

On approval of the Rules for the provision of primary health care

Unofficial translation

Order of the Minister of Health of the Republic of Kazakhstan dated August 24, 2021 No. RK HM-90. Registered with the Ministry of Justice of the Republic of Kazakhstan on August 24, 2021 No. 24094.

Unofficial translation

In accordance with subparagraph 82) of article 7 of the Code of the Republic of Kazakhstan "On the health of the people and the healthcare system" and subparagraph 1) of article 10 of the Law of the Republic of Kazakhstan "On public services" **DECREE:**

1. Approve the Rules for the provision of primary health care in accordance with the annex to this order.

2. The Department of Organization of Medical Assistance of the Ministry of Health of the Republic of Kazakhstan, in the manner prescribed by the legislation of the Republic of Kazakhstan, shall ensure:

1) state registration of this order with the Ministry of Justice of the Republic of Kazakhstan;

2) placement of this order on the Internet resource of the Ministry of Health of the Republic of Kazakhstan after its official publication;

3) within ten working days after the state registration of this order with the Ministry of Justice of the Republic of Kazakhstan, providing information to the Legal Department of the Ministry of Health of the Republic of Kazakhstan on the implementation of the measures provided for in subparagraphs 1) and 2).

3. To impose control over the execution of this order on the supervising Vice Minister of Health of the Republic of Kazakhstan.

4. This order shall be enforced ten calendar days after the day of its first official publication.

*Minister of Health
of the Republic of Kazakhstan*

A. Tsoy

"AGREED"

Ministry of Digital Development,
Innovation and Aerospace
Industry of the Republic of Kazakhstan

Appendix
to the order of the
Minister of Health of

Rules for the provision of primary health care

Chapter 1. General Provisions

1. These Rules for the provision of primary health care (hereinafter referred to as the Rules) are developed in accordance with subparagraph 82) of Article 7 of the Code of the Republic of Kazakhstan "On the health of the people and the healthcare system" (hereinafter referred to as the Code) and subparagraph 1) of Article 10 of the Law of the Republic of Kazakhstan " On public services" and determine the procedure for providing primary health care to the population.

2. Basic concepts used in these Rules:

1) specialized specialist - a medical worker with higher medical education who has a certificate in the field of health;

2) pre-medical medical care - medical care provided by paramedical workers independently or as part of a multidisciplinary team, including health promotion, assessment of the patient's condition, making a pre-medical diagnosis, prescribing a plan of pre-medical interventions, performing pre-medical manipulations and procedures and caring for patients, persons with disabilities and dying people;

3) authorized body in the field of health care (hereinafter referred to as the authorized body) - the central executive body that exercises leadership and intersectoral coordination in the field of health protection of citizens of the Republic of Kazakhstan, medical and pharmaceutical science, medical and pharmaceutical education, sanitary and epidemiological well-being of the population, circulation of medicines and medical devices, quality of medical services (assistance);

4) dynamic observation - systematic monitoring of the patient's health, as well as the provision of necessary medical care based on the results of this observation;

5) imputed medical insurance (hereinafter referred to as the IMI) - a type of health insurance for foreigners, temporarily staying in the Republic of Kazakhstan, in accordance with the Law of the Republic of Kazakhstan "On population migration" and international treaties, ratified by the Republic of Kazakhstan, allowing to receive medical services on the conditions determined by the order of the Minister of Healthcare of the Republic of Kazakhstan dated June 7, 2023 № 111 "On approval of the model contract of imputed medical insurance and the minimum list of medical care for imputed medical insurance" (registered in the Register of State Registration of Regulatory Legal Acts under № 32732);

6) clinical protocol - scientifically proven recommendations for the prevention, diagnosis, treatment, medical rehabilitation and palliative medical care in a certain disease or condition of the patient;

7) service recipient - individuals and legal entities, with the exception of central state bodies, foreign institutions of the Republic of Kazakhstan, local executive bodies of regions, cities of republican significance, capital, districts, cities of regional significance, akims of districts in the city, cities of regional significance, districts, villages, , rural districts;

8) service provider - central state bodies, foreign institutions of the Republic of Kazakhstan, local executive bodies of regions, cities of republican significance, capital, districts, cities of regional significance, akims of districts in the city, cities of regional significance, villages, rural districts, as well as individuals and legal entities providing public services in accordance with the legislation of the Republic of Kazakhstan;

9) primary health care (hereinafter referred to as PHC) - the place of first access to medical care focused on the needs of the population, including prevention, diagnosis, treatment of diseases and conditions provided at the level of a person, family and society;

10) public service - one of the forms of implementation of individual state functions or their combination, carried out with or without the appeal of service recipients and aimed at realizing their rights, freedoms and legitimate interests, providing them with appropriate material or intangible benefits;

11) compulsory social health insurance (hereinafter referred to as the CSHI) - a set of legal, economic and organizational measures to provide medical care to consumers of medical services at the expense of the assets of the social health insurance fund;

12) compulsory social health insurance system - a set of standards and rules established by the state that regulate relations between participants in the compulsory social health insurance system;

13) medical care in the system of compulsory social health insurance - the amount of medical care provided to consumers of medical services at the expense of the assets of the social health insurance fund;

14) family doctor - a doctor who has undergone special multidisciplinary training in the provision of primary health care to family members and has a certificate of a specialist in the field of health;

15) patronage - medical workers carrying out preventive and informational measures at home (patronage of a newborn, patronage of a pregnant woman, a delivery woman, a dispensary patient);

16) the guaranteed amount of free medical care (hereinafter referred to as the GAFMC) is the amount of medical care provided at the expense of budgetary funds.

Footnote. Paragraph 2 – in the wording of the order of the Minister of Healthcare of the Republic of Kazakhstan dated 27.03.2024 № 10 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

3. PHC shall provide medical care to the population:

1) within the framework of the GAFMC;

2) CSHI;

3) within the framework of voluntary medical insurance in accordance with the Law of the Republic of Kazakhstan "On insurance activities";

4) within the IUD in accordance with the Code.

Footnote. Paragraph 3 – in the wording of the order of the Minister of Healthcare of the Republic of Kazakhstan dated 31.07.2023 № 141 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

4. The PHC organization ensures the provision of medical care in accordance with the standards for organizing the provision of medical care, approved by the authorized body in accordance with paragraph 3 of Article 138 of the Code, in compliance with the anti-epidemic regime of work on the basis of the current regulatory legal acts in the field of sanitary and epidemiological welfare of the population.

