**Universal Health Coverage to Persons Living with Tuberculosis through Ayushman Bharat- Arogya Karnataka (AB-ArK)**

Government of Karnataka is committed to End TB in the state under “ Kshaya Muktha Karnataka (KMK) by 2025” which is aligned with National Strategic Plan 2017-25, Government of Karnataka. One of the visions of KMK is to reduce the out-of-pocket expenditure of TB patients who are accessing health care services. Ayushman Bharat- Arogya Karnataka (AB-ArK) is a flagship scheme of the government of Karnataka. The integrated AB-ArK has an objective of providing financial protection to poor and vulnerable families against catastrophic health expenditure and to reduce out of pocket expenditure of individuals who are accessing inpatients health care services. The state took up an initiative to extend AB-ArK services to all Persons Living with Tuberculosis who are residents of Karnataka irrespective of their APL/ BPL card status.

The approach was as follows

* District nodal officer of TB and AB-ArK are ensuring the enrolment of presumptive/confirmed TB patients in AB-ArK online portal at designated centers.
* District authorities have empaneled more private hospitals under AB-Ark for providing health care service to TB patients.
* The 58 procedural codes of AB-Ark that can be used for Tuberculosis care were identified and widely disseminated
* The procedural codes included 5 codes for definitive treatment packages of TB, 41 codes under indicative treatment packages for Tubeculosius care, 9 codes for indicative packages for investigation of presumptive Tuberculosis patient and 3 Other indicative codes for treatment of TB patients. The codes are specified in Annexures-1, 2, , 3 and 4, respectively.
* The existing trained TB program and AB-ArK staffs are being involved in the activity with no additional costs on the health system.

The integration got implemented in the state from FY-2018 and results of the same is as follows

**Table : Total number of TB patients availed inpatients health care services under AB-ArK**

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| --- | --- | --- | --- | --- |
| **Year**  | **Total Notified TB patients**  | **Total no. of TB patients availed AB-ArK services**  | **Proportion of TB patients availed TB services**  | **Approved amount in lakhs**  |
| FY 2018-19 # | 38418 | 98 | 0.3% | 7.96 |
| FY 2019-20 | 89795 | 1051 | 1.2% | 81.91 |
| FY 2020-21 | 64512 | 1514 | 2.3% | 151.03 |
| FY 2021-22\* | 35635 | 1156 | 3.2% | 109.02 |

**Note : # FY 2018-19 – November-18 to March-19 \* FY 2021-22 – April-21 to 25th October-21**

Proportion of persons living with TB availing inpatient health care services through AB-ArK has increased in the Karnatka from 0.3% in 2018-19 to 3.2% in 2021-22. The cost incurred by AB-ArK to provide TB services also increased from 7.96 lakhs in 2018-19 to 109.02 lakhs in 2021-22. The total out of pocket expenditure saved shall be around 349 lakhs in last 4 years.

**Annexure 1: List of definitive treatment packages for Tuberculosis under AB-ArK.**

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| **Procedure name** | **Rates in Govt** | **Rates in private** | **Pre-op Investigation** | **Post-op Investigation** | **Specialization** |
| 4A.M2.00035(D,E,F,G):TB- routine ward | Routine ward- 1350/ HDU - 2025 / ICU - 2700/With ventilator -3375 | Routine ward- 1800/ HDU - 2700 / ICU - 3600/With ventilator -4500 | CBC, CT | CBC,CT | Pulmonary Medicine  |
| 2A.M1.00027 : Pericardial/ Pleural TB | 900; 1350.1800; 2250 | 1800; 2700.3600; 4500 | clinical notes, Smearexamination, X-ray chest | clinical notes, X-ray chest | General medicine |
| 2B.M2.00050 : Intracranial ring enhancing.lesion with complication (neurocysticercosis, tuberculoma) | routine ward- 1350/ HDU - 2025 / ICU - 2700/With ventilator -3375 | routine ward- 1800/ HDU - 2700 / ICU - 3600/With ventilator -4500 | Clinical Notes with relevant investigations | Treatment Notes | Pediatrics |
| 2B.S5.17021: Anterolateral Clearance For TB | 13500 | 18000 | MRI | X Ray film with report,Clinical Photograph | Orthopedics |
| 3A.S13.00067 : Encysted Empyema/Pleural Effusion – Tubercular | 20000 | 20000 | Pre-Op X-ray / CT Scan | Post Op X-ray / CT Scan | Cardiothoracic Surgery |

