

ATAL AMRIT ABHIYAN SOCIETY, ASSAM

Atal Amrit Abhiyan Society, Assam, under Medical Education and Research Department, Government of Assam is a registered Society under the Societies Registration Act, 1860 and notified by the Government as the implementing agency for Ayushman Bharat-Pradhan Mantri Jan Arogya Yojana and Ayushman Asom- Mukhya Mantri Jan Arogya Yojana, two unique Health Assurance Schemes which aims to provide cashless healthcare coverage to Low Income households in Assam. The Society is also implementing Mukhya Mantri Lok Sevak Arogya Yojana, PM-RAHAT and Vyay Vandana Schemes to different sections of the Society in the State of Assam.

For implementation of the Schemes, Atal Amrit Abhiyan Society, Assam, invites online applications for the following vacant positions on a purely contractual basis:

Sl No	Name of the Positions	No of Posts
1	Medical Officer	6
2	SAFO - Medical	1
3	Claims Executive	9
4	Operation Executive	1

Candidates having requisite qualification and experience will be shortlisted and called for interview/test at a date, time and venue to be intimated to the shortlisted candidates. The candidates have to attend the interview/test accordingly with the relevant educational, identity and work experience testimonials in original and a set of self-attested photocopy. No TA/DA will be paid for the purpose. Details relating to qualification/ eligibility etc. of the aforesaid positions are available at: www.atalamritabhiyan.assam.gov.in. Salary will be as indicated in the respective ToR of the positions.

Online applications will be received from 10/10/2026 to 25/10/2026. The aspiring candidates may visit the AAAS website for Terms of Reference and other updates.

Digitally signed by

SIDDHARTH SINGH

Date: 09-10-2026

11:47:28

Chief Executive Officer

Atal Amrit Abhiyan Society, Assam



TERMS OF REFERENCE FOR THE POST OF CLAIMS EXECUTIVE

Position: CLAIMS EXECUTIVE

Qualifications: Post Graduate in Commerce with minimum 50% marks.

Experience: Minimum 3 years in related sector

Place of Duty: The normal place of work will be the office of Atal Amrit Abhiyan Society, Assam.

He/she shall work under the overall guidance and supervision of the Lead Claims Coordinator, Atal Amrit Abhiyan Society - Assam and will be directly responsible for the below mentioned tasks.

Job Purpose:

Monitor claims processing by ISA, assist the Accounts department in making payments to the hospitals. He/she will also be responsible for any other financial matters of the scheme.

Key Responsibilities:

1. Coordinate with hospitals/ISA for post discharge facilitation.
2. Coordinate with ISA, ISA Coordinator and Medical Officer for any clarification/query regarding claims.
3. Responsible for checking the treatment cost with the package rates.
4. Monitor the claims documents along with the submission timeline after discharge of the patient.
5. Ensure the discharge summary, case sheets, investigation notes, drug bills as per the guide lines.
6. To manage all the matters pertaining to claims and its management.
7. Support claims audit.
8. Submit the claims file to the Medical team/ Finance department within TAT.
9. Undertake any other duties assigned to him/her by the CEO.

Compensation: The compensation for the post will be Rs. 40,000/- per month consolidated.



TERMS OF REFERENCE FOR THE POST OF OPERATIONS EXECUTIVE

Position: OPERATIONS EXECUTIVE

Qualification: Full time MBA from a recognized Institute/University.

Experience: Minimum 2 years in related sector

Place of Duty: The normal place of work for the party will be the office of the State Health Agency (SHA), Assam.

He/She shall work under the overall guidance and supervision of the Senior Operations Manager, SHA and will be directly responsible for the following tasks:

Job Purpose:

Provide support for the overall success in the implementation of different schemes under AAAS. The Operations Executive is expected to provide overall support to the Operations Manager. He/she would oversee and be responsible for the speedy execution of proposals once received from the field level in order to ensure the efficiency, relevance and impact of the different schemes in the state of Assam is maximized.