5. The PHC organization maintains primary medical documentation and submits reports in the forms and in the manner established by the authorized body in accordance with the order of the Acting Minister of Health of the Republic of Kazakhstan dated October 30, 2020 № RK HM-175/2020 "On approval of forms of accounting documentation in the healthcare" (hereinafter - Order № RK HM-175/2020) (registered in the Register of State Registration of Regulatory Legal Acts under № 21579), including through medical information systems.

Chapter 2. The procedure for providing primary health care

6. PHC is provided by general practitioners (family doctors), district therapists, pediatricians, paramedics, obstetricians, extended practice (general practice) nurses, district nurses, social workers, health psychologists in accordance with paragraph 3 of Article 123 of the Code.

7. According to paragraph 2 of Article 123 of the Code, PHC organizations operate according to the following principles:

1) family principle of service;

2) territorial accessibility of PHC;

3) free choice of a medical organization within the territorial accessibility;

4) patient satisfaction with the quality of medical care;

5) equality and fair competition regardless of the form of ownership and departmental affiliation;

6) PHC services, covering prevention, diagnosis and treatment, available to all patients regardless of their location.

8. In the PHC organization, a site is formed with the assignment of site specialists to serve the assigned population.

The number of assigned population per general practitioner, with the exception of rural medical organizations providing PHC, does not exceed 1,700 people of a mixed population, a district therapist 2,200 people, a district pediatrician - 500 children from 0 to 6 years old, 900 children from 7 to 18 years old.

9. In accordance with Article 117 of the Code, PHC is provided in the following forms:

1) emergency - medical care provided in case of sudden acute diseases and conditions, exacerbation of chronic diseases requiring urgent medical intervention to prevent significant harm to health and (or) eliminate the threat to life, regardless of the fact of attachment;

2) emergency - medical care provided in case of sudden acute diseases and conditions, exacerbation of chronic diseases that do not pose a clear threat to the patient's life;

3) planned - medical care provided for diseases and conditions that are not accompanied by a threat to the life of the patient, the delay in the provision of which for a certain time will not entail a deterioration in the patient's condition, as well as when carrying out preventive measures at the place of attachment by appointment or appeal.

10. PHC is provided under the conditions provided for in subparagraphs 1), 3), 4), 5), 6) of paragraph 1 of Article 118 of the Code.

11. PHC includes the services defined in paragraph 1 of Article 123 of the Code.

12. PHC includes:

1) pre-hospital medical care, which is provided by paramedical workers (district nurse (general practice nurse), paramedic, obstetrician) in case of diseases or in cases that do not require the participation of a doctor according to the list of medical services provided by PHC medical workers (paramedic, obstetrician, nurse with secondary and (or) higher medical education) in accordance with Appendix 1 to these Rules;

2) qualified medical care, which is provided by a general practitioner, a local general practitioner and (or) a pediatrician according to the list of medical services provided by PHC doctors (general practitioner, a local therapist and (or) a local pediatrician) in accordance with Appendix 2 to these Rules ;

3) medical and social assistance, which is provided by a social worker and a psychologist in the field of health according to the list of services of a social worker and a psychologist of a PHC organization in accordance with Appendix 3 to these Rules.

13. The PHC organization provides the attached population with the provision of specialized medical care in accordance with paragraph 2 of Article 124 of the Code, including through the conclusion of a co-execution agreement by the supplier with co-executors included in the database of healthcare subjects.

Paragraph 1. The procedure for organizing diagnostics and treatment in primary health care organizations

14. During the initial application to the PHC organization, the registry is issued in electronic format in medical information systems, the medical card of the outpatient in the form № 052 / y, approved by Order № RK HM-175/2020.

In the absence of technical feasibility, the medical record of an outpatient patient is issued in paper form, with subsequent entry into the medical information system.

The PHC organization ensures the safety of primary medical records, including in electronic form.

15. Persons apply to PHC organizations regarding the appeal in accordance with Appendix 4 to these Rules.

16. In the event of a patient applying for an acute disease (condition) or exacerbation of a chronic disease specialists of the PHC organization determine the methods of diagnosis and treatment in accordance with clinical protocols .

When a patient contacts a PHC organization for an emergency, acute illness (condition), a receptionist or medical worker (district nurse (general practice nurse), paramedic, obstetrician) directs the patient to the pre-medical office (filter).

In the pre-medical office (filter), a medical worker (district nurse (general practice nurse), paramedic, obstetrician) after examining the patient provides the necessary pre-hospital medical care.

In conditions requiring the provision of qualified and specialized medical care, the medical worker calls the doctor on duty or the district doctor. If there are indications, the medical worker provides a call for an ambulance team and sends the patient in an emergency form to a round-the-clock hospital according to the profile.

In conditions that do not require emergency hospitalization, further monitoring of the patient is carried out on an outpatient basis, including through remote counseling through information and communication technologies.

If it is necessary to provide specialized medical care to patients with suspected coronavirus infection and patients with coronavirus infection, remote consultations of specialized specialists are organized.

17. Specialists of the PHC organization refer the patient to a day hospital or a round-the-clock hospital in a planned form through the Portal of the Bureau of Hospitalization.

18. Calls for emergency medical care of the fourth category of urgency in PHC organizations are carried out in accordance with the Rules for the provision of emergency medical care, including with the involvement of medical aviation, approved by order of the Minister of Health of the Republic of Kazakhstan dated November 30, 2020 № RK HM-225/2020 (registered in the Register of State Registration of Normative Legal Acts under № 21713).

19. The PHC organization provides the following services with home visits:

patronage ;

active visitation of the patient;

house call ;

hospital at home;

medical rehabilitation 3 stages;

family planning, safe abortion , reproductive health services ;

healthy lifestyle activities;
medical and social support;
psychological help;
issuing prescriptions ;
dynamic monitoring of persons with chronic diseases ;
dynamic monitoring of persons with socially significant diseases ;
departure of the palliative mobile team;
departure of a mobile team for patients with suspected coronavirus infection and patients with coronavirus infection.

20. Patronage is carried out:

- 1) children under 5 years old, including newborns;
- 2) pregnant women and puerperals;
- 3) families with children under 5 years of age, pregnant women or women in childbirth, where medical or social risks have been identified that pose a threat to their life, health and safety;
- 4) patients with chronic diseases without exacerbation with restriction of movement;
- 5) patients in need of palliative care.

