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Circular

To,

Superintendents, AB PM-JAY-KASP Empanelled Hospitals

Sub: SHA –KASP-AB PM-JAYScheme – Claim management – Documentation guidelines – Reg.

It is observed that the Empaneled hospitals under the AB PM-JAY-KASP need clarifications regarding the initiation of claims for certain treatment packages. The guidelines regarding the same is given below for a standardised documentation in the claim management.

- A. At the time of admission, hospitals should upload either the live photo captured at the counter of the beneficiary being treated or in case of emergency the valid Govt. approved id proof must be uploaded under the patient photo.
- B. With regards to certain day care therapies, the documents made mandatory by National Health Authority have been relaxed for Kerala State Health Care Providers. In order to build uniformity on documentation for all the Providers across the State on the below mentioned procedures, mandatory documents are as specified.
 - (i) Haemodialysis:
 - Patient details with Diagnosis and Date of Haemodialysis done.
 - Dialysis charting with Pre and Post Haemodialysis vitals recorded.
 - Signed by authorised personnel.
 - (ii) Peritoneal Dialysis:
 - Patient details with Diagnosis and Date of consultation.
 - Invoice for consumables along with the prescription signed by treating doctor.
 - (iii) Chemotherapy Packages:
 - Patient details with Diagnosis. (if recently diagnosed, Relevant investigations – HPR/CT/MRI/PET).
 - Charts of Chemotherapy regimen with dates and signed by authorised personnel along with transfusion slips (if applicable).

- Drug bar codes / actual invoice.

(iv) Radiotherapy Packages:

- Patient details with Diagnosis. (if recently diagnosed, Relevant investigations – HPR/CT/MRI/PET).
- Radiotherapy charting with dates and signed by authorised personnel.

- C. It has come to notice that some Health Care Providers, after completing one session of CT, were claiming the Chemotherapy package for complete sessions in one cycle. For such packages to be claimed, Providers should show IP admission of the patient, with Date of Admission on the 1st day of the cycle and Date of Discharge on the last day of the cycle, as mentioned in the HBP 2.0.
- D. Some of the Health Care Providers were forwarding the claims for which query was raised by processing Doctors without updating the requested document. As per the guidelines issued, processing doctors will only raise a query once and if not updated by the Health Care Providers on forwarding the pending claim, the claim would be rejected.

All Empaneled Hospitals under AB PM-JAY-KASP are requested to follow the above guidelines for the respective treatment packages utilised.

To

All concerned


Executive Director