Key Responsibilities:

- Assisting the Operations Manager in supervising the Key Control System w.r.t. veracity of claims and their speedy disposal.
- Adopting methods and monitoring the swift settlement of the claims once received from the field level.
- Ensuring compliance with the procedural requirements as set up in the implementation guidelines of the Schemes.
- Monitoring the information system about the performance outcomes of different functionaries and entities provided for in the scheme.
- Coordinate with ISA and all other stakeholders for smooth implementation of the Schemes.
- Regular coordination with NHA/SHA for better monitoring of the Schemes.
- Attend meetings on behalf of the Society with various stakeholders and analyse MIS/reports and propose suggestions for increasing uptake of the Schemes.
- Any other responsibilities as and when assigned by the authority.

Compensation: The compensation for the post will be Rs. 40,000/- per month consolidated.

TERMS OF REFERENCE FOR THE POST OF 'MEDICAL OFFICER' UNDER ATAL AMRIT ABHIYAN SOCIETY

Place of Duty:

The normal place of work will be in the State Health Agency (SHA), Assam.

Key Responsibilities:

He/ She shall work under the overall guidance and supervision of the Senior Medical Officer, Atal Amrit Abhiyan Society, Assam and will be directly responsible for the following tasks:

- To carry out medical audit as per guidelines incorporating state specific practices
- To analyze transactions data from medical perspective and highlight outlier/suspect / variant cases for further investigation.
- To support investigation team for appropriate probing of suspect cases
- Quality audit and implementing guidelines under QCI
- Implement criteria for empanelment of hospitals in various categories
- Manage the empanelment and de-empanelment process of hospitals
- Enquire complaints related to hospital and recommend disciplinary action to the Chief Executive Officer
- Responsible for quality service in the empanelled hospitals including implementation of STG.
- Involve in claim processing, investigation and audit process as per instructions issued by SHA.
- Any other works assigned by the CEO, AAAS from time to time.

Eligibility:

Qualifications – Medical graduate. Preferrably MBBS. BDS or BAMS may also apply.

Experience – At least 5 - 7 years of work experience in the area of health claims processing/audit

Required Skills:

- Knowledge of Medical protocols, clinical pathways and standard treatment guidelines.
- Operational knowledge of hospital functioning and billing practices
- Strong strategic focus and project management skills.
- Eye for details.

Compensation:

Consolidated pay of Rs. 50,000/- per month

TERMS OF REFERENCE FOR THE POST OF 'State Anti Fraud Officer (Medical)' UNDER ATAL AMRIT ABHIYAN SOCIETY

Place of Duty:

The normal place of duty shall be the office of the State Health Agency (SHA), Atal Amrit Abhiyan Society, Assam.

Key Responsibilities:

The State Anti Fraud Officer (Medical) in the rank of Medical Officer shall work under the guidance and supervision of the Senior Medical Officer / Head, State Anti-Fraud Unit, AAAS, Assam under the overall supervision of CEO/ Joint CEO and shall be directly responsible for the following:

Medical Audit, Claims and Pre-authorization Review:

- Monitor the day-to-day functioning of the State Anti Fraud Unit's (SAFU) medical review workflow, ensuring that claims, pre-authorizations and hospitalization records are reviewed within the prescribed timelines.
- Ensure prescribed audits of all National Anti Fraud Unit (NAFU)-triggered cases are conducted within stipulated timelines and take appropriate action on suspicious cases in accordance with the Anti-Fraud Guidelines.
- Conduct prescribed audits of auto-adjudicated cases as per NHA guidelines and submit reports to National Health Authority (NHA).
- Supervise random beneficiary visits/ audits and post-discharge audits – including telephonic and home visits – from a clinical verification standpoint, in line with the Desk/Field Medical Audit and Beneficiary Audit protocols of the NHA Field Investigation and Medical Audit Manual.