21. Patronage of children under 5 years of age, including newborns, is carried out in accordance with the standard for organizing the provision of pediatric care in the Republic of Kazakhstan, approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 of Article 138 of the Code.

22. Patronage of pregnant women and puerperas is carried out in accordance with the standard for organizing the provision of obstetric and gynecological care in the Republic of Kazakhstan, approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 of Article 138 of the Code.

23. Under patronage, the PHC organization conducts mandatory scheduled visits, in cases of identifying medical or social risks to the life, health or development of the child, additional active visits are carried out according to an individual plan for pregnant women, newborns and children in need of special support.

Patronage supervision is provided to all pregnant women and children under 5 years of age and consists of 2 prenatal visits to a pregnant woman (up to 12 weeks and 32 weeks of pregnancy) and 9 visits to children according to the general scheme of observation of pregnant women, newborns and children under 5 years of age by a doctor or paramedic, or paramedical worker at home and at the reception in PHC organizations.

Patronage supervision is provided to pregnant women and children who have identified medical or social risks that pose a threat to their life, health, development and safety under the scheme of a universally progressive approach to patronage of pregnant women and children under 5 years of age (patronage visits at home by a paramedical worker), in accordance with the standards organizations provision of pediatric and obstetric-gynecological care in the

Republic of Kazakhstan, approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 of Article 138 of the Code.

24. Information about the recipient (last name, first name, patronymic, address of residence, phone numbers of the patient or legal representative) of services is entered into the information system of the Ministry of Health of the Republic of Kazakhstan "Unified Payment System".

25. The results of the patronage of pregnant women by the district nurse are entered into the individual card of the pregnant woman and the puerperal in the form 077 / y, and newborns and children under 5 years old are entered into the medical record of the outpatient patient and form an individual plan for working with the family in the form 052 / y, approved by the Order № RK HM-175/2020, including through medical information systems.

In the absence of technical feasibility, it is issued in paper form, with subsequent entry into the medical information system.

26. When performing patronage, a PHC specialist uses: a centimeter tape, thermometers for measuring body temperature and room temperature, a phonendoscope and a tonometer, hand disinfectant, a minimum first aid kit, and information materials. In cases of introducing medical information systems, including mobile applications, a PHC specialist uses a tablet or smartphone with a mobile application.

27. The head nurse of the PHC organization or in her absence, the district doctor (general practitioner) coordinates the organization of patronage.

28. An active visit to the patient at home by a specialist of the PHC organization, including through door-to-door (door-to-door) rounds, is carried out when:

1) discharge from a hospital or transfer of information (assets) from an ambulance station, in patients with a serious condition with movement restrictions;

2) non-appearance of pregnant women and puerperals for an appointment within 3 days after the appointed date;

3) the arrival of the puerperal to the service area according to the information received from the healthcare organizations providing obstetric and gynecological care, regardless of the attachment status;

4) the threat of an epidemic of an infectious disease, including persons who refused to be vaccinated or identifying patients with an infectious disease, persons in contact with them and persons suspected of an infectious disease by door-to-door visits.

Active visits to the patient at home are mainly carried out by the district nurse or paramedic.

29. The service of calls at home by the specialists of the PHC organization is coordinated by the head of the department of the district (general medical) service, in his absence, the district doctor (general practitioner, district therapist (pediatrician)).

Reception of calls to the house is carried out by the registry of the PHC organization and (or) the district nurse or paramedic.

30. Indications for servicing calls at home are appeals to the PHC organization, with the exception of emergency calls of the fourth category of urgency, by persons who, due to health reasons and the nature of the disease, are unable to visit the PHC organization.

Indications for home care of a district nurse or paramedic:

- 1) body temperature up to 38°C at the time of the call;
- 2) increase in arterial pressure without disturbances of health;
- 3) conditions, diseases, injuries (without loss of consciousness, without signs of bleeding, without a sharp sudden deterioration in condition), requiring medical care and consultation at home;

Indications for servicing calls at home by a local doctor:

- 1) conditions assessed by the PHC registry when receiving a call, by the district nurse or paramedic who served the call, as requiring a medical examination at home.
- 2) deterioration after vaccination.

Children under 5 years of age, pregnant women and women in childbirth with any deterioration in their health are served at home. Persons over 65 years of age are served at home with restriction of movement.

31. The results of active visits to pregnant women and puerperals are entered into the individual card of the pregnant woman and the puerperal in the form № KR HM-175/2020.

32. In cases of medical procedures and manipulations and the absence of the possibility of visiting the organization, the services of a hospital at home are provided for medical reasons.

33. The management of patients in a hospital at home and in a day hospital is carried out by medical workers of the PHC organization in accordance with the Rules provision of specialized medical care in hospital-replacing conditions, approved in accordance with subparagraph 47) of paragraph 16 of the Regulation on the Ministry of Health of the Republic of Kazakhstan approved by the Decree of the Government of the Republic of Kazakhstan dated February 17, 2017 № 71 (hereinafter referred to as the Regulation).

34. The PHC organization ensures the provision of special social services in accordance with the standard for the provision of special social services in the field of healthcare, approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 of Article 138 of the Code.

35. In the case of determining outpatient treatment and prescribing medical procedures, the patient is issued a prescription in accordance with the Rules for issuing, recording and storing prescriptions, approved by order of the Minister of Health of the Republic of Kazakhstan dated October 2, 2020 № RK HM-112/2020 (registered in the Register of State Registration normative legal acts under № 21493) for medicines and referral to the treatment room of the PHC organization or the appointment of medical procedures at home. Evaluation of the effectiveness of outpatient treatment and its correction is carried out by the PHC doctor who referred for treatment.

36. The issuance of medicines by medical workers of PHC organizations is not allowed, with the exception of specialists certified for this type of activity with medical education (medical outpatient clinics, medical and feldsher-obstetric stations in settlements that do not have pharmacy facilities).

37. In PHC organizations, drug provision of the attached population within the framework of the guaranteed volume of free medical care and (or) in the compulsory health insurance system is carried out in accordance with the list medicines and medical devices for free and (or) preferential outpatient provision of certain categories of citizens of the Republic of Kazakhstan with certain diseases (conditions), approved by the authorized body in accordance with subparagraph 47) of Article 7 of the Code.

