

**INSURANCE REGULATORY AND DEVELOPMENT AUTHORITY OF INDIA**  
**NOTIFICATION**  
**Hyderabad, the 12th July, 2016**  
**Insurance Regulatory and Development Authority of India**  
**(Health Insurance) Regulations, 2016**

"All such providers offering cashless services for allopathic treatment shall meet with the pre-accreditation entry level standards laid down by National Accreditation Board for Hospitals (NABH) or such other standards or requirements as may be specified by the Authority from time to time within a period of two years from the date of notification of these Guidelines. (Explanatory Note: Network Providers are to visit NABH website for details regarding procedure for obtaining the necessary accreditation)"

*Ref notification:* IRDA/HLT/REG/CIR/146/07/2016 dated 29.07.2016

**Modified Guidelines on Standards and Benchmarks for hospitals in the provider network**

On examining the extent of compliance to the standards and benchmarks specified, in supercession of Clause (a) and Clause (b) of Chapter IV of Guidelines on Standardization in Health Insurance issued vide Circular Ref: IRDA/HLT/REG/CIR/146/07/2016 dated 29<sup>th</sup> July, 2016, the following modified Clause (a) and Clause (b) are issued.

- a) All the existing Network Providers shall, within twelve months from the date of notification of these modified guidelines, comply with the following:
- i. Register with Registry of Hospitals in the Network of Insurers (ROHINI) maintained by Insurance Information Bureau (IIB). [<https://rohini.iib.gov.in/>].
  - ii. Obtain either Pre-entry level Certificate (or higher level of certificate) issued by National Accreditation Board for Hospitals and 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).

*For the new entrants* from the date of notification of these modified Guidelines, only those hospitals that are compliant with the requirements specified at Clause (a) (i) above shall be enlisted as network providers. These network providers shall comply with the requirements stipulated at Clause (a) (ii) above within one year from the date of enlisting as a Network Provider and this shall be one of the conditions of Health Services Agreement.

- b) Insurers and TPAs may also endeavour to get hospitals (other than Network Providers) involved in reimbursement claims to meet the requirements stipulated at Clause (a) (i) and (a) (ii) above.

This is issued in terms of Regulation (31) (e) of IRDAI (Health Insurance) Regulations, 2016.

These modified guidelines are applicable with immediate effect.

**General Manager (Health)**