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GOVERNMENT OF KERALA

Abstract

Health & Family Welfare Department -Arogya Kiranam Scheme-
Standard Operating Procedure -State Level Technical
Committee/District Level Technical Committees- Approved - Orders
Issued

HEALTH & FAMILY WELFARE (M) DEPARTMENT

G.O.(Rt)No.3356/2023/H&FWD Dated,Thiruvananthapuram, 20-12-
2023

- Read 1. G.O.(Rt) No.317/2022/H&FWD dated 09.02.2022
2. G.O.(Rt) No.2619/2022/H&FWD dated 01.11.2022
3. Letter no.SHA/154/2022-MGR (OPN) dated 19.10.2023
from Executive Director, State Health Agency.

ORDER

Arogya Kiranam scheme provides free treatment and related medical services to all patients belonging to BPL or APL categories (excluding dependents of government servants/ income tax payers) from birth to 18 years, as an entitlement. Earlier the scheme was operated through Director of Health Services (DHS) and implemented through National Health Mission (NHM).

2. As per the Government Order read as 1st paper above, a Technical Committee was constituted at State level under the chairmanship of Director, Malabar Cancer Center, Kannur for sanctioning financial assistance under Arogya Kiranam scheme and for preparation of list regarding the maximum amount that can be granted in each case, considering the nature of disease and expense of treatment.

3. As per the Government Order read as 2nd paper above, sanction

was accorded to State Health Agency to implement the Arogya Kiranam scheme from the 2022-23 financial year on wards.

4. The Technical Committee constituted vide Government Order read as 1st paper above has furnished a Standard Operating Procedure (SOP) for the operations of the State Level Technical Committee/District Level Technical Committees of the Arogya Kiranam Scheme vide 4th paper above .

5. The Government have examined the matter in detail and are pleased to accord sanction for the Standard Operating Procedure (SOP) as appended to this order for the operations of the State Level Technical Committee/District Level Technical Committees of the Arogya Kiranam Scheme.

(By order of the Governor)
SUBHASH R
ADDITIONAL SECRETARY

To:

The Executive Director, State Health Agency, Thiruvananthapuram
The Director, Malabar Cancer Center, Thalassery
The Director, I& PR(Web& New Media) Department
The Principal Accountant General(A&E, Audit), Kerala
Stock File [M4/128/2023-HEALTH]

Forwarded /By order
Signed by
Shaila Kumari M
Date: 21-12-2023 10:04:34
Section Officer

Copy To

P.S to Hon'ble Minister for H&FWD
P.A to Principal Secretary, H&FWD
C.A to Additional Secretary, H&FWD

STANDARD OPERATING PROCEDURE FOR PROCESSING HIGH-COST TREATMENT UNDER AROGYAKIRANAM SCHEME

About the Scheme

The "Arogyakiranam(AK)" is one of the flagship Health programmes of the Government of Kerala. The programme provides free treatment and related medical services to all patients from birth to 18 years, as an entitlement. The program entitles all beneficiaries (excluding dependants of Government Servants and income tax payees) from birth to 18 years to free investigation and treatment for all health conditions other than 30 conditions covered under Rashtriya Bal SwasthyaKaryakramm (RBSK) Guidelines. Children from birth to 1 year age will continue to receive existing treatment support entitled under Janani Shishu Suraksha Karyakaram (JSSK).

The beneficiaries who are entitled in Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY) / Karunya Arogya Suraksha Padhathi (KASP) scheme will continue to receive existing treatment support entitled under AB-PMJAY/KASP as priority. The AK beneficiaries can avail treatment support if there is no provision for treatment support under Thalolam, Cancer Suraksha or any other State Health Scheme. There is no APL/BPL differentiation in the scheme and all hospital expenses including OPD services will be covered under this scheme. Arogyakiranam benefits will be provided through all public hospital including PHC, CHC to Medical Colleges and Autonomous institutions in the public sector.