Paragraph 2. The procedure for organizing prevention and rehabilitation in primary health care organizations

38. Prevention of diseases in the PHC organization includes:

- 1) preventive medical examinations of target population groups;
- 2) early detection and monitoring of behavioral risk factors for diseases of the attached population and training in skills to reduce identified risk factors;
- 3) immunization;
- 4) formation and promotion of a healthy lifestyle;
- 5) measures to protect reproductive health;
- 6) antenatal monitoring of pregnant women and monitoring of puerperas in the late postpartum period;
- 7) sanitary - anti -epidemic and sanitary - preventive measures in the centers of infectious diseases;

39. Preventive medical examinations of target groups and early detection of behavioral risk factors are carried out with the frequency, frequency and volume of diagnostic services in accordance with the order of the Minister of Health of the Republic of Kazakhstan dated December 15, 2020 № RK HM-264/2020 "On approval of the rules, volume and frequency conducting preventive medical examinations of target groups of the population, including children of preschool, school age, as well as students of technical and vocational, post-secondary and higher education organizations" (registered in the Register of State Registration of Normative Legal Acts under № 21820).

40. In order to conduct preventive consultations and provide detailed recommendations on changing the behavior of persons with behavioral risk factors, the organization of primary health care for the attached population provides training in skills to reduce identified risk factors. This training is conducted by a specialist of the PHC organization in prevention rooms or specially designated areas, including through remote counseling through information and communication technologies.

41. Activities to raise awareness and literacy of the population, as well as consult PHC specialists on the formation of a healthy lifestyle, nutrition and other topical issues of maintaining health, are carried out by health organizations that carry out activities in the field of promoting a healthy lifestyle, healthy nutrition.

42. The PHC organization provides reproductive health services by:

1) conducting prenatal training for pregnant women in preparation for childbirth, including for partner childbirth, informing pregnant women about alarming signs, effective perinatal technologies, the principles of safe motherhood, and breastfeeding;

2) counseling and provision of services on family planning;

3) prevention and detection of sexually transmitted infections for referral to specialized specialists;

4) prevention of unwanted pregnancy and safe abortion.

5) prevention of cancer of the reproductive organs (cancer of the cervix and breast).

43. The PHC organization provides antenatal monitoring of pregnant women, monitoring of puerperas in the late postpartum period, dynamic monitoring of women of childbearing age with extragenital pathology in accordance with the standard for organizing the provision of obstetric and gynecological care in the Republic of Kazakhstan, approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 articles 138 of the Code.

44. The PHC organization ensures the conduct of preventive examinations of the oral cavity of children in preschool educational institutions and the training of children in sanitary and hygienic skills in caring for the teeth and oral mucosa on their own or by concluding a co-execution agreement with healthcare organizations providing dental care.

45. The prevention of infectious diseases at the level of the PHC site includes:

timely detection of patients;

conducting preventive vaccinations ;

sanitary - anti -epidemic and sanitary - preventive measures in the centers of infectious diseases.

Active detection of infectious diseases among the attached population is carried out upon receipt of an official notification of an outbreak of an infectious disease by actively visiting the patient at home by a medical worker of PHC organizations, including by house-to-house (door-to-door) rounds.

46. The organization of primary health care for the prevention of infectious diseases ensures the conduct of preventive vaccinations in accordance with the list of diseases against which mandatory preventive vaccinations are carried out within the guaranteed volume of medical care and the Rules the timing of their mandatory preventive vaccinations within the guaranteed volume of medical care, approved by the Decree of the Government of the Republic of Kazakhstan dated September 24, 2020 № 612 “On approval of the list of diseases against which mandatory preventive vaccinations are carried out within the guaranteed

volume of medical care, rules, timing of their implementation and population groups subject to preventive vaccinations.

47. The PHC organization conducts preventive vaccinations for the population in accordance with the requirements of regulatory legal acts in the field of sanitary and epidemiological welfare of the population, approved in accordance with subparagraph 3) of paragraph 16 of the Regulations.

48. Accounting for preventive vaccinations is carried out by the relevant records in the registration forms that are stored at health facilities at the place of vaccination, at the facilities of preschool education and training, education: a register of preventive vaccinations in the form 066 / y, a card of preventive vaccinations in the form № 065 / y, an outpatient medical record in the form № 052 / y, approved by Order № RK HM-175/2020, including through medical information systems.

In the absence of technical feasibility, it is issued in paper form with subsequent entry into the medical information system.

49. Specialists of the PHC organization carry out explanatory work among the attached population on the issues of immunoprophylaxis, including with persons who refuse vaccination.

50. The PHC organization organizes work in the centers of infectious diseases and carries out sanitary and anti-epidemic and sanitary and preventive measures in accordance with regulatory legal acts in the field of sanitary and epidemiological welfare of the population, approved in accordance with subparagraph 3) of paragraph 16 of the Regulations.

51. In case of detection of diseases, according to the list of infectious, parasitic diseases and diseases that pose a danger to others, in the treatment of which specialized medical care is provided in a hospital within the framework of the guaranteed volume of medical care, approved by order of the Acting Minister of Health of the Republic of Kazakhstan dated October 28, 2020 № RK HM-162/2020 (registered in the Register of State Registration of Normative Legal Acts under № 21537) and the list of diseases that pose a danger to others and the amount of medical care in which foreigners and stateless persons temporarily staying in the Republic of Kazakhstan, asylum seekers, have the right to receive a guaranteed volume of free medical care, approved by order of the Minister of Health of the Republic of Kazakhstan dated October 9, 2020 № RK HM-121/2020 (registered in the Register of State Registration of Normative Legal Acts under № 21407), PHC specialists implement take measures in accordance with sanitary rules approved in accordance with subparagraph 3) of paragraph 16 of the Regulations.

52. The PHC organization organizes and conducts a set of measures for prevention, active early detection and diagnosis of tuberculosis in accordance with the Rules for carrying out measures for the prevention of tuberculosis, approved by order of the Minister of Health of

the Republic of Kazakhstan dated November 30, 2020 № RK HM-214/2020 (registered in the Register state registration of regulatory legal acts under № 21695) (hereinafter - Order № RK HM-214/2020), including through medical information systems.

