**Study to Understand the State level Claims Management System under PM-JAY**

**Context:** ACCESS Health International implements a program to support state of Uttar Pradesh and Kerala in implementation of PM-JAY.PM-JAY provides a fully subsidized comprehensive secondary and tertiary healthcare packages with an annual coverage of Rs. 5 lakhs per family on a floater basis. Over 10 crore families, or 49 crore individuals – identified as deprived in the Socio-Economic Caste Census (SECC) 2011 – are covered. The scheme is operational in 33 States and UTs and has a national portability feature which allows beneficiaries to avail benefits anywhere in India.

Transaction Management System has been developed that allows for capturing of in-patient data on admission, treatment, and discharge, and onwards to hospital claims and financial settlement. It has gone through 2 version of development. Several states have integrated their state health insurance schemes with PM-JAY and leveraging the national infrastructure for implementation. This is integrated through Application Program Interface (APIs).

Claims Management System in states which, implement the scheme in assurance mode, comprises of in-house team of Medical Auditors for technical and medical audits supported by the Third-Party Administrators (TPAs) and specialized agencies. The states use TMS set up by NHA and have adapted the claims adjudication guidelines per the context. Effective claims management is one of the most critical functions for the State Health Agencies – besides processing and payment it can also help in developing strategies to reduce cost.

ACCESS Health is undertaking a study towards strengthening Claims Management Systems and Processes. A two-state study to understand the state systems, operational barriers, and opportunities and solutions for improving efficiencies will be conducted. The three areas of study are

1. Study the existing state claims adjudication process to understand the gap and inefficiencies.
2. Study the existing state claim adjudication process against the national guidelines to understand compliance or adaptation per state needs.
3. Study the operational and system (TMS) related barriers across the claim processing workflow (preauthorization, claim submission, claims adjudication to payment) to identify the operational bottlenecks across the process.
4. Study national and international examples of introducing digital solutions in claims management to improve efficiency.

**Scope of Work**

1. Development of the study design areas of enquiry and tools for qualitative assessment.
2. Provide framework for organizing the study findings.
3. Desk review of the global good practices – processes and tools for electronic claims management systems
4. Write the final report based on the drafts shared by the staff.

**Deliverables**

1. Study design – areas of enquiry, tools, and structure to collect information.
2. Final Report

**Compensation**

A consulting fee of USD 1000 per day inclusive of taxes for total 30 working days will be paid to the consultant. The payment will be released only on the completion of deliverable and by providing the invoice.

**Term**

This engagement shall commence upon execution of this Agreement. The Agreement shall continue in full force and is effect from **March 20, 2022** to **August 31, 2022.**