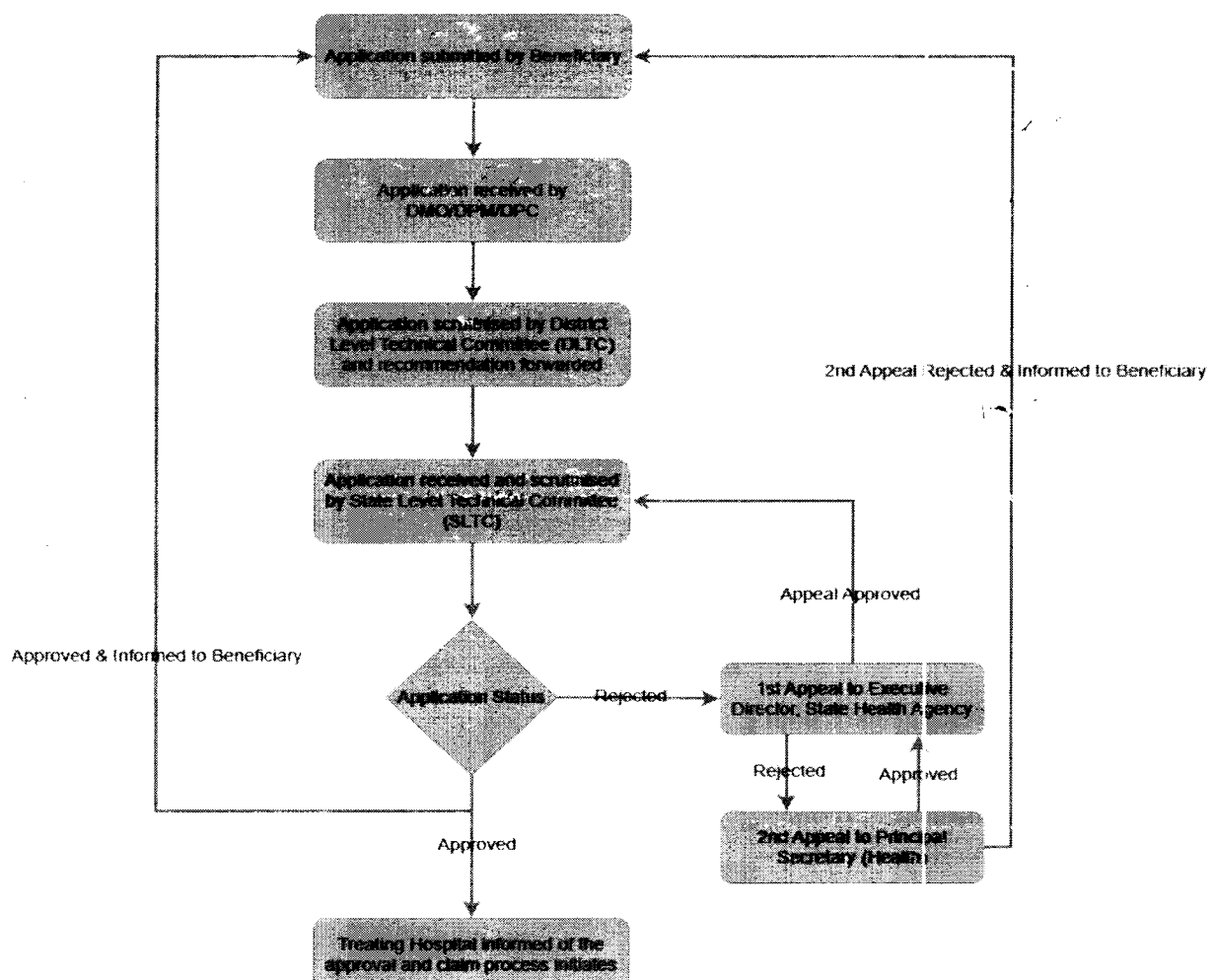
As per the G.O (Rt)No.2619/2022/H&FWD dated.01-11-2022, State Health Agency (SHA) Kerala is implementing the Scheme from 1st November 2020. In-patient (IP) services are integrated with the Transaction Management System (TMS), the IT platform of AB PM JAY/KASP and the Out-patient (OP) services are providing through the OPD module developed by SHA. For high-cost treatment, SHA adopted existing procedures without significant changes. The standard operating

procedures to be followed for processing of High-cost approval under the Scheme are as follows.

High-cost treatment procedures

High-cost treatment under the "Arogyakiranam" Scheme is defined as cases where the cost of treatment is between 2 lakhs to 30 lakhs (**based on range of applications received - NHM/SHA*). In such cases, approval of the authority is required as per the scheme guidelines for the beneficiary to receive treatment. A framework has been put in place for processing such applications.

The diagram below shows the broad overview of processing the application form received from the beneficiaries.



Description of the steps illustrated above is furnished below.

I. Submission of Application

The beneficiary can submit the application with all supporting documents as specified below to any of the following officers in the district.

