



User Manual for Medical Reimbursement - Claims

Prepared by APOnline







Prepared by	Date
Afroze Shabana	22.07.2017
Reviewed by	Date
Raghavendrara Rao Jakka	23.07.2017
Approved by	Date
Ramasrinu D	24.07.2017

Distribution list

Name	Role
B .Bala Kishore	Group Leader

Document Control Information

Version	Revision Date	Author	Affected Sections	Brief Description of Change
1.0	NA	NA	NA	NA

Change Note History

Ref. No.	Release Date	Version No.	Section No.	Page No. & Line No.	Remarks
1	NA	NA	NA	NA	NA





Contents

1.	INTRODUCTION	6
2.	OBJECTIVE	6
3.	SCOPE	6
4.	ABBREVIATIONS	6
5.	SOFTWARE AND TECHNOLOGIES	6
6.	PROCESS - Academic Student Performance	7
7.	Change Management procedures	14
8.	Approvals	14





List of Tables

Table 1: List of Abbreviations	6
Table 2: Software and Technologies	6
Table 3: Approvals	14





List of Figures

Figure 1: Home Page	7
Figure 2: E-Office Tab Page	7
Figure 3: Login Page	8
Figure 4: Select Menu Page	8
Figure 5: Select PDF Page	9
Figure 6: Select Type of Claim Page	9
Figure 7: Select Name Page	
Figure 8: Claim Form Page	
Figure 9: Unique ID Page	
Figure 10: Print Page	
Figure 11: Claim Selection Page	
Figure 12: Claim Form Page	
Figure 13: Unique ID Page	
Figure 14: Print Page	



1. INTRODUCTION

Department of school education portal <u>www.cse.ap.gov.in</u> was developed to bring all information related to education on a single platform. It was desired to monitor all data to make education an ennobling experience.

Various measures are being taken to enhance the performance of the students. One such measure is Continuous Comprehensive Evaluation. Hence it is desired to develop an application to capture performance of the students in four formative tests and three summative exams. To capture data an application was developed.

2. OBJECTIVE

To claim Medical Reimbursement for employees of Department of School Education an online application is put in place to cut down on turn-around-time and to make it a transparent process.

3. SCOPE

The scope of this document is to explain the process of claiming medical reimbursement for both Inservice and retired employees.

4. ABBREVIATIONS

Table 1: List of Abbreviations

Abbreviation	Expansion
MR	Medical Reimbursement

5. SOFTWARE AND TECHNOLOGIES

Table 2: Software and Technologies

S.No.	Software	Version
1	JDK	1.6
2	J2EE	NA
3	Struts	1.0
2	SQLServer	2012
3	JBOSS	6.0

APOnline





6. PROCESS – Medical Reimbursement Claim for In-service and retired employees

The process to apply for medical reimbursement claims online, and various steps involved in this process are defined below.

1. Navigate to portal <u>www.cse.ap.gov.in</u>.

COMMISSIONERA COVERNMENT OF ANDHRA PRADESH	TE OF SC	CHOOL ED	UCATION		
1 Home About Us	Reports	Graphs	n Photo Gallery	Contact Us	🔍 Login
SRI. N CHANDRABABU NAIDU HON'BLE CHIEF MINISTER GOVERNMENT OF ANDHRA PRADESH		Hon'ble CM laun	anning internet on of	au change (AP Subject	Forum)
Donale for Digital Glassroom					
Continuous Comprehensive Evaluation	CURRENT	NEWS:			
Student mormation system	Prationa Av	vard 2016			
Mid Day Mard	SL-PROVIS	IONAL SENIORITY LIST (I SUPERINTENDENTS		
Mid-bay moat	PROVISION	LIST OF PRATHEBIA AW	ARDS 2016		

Figure 1: Home Page

2. On the home page click **Medical Reimbursement from E Office tab** as shown in Figure 1. The login screen appears. As shown in figure below.

