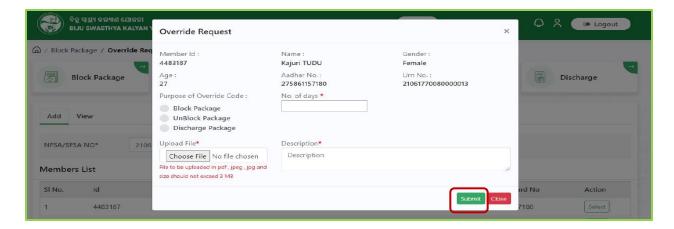


Figure 3-22 Override Request Screen

3.1.6 Pre-Authorization

If any package (includes any highenddrugs and if editable is mentioned against any implant) requires Pre-Auth, the hospital user will upload the clinical notes and enter number of days. That will auto forwarded to SNA for approval. If SNA don't take any action within 48 Hours, then the request is auto-approved. After confirmation from the SNA, hospital can block the package.

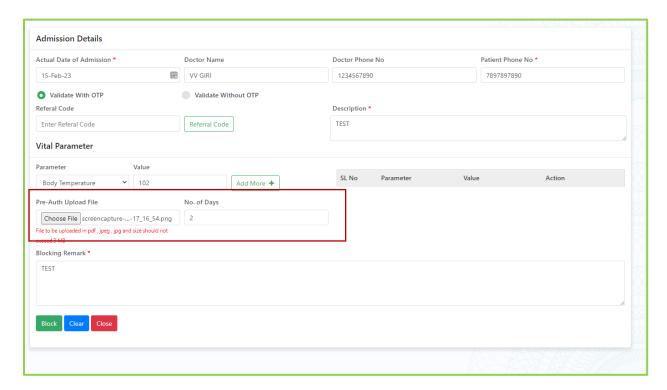


Figure 3-23 Admission Details Screen

3.2 Unblock Package

If the patient wants to change the block package or cancel the existing block package, then the patient can claim to unblock the existing block package. After unblocking, the hospital can block any package again or discharge.

3.2.1 ADD UNBLOCK PACKAGE

Click on the Unblock Package link and get navigated to Add Unblock Package.

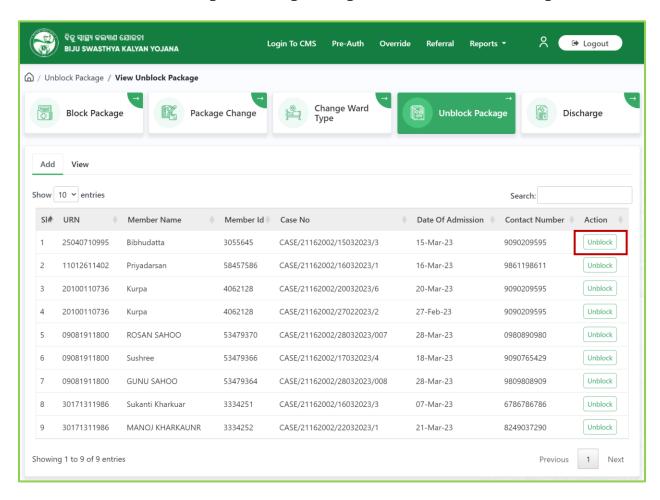


Figure 3-24 Add Unblock Package Screen

For authentication process, the authorized user can use the same four process (IRIS, POS, OTP and Override Code).

Click on the **Unblock** button as highlighted in the figure and get navigated to **Fig. 3-25**.

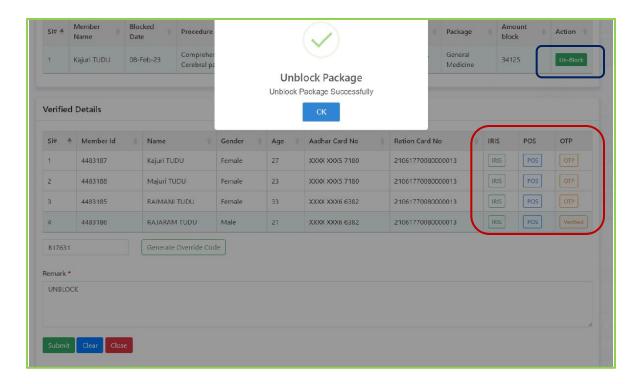


Figure 3-25 Unblock Screen

To close the pop-up message click on \mathbf{OK} button.

