



AHPI

Tamil Nadu Chapter



Dr. Sathish Devadoss

Devadoss Hospital Pvt Ltd

President AHPI-TN



Mr. Rambabu

Sabarmathi Health Retreat

Secretary AHPI-TN



Mrs. Gayathri Sandeep

Seethapathy Clinic & Hospital

Treasurer AHPI-TN

From the President's Desk:



The Challenges of Healthcare Insurance for Hospitals: A Perspective from AHPI-TN

As the President of the Association of Healthcare Providers of Tamil Nadu (AHPI-TN), I feel compelled to address the growing concerns related to healthcare insurance that are impacting our hospitals and, ultimately, the quality of care we provide to our patients. The intersection of healthcare delivery and insurance has always been complex, but recent developments have exacerbated existing issues, creating a challenging landscape for both providers and patients.

1. *Rising Costs of Healthcare Delivery*

One of the most pressing issues faced by hospitals is the rising cost of healthcare delivery. This includes not only the costs of medical supplies and pharmaceuticals but also the overhead associated with maintaining high-quality facilities and employing skilled healthcare professionals. As these costs continue to climb, hospitals find themselves squeezed between the need to provide comprehensive care and the limitations imposed by insurance reimbursements.

2. *Inadequate Reimbursement Rates*

Insurance companies often set reimbursement rates that do not align with the actual costs incurred by hospitals. Many facilities are facing significant financial strain due to low reimbursement rates from government programs like Medicare and Medicaid, as well as private insurers. This disparity forces hospitals to absorb losses, which can lead to reduced services, staff shortages, and even hospital closures in extreme cases.

3. *Complexity of Insurance Claims*

The process of filing insurance claims is notoriously complex and time-consuming. Hospitals must navigate a labyrinth of regulations and requirements that vary by insurer, which can lead to delays in reimbursements and increased administrative costs. This complexity can also result in errors that further prolong the payment process, exacerbating cash flow issues for hospitals.

4. *Insurance Denials and Appeals*

Insurance denials have become increasingly common, leaving hospitals to deal with the consequences. When a claim is denied, it not only impacts the hospital's revenue but also affects the patient's access to necessary care. The appeals process is often lengthy and resource-intensive, draining valuable time and energy that could be better spent on patient care.

5. *The Impact of High-Deductible Plans*

High-deductible health plans are designed to lower premiums but often lead to higher out-of-pocket costs for patients. This shift places additional pressure on hospitals, as patients may delay or forgo necessary treatments due to cost concerns. The resulting decrease in patient volume can threaten the financial viability of many facilities, especially smaller hospitals serving rural communities.

6. *Regulatory Challenges*

The healthcare landscape is also shaped by a myriad of regulations that can further complicate the relationship between hospitals and insurance providers. Compliance with these regulations requires significant resources and expertise, and non-compliance can lead to severe penalties. This regulatory burden can detract from the primary mission of healthcare providers: delivering quality patient care.

7. *The Path Forward*

To address these challenges, collaboration between hospitals, insurers, and policymakers is essential. We must advocate for fair reimbursement rates that reflect the true costs of healthcare delivery. Simplifying the claims process and reducing administrative burdens will also help healthcare providers focus on patient care rather than bureaucratic hurdles. Moreover, a shift towards value-based care models can incentivize better health outcomes while controlling costs. By prioritizing quality over quantity, we can create a more sustainable healthcare system that benefits all stakeholders.

Conclusion:

As we navigate the complexities of healthcare insurance, it is imperative that we work together to find solutions that ensure hospitals can continue to provide high-quality care without compromising their financial stability. At AHPI-TN, we remain committed to advocating for the needs of our hospitals and the patients they serve, striving for a healthcare system that is equitable, efficient, and, above all, compassionate. Together, we can overcome these challenges and build a healthier future for all.

Warm regards,

Dr Sathish Devadoss MS ortho, MCh Orth(UK), FASIF (AUSTRALIA)

President, AHPI Tamil Nadu

Key Indian Laws that every Hospital should know

In India, healthcare providers operate in a rapidly evolving legal landscape. Medical legal issues are increasingly relevant as the healthcare industry grows and patient rights become more prominent. On the other hand, Indian hospitals often face challenges related to patient and staff safety, particularly in tense or high-stakes situations that can escalate into violence or vandalism. Several sections of the Indian Penal Code (IPC) provide legal protection for healthcare providers, safeguarding them against threats, assault, and damage to property. Here's an overview of these sections and their benefits for hospitals:

1.IPC Section 504: Intentional Insult with Intent to Provoke Breach of the Peace Section 504 addresses situations where someone intentionally insults another person with the intent to provoke a breach of the peace or to compel them to act against their will. This offense is punishable by imprisonment for up to two years, a fine, or both.

Benefit for Hospitals: Hospitals can invoke Section 504 to deter patients or visitors from insulting or provoking healthcare staff, which can often escalate into confrontational situations. By penalizing disrespectful behaviour, this section helps maintain a respectful environment conducive to healthcare delivery.

2.IPC Section 506: Criminal Intimidation Section 506 deals with criminal intimidation, where threats are made to injure a person, their property, or their reputation. The punishment varies depending on the severity of the threat, with aggravated threats punishable by up to seven years in prison, a fine or both.

Benefit for Hospitals: This section provides hospitals with legal grounds to address threats directed at doctors, nurses, or other staff. Criminal intimidation laws protect staff from harassment, allowing them to focus on patient care without fear of coercion or retaliation.

3.IPC Section 332: Voluntarily Causing Hurt to Deter a Public Servant from Duty Section 332 penalizes those who voluntarily cause harm to a public servant to prevent them from performing their lawful duties, with imprisonment of up to three years, a fine, or both.