	NEW: eHazar Training Videos		
	NEWI User Manuals	eHazar Support Details	Student Corner
	Donate for Digital Classroom	List of awardnes for Savitribal Phule State level Teacher awards	and children
	Continuous Comprehensive Evaluation	SE-PROVISIONAL SENIORITY LIST OF SUPERINTENDENTS	Corner
	Student Information System	PROFORMA - SELF DEFENSE TRAINING	Donor's
	UDISE		Corner 📥
	Mid-Day Meal	Quick Links	
	Geographic Information System (GIS)	Feedback Success Stories Facebook	STATE MAP
	Asset Management System	🐑 Upload GOs	
	Exams & Results	C Recruitments	ALL NO
	Biometric Attendance System	RTI Act	and the second s
	Children With Special Needs (CWSN)	Privacy Policy	-
	Services Through External Agencies		SCERT CAL
	c-Office	Medical Reimbursement Approvals	
	Private School Registration	NOC ASSISTANCE : +91 7032901380	MEMBERS AT IT CELL DISTRICT WISE
		Designed, Developed & I	
_			- Doo Onumbes
		Figure 2: E Office Tab Dage	
		Figure 2: E-Office Tab Page	





3. The following screen appears. Enter **Username** and **Password** and click **Submit**.

Home Abo	ut is 📴 Reports	C Analytics	Statistics	Photo Gallery	Contact Us
	User Pass 15	nome : word : 0 5 5 Submit	Forgot Password		

Figure 3: Login Page

4. The following screen is displayed. Click on Medical Reimbursement tab and select from drop down menu as shown below

Services *	Medical Reimbursement * Reports Others * Log	out	
	Medical Reimbursement Claim Form For Inservice Claim Form For Retired Employees	te of School Education	
	Model Medical Proforma		Request Tracking System

Figure 4: Select from Dropdown Menu Page





5. From the below screen click on the PDF image to download relevant document.

ard Services * Medical Re	imbursement * Reports Others * Logout		
	Medical reimbursement pro	oforma	
	proforma Name	Download	
	APPENDIX-II	1	
	APPLICATION LETTER FOR EMPLOYEE	1	
	CHECK LIST	1	
	DEPENDENT CERTIFICATE	1	
	LIST OF ENCLOSERS	1	2
	NON DRAWAL CERTIFICATE -SERVICE	1	
	NON DRAWAL CERTIFICATE-PENSIONER	1	
	EMPLOYEE/PENSIONER DECLARATION FORM	1	
	DDO DECLARATION FORM	1	

Figure 5: Select PDF Page

6. Select Medical Employees Claim Form For In-service option in the Medical Reimbursement Menu.

Dash Board	Services *	Medical Reimbursement * Reports Other	• * Logout	
		Medical Reimbursement Claim Form For Ins	ervice	
		Claim Form For Retired Employees	te of School Education	
		Model Medical Proforma		Request Tracking System

Figure 6: Select Type of Claim Page





- COMMISSIONERATE OF SCHOOL EDUCATION

 OVERNOLEN (FADESI)

 Desh Boord Services * Madical Reindursement * Reports Others * Lagout

 Desh Boord Services * Madical Reindursement * Reports Others * Lagout

 Madical Reindursement * Reports Others * Lagout

 Desh Boord Services * Madical Reindursement * Reports Others * Lagout

 Matrix Saturd Science Respan="2">Matrix Saturd Science Respan="2">Others * Lagout

 Matrix Saturd Science Respan="2">Colspan="2"

 Matrix Saturd Science Respan="2"

 Matrix Saturd Science Respan="2"
- 7. From the below screen Select your name from the list of Employees working in that school