53. The PHC organization organizes and conducts an examination according to epidemiological indications for the presence of HIV infection in accordance with the Rules for mandatory confidential medical examination for the presence of HIV infection, approved by order of the Minister of Health of the Republic of Kazakhstan dated November 27, 2020 № RK HM-211/2020 (registered in the Register of State Registration of Normative Legal Acts under № 21692).

54. The PHC organization organizes and conducts a set of measures for the prevention and active early detection of precancerous and oncological diseases in accordance with the standard for organizing oncological care for the population of the Republic of Kazakhstan, approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 of Article 138 of the Code.

55. PHC shall organize and carry out a set of measures for the prevention and active early detection of patients with mental and behavioral disorders in accordance with the standard for organizing the provision of medical and social assistance in the field of mental health to the population of the Republic of Kazakhstan, approved by the order of the Minister of Healthcare of the Republic of Kazakhstan dated November 30, 2020 № RK HM-224/2020 (registered in the Register of State Registration of Regulatory Legal Acts under № 21712) (hereinafter referred to as the order № RK HM-224/2020).

The authorized body in the field of health, within three working days from the date of approval or amendment to these Rules, shall update them and send them to the subjects of health care, the operator of the information and communication infrastructure of the "electronic government" and the Unified Contact Center.

Footnote. Paragraph 55 – in the wording of the order of the Minister of Healthcare of the Republic of Kazakhstan dated 27.03.2024 № 10 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

Paragraph 3. The procedure for organizing dynamic monitoring, medical rehabilitation and palliative care, examination of temporary disability in primary health care organizations

56. Specialists of the PHC organization carry out dynamic monitoring of patients with chronic diseases in accordance with the order of the Minister of Health of the Republic of Kazakhstan dated September 23, 2020 № RK HM-109/2020 "On approval of the list of chronic diseases subject to dynamic monitoring" (registered in the Register of State Registration of Regulatory Legal acts under № 21262).

The patient is registered for dynamic observation in the PHC organization at the place of attachment on the basis of one of three documents:

- 1) conclusions of a PHC doctor ;

- 2) advisory opinion of a specialized specialist;
- 3) extracts from the medical record of the inpatient.

57. When registering a patient taken for dynamic observation for the first time, the district nurse fills out sheet 5 to the outpatient medical record in the form 052 / y “dynamic observation”, approved by Order № RK HM-175/2020, including through medical information systems.

In the absence of technical feasibility, it is issued in paper form, with subsequent entry into the medical information system.

58. Dynamic monitoring of persons with chronic diseases is carried out by specialists of PHC organizations: PHC doctors (general practitioner, district physician and (or) district pediatrician), paramedical workers (district nurse or paramedic).

If there are indications, social workers in the field of health, psychologists and specialists from healthy lifestyle cabinets are involved.

59. The list, volumes, frequency of examinations of the district nurse, PHC doctor, specialized specialists, laboratory and instrumental studies, observation periods, deregistration criteria are determined in accordance with the order of the Minister of Health of the Republic of Kazakhstan dated October 23, 2020 № RK HM-149 /2020 “On approval of the rules for organizing the provision of medical care to people with chronic diseases, the frequency and timing of observation, the mandatory minimum and frequency of diagnostic studies” (registered in the Register of State Registration of Regulatory Legal Acts under № 21513) (hereinafter - Order № RK HM-149 / 2020).

60. Dynamic monitoring of patients with chronic diseases within the framework of the Disease Management Program is carried out in accordance with Order № RK HM-149/2020.

61. Dynamic monitoring of patients who have had tuberculosis, persons of group III with an increased risk of tuberculosis is carried out in accordance with order № RK HM-214/2020.

Dynamic observation of oncological patients is carried out for patients of group Ia with a disease suspected of malignant neoplasms, group Ib with precancerous diseases, group IV with common forms of malignant neoplasms subject to palliative or symptomatic treatment in accordance with the standard for organizing the provision of oncological care to the population of the Republic of Kazakhstan, approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 of Article 138 of the Code.

62. For persons with chronic diseases, if indicated, the PHC organization provides medical rehabilitation , palliative care and nursing care services with the provision of special social and medical services.

63. The PHC organization ensures the provision of medical rehabilitation, palliative care and nursing care services in accordance with the standards medical care organizations approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 of Article 138 of the Code.

64. The organization of PHC ensures the provision in accordance with the standard organization of the provision of palliative care to the population, approved by order of the Minister of Health of the Republic of Kazakhstan dated November 27, 2020 № KR HM-209/2020 (registered in the Register of State Registration of Regulatory Legal Acts under № 21687) and the standard for organizing the provision of nursing care to the population of the Republic of Kazakhstan, approved by the authorized body in accordance with subparagraph 32) of Article 7 and paragraph 3 of Article 138 of the Code.

65. The PHC organization performs an examination of temporary disability in accordance with the Rules for the examination of temporary disability, as well as the issuance of a sheet or certificate of temporary disability, approved by order of the Minister of Health of the Republic of Kazakhstan dated November 18, 2020 № legal acts under № 21660).

Chapter 3. The procedure for organizing the provision of public services provided by organizations of primary health care

66. In accordance with subparagraph 1) of Article 10 of the Law of the Republic of Kazakhstan “On Public Services” (hereinafter referred to as the Law), PHC organizations provide the following public services:

- 1) making an appointment with a doctor;
- 2) calling a doctor at home;
- 3) issuance of a certificate from a medical organization providing PHC;
- 4) attachment to a medical organization providing PHC.

67. The PHC organization provides the patient with the state service "Making an appointment with a doctor" upon self-treatment, by telephone or through the "electronic government" web portal (hereinafter referred to as the EGP).

Information about identity documents or an electronic document from the digital document service (for identification), the PHC organization receives from the relevant state information systems through the PEG.

The list of basic requirements for the provision of the public service "Making an appointment with a doctor", including the characteristics of the process, the form, content and result of the provision, as well as other information, taking into account the specifics of the provision of the public service, is given in Appendix 5 to these Rules.

When the patient contacts the PHC organization on his own or by telephone, PHC specialists make an entry in the journal “Preliminary appointment for an appointment with a doctor” and provide an oral response indicating the free time and date of the doctor’s appointment, in accordance with the doctor’s appointment schedule.

When a patient applies through the PEG, the patient receives a notification in the form of the status of an electronic application in the "Personal Account". After accepting the request for the provision of the state service " Make an appointment with a doctor", medical assistance to the patient is provided at the scheduled time.

