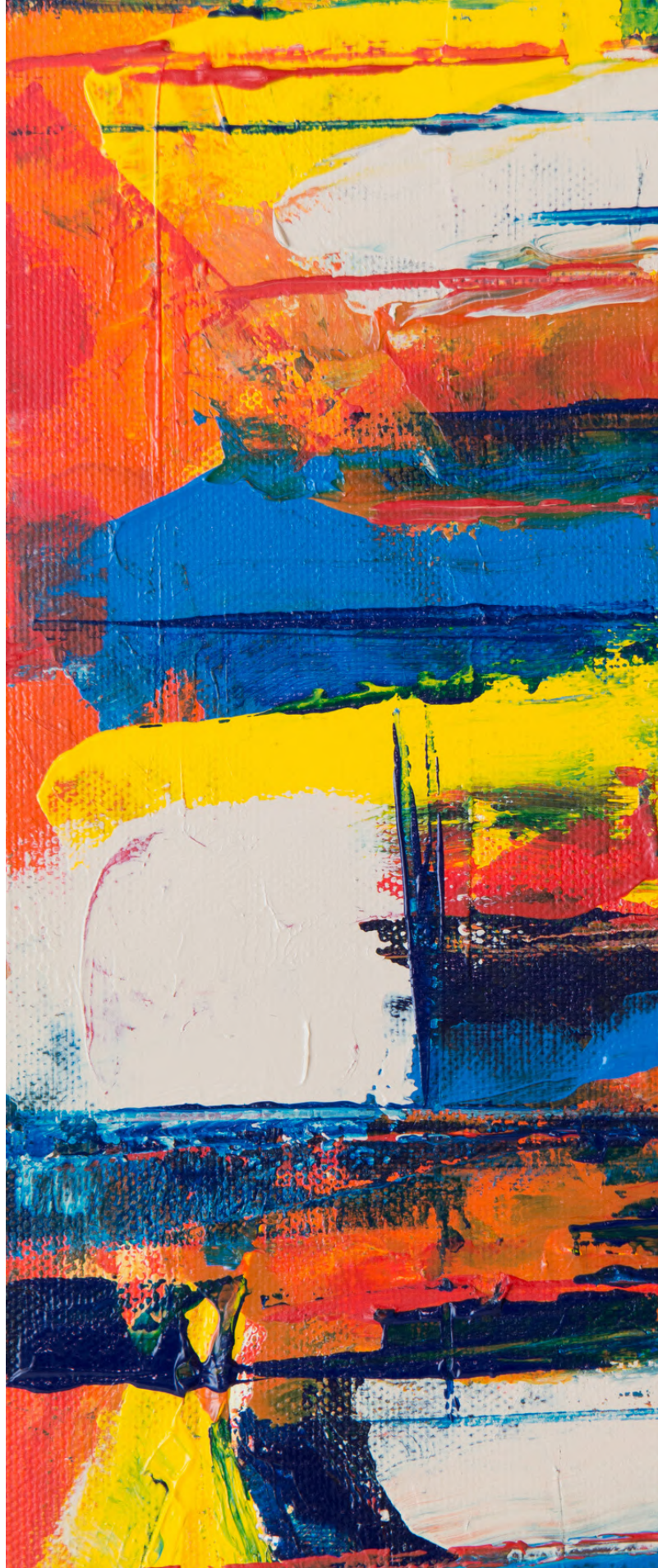


2022  
MAY  
**NEWS  
LETTER**

Shaping India's health system by owning and contributing to strategic healthcare agenda



# What's inside the...

## NEWS

# LETTER

## Impact in the last 30 days

**Collaboration with Gol:** NATHEALTH Leadership team met the Union Health Secretary, Gol to discuss collaborative next steps for the year ahead, on GST, CGHS, MVT & CSR.

**Infrastructure, Education & Delivery:** NATHEALTH, along with partners ADL, Bain & Company and PwC, met Dr. Vinod Paul, NITI Aayog to chart strategic pathways for boosting India's health infra, education & health delivery.

**Start-ups & Infra:** A meeting with Dr. Vipul Aggarwal, NHA on Investible Periurban Models for New Health Infra Creation - Challenges and Solution Framework, Startup Industry Interface & more.

**Supporting Gol initiatives:** NATHEALTH was a part of Stakeholder Consultation about Trade Margin Rationalization (TMR) on Non-scheduled Medical Devices, held by DOP & NPPA.

**Data & Evidence Driven partnerships with Gol:** NATHEALTH's Leadership team met Ms. S Aparna, DoP to discuss Infrastructure Expansion, Digital Health, Healthcare Innovation, Globalizing India's healthcare, Aarogya Bharat, CSR & more.

**MedTech sector support initiative:** The DOP meeting also discussed GST Rationalization: Amendment to be carried out in the Legal Metrology (Packaged Commodities) Rules, 2017 (Medical Devices).