Figure 7: Employee Name

8. In the form which is displayed below fill all fields and upload appropriate documents then click on submit button.

Leak Sources * Necto	a Reariburgement * Reports Others	" Logast	
	NOT	: Sutanit Original Bills, Proformae	and Unline application Print to your
	MEDICAL REIMBURSEN	ENT CLAIM REGISTRATION FORM	
	Employee Name NALVALN		
			-All Tields Are Like
National Property	- Longeron	hands betails	Lange way a
Vilage Name	PTINAVPALIA	School Name	28210800071-HERR RTITINAUPINULS
	Per	sonal Details	
Treasury Code	0952052	Name of the Employee	NALVALA DULIAS BEIG
Gender	Mala	Date Of Dirth (DD/HM/ YYYS)	01000/1075
no agrianiae		wohile number	949-409409
Aedhear Number	731134819266	ATD/STO/PAG Name	Next Concernance of C
	Fundes	re Address Octails	A set Constant Wiley in such
No.as Rumber	1	Street Name	Le te Settings Djagtw
District Name	-teed-	Handal Name	
	(UDO Declaration For	m) Tanchers worldry in high school onh	
DDO Declaration form (PDF	Choree Ine - Knille droven		
524 DER 15 198) (195	ar Ralament Hornmante (Broof in	support of claum historic descention	Ob 40 best server
Other Relevant Datament T	Chaste Els Valla cheren	Other Relevant Darament 2	Charry Els bladia sharra
(POF SEZE AND IN LINE)	CHOOSE FIC	(FDT GIZE BKD to JHD)	STOLEFIC IN TO STOLE
(POF SIZE 6(D to LND)	Choose File No file chosen	(FDT SIZE BKD to JHD)	Choose File No file chosen
Other Relevant Document 3 (PDF SIZE GKR to 1996)	Chance Lie No He doesen		
	Other Documents (Proof in supp	ort of claim)Upland decuments with d	Hirard married
Other Document 1 (FDT SIZE (K3 to 1/42)	Choose File No He chosen	Other Document 1 (PDF SIZC SID to 18D)	Choose File No re choon
Other Decement & (FOR SIZE	Choose File No file chosen	Other Document 4 (1998-stra-	Onosse File No file chosen
Divertion and a (FDF NUF	Chases Els. Valla chases	AND ID THD!	1
6K3 to 1/43)	serverse Pre- No the chosen		
UyU	oad IP Bill Documents (Proof in s	upport of clann)Uplond documents vi	the different marries
CP DIE 1 (PDT SIZE SKD to	Chanse Line Northe dataset	10 048 2 (PDF S222 6x0 to 1708)	Crussel le No de chuser
1PH)			
1996) EP DII 3 (PDT SIZE 863 %	Chouse Frei Rolle chosen	1P DIII 4 (PDF SDD 6kD to	Groce File No ite chosen

Figure 8: Claim Form

APOnline Confidential





9. On Successful submission of the claim application, a unique claim id will be generated as shown below and you will receive an SMS to the registered mobile number. Click on the Print button to get the printed copy of your claim application.

Dash Board Services * Medic	al Reimbursement * Repo	orts Others * Logout		
	Employe	e Claimed Details Inserte	d Successfully	
	INW\SEC\2017	7\0933092/MB12/11\EMP	92/MB12/1172/2017	
		Print		

Figure 9: Unique ID

10. Make sure printer connected to the system and Click **on Print button** to get the hard copy of your claim application

				and the second se	
intal: 2 sheets	s of paper			CLIME ID = 093	3092/MB12/1172/20
			firhoal	Dataile	
	Print Concel	Listict Name	Kuned	Mancal Name	NANDIKOTKUR
	Concer	Village Name	BUINAVEMULA	School Name	MPPS BUNA/EMULA
			Portant	of Details.	
stination	CutePDF Writer	PPO ID	0953092	Name of the Employee	MALYALA ILL A
	December of the second s	Gunder	Mater	Data Of Birds (DD/MM00007)	01/06/19/19
	Change	Decignation	SchoolAssistant	Mobilo Number	8941059215
		Aadbaar Number	721124809266	Trassury Code	0933363
		Heuse Number	633537	Street Name	**
	 (e) All 	District Name	KURNOOL	Mancal Name	NANDIKOTKUR
		village Name	BUINWEMULA	Pincede	56757
	() e.y. 1-5, 8, 11-13		Patron	Details	
		Namo of the Pations	MALYALA ILL AS	Relationship with Employee	Salf
	1	Nature of Dispase/Timoss/Treatment	fever	InPatient Number	6789
-		Date of Admission (DD/WW/YYYY)	0501/2017	Date of Discharge (DD/MM/YYYY)	10/03/2017
		Death, Durling the Treatment	NO	Total Amount Claimed (Rs.)	53000
	Fortrait 💌	Is Hypertensive	YEB	Is DiaLutik	YES
			Hospitz	v Dotzile	
	Color 👻	Name & Address of the Hospital/Nersing home	Anple Dental Hospital, Nain Road, Opp. 35H, Kathaper, S.G. Disiriot		
		Date Of Recognition From (DovMWYYYY)	01/07/2008	Date Of Recognition To (DEVMM/YYYY)	15/07/2019
	ticar	3.Mu. IP 8	ill Mandeur	Bill Data (OD/MW/YYY)	00
26	maile		603	14/87/2017	
			Decumaria Proof	In Rupport Of Claim	
sys	item dialog (Ctrl+Shift+P)	Discharge Science y	APPENDIKAI (1)pdf	Ease diality for tilbate	APPLICATION LETTER FOR EMPLOYEE.pd
		Emergency Certificate	CDO DeclarationForm.act	Dependent Certificate	OHECK ISLad
		NON-Drawl Parm	APPENDIKHI (*)petf	Referal Hospital Proceeding	DEPENDENT OCRTIFICATE.pdf
		Consolitate Bills	CERTIFICATE	Activate	