3.2.2 VIEW UNBLOCK PACKAGE

To view the details of the Unblock package, click on the **View** button.

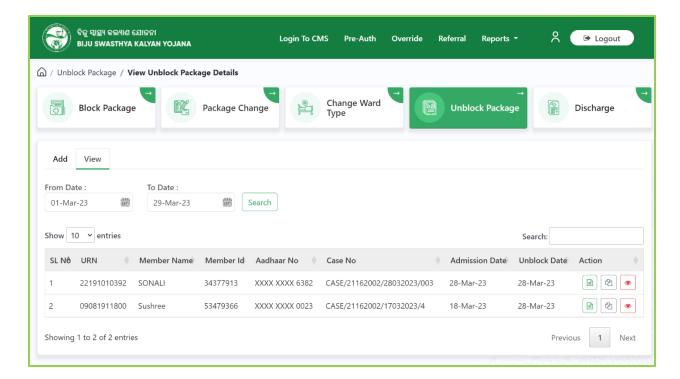


Figure 3-26 View Unblock Screen

In reference to **Fig. 3-26**, in the View page, detailed information- Hospital Slip, Patient Slip and View Details.

3.3 Discharge

After all the treatment procedure is completed, the hospital can discharge the patient by following the discharge procedure. During discharge, the final cost of treatment has to be based on the packages blocked and the per day ward costs utilized by the patient.

3.3.1 ADD DISCHARGE PACKAGE

Click on the Discharge link and get navigated to Add Discharge Package.

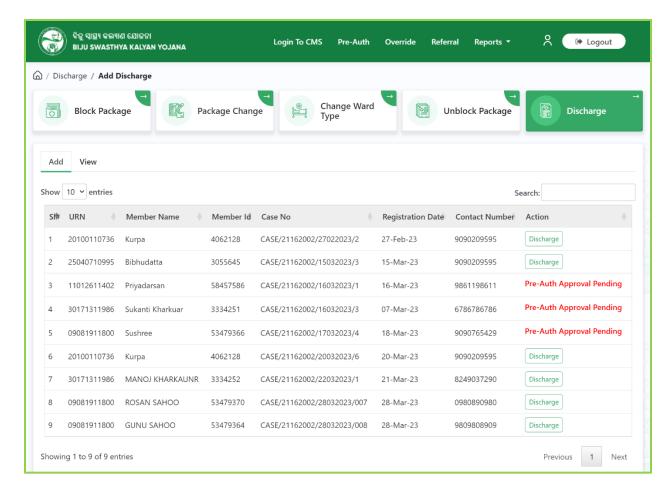


Figure 3-27 Add Discharge Screen

Referring to **Fig. 3-27**, in the Add Discharge page- to discharge the package, click on the **Discharge** button against the Member ID.

The page further expands to display the details for discharge process.

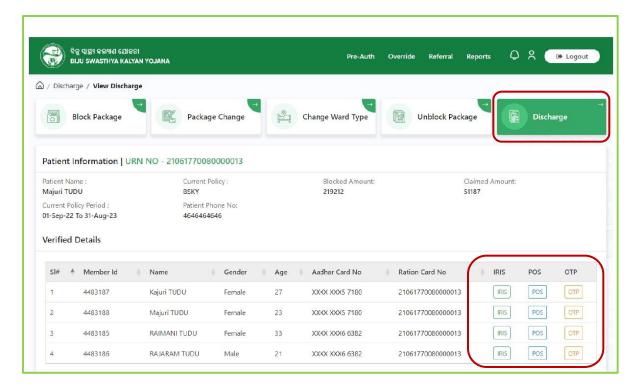


Figure 3-28 Discharge Screen

For authentication process, the authorized user can use the same four process (IRIS, POS, OTP and Override Code).