**Joint representation for import:** A Joint Representation letter was sent to each - DOP, NITI Aayog, & MEITY to enable import, manufacturing & supply of monitors for medical devices.

**Representation on public health initiative:** NATHEALTH shared a joint representation letter with Mr. Lav Aggarwal, MOHFW, on Antimicrobial Resistance (AMR).

**Stakeholder in Gol decisions:** At NHA's request, NATHEALTH shared its inputs on draft of the revised Health Data Management (HDM) Policy for the Ayushman Bharat Digital Mission (ABDM).

**Representation on medical devices:** NATHEALTH sent a joint representation draft to DOP on the exemption of medical devices from Legal Metrology.

**PMJAY & GST:** NATHEALTH participated in NHA's meeting with corporate hospitals on PMJAY; and also held a separate meeting with NHSRC on GST.

**8th Annual Summit Report launch:** NATHEALTH's detailed work on Re-building, Re-structuring & Re-imagining Resilient Healthcare Systems in India in a Post Pandemic Era, captured in the report.

**CSR Agenda:** NATHEALTH is supporting India's healthcare development through its CSR Charter. Launch of CSR Report Vol. 1 is a step ahead.

## Building and enhancing public & Government trust

### NATHEALTH meets Union Health Secretary, Govt to discuss collaborative next steps for the year ahead

NATHEALTH's Leadership team recently met with Shri Rajesh Bhushan, Union Health Secretary, Government of India. The meeting included Dr. Shravan Subramanyam, President-NATHEALTH, Dr. Harsh Mahajan, Immediate Past President-NATHEALTH, Ms. Ameera Shah, Vice President-NATHEALTH.



#### Discussion points revolved around:

- Industry response to NHA PMJAY White paper on Provider Payment (Package, payments & Reimbursements) - Recommendations.
- Embedded taxes in healthcare sector GST (next steps).
- NATHEALTH CSR Program on Vaccine Hesitancy.
- Boosting Medical Value Travel in India.

#### CGHS rates revision

In a discussion on the subject, NATHEALTH suggested the below:

- A revision in rates keeping in mind the long duration since the last revision.
- A mechanism to tie these rates to CPI index so that they don't fall out of line.
- A mechanism for speedy settlement of claims removes payment risk and results in full participation of all providers without their working capital getting locked.

Key priorities of NATHEALTH (after internal deliberations and feedback from the recent March 2022 8th Annual Summit), were also discussed. Along with NATHEALTH 3.0 Agenda, which focuses on shaping India's health system by owning and contributing to strategic healthcare agenda.

## Building and enhancing public & Government trust

### NATHEALTH's meeting with NITI Aayog to chart strategic pathways for boosting India's health infra, education & health delivery

NATHEALTH's Leadership team, along with partners ADL, Bain & Company and PwC, recently met Dr. Vinod Paul, Hon'ble Member (Health), NITI Aayog, Government of India.

#### Discussion points included:

- Medical Education: PPP, DnB & Nursing/Skilling reforms leveraging digital (Collated summary Industry Feedback).
- Investible Peri-urban Models for New Health Infra Creation - Challenges and Solution Framework - Recommendations.
- Industry response to NHA PMJAY White paper on Provider Payment (Package, payments & Reimbursements) - Recommendations.

Key priorities of NATHEALTH (after internal deliberations and feedback from the recent March 2022 8th Annual Summit), were also discussed. Along with NATHEALTH 3.0 Agenda, which focuses on shaping India's health system by owning and contributing to strategic healthcare agenda.

### NATHEALTH & NHA's meeting held

NATHEALTH's Leadership team recently met with Dr. Vipul Aggarwal, Deputy CEO, NHA to discuss various collaborative steps for the year ahead.

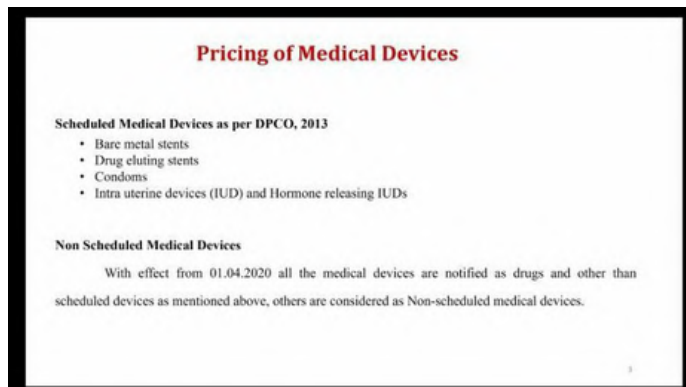
#### The meeting deliberated on:

- Industry response to NHA PMJAY White paper on Provider Payment (Package, payments & Reimbursements).
- Investible Periurban Models for New Health Infra Creation- Challenges and Solution Framework - Recommendations.
- Startup Industry Interface.

