

**Magma HDI General Insurance
Company Limited**

**Empanelment
Policy of Cashless
Network Hospitals**

Effective Date: 1 Aug 2022

Approval Date: **30/04/2024**

Version No.: 2.0

Approved By: **Board of Directors**

Policy Owner: Mr. Amit Bhandari

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| Subject: Empanelment Policy of Network Providers | Original Issue Date: 1 Aug 2022 | Effective Date: 01-Apr-2024 |
| Policy on | Revision Dates: 30-Apr-2024 | Version No: 2.0 |

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| Base Document | : | IRDAI Circular 'Standard and Benchmarks for Hospitals in the Provider Network' vide Circular no: IRDAI/HLT/CIR/MISC/150/7/2022, dated 20th July 2022 IRDAI Circular: 'Guidelines on providing AYUSH coverage in Health Insurance policies' vide circular no: IRDAI/HLT/CIR/GDL/31/01/2024, dated 31st Jan 2024 |
| Initial Document Prepared by | : | Vikram Singh |
| Functional aspects Checked by | : | Dr Sunil Gala/Nirmal Gupta |
| Governing Guideline/Policy | : | NA |
| Legal aspects checked by | : | Compliance team |
| Policy owner | : | Amit Bhandari |

INDEX

| | |
|------------------|----------|
| Objective | 3 |
|------------------|----------|

| | | |
|--|---------------------------------|-----------------------------|
| Subject: Empanelment Policy of Network Providers | Original Issue Date: 1 Aug 2022 | Effective Date: 01-Apr-2024 |
| Policy on | Revision Dates: 30-Apr-2024 | Version No: 2.0 |

| | |
|---|----------|
| Regulations Governing the Policy | 3 |
| Empanelment Philosophy | 3 |
| Current Network Status | 3 |
| Empanelment Process | 4 |
| Empanelment Criteria | 4 |
| Change Control Record | 6 |

Objective:

The main objective of empanelment policy of cashless network hospitals (herein after referred to as “the Policy”) of Magma HDI General Insurance Co. Ltd. (herein after referred to as “Magma HDI or Company”) is to comply with IRDAI circular on ‘Standards and Benchmarks for the Hospitals in the Provider Network’ dated 20th July 2022(hereinafter referred as “the Circular”).

This circular specifies as below:

“with an objective to enhance the scope of cashless facility across the nation, Insurers are now empowered to empanel the network providers that meet the standards and benchmarks criteria as specified by their respective Boards.”

The Circular further stipulates the following conditions for the Insurers:

- While specifying the criteria, board shall, amongst others, consider especially the minimum manpower and healthcare infrastructure facilities
- While empaneling network providers for cashless facility, insurers are also advised to focus on the delivery of quality healthcare services.

Regulations Governing the Policy:

IRDAI Circular ‘Standard and Benchmarks for Hospitals in the Provider Network’ vide Circular no: IRDAI/HLT/CIR/MISC/150/7/2022, dated 20th July 2022

Empanelment Philosophy

Magma HDI offers Health Insurance products to various segments viz. retail, corporate and mass population. Therefore, the Company regularly empanels number of network Hospitals across India to provide cashless facility to Magma HDI policyholders.

For the empanelment of Hospitals on network, focus shall remain on:

- Wide geographical distribution
- Quality infrastructure
- Cost effectiveness

Current Network Status

Magma HDI has a network base of 8608 empaneled hospitals as on Feb 2024. Hospitals are either empaneled via a bipartite agreement (direct) or a tripartite agreement (through various partner TPA).

Network list comprises of Hospitals under primary care, secondary care, and tertiary care categories spread across India.

Empanelment Process

Hospitals are empanelled through a bipartite or a bipartite agreement. While tripartite empanelment is executed through TPA, Bipartite empanelment is executed directly by Magma HDI. Decision to empanel a certain hospital/Group is taken basis the following:

| | | |
|--|---------------------------------|-----------------------------|
| Subject: Empanelment Policy of Network Providers | Original Issue Date: 1 Aug 2022 | Effective Date: 01-Apr-2024 |
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- Request for empanelment of a particular Hospital, from distribution team
- Request for empanelment of hospitals in a certain geography, from distribution team
- Empanelment request from a certain Provider/Hospital Group
- Suo-moto empanelment decision by Zonal head – Provider Management Team (PMT), basis the following:
 - To empanel a critical provider/ hospital chain
 - To expand the network in certain geographies
 - Basis competition benchmarking

On account of high reimbursement cases/pay-out

Empanelment Criteria

Empanelment criteria is specified under following two broad categories:

- Healthcare Infrastructure facilities
- Minimum Manpower requirements

Separate empanelment criteria has been put in place for AYUSH hospitals and AYUSH day care centers