**Annexure -2 List of indicative treatment packages related to Tuberculosis under AB-Ark**

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| **Procedure name** | **Rates in Govt****hospitals** | **Rates in private****hospitals** | **Pre-op Investigation** | **Post-op****Investigation** | **Specialization** |
| 2A.S5.00076 : Sequestrectomy of Long Bones +anti-biotics + dressing | 12500 | 25000 | X-ray, Clinical photo | X-ray | Orthopedics |
| 2A.S1.00025 : Drainage of Psoas Abscess | 3750 | 7500 | CT/USG , clinical notes, X-Ray of spine | Clinical photo, OT notes | General Surgery |
| 2A.S1.00249 : Aspiration of cold Abscess ofLymph node | 1500 | 3000 | Clinical photo, x-raychest | Scar photo, HPE |
| 2A.S1.00250 : Aspiration of Empyema | 1000 | 2000 | Chest X-ray | C&S Report, X-Ray |
| 2B.S4.00069 : Diagnostic laparoscopy &hysteroscopy for infertility | 3750 | 4500 | USG and clinicalnotes | OT Note | OBG |
| 2A.M1.00019 : Pneumonia | 900; 1350.1800,2250 | 1800; 2700.3600; 4500 | clinical notes, X-ray | clinical notes | Generalmedicine |
| 2A.M2.00029 : Acute severe malnutrition | 900; 1350.1800,2250 | 1800; 2700.3600; 4500 | Clinical note with Labreports | Treatment note | Pediatrics |
| 2B.M1.00033 : Lung abscess/ Empyema | Routine ward - 1350/HDU - 2025 /ICU - 2700/With ventilator - 3375 | Routine ward - 1800/HDU - 2700 /ICU - 3600/With ventilator –4500 | clinical notes, X-ray/USG -chest | clinical notes, X-ray/USG -chest | General Medicine |
| 3A.M1.00034: Acute and chronic meningitis | Clinical Notes with relevant investigations | Treatment Notes | General Medicine |
| 3A.M1.00047: Severe pneumonia | Clinical Notes with relevant investigations | Treatment Notes | General Medicine |
| 3A.M2.00015 : Chronic cough | Clinical Notes with relevant investigations | Treatment Notes | General Medicine |
| 4A.M1.00006 : Pneumothorax | Clinical Notes with relevant investigations | Treatment Notes | General Medicine |
| 4A.M1.00020 : Acute exacerbation of ILD | Clinical Notes with relevant investigations | Treatment Notes | General Medicine |
| 4A.M1.00044 : Type 1/2 respiratory failure | Clinical Notes with relevant investigations | Treatment Notes | General Medicine |
| 4A.M1.00067 : Respiratory failure due to any cause (pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.) | Clinical Notes with relevant investigations | Treatment Notes | General Medicine |
| 4A.M2.00088 : Respiratory failure due to any causes (pneumonia, asthma, foreign body, poisoning, head injury etc.) - routine ward | Clinical Notes with relevant investigations | Treatment Notes | Pediatrics |
| 4A.S13.00066 : Intercostal Drainage and Management of ICD, Intercostal Block,Antibiotics & Physiotherapy | 15000 | 15000 | Pre-Op X-ray / CT Scan | Post Op X-ray / CT Scan | Cardiothoracic ic Surgery |
| 3A.M1.00039 : HIV with complications | routine ward - 1350/ HDU - 2025 / ICU -2700/ With ventilator – 3375 | routine ward - 1800/ HDU -2700 / ICU -3600/ With ventilator – 4500 | clinical notes, Blood examination report | clinical notes | General medicine |
| 3A.M2.00036 : HIV with complications - | Clinical note with Lab reports | Treatment note | Pediatrics |
| 3A.M2.00042 : Persistent pneumonia | Pediatrics |
| 3A.M2.00065 : Severe pneumonia | Pediatrics |
| 3A.S13.17102 : Lobectomy | 70000 | 70000 | CT Chest report | Post Op X-ray, scarphoto | Cardiothoracicic Surgery |
| 4A.M2.00017(A,B,&C) :Unexplained seizures | routine ward - 1350/ HDU - 2025 / ICU -2700/ With ventilator – 3375 | routine ward - 1800/ HDU -2700 / ICU -3600/ With ventilator – 4500 | Clinical notes detailing history andAdmission notes showing vitals andexamination findings; any investigations done; planned line ofmanagement | Detailed ICPs, Treatment details,detailed discharge summary, Allinvestigations reports. | NeonatalAndPediatricsSurgeries |