Field Supervision, District Coordination and Capacity Building:

- Conduct regular visits to EHCPs and districts to supervise and monitor the work of District Medical Officers (DMOs) as Anti Fraud Officers and other SAFU-related field activities.
- Supervise and mentor DMOs on clinical protocols, standard treatment guidelines and documentation standards for fraud investigation, in accordance with the audit checklists prescribed in the Field Investigation and Medical Audit Manual.
- Conduct meetings on anti-fraud guidelines and reports submitted by DMOs with relevant stakeholders, including hospitals, district administration and other concerned parties.

Data Analytics and Fraud-Pattern Identification (Medical Perspective):

- Monitor the implementation and analysis of fraud triggers embedded in the IT systems that are medical/ clinical in nature, and recommend refinement of triggers based on emerging patterns.
- Analyse claims and pre-authorization data from a medical perspective to identify outlier, suspect or aberrant cases – including unusual combinations/ multiple procedures, excessive length of stay, unbundling, upcoding, conversion of day-care procedures to overnight admissions, and high-value or uncommon procedure codes.

- Conduct comparative analysis of empanelled providers with respect to utilization, procedure mix, outcomes, referral and disenrollment patterns to identify aberrant clinical practices.

Documentation, Reporting and Quality Systems:

- Supervise the development and periodic updation of medical audit checklists, standard treatment guideline references and post-audit closure action trackers used by the SAFU.
- Analyze relevant indicators pertaining to the medical function and report findings on a periodic basis, including the monthly MIS return to NHA as prescribed in the Field Investigation and Medical Audit Manual.

Advisory Support to SHA Leadership and the Anti-Fraud Unit:

- Provide evidence-based medical inputs and recommendations to the CEO, SHA, to facilitate informed decisions regarding claim rejection, provider suspension and de-empanelment.
- Advise the Anti-Fraud Unit on updates required to state-specific anti-fraud guidelines and empanelment/assessment criteria based on emerging clinical fraud patterns.
- Support the timely review of cases by the Anti-Fraud Unit with the SHA Authority by presenting medical audit findings and recommending corrective actions.
- Provide inputs on show-cause notices to EHCPs engaged in unethical practices, in accordance with NHA guidelines, where such practices are clinically substantiated.

Coordination with the National Anti-Fraud Unit (NAFU):

- Liaise with the National Anti-Fraud Unit (NHA) medical function to share state-specific findings and receive evidence-based insights emerging from national-level analytics, consistent with the NAFU–SAFU coordination mechanism envisaged under the NHA Anti-Fraud Guidelines.

Undertake any other work assigned by the CEO, AAAS from time to time.

Eligibility:

MBBS from a recognized university, registered with the Assam Medical Council / National Medical Commission (or equivalent State Medical Council).

Experience:

Minimum 5 years' post-qualification clinical/professional experience, including at least 2–3 years in health insurance claims processing, medical audit, hospital administration, or a government-funded health assurance/insurance scheme (e.g., AB-PMJAY, RSBY, ESIC, CGHS, or private TPA/insurer).

Desirable:

- Postgraduate qualification (MD/MS/DNB) or PG Diploma in Hospital Administration, Health Management, Public Health, or Forensic Medicine.
- Prior experience in medical audit, claims adjudication, fraud/vigilance investigation, or insurance/TPA claims scrutiny.
- Familiarity with the PM-JAY Transaction Management System (TMS), BIS module, or similar IT-based claims/health-scheme platforms.



- Expertise on MS Office and basic data analysis for identifying utilization patterns and outliers of the portals.
- Knowledge of Assamese and familiarity with the district-level health administration set-up of Assam.

Required Skills:

- In-depth understanding of Standard Treatment Guidelines (STGs), clinical pathways and medical protocols.
- Through operational knowledge of hospital administration, billing practices, IPD/OT register management and clinical documentation.
- Analytical mindset with an eye for detail to spot anomalies in clinical paper trails.
- Excellent interpersonal, verbal and written communication skills.
- Proficiency in using IT systems and database management tools for claim reviews.

Compensation: The compensation of the position will be Rs. 1,00,000/- per month consolidated.
