

GOVERNMENT OF ANDHRA PRADESH
ABSTRACT

Health, Medical & Family Welfare Department - Strengthening of Employees Health Scheme - Orders - Issued.

HEALTH, MEDICAL & FAMILY WELFARE (I.1) DEPARTMENT

G.O.Rt.No.353

Dated: 12.05.2023

Read the following:

1. G.O.Rt No.79, HM&FW(M2) Department, Dated.21.01.2014.
2. G.O.Rt No.150, HM&FW(I.1) Department, Dated.04.12.2014.
3. G.O.Rt No.345, HM&FW(I.1) Department, Dated.21.08.2018.
4. From the CEO, Dr.YSR Aarogyasri Health Care Trust, Mangalagiri, e_file No.2042551, dt.11.04.2023.

ORDER:

During the meeting convened by the Chief Secretary to Government on 14.03.2023 with the Employees Associations, certain requests were put forth for Strengthening of Employees Health Scheme. Accordingly, the CEO, Dr.YSR Aarogyasri Health Care Trust has furnished the proposals in the ref 4th read above.

2. After careful examination of the matter and keeping in view of the request made by the Employees Associations, Government hereby issue the following orders:

(i) 25 procedures under EHS having package prices above 2 lakhs will be permitted under Medical Reimbursement also with the same package price as upper ceiling, as an exception to G.O.Rt.No.79, HM & FW (M2) department, dated:21.01.2014 (the details of 25 Procedures are appended as Annexure-A to this order).

(ii) Permitted to start Outpatient services for chronic ailments at all 26 Districts in addition to the existing 14 centres in Teaching hospitals/Area Hospitals or District Hospitals with an initial set up cost not exceeding Rs.2 lakhs from the available EHS funds.

(iii) Dispensary system will be provided for EHS beneficiaries by setting up clinics at AHs for consultation, diagnostics, medicines and referral system to higher centres.

(iv) Government hereby permit the following package rates for 4 Dental procedures:

Sl.No.	Procedure	Present Package Rate(Rs.)	New Package Rate (Rs.)
1	Metal Ceramic Crown	1,392	1,500
2	Flap Surgery	6,710	8,700
3	Complete Denture	6,710	10,000
4	Orthodontic Treatment (Fixed Braces)	12,935	15,000

(v) The deleted 204 procedures under Medical Reimbursement Scheme shall be continued with EHS package rates as the ceiling in supercession of orders issued in G.O. Rt.No. 345, HM & FW (I.1) department, dated.21.08.2018.

(PTO)

3. The Chief Executive Officer, Dr.YSR Aarogyasri Health Care Trust, AP, Mangalagiri, Guntur District shall take further necessary action in the matter.

4. This order issues with the concurrence of the Finance (FMU, HM&FW) Department vide their U.O.No. FIN01-FMU0BES(HMF2)/11/2023-FMU-HMFW, dt.08.05.2023.

(BY ORDER AND IN THE NAME OF THE GOVERNOR OF ANDHRA PRADESH)

M.T.KRISHNA BABU

SPECIAL CHIEF SECRETARY TO GOVERNMENT

To,

The Chief Executive Officer,

Dr.YSR Aarogyasri Health Care Trust, AP, Mangalagiri, Guntur District.

The Director of Medical Education, A.P., Vijayawada.

The Commissioner, A.P. Vaidya Vidhana Parishad, Vijayawada.

All the Superintendents of Teaching Hospitals, A.P., through the DME, A.P., Vijayawada.

All the Superintendents of District Hospitals and Area Hospitals through the Commissioner, A.P. Vaidya Vidhana Parishad, Vijayawada.

All the Departments, AP Secretariat.

All the Heads of the Departments under control of HM & FW Department.

All the Collectors and District Magistrates in the State.

Copy to:

The Finance (FMU, HM&FW) Department.

The PS to Minister (HFW&ME)

The PS to Special Chief Secretary to Govt., HM&FW Department.

The Accountant General (A&E), AP, Vijayawada.

The Director of Treasuries and Accounts, AP, Vijayawada.

