**Information/documents needed from the hospital**

| **A** | **General** |
| --- | --- |
| 1 | Hospital address/Logo |
| 2 | Lab outsourced/owned |
| 3 | Pharmacy outsourced/owned |
| 4 | Current HIS used (if any) |
| 5 | Does the hospital need historical data to be migrated from current HIS (if any) |
| 6 | Details of any other software systems used |
| 7 | Any other external service providers |
| 8 | Name of the Single Point of Contact (SPOC) from the hospital |

| **B** | **Hospital organization** |
| --- | --- |
| 1 | List of departments |
| 2 | List of service providers with requisite details – doctors/nurses/others |
| 3 | List of workspaces needed |
| 4 | List of services with standard charges |
| 5 | List of wards with number of beds/types of beds |
| 6 | List of Operation Theatres |
| 7 | List of TPAs |
| 8 | Mapping of doctors to departments |
| 9 | Mapping of roles to MedSmart users |

| **C** | **Process flows** |
| --- | --- |
| 1 | Process flow – Out-patient - Registration to Discharge |
| 2 | Process flow – In-patient – Admission to Discharge |
| 3 | Process flow – Labs/Pharmacy (if owned) |
| 4 | Process flow – Insurance and claim management |
| 5 | Rules regarding revenue recognition for a department/physician |
| 6 | Rules regarding discount on services and its approval process |
| 7 | Rules regarding calculation of bed charges |
| 8 | Whether Patient-ID cards need to be printed |

| **D** | **Documents/templates/samples required from the hospital** |
| --- | --- |
| 1 | Out-patient/In-patient registration slip |
| 2 | Templates of case-sheets |
| 3 | Samples of OP/IP billing |
| 4 | Sample Patient-ID card |
| 5 | Templates for birth/death certificates |
| 6 | Sample of prescription sheet |
| 7 | Sample payment vouchers |
| 8 | Sample Lab investigation reports |