Key priorities of NATHEALTH 3.0 were also discussed, which focuses on shaping India's health system by owning and contributing to strategic healthcare agenda.

## Building and enhancing public & Government trust

### Stakeholder Consultation about Trade Margin Rationalization (TMR) on Non-scheduled Medical Devices



A stakeholder consultation was held by the Department of Pharmaceuticals/National Pharmaceuticals Pricing Authority (NPPA) about Trade Margin Rationalization (TMR) on Non-Scheduled Medical Devices. Towards this, a presentation was made by NPPA to which members inputs and suggestions were asked.

NATHEALTH fully supports the initiative to use TMR from Price to Distributors (PTD) as a pricing mechanism to make medical devices more affordable for the patients. NATHEALTH also appreciates applying TMR on 6 medical devices that resulted in substantial reduction in price to the tune of 54% to 70%.

**Some of the collective industry responses shared by NATHEALTH with the DOP/NPPA are:**

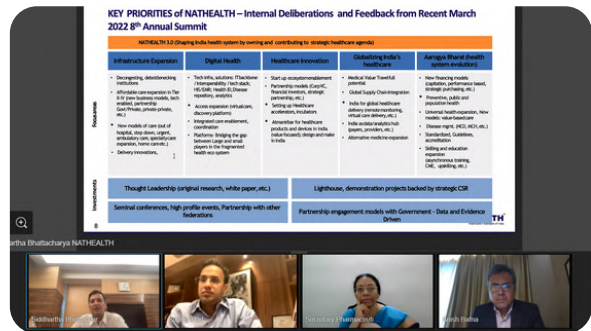
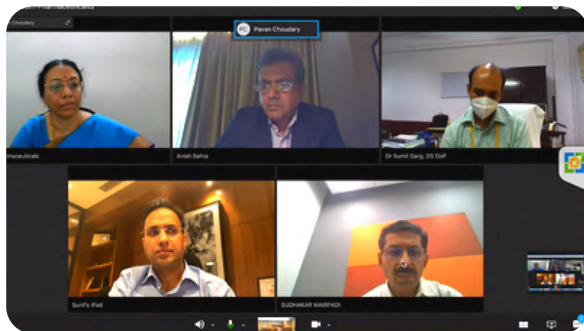
- Price band-based approach may not work for devices due to complexity and variations in prices of same category of devices. Recommend a phased manner approach from bandwidth perspective and operational challenges.
- Graded margin for TMR depending upon therapeutic area. It should be Margin (MRP-Selling Price/MRP) and not Mark up (MRP-Selling Price/Selling Price).
- PTD should be calculated as: Sum of net sales realized for the product by the manufacturer divided by sum of total quantity of such product sold.
- Apply TMR from prospective batches to minimize supply chain disruptions.
- Create a legal provision to incorporate TMR from PTD to bring predictability and consistency in the pricing policy.

## Meeting with Department of Pharmaceuticals to discuss future plans for health sector development

NATHEALTH's Leadership team recently held a meeting with Ms. S Aparna Secretary, Department of Pharmaceuticals (DoP).

### Discussion points focussed on:

- Infrastructure Expansion, Digital Health, Healthcare Innovation, Globalizing India's healthcare, Aarogya Bharat (health system evolution).
- Understanding how lighthouse, demonstration projects backed by strategic CSR can work in the Indian set-up.
- Data and Evidence Driven partnership engagement models with Government.
- Collaboration on Thought Leadership initiatives like original research, white paper, etc.

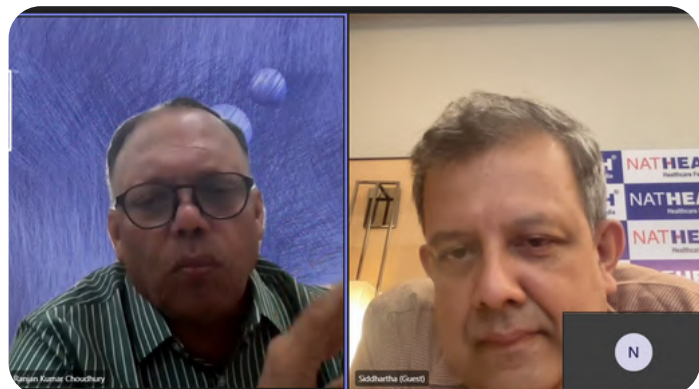


## Meeting with NHSRC on GST

NATHEALTH arranged an interaction with Mr. Ranjan Kumar Choudhury, Advisor HCT to discuss key aspects of GST in healthcare. The key outcomes/action steps were:

- GST Stakeholder Discussion to be organised by NHSRC.
- Plan a One Nation and One Dialysis Program.

NATHEALTH is now in the process to organize the dialysis meeting along with various stakeholders.