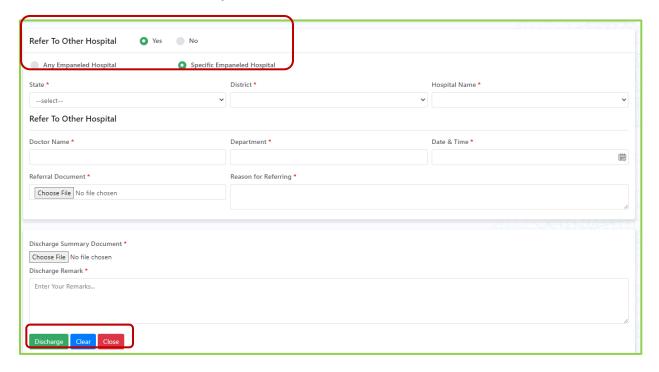


Figure 3-29 Discharge Referral Screen

During discharge time, the authorized user can refer the patient to any empanelled hospital or any specific empanelled hospital (if any patient wants to go to a particular hospital willingly).

Further the authorized user need to fill all the discharge details and click on the **Discharge** button.

3.3.2 VIEW DISCHARGE PACKAGE

To know the details of the discharge package, click on the **View** button.

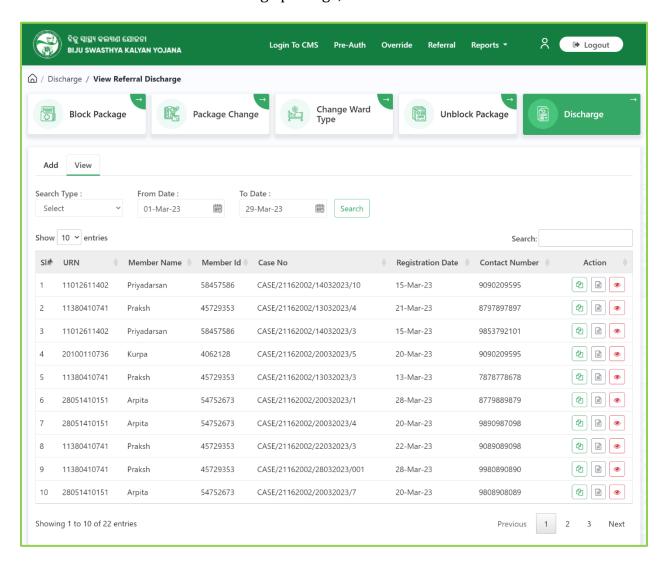


Figure 3-30 View Discharge Package Screen

3.4 Generate Override

The authorized user can click the **View** page to find out the status of the request (whether approved or Reject).

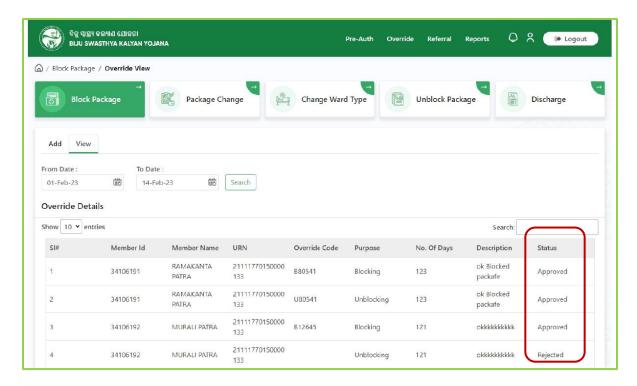


Figure 3-31 Override View Screen

3.5 Pre-Auth

If any package requires Pre-Auth, the hospital user requests to SNA for approval. If SNA don't take any action within 48 Hours, then the request is auto-approved.



Figure 3-32 View Pre-Auth Screen

The authorized user can view the status (Approved or Pending or Rejected) under the Status section. If the status displays Approved, then under the Action section, it displays **Block**.

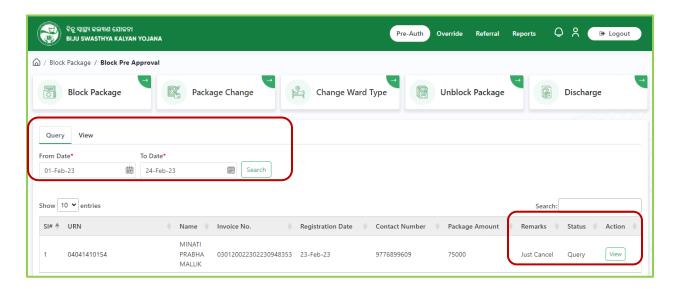


Figure 3-33 Pre-Auth Query Screen

If SNA raises Query against the Pre-Auth of the respective package, the details is displayed under the Query section (Refer **Fig. 3-26**). Click on the View button under the Action section to display the details of the query.