The PAO, AP, Vijayawada.

All the Employees and Pensioners Associations through

G.A. (Services Welfare) Department, A.P., Secretariat, Amaravati.
SF/SC.

// FORWARDED :: BY ORDER //


SECTION OFFICER

Annexure - A to GO. Rt. No.353 , HM & FW (I.1) Department, dt.12.05.2023

EHS Above 2 Lakhs Cases							
SN O	Code	Speciality Name	Treatment a Code	Treatments Name	Preauth Evidence	Price for Semi private ward Non NABH	Price for Private ward Non NABH
1	S11	SURGICAL ONCOLOGY	S11.2. 12	HCCCHEMO EMBOLIZATION	CT, Histopathological report, MRI	201500	203000
2	S12	MEDICAL ONCOLOGY	C19	auto transplant for lymphomas	2D Echo, BIOPSY, CBP, CMV, IHC, LFT, LYMPOMA PANEL, PETCT, RFT, TRIPLE CULTURES, VIRAL MARKERS	944000	953000
3	S12	MEDICAL ONCOLOGY	C30	Transplant for paediatric solid cancers (EWS, Neuro blastoma, Wilms tumour, RMS, Germcelltumour;	CBP, CMV, CT- CHEST AND ABDOMEN WITH CONTRAST, HEPATITIS -B CORE ANTIGEN, HSV, LFT, PETCT, RFT, TRIPLE CULTURES(BLOOD, URINE), VIRAL MARKERS	659000	668000
4	S12	MEDICAL ONCOLOGY	C88	Chemotherapy for Acute Lymphoblastic Leukaemia with Induction 1st And 2nd Months for (> 25 years) one time only	Bone Marrow test, Cytogenetic test, FLOW CYTOMETRY, Haematology	270900	271800
5	S12	MEDICAL ONCOLOGY	C89	Chemotherapy for Acute Lymphoblastic Leukaemia with Induction 1st And 2nd Months for (15 to 25 years) one time only	Bone Marrow test, Cytogenetic test, FLOW CYTOMETRY, Haematology	250900	251800
6	S12	MEDICAL ONCOLOGY	C90	Myeloma autologous HSCT	2D Echo, B2 MIC, CT- SCAN WITH CYTOGENIC TEST, FLOW CYTOMETRY, FREE LIGHT CHAINS, MRI- SPINE (OR) PET, PFT, RFT, SERUM AND URINE IMMUNOFIXATION ELECTROPHORESIS, SERUM PROTEIN ELECTROPHORESIS	659000	668000
7	S12	MEDICAL ONCOLOGY	C97	APML- Induction	BIOPSY, BMA Remission Report, CBP, KARYOTYPING, LFT, RFT	379000	388000
8	S13	RADIATION ONCOLOGY	C61	IGRT:List of Diseases - 1. CA Prostate non metastatic2. CA Lung non metastatic (minimum of 6600cGy in 33 fractions or its equivalent)	BIOPSY, CBP, CECT CHEST, RFT, USG Abdomen	275300	275600
9	S14	PLASTIC SURGERY	96.59. 5	Conservative management of 60% burns	Clinical Photograph	251349	264849
10	S19	ORGAN TRANSPLANTATI O N SURGERY	1.1.1	Heart Transplantation	Blood Group RH Type, C/S Of Nasal & Axillary & Groin & Dorsum of Hands for MRSA, Cardiac Cath with CAG and calculation OF TPG and / or PVR, Coagulation Profile . BT & CT & APTT & PT, Oxygen Saturation Values at Rest and Exercise, PFT, PRA, Serological Tests for HBV, USG Abdomen & HR CT Chest, VO2	1080210	1082910