Benefit for Hospitals: Healthcare professionals, especially in public hospitals, are considered public servants under the law. This section safeguards doctors, nurses, and other staff from physical harm by penalizing those who attack them while they are performing their duties. It serves as a strong deterrent, helping create a safer working environment for hospital staff.

4.IPC Section 333: Voluntarily Causing Grievous Hurt to Deter a Public Servant from Duty Section 333 is similar to Section 332 but addresses cases of grievous hurt, which includes severe injuries that can permanently harm or disable a public servant. The penalty is harsher, with imprisonment of up to ten years and a fine.

Benefit for Hospitals: Section 333 provides greater protection to healthcare workers by imposing severe penalties on individuals who cause serious harm to hospital staff while they are on duty. This law is critical in deterring violent acts that endanger the lives and safety of healthcare workers.

5.IPC Section 427: Mischief Causing Damage to Property Section 427 deals with "mischief," or intentional acts that cause damage to property valued at Rs. 50 or more. This is a non-cognizable offense, which means it is bailable. However, the punishment includes imprisonment of up to two years, a fine, or both.

Benefit for Hospitals: Hospitals often face incidents of vandalism, especially in high-stress areas like emergency departments. Section 427 allows hospitals to take legal action against individuals who damage hospital property, helping to protect costly medical equipment and maintain a functional, safe environment for patient care.

6.IPC Section 141: Unlawful Assembly Section 141 defines an "unlawful assembly" as a group of five or more people with the intent to commit an offense, resist law enforcement, or provoke others into acting illegally. This is crucial in maintaining order and can lead to penalties if a group acts disruptively.

Benefit for Hospitals: Hospitals can use Section 141 when large groups gather to protest, disrupt hospital services, or create disorder. By identifying such gatherings as unlawful, hospitals can request intervention from the police to disperse crowds, ensuring the hospital environment remains safe and focused on patient care.

7.IPC Section 143: Punishment for Being a Member of an Unlawful Assembly Section 143 penalizes individuals for being part of an unlawful assembly, with imprisonment of up to six months, a fine, or both.

Benefit for Hospitals: Section 143 complements Section 141 by holding each member of an unlawful assembly accountable. This discourages individuals from participating in disruptive gatherings on hospital premises, promoting a peaceful, professional atmosphere where healthcare providers can work without interference.

How Hospitals Can Leverage These IPC Sections

Hospitals can use these IPC sections to safeguard their premises, staff, and property. Here's how:

- 1.Employee Training: Training staff on these legal protections can empower them to respond appropriately to threats or aggressive behaviour and ensure incidents are properly documented for legal purposes.
- 2.Clear Communication: Display notices that inform patients and visitors about the legal repercussions of threatening or damaging behaviour under these IPC sections. This can deter disruptive actions.
- 3.Collaboration with Law Enforcement: Building a strong relationship with local police can help hospitals respond quickly in cases of violence, intimidation, or property damage.
- 4.Encouraging Reporting of Incidents: Hospitals should encourage staff to report any incidents of intimidation, assault, or property damage, no matter how minor, to build a case for potential legal action if needed.

Draft Bill

The Healthcare Service Personnel and Clinical Establishments (Prohibition of Violence and Damage to Property) Bill, 2019, criminalises both the commission and the incitement to commission of violence against healthcare professionals as well as damage to the property of clinical establishments. This addresses violence against healthcare professionals at the national level. If found guilty, a punishment of imprisonment for a minimum term of six months extending upto five years and a minimum fine of fifty thousand extending upto five lacs rupees was prescribed. For violence leading to grievous hurt, a punishment of imprisonment for a minimum term of three years extending upto ten years and a minimum fine of two lacs which may extend upto ten lacs rupees was prescribed. Further, the draft bill made the offence cognizable and non-bailable. However, it never saw the light of the day as the Bill was stalled for various reasons.

AHPI-Tamil Nadu has moved the Hon'ble Supreme Court for the implementation of this draft bill on the Violence against Doctors and is striving to protect the safety of healthcare professionals and healthcare property.

Conclusion

Knowing the relevant Indian Penal Codes will provide several important protections for hospitals from threats, assault, vandalism, and disruptive assemblies. For hospitals, effectively utilizing these laws enhances safety, ensures uninterrupted patient care, and fosters a respectful workplace, all of which are essential for effective healthcare delivery. AHPI-Tamil Nadu has always kept the safety and interest of our member hospitals at its core and shall continue to work in this path.

Regards,

Mr. Adel J - Founder & Managing Director
Alfa Care Hospitals

Nursing Skill Development Program - 06

On October 26, 2024, the comprehensive Nursing Skill Development Program (NSDP-06) was successfully held at SIMS Hospital in Chennai. This program was organized collaboratively by the Tamil Nadu Chapter of the Association of Nurse Executives (India) [ANEL], the Association of Healthcare Providers (India) [AHPI], and Kanchi Kamakoti Child's Trust. Participants engaged in interactive workshops and discussions to enhance their proficiency in critical nursing procedures, including injection techniques, IV cannulation, NG tube insertion, urinary catheterization, ECG interpretation, and wound care management. This program provided a valuable platform for nurses to refine their skills, ultimately ensuring patient safety and well-being.



CONTACT

📍 Address for Correspondence
President - AHPI TN Chapter, Devadoss Hospital
75/1, Alagarkovil Road, Surveyor Colony,
Madurai 625 007. Tamilnadu

Mrs. Lavanya
Secretarial Executive AHPI TN
☎ **98401 99979**
✉ secretarialexecutiveaphi@gmail.com