| 4A.M2.00027(A,B,&C):Pyogenic meningitis  | routine ward - 1350/ HDU - 2025 / ICU -2700/ With ventilator – 3375 | routine ward - 1800/ HDU -2700 / ICU -3600/ With ventilator – 4500 | Clinical notes detailing history andAdmission notes showing vitals andexamination findings; any investigations done; planned line ofmanagement | Detailed ICPs, Treatment details,detailed discharge summary, Allinvestigations reports. | NeonatalAndPediatricsSurgeries |
| 3A.M1.00034B(A,B,&C): Acute and chronic meningitis | routine ward - 1350/ HDU - 2025 / ICU -2700/ With ventilator – 3375 | routine ward - 1800/ HDU -2700 / ICU -3600/ With ventilator – 4500 | Clinical Notes with relevantinvestigations | Treatment Notes | General Medicine |
| 3A.M1.00047 (A,B,&C):Severe pneumonia | routine ward - 1350/ HDU - 2025 / ICU -2700/ With ventilator – 3375 | routine ward - 1800/ HDU -2700 / ICU -3600/ With ventilator – 4500 | Clinical Notes with relevantinvestigations, X-ray/USG of chest | Treatment Notes | General Medicine |
| 3A.M1.00034 (A,B,&C): Acute and chronic meningitis | routine ward - 1350/ HDU - 2025 / ICU -2700/ With ventilator – 3375 | routine ward - 1800/ HDU -2700 / ICU -3600/ With ventilator – 4500 | Clinical Notes with relevantinvestigations | Treatment Notes | General Medicine |
| 4A.M1.00067C:Respiratory failure due to any cause(pneumonia, asthma, COPD, ARDS, foreign body, poisoning, head injury etc.) | routine ward - 1350/ HDU - 2025 / ICU -2700/ With ventilator – 3375 | routine ward - 1800/ HDU -2700 / ICU -3600/ With ventilator – 4500 | Clinical notes, X-ray/CT chest  | Clinical notes, X-ray/CT chest | General Medicine |
| 2A.S1.00017: A.S1.00017 : Cervial Lymphnodes Excision | General ward- 1000 | General ward- 2000 | USG/Biopsy/ FNAC | USG, HPE Report | General surgery  |
| 2A.S1.00018 : Colostomy | General ward- 10000 | General ward- 20000  | Biopsy of the primary + CT Scan with film | Clinical Photograph of operated site | General surgery |
| 2B.S1.00043 : Excision Small Intestinal Fistula | General ward-9000 | General ward- 12000 | USG/ CT, provisional diagonsis | 1. Scar photo, 2. Clinical notes, 3. Daily bed side rounds notes, 4. OT notes 5. LAB investigations, 6.Discharge summary 7.Final bill | General surgery |
| 2B.S1.00086 : Intestinal Obstructio | General ward-9375 | General ward- 12500 | X-Ray abdomen /CT /USG, provisional diagonsis | 1. Scar photo, 2. Clinical notes, 3. Daily bed side rounds notes, 4. OT notes 5. LAB investigations, 6.Discharge summary 7.Final bill 8. USG | General surgery  |
| 2B.S1.00090 : Intestinal Perforation (Resection Anastomosis) | General ward- 15000 | General ward- 20000 | Erect abdomen X Ray/CT Abdomen, provisional diagonsis | 1. Scar photo, 2. Clinical notes, 3. Daily bed side rounds notes, 4. OT notes 5. LAB investigations, 6.Discharge summary 7.Final bill | General surgery |
| 2B.S1.00095 : Ileostomy | General ward- 15000 | General ward- 20000 | Biopsy of the primary + CT Scan with film, provisional diagnosis | 1. Scar photo, 2. Clinical notes, 3. Daily bed side rounds notes, 4. OT notes 5. LAB investigations, 6.Discharge summary 7.Final bill | General surgery |
| 3A.S1.00120 : Resection Anastomosis (Large Intestine) | General ward- 11250 | General ward- 15000 | USG / CT Scan | Scar photo, HPE | General surgery |
| 3A.S1.00121 : Resection Anastomosis (Small Intestine) | General ward- 11250 | General ward- 15000 | USG / CT Scan | Scar photo, HPE | General surgery |
| 3A.S1.00179 : Laparoscopic Adhesinolysis | General ward- 11250 | General ward- 15000 | MRI/ CT Abdomen | Scar Photo, HPE Report | General surgery |
| 3A.S1.00201 : Caecostomy | General ward- 7500 | General ward- 10000 | Clinical notes, USG/ CT | Scar photo, HPE | General surgery |
| 3A.S1.00202 : Closure of Colostomy | General ward-22500 | General ward-30000 | Colonoscopy, Biopsy | Clinical Photograph showing scar | General surgery |
| 3A.S1.00234 : Thoracoscopic Decortication | General ward-18750 | General ward-25000 | Clinical Photograph | Scar photo | General surgery |
| 4A.S15.00021A : Tracheostomy | General ward - 3750 | General ward-5000 | Clinical photo | Clinical photo | General surgery |