## Representation on exemption of medical devices from Legal Metrology

In view to remove the double regulation for Licensed medical devices from the Legal Metrology Rules 2011, Dr. N. Yuvraj, Joint Secretary, DoP recently conducted a meeting with the industry stakeholders. Towards this, a draft representation on exemption from Legal Metrology was sent by NATHEALTH to the DOP.

To  
Dr N. Yuvraj  
Joint Secretary  
Department of Pharmaceuticals  
Ministry of Chemicals & Fertilizers

May 2022

**Subject: Industry submission on enforcement provisions of the Legal Metrology (Packaged Commodities) Rules, 2017 (Medical Devices) w.r.t meeting held on May 11, 2022**

Dear Sir,

This reference to the meeting referred in the subject line, under your Chairmanship regarding enforcement provisions of the Legal Metrology (Packaged Commodities) Rules, 2017 (Medical Devices).

It has been the constant demand from the industry to seek exemptions from Legal Metrology (Packaged Commodities) Rules, 2017 since the drugs which are more customer facing product is given exemption from the legal metrology rules. The exemptions which was earlier available for the medical device industry was withdrawn due to the issue of MRP not being applied by certain importers. However as per the provisions of the 31/3/2020 notification in pursuance of Notification No. SO 648(E) of NPPA, all devices whether regulated or not, comes under the ambit of DPCO and thus are regulated by NPPA. All other labelling rules applicable for medical devices as per MDR 2017 already complies with the requirements of the customer, similar to that of the drugs.

**Background:** It has been the constant demand from the industry to seek exemptions from Legal Metrology (Packaged Commodities) Rules, 2017, since the drugs, which are more customer facing product is given exemption from the Legal Metrology rules. The exemptions which was earlier available for the medical device industry was withdrawn due to the issue of MRP not being applied by certain importers. However as per the provisions of the 31/3/2020 notification in pursuance of Notification No. SO 648(E) of NPPA, all devices whether regulated or not, comes under the ambit of DPCO and thus are regulated by NPPA. All other labelling rules applicable for medical devices as per MDR 2017 already complies with the requirements of the customer, similar to that of the drugs.

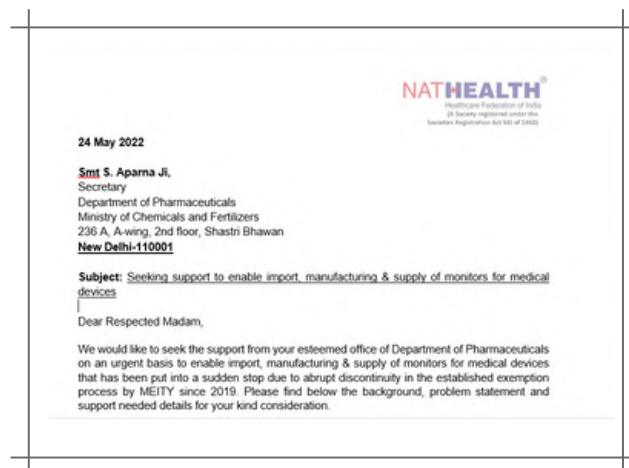
### The representation letter included the following requests/recommendations:

- Request for exempting medical devices from the ambit of Legal Metrology (Packaged Commodities) Rules, 2017 as given to drugs.
- In addition, as a post-analysis to the said meeting, NATHEALTH submitted its stand on the 4 issues of enforcement provisions, which have been raised by Department of Legal Metrology:
  1. Retail sale price in the form of Maximum Retail Price (MRP) is inclusive of all taxes for medical devices.
  2. Consumer complaints number.
  3. Country of origin in case of imported packages.
  4. Size and dimensions of the medical devices where it is necessary.

## Joint representation to enable import, manufacturing & supply of monitors for medical devices

As a joint representation by NATHEALTH, medical tech players and other relevant stakeholders, a letter was sent to the DOP, NITI, and MEITY to seek the support on an urgent basis to enable import, manufacturing & supply of monitors for medical devices that has been put into a sudden stop due to abrupt discontinuity in the established exemption process by MEITY since 2019.

The representation letter included detailed background, problem statement and support needed details for consideration from these three offices.



NATHEALTH is committed to resolve industry issues, especially the ones, which disrupt functionalities and patient outcomes. The above being one of them. The dialogues are in progress on the joint representation, with favorable results expected.

## Joint representation on Antimicrobial Resistance (AMR)

NATHEALTH shared a joint representation letter with Mr. Lav Aggarwal, Joint Secretary, Ministry of Health Family Welfare (MOHFW), Government of India, on Antimicrobial Resistance (AMR). The intent of the letter is to explore opportunities that exist for private and public sector to join hands in the implementation of the AMR guidelines at the state level.

