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PART - II

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GOVERNMENT OF PUDUCHERRY
CHIEF SECRETARIAT (HEALTH)

(G.O. Ms. No. 03, Puducherry, dated 13th January 2021)

NOTIFICATION

The Lieutenant-Governor is pleased to notify “AB-PMJAY-Convergence Scheme” for providing Health Care benefits to eligible AB-PMJAY Scheme Beneficiaries and non-AB-PMJAY Beneficiaries among all BPL (AAY & PHH) Ration Card Holders in the Union territory of Puducherry.

GUIDELINES

(1) The Scheme of providing medical assistance to poor, run by the Pondicherry Medical Relief Society (PMRS) stands merged with the Central Government run Scheme of AB-PMJAY from the date of issue of this Notification.

(2) The AB-PMJAY-Convergence Scheme shall be implemented by the State Health Agency on the same lines as AB-PMJAY Scheme in Trust Mode for the present. All the Staff under PMRS shall be brought under the control of State Health Agency on the existing terms and conditions under the AB-PMJAY-Convergence Scheme.

(3) All eligible AB-PMJAY Scheme Beneficiaries and non-AB-PMJAY Beneficiaries among all BPL (AAY & PHH) Ration Card Holders in the Union territory of Puducherry are covered under the Scheme. The Premium/Claim Payment for the AB-PMJAY Scheme Beneficiaries shall be borne by National Health Authority and Union Territory Government in the ratio 60:40. The Beneficiaries who are not covered under AB-PMJAY Scheme shall be funded by the Union Territory Government (Non-SECC BPL Families)

(4) The benefit coverage of this converged Scheme will be ₹ 5,00,000 per family per year covering all eligible AB-PMJAY Scheme Beneficiaries and non-AB-PMJAY Beneficiaries among all BPL (AAY & PHH) Ration Card Holders in the Union territory of Puducherry.

(5) No restriction on family size, ensuring all members of designated families get coverage.

(6) The Scheme is on entitlement basis, providing cashless, portability and paperless access to services for the Beneficiary at the point of service in any (both public and private) empanelled hospitals of AB-PMJAY.

(7) A well-defined Complaint and Public Grievance Redressal Mechanism actively utilizing electronic, mobile platform, internet as well as social media, will be put in place by the State Health Agency through which complaints/grievances will be registered, acknowledged, escalated for relevant action, resolved and monitored.

(8) Pre-Authorization is mandatory for all secondary and tertiary care packages.

(9) The Scheme coverage shall be as per HBP 2.0.

(10) Coverage will be made available throughout India through Third Party Administrator (TPA)/Implementing Support Agency (ISA)/ Insurance Company.

(11) The Guidelines issued by the Ministry of Health and Family Welfare and National Health Authority shall be applicable to this Scheme from time to time,

(12) Maintenance of Account:-

(i) The existing Escrow Account for Grant-in-Aid and Admin Account of State Health Agency for AB-PMJAY only shall be utilized for the Operation of the “AB-PMJAY-Convergence Scheme”.

(ii) Funds shall be disbursed to the health care provider/treating hospital by DBT after it is duly sanctioned and authorized both by Director of Health and Family Welfare Services, Puducherry and Senior Accounts Officer/Junior Accounts Officer, Directorate of Health and Family Welfare Services.

(iii) No cash payment to the individuals shall be made as per the CVC Guidelines.

(iv) Cash Book shall be maintained as per the Double Entry System and simultaneously entered electronically also and be closed daily and monthly for auditing. A monthly account showing the allotment and expenditure incurred shall be prepared, and submitted to the Director for scrutiny. Annual accounts shall be drawn and audited by a Chartered Accountant and furnish an Utilization Certificate to the Government.

(13) Annual Budget should be prepared by State Health Agency to seek required funds for payment of remuneration to the employees and for making payment to the empanelled hospitals.

(By order of the Lieutenant-Governor)

A. PUNITHAMARY,

Under Secretary to Government (Health).