

Government of Rajasthan  
Rajasthan State Health Assurance Agency, Rajasthan  
Department of Medical, Health & FW, Jaipur  
(Old RTDC Campus, Railway station, Jaipur)  
(Ayushman Bharat-Mahatma Gandhi Rajasthan Swasthya Bima Yojna)

**General directions to EHCP's to ensure claim processing as per guidelines & reduce undue rejection**

S.N.	Rejection Grounds	Solutions/suggestion to be followed by EHCP's
1	Patient not self-verified, case type normal	It is mandatory to do bio-metric identification of beneficiary. After the three attempts of bio-metric identification not performed then MOIC (Medical Officer In-Charge Route) to adopt by the Swasthya Margdarshak and Reason to be mentioned in the Annex-2. Bio-metric identification of child below 5 years is not mandatory, in this case TID can be generated through MOIC route but clearly reason to be mentioned in the Annex-2. <b>For better clarification see the video and user manual available on the scheme website.</b>
2	Pre & Discharge photo are same & uploaded	It is mandatory to take live patient photographs at the time of admission & discharge by the Swasthya Margdarshak. Do not upload the patient upload photo at the time admission until/unless any emergency issue and reason to be mentioned in Annex-4. Discharge time only captured photo is mandatory except Death cases and referral cases. <b>For better clarification see the video and user manual available on the scheme website.</b>
3	Hospital booked the package of sever-Anemia Routine ward but Hemoglobin 8.3	As per the classification for severe anemia hemoglobin should be less than 7 mg% if hospital is admitting under this package than Doctor should justify the diagnosis of sever-Anemia and treatment advised (other than

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		Blood transfusion).
4	Hospital is discharging the patient before completing the 24hrs in Routine wards	It is mandatory to stay 24hrs in routine ward, HDU, ICU without ventilator and ICU with ventilator for patients for per day claim.
5	Wrong fill up Feedback form (Annex-6) /not giving Feedback form (Annex-6) despite of query	It is mandatory to upload the feedback form of the patient during claim submission. It is advice to hospital check the feedback form before submission. Query of feedback form or justification should be replied on time.
6	Open cholecystectomy done but package booked for Renal colic- Routine ward	If any Routine ward package is taken then if surgery performed, it is mandatory to edit the TID for final performed packages in the software before discharge
7	Hemodialysis case admitted for eight days but patient absconded	It is advised to the hospital administration to look after such cases so that abscond cases cannot occur. Such type of cases should be discharge as LAMA/DAMA with consent of the patient & discharge live captured photo so that rejection should not occur.
8	Package booked for Whole Blood but Packed Cell (PCV) given.	In the AB-MGRSBY Whole Blood Transfusion and Packed Cell (component) both type of package available separately.
9	Hemodialysis is started before admission of the patient	It is mandatory after the pre-auth approval of the Hemodialysis package dialysis of patient can be started. Start & end time of dialysis should be after admission time /Pre-auth approval time.  If any emergency of dialysis is required, then Tid should be generated on emergency mode and justify the emergency on record during pre-auth and claim submission

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10.	In case of whole Blood packages BT sticker/Blood Compatibility report not providing by the hospitals, only Cross match slip provided	As per the MDP Blood Group, clinical notes with planned line of treatment, Detailed ICP's with transfusion notes, discharge summary, complete hemogram is mandatory to uploaded and as far as possible BT sticker can be provided during claim submission.
11.	Follow up package of implant removal rejected in grounds of this package is not admissible as per the RFP.	In all the follow up procedures, if primary procedures were not done under the ABMGRSBY/BSBY scheme then follow up packages cannot be allowed to book.