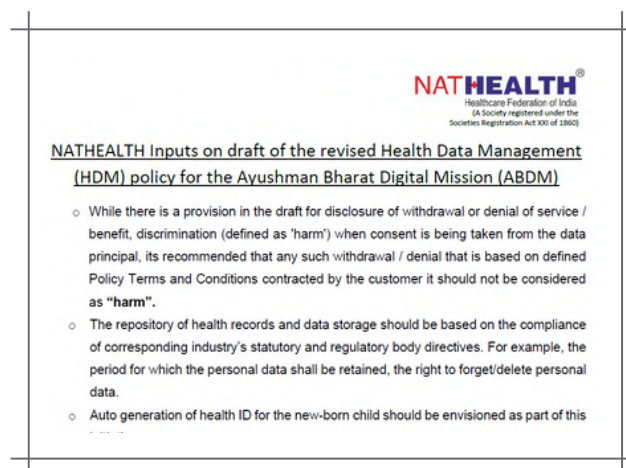
**The suggestions of the NATHEALTH AMR Taskforce included in the letter are:**

Awareness campaigns for AMR; Training programs for doctors mandated by ICMR; A platform encompassing central and state implementing agencies to implement ICMR AMR Guidelines; Strengthen diagnostic capacity; Mandate every hospital to report on AMR audits monthly/quarterly across states; Compiling industry data. NATHEALTH has also extended itself to provide the multi-sectoral support that these initiatives require.



## Inputs on draft of the revised Health Data Management (HDM) Policy for the Ayushman Bharat Digital Mission (ABDM)

The National Health Authority (NHA) had requested industry comments/feedback to be submitted on the draft revised Health Data Management Policy released by NHA. In response to this request, NATHEALTH had shared its collective industry inputs on the Policy.



### A glimpse of a few NATHEALTH inputs on the HDM Policy:

- While there is a provision in the draft for disclosure of withdrawal or denial of service /benefit, discrimination (defined as 'harm') when consent is being taken from the data principal, it is recommended that any such withdrawal/denial that is based on defined Policy Terms and Conditions contracted by the customer it should not be considered as "harm".
- The repository of health records and data storage should be based on the compliance of corresponding industry's statutory and regulatory body directives. For example, the period for which the personal data shall be retained, the right to forget/delete personal data.
- Auto generation of health ID for newborns to be envisioned as part of this initiative.
- The information to be provided by the data fiduciary to the data principal should be allowed in electronic form.
- Major % difference in package will bring in complexity and various diversion mechanism, suggestion requested there shouldn't be more than 5% difference.
- Case base package should be converted to disease-based package, there should be targeted disease-based packages. There by deciding line of testing and treatment.
- There should not be more than 2 variations in category.
- There should be difference in disease and lifestyle/cosmetic treatment.
- Specifications of instruments or consumable should be common and equal ground for imported and local manufacturer (no biases in quality standard).

### NATHEALTH's participation in NHA's meeting with corporate hospitals

NATHEALTH recently participated in a meeting with top Corporate Hospitals' CEOs for Hospital Empanelment in Ayushman Bharat Pradhan Mantri Jan Arogya Yojana organized by the NHA. The meeting was chaired by Shri Mansukh Mandaviya, Union Health Minister for Health, Ministry of Health, and Family Welfare and MOCF.



#### Important Points/Takeaways:

- Health Benefit Package (HBP) 2022: 365 new procedures have been added in the new version of the NHA HBP, which takes the total to 1,949.
- Under this scheme, differential pricing has been introduced that is based on city type and the level of care.
- NHA soon is planning to release price fixing strategy (pricing will be dynamic and will be implemented very soon). This was the purpose of releasing the consultation paper.
- NHA is now trying to see convergence of various schemes to achieve Universal Health Coverage. Target is to approach missing middle population (i.e. 30-40%) through low-cost insurance cover.
- Other points such as GST, CGHS, delayed payments and base rates were also discussed.

For more details, visit: <https://nha.gov.in/img/resources/HBP-2.2-manual.pdf>

## Resource Mobilization Initiative

### NATHEALTH's Hiring Drive Going Strong

NATHEALTH had recently floated its requirements regarding the Regional Hiring being conducted by the Federation. Job description details and other information are being posted regularly at various social platforms. The process is swiftly moving forward.

**REGIONAL LEAD (WEST, SOUTH AND EAST)** No. of positions-3  
Location: Bangalore/Hyderabad/Chennai / Mumbai/Pune and Kolkata

**ROLE DESCRIPTION**  
The Regional Lead is responsible for maintaining a close and effective relationship with all regional members and expansion of NATHEALTH footprint in the designated territory through new member acquisition and partnerships. The position is responsible for the strategic implementation of the Regional Work. The Regional Lead supports the work of NATHEALTH Secretariat and facilitates meetings and information exchange with regional members and authorities. He/she serves as focal point of contact to all regional specific issues to all relevant government bodies, regional members. He/she will be centrally co-located at the office of regional members. He/She will be working closely with the secretariat to develop the regional agenda.

