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days from the date of discharge. Step 9: The Insurer scrutinizes the bills in light of the operational guidelines and mandatory investigations and pays claims as per the agreed package rates and grade of the Hospital. The Insurance Company shall settle the claims of the hospitals online within 15 working days of receipt of the complete claim document from the Network Hospital. Note 1: The claim settlement module along with electronic clearance and the payment gateway will be part of the workflow in the State Health Assurance Society (SHAS) portal and will be operated by the Insurer. Note 2: The reports will be available for scrutiny on the State Health Assurance Society (SHAS) login.

Documents Required

List of valid photo ID proofs to be accepted along with document of eligible criteria:

1. Aadhaar Card or Aadhaar Registration Slip with a photo of the beneficiary. An Aadhaar Card would be insisted upon as an identification document and in the absence of an Aadhaar card/number; any document that is accepted for issuance of an Aadhaar card will also be accepted.
2. Pan Card
3. Voter ID
4. Driving License
5. School/College Id
6. Passport
7. Freedom Fighter ID card
8. Health Card of RGJAY / MJPJAY
9. Handicap Certificate
10. Nationalized Bank Passbook with Photo
11. Senior citizen card issued by the Central Government or State Government
12. Defense ex-servicemen card issued by Sainik Board
13. Marine Fishery Identity card (Issued by Ministry of Agriculture / Fisheries Department Government of Maharashtra)
14. Any photo ID proof issued by the Government of Maharashtra/ Government of India

Frequently Asked Questions

What is the full form of MJPJAY? MJPJAY's full form is Mahatma Jyotiba Phule Jan Arogya Yojana. When was MJPJAY started? MJPJAY was launched in 28 districts of Maharashtra on April 1st, 2020. What is the objective of MJPJAY? MJPJAY aims to provide cashless, quality medical care to the beneficiaries under the scheme for catastrophic illnesses requiring hospitalization for surgery and treatment under identified specialized services through a network of health care providers. How much assistance is available under MJPJAY Yojana? MJPJAY Yojana 2024 provides coverage up to ₹1,50,000/- per policy year per family to meet all expenses related to hospitalization of the beneficiary. For renal transplants, this limit has been increased to ₹2,50,000/- per family per policy year. Who is eligible for receiving Maintenance Haemodialysis treatment under MJPJAY? A patient suffering from chronic kidney disease requiring maintenance HD and who has a health card is eligible. If the patient does not have a health card, he or she should have an orange or yellow ration card or an Antyodaya or Annapurna card along with valid ID proof. Which services are provided under package of Maintenance Haemodialysis under MJPJAY for the patient? The package includes pre- and post-treatment diagnostics, consultation, hospital charges, consumables, and medicines. The detailed package is as follows: >> Investigations Creatinine tests (Monthly) Complete blood count (CBC, Monthly) HIV/Hep.A/Hep.C tests (once every three months) Serum electrolytes (as per advise) Blood glucose, if required >> Consultation Clinical examination by Nephrologist/Medical Coordinator. >> Consumable -Dialyser (It will be used upto optimal capacity and replaced if needed free of charge under scheme), - Tubing (It will be used upto optimal capacity and replaced if needed free of charge under scheme), - Fistula Needle (It will be used upto optimal capacity and replaced if needed free of charge under scheme). - IV fluids, - Haemodialysis Part A/B and o Heparin. >> Medicines Inj. Erythropoetin, as per the advice of Nephrologist What should be frequency of dialysis cycles under MJPJAY for each approved preauth? The frequency of dialysis should be a minimum of 8 cycles and a maximum of 12 cycles, as recommended by the nephrologist or medical coordinator based on his or her serum creatinine level. Does patient have to pay any extra money for treatment? No. The patient should not pay any extra money to the hospital or center for services that are covered under the approved package. Will Balance Sum Insured used for dialysis patient limit other household members to avail services under MJPJAY? The maximum sum assured under MJPJAY is ₹1,50,000/- per family, on a family-floater basis. If the dialysis patient has utilized a particular amount from the sum assured, other family members can still avail services under MJPJAY till the total amount of ₹1,50,000/- gets exhausted. This amount of Sum Insured cannot get extended under any circumstances (except if patient requires a renal transplant, where BSI will be considered as ₹2,50,000/-) Can HIV or HCV positive cases avail Maintenance Haemodialysis service under MJPJAY? Yes. If a patient is a beneficiary of MJPJAY and is HIV or HCV positive, then he or she can still avail services under MJPJAY. Empanelled hospitals and stand-alone dialysis centers must have dedicated machines for HIV or HCV-positive patients. Under no circumstances shall these units be used for other patients. If patient requires blood transfusion, is cost of blood transfusion covered under package? No. Maintenance Haemodialysis package does not cover the cost of a blood transfusion. In case of a query or to register a complaint what should I do? In case of a query, you can contact Arogyamitra or call the toll-free number. Arogyamitra is available round the clock in the hospital or center and will facilitate and guide you if any problem arises. But if you are not satisfied, then call our toll-free numbers, 155388 or 18002332200, to register a complaint. Sources And References Official Website FAQs Ok Was this helpful? News and Updates No new news and updates available Share Something went wrong. Please try again later. Ok You need to sign in before applying for schemes Cancel Sign In Something went wrong. Please try again later. Ok It seems you have already initiated your application earlier. To know more please visit Cancel Apply Now Check Eligibility Maharashtra Mahatma Jyotirao Phule Jan Arogya Yojana Cashless Service Diseases Health Insurance Hospital Hospital Details Benefits Eligibility Application Process Documents Required Frequently Asked Questions Mahatma Jyotirao Pule Jan Arogya Yojana is the flagship health insurance scheme of the Government of Maharashtra. The scheme provides end-to-end cashless services for identified diseases through a network of service providers from the Government and Private sector. The scheme earlier was known as Rajiv Gandhi Jeevandayee Arogya Yojana which was started on 2nd July 2012 in eight districts and then was expanded to 28 districts of Maharashtra from 21st November 2013. OBJECTIVE: To provide cashless quality medical care to beneficiaries under the scheme for catastrophic illnesses requiring hospitalization for surgeries and therapies under identified specialty services through a network of health care providers. Note: The Integrated Mahatma Jyotirao Phule Jan Arogya Yojana (MJPJAY) and Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) were launched in the state on 1st April, 2020. United India Insurance Company Limited (a Public sector Undertaking Company) provides health insurance coverage to beneficiaries under the insurance mode and the State Health Assurance Society provides coverage in assurance mode. State Health Assurance Society is paying an insurance premium of ₹797/- per family per year to the Insurance Company in quarterly installments on behalf of eligible beneficiary families. Ok Was this helpful? Share News and Updates No new news and updates available ©2024 Powered by Digital India Corporation (DIC) Ministry of Electronics & IT (MeitY) Government of India Quick Links About Us Contact Us Screen Reader Accessibility Statement Frequently Asked Questions Disclaimer Terms & Conditions Useful Links Get in touch 4th Floor, NeGD, Electronics Niketan, 6 CGO Complex, Lodhi Road, New Delhi - 110003, India support-myscheme[at]digitalindia[dot]gov[dot]in (011) 24303714 Last Updated On : 28/03/2024 | v-2.1.1