APOnline Confidential





Process 2: Applying Claim procedure for Retired Employees.

11. Step 1: Select **Claim Form** for **Retired Employees** option in the Medical Reimbursement Menu.

COMMISSIO GOVERNMENT OF ANDHU	NERATE OF SCHOOL	EDUCATION	
Dash Board Services *	Medical Reimbursement * Reports Others * Logo	ut)	
	Medical Reimbursement Claim Form For Inservice		
	Claim Form For Retired Employees	te of School Education	
	Model Medical Profoma		Request Tracking System
Copyright @2015. All rights Reserv	ed.	Designed, Deve	kped & Maintained by APOnline

Figure 11: Claim Selection Page

12. On selection of menu a form is displayed as shown below. Fill all fields and upload appropriate documents then click on **submit** button.

entrancel postform proves	-See -	Range of the second	
stantione of the long sectors)		Paris a Marile	-Calad- T
Network Officers (Allaness Systems)		Trefficial acades	
stantala an (otherwork)	8	named along (agony con)	
transfer dis daraphe testinat		Malana (mailes)	
le Louterste	3000 7	ta Discaldo	Sikel *
		Ticepital debita	
- An and all the data in the same	Genel	BeglinBanny	
sterilization facility sectors	6	Dates a sugaria and appropriate	
	Documenta	(Proof is suspert of claim)	
P2	1 Number	Di date	CDANNAMONT
		IIIN567	ev
6		to an its that is to me because	
WE THE	Clover Lie No fin chosen	POPTATING	Stowellie, Stiffe there
NE S THE	Clock the No Fedham	NACIONAL ADDITION ADDITION AND TABLET	Clussener No fie choren
NUM DRAWAL SITE OF SALES OF	Choose Fig. Nucleader cont	Default Research Proceeding (Ad. Stat. Analise Stat.	Croco File No de choven
CONSERVED IN INCOME ON IN	Charge Fig. Mulleich son		
	Choose File No Lis choose	Exclamation Form 1, IRCT 0220 (10 to	Chowe File No. & choose
	(000 Dedecation For	n) farmer verkinen ihrt erkentunte	
100 Ballions Anna (RDFS) / FSS	Linear Line Mo En chosen		An brane Window
(198)	THE REAL PROPERTY AND ADDRESS OF		Provident and a second
	Other Hadevart by	un resta (Prost in augus tot class)	
TTAN ME	Charge Life Koffs chosen	745 16 101	t times tas hoft: chosen
Direction and Dimensional (Street and ROFIN (1994)	Classe Lie Rodit chores	EDITOR PROVIDENT AND A STREET	Stway He Hoffs chosen
Dies Krissel Generation (Alexian Robert (R)	Classe He. Rode chosen		
Coher Documental (RDT SSD: GID-to UND)	Cheves File No ra chover	Citrar Documents2 (#07 000 GHD re (ND)	Chosen File No is chosen
Const Decrements 1 (DEC FEET (3.5.)-	Chines File No 15 Closes	Clear Decremented (D11 TTTT Call or	Chinese file Borns chosen
Distantian and A Distant Area and	Charges Las Kofic chocen		
	United In TR. Oak	anoralis (Possilla suspend of circles)	
			to a chores
	Class be Bodie choses		I Destance The second second
	Classe He Rolls chosen		I company big ha damage
	Classe Mr. Rodinstown	and the difference descended.	LINGSE FOR BUILD IN CONSER
T PELA TURGETRANS SE ITHELA SUBANARANI TAL ITHELA SUBANARANI TAL	Classe His Rolle down	and in the second second	(Urossered) for 1+ chosen