## Thought Leadership Initiatives

### Launch of NATHEALTH 8th Annual Summit Report

NATHEALTH has launched a detailed report on its 8th Annual Summit held recently. The Report captures the essence of the 2-day event, which was organized with the theme: Re-building, Re-structuring & Re-imagining Resilient Healthcare Systems in India in a Post Pandemic Era.

Various eminent Government officials and healthcare leaders spoke at the event, whose thoughts are well captured in the report. The document also includes Key Takeaways & Next Steps derived at the event, for each of the key plenary sessions. These can prove beneficial to chart out growth plans for the year ahead.

The Report has been widely circulated within NATHEALTH members and the healthcare industry. To download a copy, [click here](#).



#### Leaders Speak

**"With improved public private collaborations, India's healthcare system can be rebuilt, restructured & reimaged"**



**Shri. M. Venkaiah Naidu ji**

Hon'ble Vice President of India  
Government of India

*There is a pressing need to increase public expenditure in health. The Government has set a target of 2.5% of GDP by 2025 in the National Health Policy. This should be complemented by capacity building, comprehensive & cost-effective healthcare, and digital health tools.*

#### Re-building, Re-structuring & Re-imagining Resilient Healthcare Systems in India

While India has shown great resilience in the face of adversity, the pandemic reinforced the need to strengthen India's healthcare infrastructure. Achievements like indigenous development of vaccines, administration of over 180 crore doses, and a parallel rapid scaling of diagnostic facilities are global benchmarks. It bears testimony to the collective resolve to meet this grave unforeseen challenge.

#### Leaders Speak

**"The 4 pillars of Ayushman Bharat can create a resilient health system. This is how the Union Government is reimaging healthcare delivery in India"**



**Shri. Rajesh Bhushan**  
Secretary, Ministry of Health and Family Welfare, during the Inaugural Ceremony

*Under the Ayushman Bharat Health Infrastructure Mission, there is a highly ambitious Rs. 64,000 crore outlay scheme for the next 5 years for building health infrastructure. The Mission will ensure a diagnostic facility and a public health lab in every block. This would happen for the first time in India.*

#### The role of Ayushman Bharat in building a resilient & re-imagined India

Ayushman Bharat's four pillars of Health and Wellness Centres, Pradhan Mantri Jan Aarogya Yojna, Ayushman Bharat Digital Mission, and Pradhan Mantri Health Infrastructure Mission - lead to resilience.

- By creating 1,50,000 Health and Wellness Centres across India, will improve health services delivery.
- India will be reimaged when the remote & rural population can easily visit their wellness

## Thought Leadership Initiatives

# Launch of NATHEALTH's CSR Report - Volume 1



CSR is a powerful tool to re-build, re-structure and re-imagine resilient healthcare systems in India. To highlight these aspects, along with partners Bridgespan & Sahamanthran, NATHEALTH has been undertaking various initiatives to promote CSR in healthcare. The report is a culmination of these thoughts to explore CSR in healthcare, as it dives deep into the vision behind driving healthcare CSR in India, the stakeholders, their roles, some noteworthy initiatives, the possible challenges, way forward and the next steps.

The edition also features NATHEALTH's 1st Healthcare CSR Awards, which were conducted in association with Sahamanthran, and the results of NATHEALTH & Bridgespan's CSR Best Practices Survey. The Report has been widely circulated within NATHEALTH members and the healthcare industry.

To download a copy, [click here](#).

### Top 5 Transformative CSR Best Practices - your guide in the CSR journey A NATHEALTH & Bridgespan survey

To further the cause of healthcare CSR in India, NATHEALTH & Bridgespan conducted a survey to identify the best CSR practices in the healthcare space. This is an essential step in the way ahead for developing healthcare CSR. With Best Practices in place, corporate organizations will have a reference charter, which can be utilized for optimized fund utilization and for best care outcomes.

Major findings of the survey were through the data collected in the survey, which was kept completely anonymized and the results have been published at an aggregate level, as NATHEALTH's CSR Best Practices Guidelines, with the Bridgespan Group as the partner for this initiative.

The survey was filled by: Top Industry Leaders, Industry corporate foundation CSR heads, Companies aspiring to set up CSR practices, Partners looking at participating in the CSR programs, Knowledge partners associated with CSR programs, Academia/Technical partners doing impact assessment, Capacity building partners, Donors/Co-funders of CSR programs, Independent experts.