The PHC organization ensures the entry of data on the provision of the public service “Making an appointment with a doctor” into the information system in order to monitor the provision of public services in accordance with subparagraph 11) of paragraph 2 of Article 5 of the Law.

68. The PHC organization provides the patient with the state service "Calling a doctor at home" upon self-treatment, by telephone or through a PEG.

Information about identity documents or an electronic document from the digital document service (for identification), the PHC organization receives from the relevant state information systems through the PEG.

The list of basic requirements for the provision of the public service "Calling a doctor at home", including the characteristics of the process, the form, content and result of the provision, as well as other information, taking into account the specifics of the provision of the public service, is given in Appendix 6 to these Rules.

When the patient contacts the PHC organization independently or by telephone, PHC specialists make an entry in the Call Log and provide an oral response indicating the date and time of the visit to the doctor. After accepting the request for the provision of the state service "Calling a doctor at home", medical care at home is provided at the set time.

When a patient applies through the PEG, the patient receives a notification in the form of the status of an electronic application in the "Personal Account". After accepting the request for the provision of the state service "Calling a doctor at home", medical care is provided to the patient at the scheduled time.

The organization providing PHC ensures the entry of data on the provision of the public service "Calling a doctor at home" into the information system in order to monitor the provision of public services in accordance with subparagraph 11) of paragraph 2 of Article 5 of the Law.

69. To receive the state service "Issuance of a certificate from a medical organization providing primary health care", patients independently apply to the PHC organization or through the PEG.

Information about identity documents or an electronic document from the digital document service (for identification), the PHC organization receives from the relevant state information systems through the PEG.

The list of basic requirements for the provision of the public service "Issuance of a certificate from a medical organization providing primary health care", including the characteristics of the process, the form, content and result of the provision, as well as other information, taking into account the specifics of the provision of the public service, is given in Appendix 7 to these Rules.

When the patient directly contacts the PHC organization, PHC specialists check the medical information system about the patient's condition / not condition on dynamic observation, then a certificate is issued in the form № 027 / y, approved by Order № "Medical

report" with the name of the diagnosis, and is certified by the personal signature and seal of the local doctor or general practitioner and the seal of the primary care organization, with the exception of socially significant diseases (tuberculosis, disease caused by the human immunodeficiency virus (HIV), mental, behavioral disorders (disease)).

When a patient applies through the PEG, a certificate is generated from the medical organization in the form of an electronic document, with an electronic digital signature (hereinafter referred to as the EDS) of the PHC organization, which is sent to the "Personal Account".

As a result, a certificate is issued from the PHC organization on the status and (or) not the status on dynamic observation.

The PHC organization ensures that data on the provision of the public service "Issuance of a certificate from a medical organization providing primary health care" is entered into the information system in order to monitor the provision of public services in accordance with subparagraph 11) of paragraph 2 of Article 5 of the Law.

70. Attachment to a PHC organization at the place of permanent or temporary residence is carried out in accordance with the state service "Attachment to a medical organization providing primary health care" in accordance with the Rules for attaching individuals to health organizations providing primary health care, approved by order of the Minister of Health care of the Republic of Kazakhstan dated November 13, 2020 № RK HM-194/2020 (registered in the Register of State Registration of Regulatory Legal Acts under № 21642).

Chapter 4. Procedure for appealing decisions, actions (inaction) of the service provider and (or) its officials regarding the provision of public services

Footnote. Chapter 4 - in the wording of the order of the Minister of Healthcare of the Republic of Kazakhstan dated 07.12.2021 № RK HM-125 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

71. A complaint about the decisions, actions (inaction) of the service provider and (or) their employees regarding the provision of public services shall be submitted to the head of the service provider.

The complaint of the service recipient received by the service provider directly providing the state service, in accordance with paragraph 2 of Article 25 of the Law "On state services," shall be subject to consideration within five working days from the date of its registration.

The complaint of the service recipient received by the authorized body for assessment and control over the quality of public services shall be subject to consideration within fifteen working days from the date of its registration.

When contacting through the portal, information on the appeal procedure can be obtained by calling a unified contact center on the provision of public services.

72. Pre-trial consideration of a complaint on the provision of public services shall be carried out by a higher administrative body authorized by the body for assessment and control

over the quality of public services (hereinafter referred to as the body considering the complaint).

A complaint shall be filed with the service provider, whose decision; action (inaction) shall be appealed.

The service provider, whose decision, action (inaction) shall be appealed, no later than three working days from the date of receipt of the complaint shall send it and the administrative case to the body considering the complaint.

At the same time, the service provider, whose decision, action (inaction) shall be appealed, has the right not to send a complaint to the body considering the complaint, if he makes a decision or other administrative action that fully meets the requirements specified in the complaint within three working days.

Unless otherwise provided by law, an appeal to a court is allowed after a pre-trial appeal.

Appendix 1
to the Rules for the provision
of primary health care

**List of medical services provided by
primary health care workers (paramedic, obstetrician, nurse
with secondary and (or) higher medical education)**

№ p / p	Service code	Name of service
1.	A01.008.000	Reception: Paramedic
2.	A01.008.002	Education of the population on disease prevention: Paramedic
3.	A01.008.003	Teaching the patient self-management: Paramedic
4.	A01.008.008	Pre-medical examination in the examination room: Paramedic
5.	A01.008.009	Preventive oral examination: Paramedic
6.	A01.008.010	Teaching children sanitary and hygienic skills for caring for teeth and oral mucosa: Paramedic
7.	A01.008.012	Complex of medical rehabilitation services: Paramedic
8.	A01.008.013	Providing emergency medical care: Paramedic
9.	A01.009.000	Admission: Graduate Nurse
10.	A01.009.002	Education of the population on disease prevention: Nurse with higher education
11.	A01.009.003	Teaching the patient self-management: Nurse with higher education