11	S19	ORGAN TRANSPLANTATION SURGERY	1.1.2	Heart Transplantation Rejection		311160	314460
12	S19	ORGAN TRANSPLANTATION SURGERY	S19.2.1	HEART TRANSPLANTATION SURGERY	APTT, Axillary, CT, Dorsum of Hands for MRSA, Groin, HR CT Chest, PT, Blood Group RH Type, C/S Of Nasal, Cardiac Cath with CAG and calculation OF TPG and / or PVR, Coagulation Profile - BT, Oxygen Saturation Values at Rest and Exercise, PFT, PRA, Serological Tests for HBV, USG Abdomen, VO2	1080210	1082910
13	S19	ORGAN TRANSPLANTATION SURGERY	S19.2.2	HEART TRANSPLANTATION REJECTION		311160	314460
14	S7	CARDIAC AND CARDIOTHORACIC SURGERY	35.20.2	Double valve replacement (With Valve)	Cardiac CATH, Chest X-Ray PA View(1 Film) , ECG (Electro Cardiogram) , ECHO Cardiogram	220400	221000
15	S7	CARDIAC AND CARDIOTHORACIC SURGERY	35.20.3	Double valve replacement With Bio Prosthetic Valve	Cardiac CATH, Chest X-Ray PA View(1 Film) , ECG (Electro Cardiogram) , ECHO Cardiogram	245158	245758
16	S7	CARDIAC AND CARDIOTHORACIC SURGERY	35.22.2	Surgical management of Annulus Aortic Ectasia With Valved Conduits	CT Angiography (Coronary Angiography), CT Scan Chest Without Contrast , Chest X-Ray PA View(1 Film) , ECHO Cardiogram , MRI Angiogram, TEE (Transesophageal Echocardiogram)	207829	208429
17	S7	CARDIAC AND CARDIOTHORACIC SURGERY	35.22.3	Aortic Valve Replacement With Bioprosthetic Valve	Cardiac CATH, Chest X-Ray PA View(1 Film) , ECG (Electro Cardiogram) , ECHO Cardiogram , TEE (Transesophageal Echocardiogram)	204327	204927
18	S7	CARDIAC AND CARDIOTHORACIC SURGERY	35.8	Total Correction Of Complex Congenital Heart Disease With Special Conduits (Xeno Graft)	CT Angiography (Coronary Angiography) , CT Scan Chest Without Contrast, Chest X- Ray PA View(1 Film), ECHO Cardiogram	235519	237019
19	S7	CARDIAC AND CARDIOTHORACIC SURGERY	37.33.1	Surgical Treatment For MVR And Atrial Fibrillation- Maze Method	Coronary Angiogram Chest X-Ray PA View(1 Film) , ECG (Electro Cardiogram) , ECHO Cardiogram , Holter/24 Hr Ecg (Monitoring)	210514	211114
20	S7	CARDIAC AND CARDIOTHORACIC SURGERY	37.33.3	Surgical Treatment For MVR And Atrial Fibrillation- Hifu Method	ECG (Electro Cardiogram), ECHO Cardiogram, Holter/24 Hr Ecg (Monitoring)	209400	210000
21	S7	CARDIAC AND CARDIOTHORACIC SURGERY	38.40.1	Aneurysm Resection & Grafting	Angiography Cd, ECHO Cardiogram	227576	228176
22	S7	CARDIAC AND CARDIOTHORACIC SURGERY	38.44.3	Thoraco Abdominal Aneurysm Or Dissection Repair With Graft(38.45)	CT Scan Abdomen Without Contrast/MRI Abdomen Without Contrast, Chest X- Ray PA View(1 Film), ECHO Cardiogram	247892	249392
23	S7	CARDIAC AND CARDIOTHORACIC SURGERY	38.45	Intrathoracic Aneurysm - Requiring Bypass (With Graft)	ECHO Cardiogram, Pulmonary Angiogram(CT Angio Chest) Cd	229073	229673
24	S7	CARDIAC AND CARDIOTHORACIC SURGERY	39.54	Surgical management of Dissecting Aneurysms	CT Angiogram Abdomen , ECHO CD, ECHO Cardiogram	222874	223474
25	S9	GENITO URINARY SURGERIES	55.6	Renal Transplantation Surgery	Abdomen And Pelvis For Kidneys Ureters And Bladder (KUB), CT Scan Lower Abdomen With Contrast, HLA Typing, MRI Local Area, USG Abdomen	201058	207058