Figure 12: Claim Form Page

APOnline Confidential





13. On Successful submission of the claim application, a unique claim id will be generated as shown below and you will receive an SMS to the registered mobile number. Click on the Print button to get the printed copy of your claim application.

Dash Board Services *	Medical Reimbursement * Reports Others * Logout
	Employee Claimed Details Inserted Successfully
	INW/SEC/2017/1212324343/MB22/11/EMP24343/MB22/1173/2017
	Print

Figure 13: Unique ID

14. Make sure the printer is connected to the system and Click on Print button to get the hard copy of your claim application.

Print			fedical Reimburs	anent - Claim Form		
Total: 2 sheets	a of p <mark>ap</mark> er		CLINE ID - 12 (23240-44/822/11/5291			
		0000	1012224040	Name of the Cattioner	actodia	
	Print Cance	Anna	V.b	Date of Skills (SOMMATT)	distant and	
		Designation	Diales	Middle Handan	A14179/020	
		Nuclear the class	12 8250 180 922	PPO ILVIER	- and the line of	
SUPPORT NO.	h d CutePDE Writer	Human Human	- Indiadiat	Rived Name	and a first of	
reliantos		Califold Name	8/3T-000/0/5R	Manual Nation	KARARA.	
	43. mp	VEINOR PRIMA	*CHUCKENERS	SCINO MOTIN	HATC NO.1	
		Piecedo	16-16-15			
	the second second		2307	and and a second s		
ages	(ii) All	Aucuse (Bender	NO-301202102-8	Assound Beider Barre	whiteh	
		Lanix Netwo	Cyndionis bank	Lanx Dispon	MARTINEA	
	(i) 129 T 5 8 TT 18	153608	CTHEROROR SD			
			Value	LAUTER .		
		Name of the Policel	stoch	Relationship with Decloyee	Cell	
pies		Nature of Discussions as Treatment	the best	In Fallant Humber	actecto	
		Cala of Admission (DD/MM/YYYY)	25/00/2217	Date of Discharge (DDFMINY) (77)	00/00/0217	
	la constante de	Earth, Earling But Trademark	445	Total Associat Chinesel To (10.00.5	
Acut	Portrait *	In Highering along	110	for Distant in	148	
			Hards	C Decisión		
olar	Color 💌	name 5. Admission me hoogetefnists ng name	P Bus Separ Opcositor Heapton, LKC National, Main Fland, National			
		Lass of locagement from (Low MINT 1777)	15/8/6/217	Less Of Recording to (CERTIN TTYS)	11600007	
24	the second s	1m. #10	I mánice.	In-lasts (200ml/1111)		
		1 50	1 543(345 Ex602817			
			Economisti Prost	In Dupport Of Claim		
'r nt using sys	item c alog. (Ctrl+ShiPi+P)	Gracterije Germany	ATTE \$5044	Ensemblely Services	ATTLICATES LETTER FOR BARL 2022 p.E	
		Presignary Det Brain	CONTRACT OF	Reparation Excellence	Codeadorf or a	
		NOTI-Grawit our	Constant Dates	Rotaria Roapina Fascacaling	CHELOSCIAL P	
		Conexistant larie	CONTRACTOR CONTRACTOR	Activate	ATLADAL	

Figure 14: Print Page





7. Change Management procedures

This document is meant for usage by the Department of School Education team and shall be the basis for preparing the test case, incident, log and the final report. Any changes made to the requirements in future shall have to go through a formal change approval process, wherever necessary and shall not make any alterations without the permission of the client and the development team.

8. Approvals

Table 3: Approvals

Inspected By	Date	Signature
Ramasrinu D	24.07.2017	
Approved By	Date	Signature
B.Bala Kishore	24.07.2017	