12.	A01.009.008	Pre-medical examination in the examination room: Nurse with higher education
13.	A01.009.009	Preventive oral examination: Nurse with higher education
14.	A01.009.010	Teaching children sanitary and hygienic skills for caring for teeth and oral mucosa: Nurse with higher education
15.	A01.009.012	Complex of medical rehabilitation services: Nurse with higher education
16.	A01.010.000	Reception: Nurse with secondary education
17.	A01.010.002	Education of the population on disease prevention: Nurse with secondary education
18.	A01.010.003	Teaching Patient Self-Management: Nurse with Secondary Education
19.	A01.010.008	Pre-medical examination in the examination room: Nurse with secondary education
20.	A01.010.009	Preventive oral examination: Nurse with secondary education
21.	A01.010.010	Teaching children sanitary and hygienic skills for caring for teeth and oral mucosa: Nurse with secondary education
22.	A01.010.012	Complex of medical rehabilitation services: Nurse with higher education
23.	A01.011.000	Reception: Midwife
24.	A01.011.003	Patient self-management education: Midwife
25.	A01.011.008	Pre-medical examination in the examination room: Midwife
26.	A01.011.013	School of preparation for childbirth of a pregnant woman and family members: Midwife
Laboratory diagnostics (first aid)		
27.	B03.866.003	Determination of urine parameters (pH, leukocytes, erythrocytes, urobilinogen, nitrites, protein) by express method
28.	B03.401.003	Determination of total cholesterol in blood serum by express method
29.	B03.335.003	Determination of glucose in blood serum by express method

30.	B03.486.003	Determination of triglycerides in blood serum by express method
31.	B03.517.003	Determination of human chorionic gonadotropin (hCG) in urine by express method (pregnancy test)
32.	B03.860.003	Determination of total antibodies to HIV-1,2 and p24 antigen by express method
33.	B03.861.003	Determination of antibodies to Treponema Pallidum in blood serum by express method (quick test for syphilis)
34.	B03.862.003	Determination of total antibodies to hepatitis C virus in blood serum by express method
35.	B03.863.003	Determination of HBsAg in blood serum by express method
36.	B03.870.003	Examination of a smear for the presence of amniotic fluid by the express method
Procedures and manipulations		
37.	D99.293.012	Taking blood from a vein
38.	D99.296.013	Finger blood sampling
39.	D91.496.105	Taking a smear for oncocytopology
40.	D91.496.106	Taking a smear for the degree of purity of the vagina
41.	D99.293.012	Collection of material for microbiological studies
42.	D99.296.013	Conducting a Mantoux test
43.	D91.496.105	Carrying out Diaskintest
44.	D96.330.014	Gastric lavage
45.	D96.390.015	Enema
46.	A01.009.018	Carrying out inhalation
47.	A01.009.019	Sanitation of the respiratory tract with an electric suction
48.	A01.009.020	Washing of sulfur plugs
49.	A01.009.021	Sanitation of the nasal sinuses
50.	A01.009.022	Placement of a nasogastric tube
51.	A01.009.023	duodenal sounding
52.	A01.009.024	Bladder catheterization
53.	A01.009.025	Catheterization of peripheral veins
54.	A01.009.026	Transport immobilization
55.	A01.009.027	Sanitation of the vagina
56.	A01.009.028	Eye wash (excluding the cost of medicines)
57.	A01.009.029	Washing the tympanic cavity

58.	A01.009.030	Dezo dressing
59.	A01.009.031	Subconjunctival injection (excluding the cost of medicines)
Procedures and manipulations of nursing care		
60.	D93.891.018	Nursing procedures for the elderly patient
61.	D93.891.019	Teaching the patient's family members the elements of care and hygiene
62.	D93.891.020	Prevention and treatment of bedsores
63.	D93.571.415	dressing
64.	D93.891.022	Care of hair, nails, shaving of a seriously ill patient
65.	D93.891.023	Oral care for a critically ill patient
66.	D93.891.024	Suction of mucus from the oropharynx
67.	D93.891.025	Help with orostomy, esophagostomy
68.	D93.891.026	Help with tracheostomy
69.	D93.891.027	Caring for your nasogastric tube, nasal prongs, and catheter
70.	D93.891.028	Suction of mucus from the upper respiratory tract
71.	D93.891.029	Suction of mucus from the nose
72.	D93.891.030	Help with pharyngostomy
73.	D93.891.031	Administration of drugs intranasally
74.	D93.891.032	Help with gastrostomy
75.	D93.891.033	Caring for your nasogastric tube
76.	D93.891.034	Feeding a seriously ill patient through a gastrostomy
77.	D93.891.035	Help with ileostomy
78.	D93.891.036	Caring for your intestinal tube
79.	D93.891.037	Feeding a seriously ill patient through an intestinal tube
80.	D93.891.038	Ileostomy Care Training
81.	D93.891.039	Colon Stoma Assistance
82.	D93.891.040	Colostomy care training
83.	D93.891.041	Assistance for defecation of a seriously ill patient
84.	D93.891.043	Installing a gas tube
85.	D93.891.044	Coprolite removal
86.	D93.891.045	Help for fecal incontinence
87.	D93.891.046	Setting a siphon enema
88.	D93.891.047	Insertion, removal of the vaginal support ring (PEGsary)

89.	D93.891.048	Caring for the external auditory canal
90.	D93.891.049	Eye Care for a Seriously Ill Patient
91.	D93.891.050	Instillation of medicinal substances into the conjunctival cavity
92.	D93.891.051	Urination aid for the critically ill patient
93.	D93.891.052	Caring for your urinary catheter
94.	D93.891.053	Cystostomy and Urostomy Care
95.	D93.891.054	Help for urinary incontinence
96.	D93.891.055	Moving and (or) placing a seriously ill patient in bed
97.	D93.891.056	Transportation of a seriously ill patient within the facility
98.	D93.891.057	Feeding a critically ill patient by mouth and/or nasogastric tube
99.	D93.891.058	Preparation and change of bed linen for a seriously ill patient
100.	D93.891.059	Benefit for changing linen and clothes for a seriously ill patient
101.	D93.891.060	Care of the perineum and external genitalia of a seriously ill patient
102.	D93.891.061	Drainage Care
103.	D93.891.062	Benefit for parenteral administration of drugs
104.	D93.891.063	Pressure ulcer risk assessment
105.	D93.891.064	Assessment of severity of bedsores
106.	D93.891.065	Pain Intensity Assessment
107.	D93.891.066	Training of family members of the patient in the technique of transfer and (or) placement in bed
108.	D93.891.067	Teaching the patient self-help when moving in bed and (or) chair
109.	D93.891.068	Teaching the patient to walk on crutches
110.	D93.891.069	Teaching the patient self-help when moving with an additional support
111.	D99.590.019	Vaccination without the cost of the drug
112.	D97.311.050	Removal of sutures, removal of ligatures
113.	D04.001.000	Training in preventive offices, health improvement schools
		Education of patients and their families in self-management,