3.6 Referral

Any empanel hospital or District Coordinator (DC) can refer a patient to another empanel hospital in any circumstance. If any treatment is not available at the existing hospital, the hospital can refer the patient to another hospital for that treatment.

If any of the selected package required referral code, then the hospital user can generate referral code.

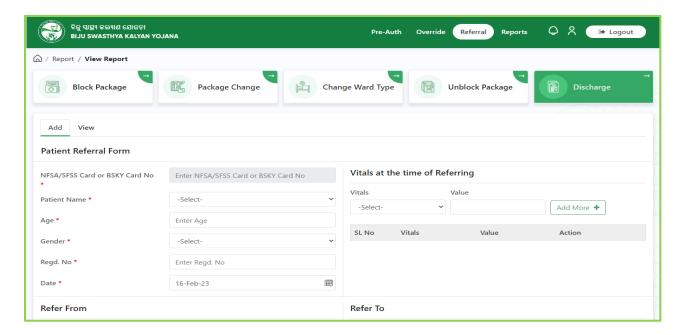


Figure 3-34 Referral Screen (1)

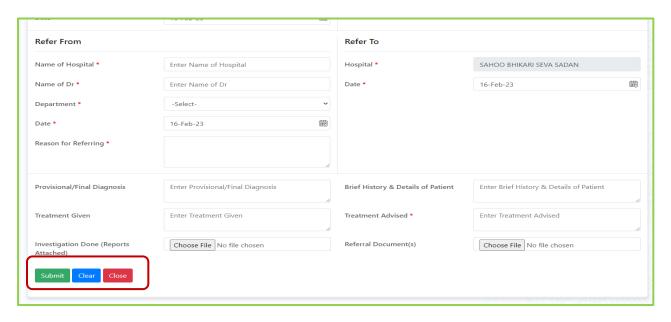


Figure 3-35 Pre-Auth Request Screen (2)

Table of Figures

Figure 2-1 Login Screen	4
Figure 3-1 Welcome Screen	4
Figure 3-2 Block Package Screen (1)	5
Figure 3-3 Block Package Screen (2)	6
Figure 3-4 Block Package Screen (3)	7
Figure 3-5 IRIS Verification Screen	8
Figure 3-6 IRIS Verification Screen (2)	9
Figure 3-7 POS Machine Screen (1)	10
Figure 3-8 POS Machine Screen (2)	11
Figure 3-9 POS Machine Screen (3)	12
Figure 3-10 POS Machine Screen (4)	13
Figure 3-11 POS Machine Screen (5)	14
Figure 3-12 OTP Verification Screen	15
Figure 3-13 OTP Verification Screen (2)	15
Figure 3-14 Override Request Screen	16
Figure 3-15 Add Block Package Screen (1)	16
Figure 3-16 Add Block Package Screen (3)	17
Figure 3-17 Add Block Package Screen (3)	18
Figure 3-18 Implant Screen (2)	18
Figure 3-19 HighEndDrugs Screen (2)	19
Figure 3-20 Emergency Screen	20
Figure 3-21 View Block Package Screen	21
Figure 3-22 Override Request Screen	22
Figure 3-23 Admission Details Screen	22
Figure 3-24 Add Unblock Package Screen	23
Figure 3-25 Unblock Screen	24
Figure 3-26 View Unblock Screen	25
Figure 3-27 Add Discharge Screen	26
Figure 3-26 Discharge Screen	27
Figure 3-27 Discharge Referral Screen	27
Figure 3-30 View Discharge Package Screen	28
Figure 3-28 Override View Screen	29
Figure 3-29 View Pre-Auth Screen	30

Figure 3-30 Pre-Auth Query Screen	30
Figure 3-31 Referral Screen (1)	31
Figure 3-32 Pre-Auth Request Screen (2)	31