

ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI-29

File No: -1-36/99-2000/ Bud-Vol. VIII

Dated 14.03.2012

CIRCULAR

Subject: Revised procedure for collection of test charges for specialized tests from Private Ward patients -regarding.

Reference is invited to the Finance Division's Circular No. 1-36/99-2000/ Bud-Vol. VIII dated 07.01.2012 regarding revised procedure for collection of test/ investigation charges for specialized tests from Private Ward patients. It has been observed that the said circular does not cover the procedure to be followed for the patients admitted in main private ward and tests carried out in the centre(s) and similarly the patients admitted in the private ward of the centre(s) and the tests carried out by the various Deptts. operating Revolving Fund/ Labs of the main Institute/ various centres. In these cases the patients are also asked to deposit test charges in advance.

In order to facilitate hassle free treatment of above mentioned private ward patients at AIIMS, fresh guidelines are issued herewith for all concerned:

1. All Centres/ Departments shall carry out the specialized tests/ procedures including surgeries etc. advised to private ward patients of main Institute/ Centre(s) on the basis of test slips issued by the treating doctor/ nursing staff which at present is being issued to the patient for depositing the payment. Proof of payment would not be insisted upon. The charge for that particular test/ procedure will be billed to the account of the patient while settling the weekly/ final bills.
2. All Laboratories of Centres/ Departments and various Laboratories operating Revolving Fund shall maintain separate record of all such investigations/ tests carried out on private ward patients of Centre(s) and main Hospital. The officers incharge laboratorie(s) shall responsible to maintain separate record in their laboratories. The Centre(s) and Departments shall send a monthly statement showing full details of the specialized investigations/ tests carried out during the month on the private ward patients indicating their charges to their Billing/ Account Section and Budget Section respectively by 10th of the following month **(In Annexure-C enclosed)**.
3. The Sister-Incharge on duty in private wards while sending the weekly/ final Charge slips to Hospital Billing Section/ Centre's Billing Section shall inter alia mention the name of the Centre/ Department/ Revolving Fund and the specialized investigations/ tests carried out during the period of hospitalization of the patient separately which would be charged/ billed to the patient in the weekly/ final bills **(Annexure-A as amended)**.

4. On the basis of the weekly/ final charge slips issued by Sister incharge on duty in private wards, the Hospital Billing Section/ Centre's Billing Section shall issue/ finalize bill as per revised format (**Annexure-B as amended**) and also prepare separate accounts of the investigations/ tests carried out by Departments operating Revolving Fund and Centres on private ward patients. Further, Hospital Billing Section/ Centre's Billing/ Accounts Section (as the case may be) shall also send a monthly statement showing full details of the specialized investigations/ tests carried out during the month on private ward patients including their charges to Budget Section/ Centre's Accounts Section by 10th of the following month.
5. On the basis of the monthly statements received from various Departments operating Revolving Fund and Hospital Billing Section/ Centre's Billing Section, the Budget Section/ Centre's Account Section shall transfer the worked out amount from hospital receipts to the concerned Revolving Fund Accounts/ Centre's account every month by making necessary book adjustments or transfer under relevant head of Revolving Fund/ Accounts of respective centres (as the case may be).
6. In case one Centre i.e. Centre-'A' carries out the specialized tests/ investigations on private ward patients of other Centre i.e. Centre 'B'/ Main (hospital) based on the tests slips issued by the treating doctor/ nursing staff, the Accounts/ Billing Section of the Centre 'B' shall charge the rates of investigations/ tests as per rates applicable and finalize the bill of the patient. Thereafter, the Billing Section of the Centre-A shall raise the claim against Centre-B along with full detail of patients as per Annexure-C on monthly basis positively by 10th of the following month and recoup the charges. Accordingly, Accounts Officer of the Centre-'B' shall transfer the requisite charges to the Centre-'A' by end of the month and vice versa.

The above said procedure shall be applicable to all private ward patients of main Institute and private ward patients of Centres with immediate effect.

This issue with the approval of the competent authority.

Encl: As above.

Distribution:

1. Chiefs of all the Centres
 2. Medical Superintendent
 3. Head of the Departments
 4. Chief Nursing Officer/ Sister Incharge of private wards
 5. All Accounts Officers
 6. All Accounts Sections/ Branch Offices
- Copy to: PS to Director/ DDA/ M.S/ Sr. FA/ FA. for information

Basanti
(BASANTI DALAL)
Financial Advisor

Charge Slip

ALL INDIA INSTITUTE OF MEDICAL SCIENCES NEW DELHI-110029

Patient	Mr./Mrs./Miss	C.R. No.	<input type="text"/>
	Son/ Wife/ Daughter of	Income p.m.	<input type="text"/>
Room	<input type="text"/>		
D.O.A.	<input type="text"/>		
Address	<input type="text"/>		

Weekly/ FINAL BILL		From	to
Bill No.	Date	Rs.	
Diet Indian	From	to	
European	From	to	
Medical care	Radiotherapy		
Operation	X-ray		
Delivery			
EXTRA DIET	I.V. Infusion	Date	Nos.
Indian	From	to	
European	From	to	

COMMON/ ROUTINE/ INVESTIAGATION	MEDIENES/ INJECTIONS
NAME OF CENTRE/DEPARTMENTS/ REVOLVING FUND(S) CARRIED OUT THE TEST(S)	TEST(S) CARRIED OUT
<ol style="list-style-type: none"> 1. Urology, 2. N.M.R., 3. Nuclear Medicine, 4. Pathology, 5. Transplant Immunology & Immunogenetics, 6. Reproductive Biology (Central RIA), 7. Medicine (Clinical Immunology Section), 8. Endocrinology & Metabolism, 9. Haematology, 10. Paediatrics (paed. Genetics), 11. Microbiology, 12. Lab. Medicine (Clinical Microbiology), 13. Radiology; 14. C.T. Centre, 15. N.S. Centre, 16. Dr. BRAIRCH, 17. JPNA Trauma Centre, 18. CDER, 19. Dr. R.P. Centre; and 20. Others 	

Signature of Ward Sister/ Ward Master

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI-110029,
(HOSPITAL BILLING SECTION)**

Bill No. _____

Date:-

Type of Room Provided: A/B CLASS

ROOM NO.:

Weekly/Final Bill

ADMISSION CHARGES

1. "A" CLASS (DELUXE)

Room Rent @ Rs. per day for days.
from..... to.....

2. "B" CLASS

Room Rent @ Rs. per day for days.
from to.....

3. Private diet @ Rs. per day for days.
from..... to.....

4 Extra diet @ Rs. per day for days.
from..... to.....

OTHER CHARGES FOR:

(a) Operation Major/ Minor/ Delivery Charges

(b) I.C.U/ C.C.U for @ Rs. per day for days.
from..... to.....

(c) X-ray/ C.T. / U.S. / E.C.G.

(d) Laboratory Tests

(e) I.V. Infusion

(f) Blood Bank's of Lab. Processing Charges

(g) Medicines

(h) Haemodialysis

(i) Revolving Fund Test(s)

(j) Centres/Depts. Test(s)

TOTAL

(Less) Advance: R. No. Date..... Net Amount

Refundable/ Recoverable Rupees.....thousand..... and

.....only

For Medical Supdt.

Refund to.....

Not: (i) Omission, if any is liable to be recovered from the patient.
(ii) Payments of Bills are desired through DD.

Annexure-'C'

Statement showing the details of test/ investigations carried out on the patients admitted in private ward in main hospital/ o

S.No	Name of patient	Registration No	Room No./ Category (A/B)	Name of centre in which patient admitted	Name of test/ investigations	Date of carry out Test