Empanelment criteria for Hospitals:

| Category | Minimum Criteria for Empanelment | Mandatory requirement |
|------------------------------------|--|------------------------------|
| Healthcare Infra facilities | Minimum Beds: 15 beds in Urban, and 10 beds in Rural areas | Yes |
| | Has a fully equipped operation theatre of its own where surgical procedures are carried out | Yes |
| | Registration Certificate from local authorities (active status) | Yes |
| | Bio-Medical Waste Management certificate (active contract) | Yes |
| | Registration under PC PNDT for USG | Yes |
| | Maintains daily records of patients and makes these accessible to the insurance company's authorized personnel | Yes |
| | Safe and hygiene environment | Yes |
| | ROHINI registration | Preferred |
| HFR id (Health Facility Registry) | Preferred | |
| Minimum Manpower | Has qualified medical practitioner(s) in charge round the clock | Yes |
| | Has qualified nursing staff under its employment round the clock | Yes |
| | Availability of Housekeeping staff round the clock | Preferred |

Empanelment criteria for AYUSH Centres/Hospitals:

AYUSH treatment refers to the medical and/or hospitalization treatments given under ayurveda, yoga and naturopathy, unani, siddha and homeopathy systems.

An **AYUSH hospital** is a healthcare facility wherein medical/surgical/para-surgical treatment procedures and interventions are carried out by AYUSH medical practitioner(s) comprising of any of the following:

1. Central or state government AYUSH Hospital; or
2. Teaching hospital attached to AYUSH college recognized by the Central government/central council of Indian medicine/central council for homeopathy; or

| | | |
|--|---------------------------------|-----------------------------|
| Subject: Empanelment Policy of Network Providers | Original Issue Date: 1 Aug 2022 | Effective Date: 01-Apr-2024 |
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3. AYUSH hospital, standalone or co-located with in-patient healthcare facility of any recognized system of medicine, registered with the local authorities, wherever applicable, and is under the supervision of a qualified registered AYUSH medical practitioner and must comply with all the following criterion:
 - a) Having at least 5 in-patient beds
 - b) Having qualified AYUSH medical practitioner in charge round the clock;
 - c) Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out;
 - d) Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative
 - e) Additionally, AYUSH day care centers to have:
 - i. Active Bio-Medical Waste Management contract (mandatory)
 - ii. Be preferably ROHINI registered (non-mandatory) and have HFR id/Health facility registry (non-mandatory)
4. Considering the quality of Infrastructure, maintenance of Hygiene factors, customer wellbeing and quality of care imparted, empanelment of AYUSH hospitals to be done preferably with either pre-entry level certificate (or higher level of certificate) issued by National Accreditation Board for Hospitals & Healthcare Providers (NABH) or State Level Certificate (or higher level of certificate) under National Quality Assurance Standards (NQAS), issued by National Health Systems Resources Centre (NHSRC).

AYUSH day care centre means and includes community health centre (CHC), primary health centre (PHC), dispensary, clinic, polyclinic or any such health centre which is registered with the local authorities, wherever applicable and having facilities for carrying out treatment procedures and medical or surgical/para-surgical interventions or both under the supervision of registered AYUSH medical practitioner (s) on day care basis without in-patient services and must comply with all the following criterion:

1. Having qualified registered AYUSH medical practitioner(s) in-charge
2. Having dedicated AYUSH therapy sections as required and/or has equipped operation theatre where surgical procedures are to be carried out
3. Maintaining daily records of the patients and making them accessible to the insurance company's authorized representative
4. Additionally, AYUSH day care centers to have:
 - a) Active Bio-Medical Waste Management contract (mandatory)
 - b) Be preferably ROHINI registered (non-mandatory) and have HFR id/Health facility registry (non-mandatory)

Medical Practitioner (not applicable for Overseas Travel Insurance) : Medical Practitioner means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license. (Insurance companies may specify additional or restrictive criteria to the above e.g. that the registered practitioner should not be the insured or close member of the family. Insurance Companies may also specify definition suitable to overseas jurisdictions where Indian policyholders are getting treatment outside India as per the terms and conditions of a health insurance policy issued in India).

Network Provider (not applicable for Overseas Travel Insurance) : Network Provider means hospitals or health care providers enlisted by an insurer, TPA or jointly by an Insurer and TPA to provide medical services to an insured by a cashless facility.

| | | |
|--|---------------------------------|-----------------------------|
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Change Control Record

| Version No | Change Requested by | Memorandum of Change | Approval Date |
|------------|---------------------|---|---------------|
| 2.0 | Vikram Singh | <p>Addition of separate empanelment criteria for AYUSH Hospitals/AYUSH Day care centers.</p> <p>Addition of definition of Medical Practitioner and Network Provider</p> <p><i>Source - Master Circular on Standardization of Health Insurance Products dated 22/07/2020</i></p> | 30/04/2024 |