#### Best Practices

#### Why this is important to move from good to great in Transformative CSR

- |   |  |
|---|--|
| 1. Objective metrics publicly shared and co-owned by CEOs                                 | <ul style="list-style-type: none"> <li>• CEO and Board regularly review clearly defined success metrics</li> <li>• Ensures adequate focus and accountability on CSR, given it would be under the radar of top leadership</li> <li>• Metrics defined and shared publicly esp. with shareholders</li> </ul>  |
| 2. Focus on new long term big bets, max. 2-3 bets consume                                 | <ul style="list-style-type: none"> <li>• Being focused on specific areas enables a higher impact to be created</li> <li>• Defragmentation of resources enables corporate entities to back bigger, large scale and long term programs</li> </ul>  |
| 3. Strategic collaborations with like minded partners (e.g. PPPs, Pooled CSR, Coalitions) | <ul style="list-style-type: none"> <li>• Large scale initiatives, especially ones aiming for a systemic change, are complicated and expensive for one corporate to support &amp; require collaboration across firms</li> <li>• Sectoral collaborations allow corporates to pool their funds and expertise to support programs</li> <li>• Provides NGOs with higher pool of funds and hedges risk of drying out of funds</li> </ul> |
| 4. Leverage core business capabilities, expertise in people and platforms                 | <ul style="list-style-type: none"> <li>• Corporates need to move beyond capital and leverage their core capabilities &amp; expertise to solve social problems e.g. technological capability etc.</li> <li>• Use influence to bring in capital from other corporates for additional capital aligned to the cause</li> </ul>   |
| 5. Innovate towards sustainable financial models with CSR acting as seed capital          | <ul style="list-style-type: none"> <li>• CSR capital should be utilized as a seed fund clubbed with capabilities to create sustainable revenue streams</li> <li>• Business should be able to sustain itself after initial few years to ensure minimum leakages and long term impact</li> </ul>   |

### How can the journey move ahead?

#### Collaborative CSR - the way forward

NATHEALTH recently held a CSR Summit under the aegis of its 8th Annual Summit. During the CSR discussions, it was highlighted that CSR in healthcare has been transactional and piecemeal till date, limiting its capacity to bring about systematic change. There is a need for a collaborative approach for using CSR funds to bring about transformative impact in improving healthcare delivery in India. It is now up to the stakeholders to find ways to work together and bring this initiative to life.

NATHEALTH invites you all to provide suggestions and feedback to improve India's CSR agenda in healthcare.

#### The potential for NATHEALTH to play an anchoring role

A common consensus is to anchor NATHEALTH as a pivot, which can bring all the stakeholders together for sustainable transformation in public health through Collaborative CSR. NATHEALTH can:

- Serve as a motivator for corporate entities to enter the CSR world.
- Act as a scout: Identify the plausible, valuable opportunities for support.
- Advise other contributing groups on the best areas in CSR resources to invest in.
- Be an enabler by building the right kind of partnerships.
- Act as an independent assessor of how the actual programs' functioning.
- Amplify the knowledge gathered by disseminating and bringing the best of CSR contributions on one platform.
- Focus on capacity building with a gender equity focus on women.
- Enable Government linkages with CSR organizations & the private sector; Bridge the gap between the Government, the people needing healthcare, and the funding agencies.
- Ensure favourable regulatory mechanisms to encourage CSR contributions.

### The proposed next steps...

While NATHEALTH can play an anchoring role, it is the joint responsibility of each stakeholder to strategically grow the CSR agenda in healthcare. To attain this vision & goal, following are the proposed next steps that can be undertaken collaboratively amongst multiple stakeholders:

- Define short term and long term milestones for healthcare CSR's future.
- Shortlist projects to support through collaborations.
- Align each stakeholder's role to make this happen.
- Drive thought leadership in healthcare CSR.
- Support bold and innovative interventions in healthcare CSR by supporting members and NGOs active in the public health & CSR space.
- Develop white papers; create supporting documents that help in analytics & big data in healthcare CSR.
- Liaison with the Government on policy framework.
- Support NGOs with resources and guidance.
- Continue to recognize corporate organizations, NGOs & other health sector members, who make lasting and impactful contribution for strengthening the healthcare system through CSR interventions.

### An invitation to collaborate

NATHEALTH would like to hear from you on ways to create a collaborative structure to initiate the process of elevating the agenda of healthcare CSR. Kindly reach out to us with your feedback & suggestions.

Contact us at:  
secretariat@nathealth.co.in  
+91 85277 97856  
www.nathealth.co.in

## NATHEALTH's Regular Internal Communications

### Northern Region Leaders Call

In the meeting, the revised North Charter Leadership was introduced with the announcement of Mr. Abhishek Kapoor from Regency Healthcare joining the leadership this year for the North Chapter. Mr. Ashwajit Singh, Chair, Northern Region Chapter further informed on the updated membership tiers. The leaders were updated on a list of bucket ideas for 2022-23.

President Dr. Shraavan Subramanyam updated on the recent Government interactions NATHEALTH had with NHA, MOHFW and NITI Aayog.

#### Key Actionable/Next Steps arrived at:

- A Regional Summit was proposed to be organized this year.
- India Africa Dialogue to continue.
- To work out a Northern Region Communication Strategy from the overall communication plan.
- To take forward the discussion on the whitepaper/policy document.
- To take forward the CSR program under NATHEALTH.
- Discussions on Cervical Cancer Screening Project.