1. District Medical Officer (H)
2. District Program Manager (NHM)
3. District Project Coordinator (SHA)

Supporting documents

- a. Complete treatment records including the investigation reports (the documents should be sufficient enough for the experts in the committee to assess the status of disease and diagnosis).
- b. An application in defined format (annexed) with self-affidavit by the applicant
- c. The treating physician's letter and cost estimate from the hospital.

If the application received is incomplete or inaccurate, the official should inform the beneficiary / treating hospital on the same within 24hrs of receipt of the application and should be given an opportunity to resubmit the same.

II. District Level Technical Committee (DLTC)

For the primary examinations and decisions, technical committees have been constituted in all districts under the scheme. The composition of the DLTC is as follows,

1. Chairperson – District Medical Officer (H)
2. Co-Chairperson - HOD (Paediatrics)/HOD of concerned speciality from the Govt. Medical college of the district or region.
3. Convenor – District Program Manager (NHM)
4. Member – District Project Coordinator (SHA)
5. Invited Technical Expert

The District Level Technical Committee (DLTC) should convene its meeting within 10 working days of receiving the application. The minimum quorum required for the execution of the committee is 3. The invited technical expert shall be invited from a medical college / any government institution. If a specific technical expert is not available, such an expert may be invited from a private institution. The Chairperson/Co-chair and the Convener along with the technical expert are mandatory. In extreme rare situations, the technical expert may be exempted, and it shall be reported in the MoM. After scrutinizing the application form and the medical documents, the committee should forward its recommendation to the State Level Technical Committee in digital format.

Detailed Terms of Reference for the committee is specified below:

- a) Monitoring of the Arogyakiranam scheme implementation in the district.
- b) Receipt and Evaluation of the High-Cost Tertiary treatments which are not included in the HBP of AB PM-JAY-KASP.
- c) Receipt of applications of treatment from Public Hospitals in the District with detailed treatment cost estimate and other supporting documents.
- d) The committee should review the request from the hospitals, if needed must examine the child after due consent from parents.
- e) The committee must write their individual recommendations and views in the prescribed format; the convener must consolidate the recommendations from the committee members with due signature of all members and forward the same with covering letter of chairman.
- f) The committee should examine the child personally to evaluate the overall prognosis before forwarding the recommendation to the State.
- g) The follow up activities regarding the cases should be carried out by the concerned DLTC and the status of the same should be reported to the SLTC on a priority basis.

Meeting:

The meeting shall be intimated to all members by the convener after confirming with Chairman. The agenda notes shall be submitted at least one

day prior to the day of the meeting through email. Technical expert shall be decided in consultation with the Chairperson/ Co-chairperson and arrange the same.

The meeting can be convened online or offline. The online platform shall be decided by the convener.

Minutes of Meeting:

The MoM shall be prepared within 24 hours and sent to the chair and the approved version shall be sent to all members. If any member has a difference of opinion on minutes or any deletion or addition noted, it shall be intimated to the convener and chairman through email. This shall be done within two days of receiving the MoM. If there is no suggestion, approval shall be intimated through email.

III. State Level Technical Committee (SLTC)

On receiving the applications, the State Level Technical Committee (SLTC) should convene its meeting within 10 working days. The minimum quorum required for the execution of the committee is 4. SLTC examines the application and recommendations made by the DLTC and then recommends appropriate decisions on the application to the next level as per the high-cost treatment approval criteria of the Scheme.

Composition of the SLTC is as follows,

- **Chairperson** - Director, Malabar Cancer Centre, Thalassery.
- **Convener** – Joint Director Operations, SHA Kerala.

Members:

1. Superintendent, Government Medical College Hospital, Kottayam.
2. State Nodal Officer, Child Health, National Health Mission Kerala.
3. Dr. Noble Gracious, Government Medical College Hospital, Thiruvananthapuram.
4. Dr. Ravi, Government Medical College Hospital, Thrissur.