**Annexure -3 List of indicative packages for investigation of presumptive Tuberculosis.**

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| **Procedure name** | **Rates in Govt****hospitals** | **Rates in private****hospitals** | **Pre-op Investigation** | **Post-op Investigation** | **Specialization** |
| 3A.M2.00015(H,I,J& K) : Chronic cough | Routine ward- 1350/ HDU - 2025 / ICU - 2700/With ventilator -3375 | Routine ward- 1800/ HDU - 2700 / ICU - 3600/With ventilator -4500 | Clinical note with Lab reports | Treatment note | PULMONOLOGY |
| 2A.S1.00249 : Aspiration of cold Abscess of Lymph node | 1500 | 3000 | Clinical photo, x-ray chest | Scar photo, HPE | GeneralSurgery |
| 2A.S1.00250 : Aspiration of Empyema | 1000 | 2000 | Chest X-ray | C&S Report, X-Ray |  |
| 2B.S1.00046 : Excision of Swelling in Right Cervical Region | 3000 | 4000 | FNAC/ Biopsy | HPR |
| 2B.S4.00069 : Diagnostic laparoscopy & hysteroscopy forinfertility | 3750 | 4500 | USG and clinicalnotes | OT Note | OBG |
| 2A.M1.00071 : High end radiological diagnostic (CT, MRI, Imaging including nuclear imaging) - can only be clubbed withmedical package. Rs 5000 per annum limit to a family) | 2500 | 5000 | Clinical notes | Clinical notes | General Medicine |
| 2A.M1.00072 : High end histopathology (Biopsies) andadvanced serology investigations - can only be clubbed with medical package. Rs 5000 per annum limit to a family | 2500 | 5000 | Clinical notes | Clinical notes | General Medicine |
| 3A.S15.17169 : VATS/Laparoscopy ( for deep seated biopsy) | 7500 | 10000 | CT report with film | Scar Photo | Oncology |
| 2A.S1.00250: Aspiration of Empyema |  1000 | 2000 | Chest X-ray  | C&S Report, X-Ray | General surgery |

**Annexure 4: Other indicative codes for treatment of TB patients**

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| **Procedure name** | **Rates in Govt****hospitals** | **Rates in private****hospitals** | **Pre-op Investigation** | **Post-op Investigation** | **Specialization** |
| 2A.M1.00068 : Blood and blood component transfusion (admission for a diagnostic procedure leading to treatment requiring admission, e.g. bone marrow and bone biopsy, endoscopy, liver biopsy, bronchoscopy, CT/MRI under GA, broncho-alveolar lavage, lumbarpuncture, muscle biopsy, pleural aspiration, ascitic tapping etc.) | 1000 | 2000 | Blood group matching | Clinical notes | General Medicine |
| 2A.M1.00068A : Blood and blood component transfusion (admission for a diagnostic procedure leading to treatment requiring admission, e.g. bone marrow and bone biopsy, endoscopy, liver biopsy, bronchoscopy, CT/MRI under GA, broncho-alveolar lavage, lumbarpuncture, muscle biopsy, pleural aspiration, ascitic tapping etc.) | 1000 | 2000 | Blood group matching | Clinical notes | Pediatrics |
| 2B.M2.00099 : Blood and blood component transfusion up to a limit of 2 days(admission for a diagnostic procedure leading to treatment requiring admission, e.g. bone marrow and bone biopsy, endoscopy, liver biopsy, bronchoscopy, CT/MRI under GA, broncho-alveolar lavage, lumbar puncture, muscle biopsy, FNAC, pleural aspiration, ascitic tapping,neostigmine challenge test etc.) | 1125 | 1500 | Clinical note with Lab reports | Treatment note and HPE report | Pediatrics |