### Insurance Forum Meeting held

The meeting was led by Forum leaders Mr. Mayank Bathwal and Dr. S Prakash.

#### Discussions steered towards:

- Reflections on last years priorities and prepare grounds to seek GC consensus for FY 22-23 priorities.
- Plans for membership growth in the insurance vertical.
- Inputs from members present and deciding next steps were also collated.



## NATHEALTH's Regular Internal Communications

### MedTech Forum meeting

NATHEALTH held its MedTech Forum meeting recently, with the following deliberations:

- Revising the MEDTECH Priorities: to frame out for FY22-23
- Government meeting updates
- Inputs and Discussion with Forum members

#### Key Action Items:

- Stack ranking of the priorities through survey.
- Like last year, the forum decided to conduct the priorities charting survey to vote for the top priorities for the MdTech group to be followed by Taskforce creation with timelines for execution and delivery of outcomes.
- Reconvene in June to crystallize the priorities and plans ahead.
- Post alignment with MedTech members – NATHEALTH to share the deliberations and key take ways of various Government meetings with Governing Council members.

### Meeting with GE Taskforce held

The meeting shed light on various vital functionalities of NATHEALTH, along with an introductory round with all taskforce team members.

#### Key discussion points:

- NATHEALTH 3.0 vision and plans to execute
- NATHEALTH Regional Secretariat Hiring
- Members Community engagement tools
- PCPNDT
- GC meetings/calendar locations to be identified
- Membership drive
- PR and communication Plan
- NATHEALTH Forum agenda and priorities



## NATHEALTH's Regular Internal Communications

### NATHEALTH conducts its SGM

The Special General Body Meeting of NATHEALTH was held to discuss some of the key areas regarding the Federation's functioning.

#### Discussions included:

- Membership Tiers and their Annual Membership Fees.
- Digital Members and Institutional Members.
- Change in the Registered Office of NATHEALTH.
- Authorizations, responsibilities, duties of NATHEALTH Secretariat.



### Resource Mobilization Initiative

#### Ms. Moumita Roy Chowdhury joins as Eastern Region Chapter Lead

NATHEALTH is pleased to announce that Ms. Moumita Roy Chowdhury has joined NATHEALTH Eastern Chapter Secretariat in Kolkata Office as Eastern Region Chapter Lead. In this role, Moumita will act as the nodal point for the Eastern Region Chapter and engage with the NATHEALTH community in this region while aligning the state focus areas with our national priorities.

She has joined NATHEALTH with a work experience spanning 18 years and an



exposure in industries as varied as Education and Healthcare with her last assignment being in the Metal & Mining industry.

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News | Forbes India Blog | Health | Understanding the role of private healthcare providers in India's march toward Universal Health Coverage

## Understanding the role of private healthcare providers in India's march toward Universal Health Coverage

There continues to be a perception that private hospitals are against public interest and operate only for profit. Therefore, it is important to examine a few aspects of overall hospital operational issues and challenges to decode these misconceptions

BY ATUL KUMAR  
5 min read  
UPDATED: May 5, 2022 06:07:12 PM UTC

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TECH

## Potential of MedTech to bridge the rural-urban gap

May 20, 2022, 4:59 PM IST / Himanshu Baid in Voices, Tech, TOI

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**Himanshu Baid**  
Managing Director, Poly Medicure Ltd

Rural communities have long struggled to maintain access to quality healthcare services. Rural healthcare in India is characterised by a huge gap between supply and demand. The plight of rural hospitals has garnered particular attention from legislators, policymakers, and researchers in recent years. Currently, rural healthcare needs are met either by limited government facilities and private nursing homes, or by a number of general physicians who practise medicine in rural areas. The quality of infrastructure is usually poor, and people end up going to nearby large cities if they need

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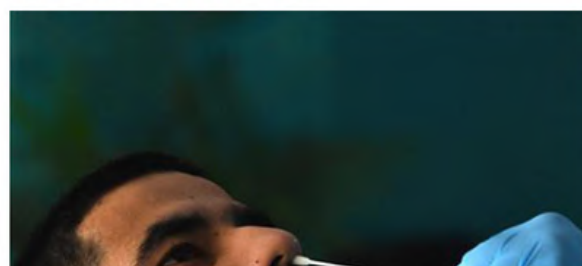
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## A year on from Covid-19's second wave, a mixed bag of learnings

Vinson Kurian | Rutam Vora | Ahmedabad, Thiruvananthapuram | Updated On: May 22, 2022

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For Kerala, Covid leaves more lessons than even the deadlier Nipah outbreak

A year after the deadly second wave of Covid-19 last May, some healthcare practices have seen a long-term adoption, while other areas still have some ground to cover.

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