5. Dr. Srikanth, General Hospital, Thiruvananthapuram.

6. Special invitee - Subject experts as suggested by the Chair.

Mandatory members- Chairman, and Convener

Terms of Reference for SLTC:

- a) Overall monitoring of Arogyakiranam implementation in the State.
- b) Evaluation of the reports submitted by the DLTC.
- c) Approval or Rejection of the applications forwarded by the District Level Committee after assessing the medical condition of the patient.
- d) The Technical committee shall submit the recommendations with specific remarks to the Executive Director, State Health Agency, Kerala. ED, SHA in turn shall issue the final orders.
- e) Fixations of the High-Cost procedure rates which are not available in the HBP.
- f) Recommending the proposals of District Committee to the Government with specific remarks for final approval.
- g) To prepare a reasonable and expected cost for High-Cost Procedure.
- h) To prepare and recommend a list of EHCPs who have the capability and potential to provide High-Cost Procedure.
- i) To recommend to SHA if a private EHCP or outside state EHCP is to be involved.
- j) The technical committee may instruct the EHCP or new service providers to provide the details of expertise and the number of procedures done so far and the outcomes.
- k) Collection and analysis of data on AK project and periodic review of the process
- l) Suggestions to improve the implementation and recommendations to the Government.

Meeting:

The meeting shall be intimated to all members by the convener after confirming with Chairman. The agenda notes shall be submitted at least one day prior to the day of the meeting through email. If any expert is required, the convener shall discuss with the Chair and arrange the same.

The meeting can be convened online or offline. The online platform shall be decided by the convener.

Minutes of Meeting:

The MoM shall be prepared within 24 hours and sent to the chair and the approved version shall be sent to all members. If any member has a difference of opinion on minutes or any deletion or addition noted, it shall be intimated to the convener and chairman through email. This shall be done within two days of receiving the MoM. If there is no suggestion, approval shall be intimated through email.

The chairman shall sign the MoM and submit to the Executive Director, State Health Agency Kerala.

IV. Final Approval

The order of the Executive Director, SHA Kerala, treatment will be issued based on the recommendations submitted by the SLTC. A copy of the order will be issued to the treating Hospitals/DLTC/Beneficiary. Further, the treating hospital should provide treatment to the beneficiary as per the proceedings issued and strictly undergo the procedures under the scheme for claiming process.

Conditions for Rejection

The rejection of an application under the Arogyakiranam (AK) scheme can occur for various reasons some common reasons for the rejection of an application under AK are,

- **Incomplete Application:** If the application form is not filled out completely or required documents are missing even after intimating the beneficiary at the time of receipt of application and providing adequate time for re-submission, it may lead to rejection.
- **Inaccurate Information:** Providing inaccurate or false information on the application can result in rejection.
- **Age Criteria:** If the applicant does not fall within the specified age range covered by the scheme (birth to 18 years), at the time submission of the application form, it may be rejected.
- **Parental eligibility:** Dependents of government servants and income tax payees are not eligible. Hence the application could be rejected.
- **Coverage of Specific Conditions:** If the applicant is seeking treatment for a medical condition that is not covered under the scheme or falls within the 30 conditions excluded from coverage, their application may be rejected.

To avoid rejection, it's crucial for applicants to carefully review the eligibility requirements and provide accurate and complete information. If any application is rejected based on recommendation of DLTC and/or after due verification of supporting medical documents, the reason for rejection should be clearly documented and the same should be intimated to the beneficiary as well as the treating hospital within 24hrs of SLTC.

Appeal option

If an application is rejected, applicants will have the option to appeal the decision at two levels: appealing to the Executive Director (ED) of the State Health Agency (SHA) and subsequently to the Principal Secretary (Health). The process is furnished below.

Appeal to the Executive Director (ED) of SHA: If an application is initially denied or rejected by the SLTC, a formal letter may be submitted to the Executive Director (ED) of the State Health Agency (SHA). This appeal should be submitted within

seven days of receiving the rejection notice. In the appeal letter, the applicant should clearly state the reasons for disagreement with the initial decision. It's crucial to provide all necessary documentation and evidence to support their case.

The Executive Director (ED) or their designated authority will review the appeal and reconsider the application within 7 days of receipt of the appeal. They may request additional information or clarification if needed. The ED's decision on the appeal will be communicated to the applicant in writing with a copy to SLTC for further processing. If the appeal is successful, the applicant can enjoy the scheme benefits.

Appeal to the Principal Secretary (Health): If the applicant is not satisfied with the decision of the Executive Director (ED) or if their appeal is again rejected at the ED level, they can submit an appeal to the Principal Secretary (Health) Govt. of Kerala. This appeal should also be submitted within 7 days after receiving the communication from ED, SHA. In the appeal letter the applicant should reiterate their case and provide reasons for disagreeing with the ED's decision with all supporting documents.

The Principal Secretary (Health) or their designated authority will conduct a thorough review of the case within 7 days of receipt of appeal. The decision of the Principal Secretary (Health) will be final and will be communicated to the applicant in writing along with SLTC for further action.