114.	D04.002.000	self-help and mutual assistance in accordance with chronic disease management programs
115.	D04.003.000	Hot line consultation
List of treatment room services provided by primary health care providers		
116.	D99.590.022	Intramuscular injection (excluding the cost of medicines)
117.	D99.590.023	Intravenous injection (excluding the cost of medicines)
118.	D99.590.024	Subcutaneous injection (excluding the cost of medicines)

Appendix 2
to the Rules for the provision
of primary health care

List of medical services provided by primary health care physicians (general practitioner, district physician and (or) district pediatrician)

№ p / p	Service code	Name of service
1.	A01.001.000	Reception: Therapist
2.	A01.001.002	Drawing up a plan for the recovery of the patient: District therapist
3.	A01.001.005	Family Planning and Safe Abortion Counseling: Community Therapist
4.	A01.001.006	Teaching the patient self-management: District therapist
5.	A01.001.007	Assessment of the social status of the patient's family: District therapist
6.	A01.002.000	Reception: Pediatrician
7.	A01.002.002	Drawing up a plan for the improvement of the patient: District pediatrician
8.	A01.002.007	Assessment of the social status of the patient's family in case of socially significant diseases: District pediatrician
9.	A01.003.000	Reception: Family doctor (General practitioner)
10.	A01.003.002	Drawing up a plan for the recovery of the patient: General practitioner
11.	A01.003.005	Family Planning and Safe Abortion Counseling: General Practitioner
12.	A01.003.006	Patient Self-Management Training: General Practitioner
13.	A01.003.007	Assessment of the social status of the patient's family in case of socially significant diseases: General practitioner

Laboratory diagnostics (qualified medical care)		
14.	B02.061.002	Measurement of erythrocyte sedimentation rate (ESR) in blood by manual method
15.	B03.864.003	Determination of hemoglobin in the blood by express method
16.	B03.865.003	Determination of leukocytes in the blood by express method
17.	B03.867.003	Determination of troponin by express method
18.	B03.868.003	Determination of glycated hemoglobin by express method
19.	B03.869.003	Determination of prothrombin time, INR on a portable analyzer by express method
20.	B06.672.012	Determination of the blood group according to the ABO system with standard sera
21.	B06.673.012	Determination of the blood group according to the ABO system with monoclonal reagents (zoliclones)
22.	B06.677.012	Determination of the Rh factor of blood
Functional and instrumental diagnostics		
23.	C02.001.000	Electrocardiographic study (in 12 leads) with decoding
24.	C02.033.000	Spirography when recording on automated devices
25.	C02.048.000	Dynamometry
26.	C02.054.000	Pulse oximetry

Appendix 3
to the Rules for the provision
of primary health care

The list of services of a social worker and a psychologist of the organization of primary health care

№ p / p	Service code	Name of service
Psychologist services		
1.	A01.005.000	Reception: Psychologist
2.	A01.005.001	Conducting child suicide prevention classes: Psychologist
3.	A01.005.002	Appointment for suspected behavioral and psychoactive disorders: Psychologist
4.	A01.005.003	Counseling on social issues, including age adaptation: Psychologist

5.	A01.005.009	Teaching the patient self-management with chronic diseases: Psychologist
Services of a social worker		
6.	A01.006.000	Admission: Graduated social worker
7.	A01.006.001	Organization and conduct of medical and social examination: Social worker with higher education
8.	A01.006.002	Teaching the patient's family members the basics of home health care: Graduate Social Worker
9.	A01.006.003	Consulting on social issues, including on issues of age adaptation : Social worker with higher education
10.	A01.007.000	Reception: Social worker with secondary education
11.	A01.007.001	Organization and conduct of medical and social examination: Social worker with secondary education
12.	A01.007.002	Teaching the patient's family members the basics of home health care: Social worker with a secondary education
13.	A01.007.003	Counseling on social issues, including age adaptation: Social worker with secondary education

Appendix 4
to the Rules for the provision
of primary health care

Reasons for applying to the organization of primary health care

№ p / p	Group of reasons for applying	Name of the reasons for the appeal
1.	Disease	Emergency conditions
		Acute disease (condition) and (or) exacerbation of a chronic disease
		Suspicion of a socially significant disease
		Assets
		Medical rehabilitation (stage 3)
		Planned dental care
		Emergency Dental Care
		Orthodontic care for children with congenital pathology of the maxillofacial region
		Orthodontic care for children from low-income families

		Services for diseases that pose a danger to others, in which foreigners and stateless persons temporarily staying in the Republic of Kazakhstan, asylum seekers are entitled to receive a guaranteed amount of free medical care
2.	Injury	Acute trauma (trauma center, outpatient organizations) Consequences of trauma (outpatient organizations) Consequences of trauma (youth health centers)
3.	Prevention	Examination of a patient with a coronavirus infection Prophylactic treatment (other than screening) Immunoprophylaxis Screening (Prophylactic medical examinations) Patronage Family planning, safe abortion, reproductive health services Admission for antenatal care Reception at postnatal observation Student health services (school medicine) Healthy lifestyle activities Paid medical examinations
4.	Dynamic Surveillance	Follow-up with chronic diseases (including the Disease Management Program) Dynamic observation with socially significant diseases Dynamic observation with chronic diseases subject to observation by specialized specialists
5.	Medical and social services	Medical and social support Psychological help
6.	Administrative	Administrative Preparation of documents for medical and social examination Issuing prescriptions
7.	Screening for coronavirus infection	Suspicion of coronavirus infection Examination for coronavirus infection during planned hospitalization (pre-hospital

examination), including pregnant women for delivery at 37 weeks, patients on hemodialysis

Annex 5
to the Rules of primary
health care

List of basic requirements for the provision of public services "medical appointments

Footnote. The title of Annex 5 – in the wording of the order of the Minister of Healthcare of the Republic of Kazakhstan dated 27.03.2024 № 10 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

Footnote. Annex 5 as amended by the order of the Minister of Healthcare of the Republic of Kazakhstan dated 27.03.2024 № 10 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

1	Name of service provider	Primary health care provider
2	Methods of public service provision	1) Medical organization providing primary health care (hereinafter referred to as the PHC organization) (in direct contact or by telephone of the PHC organization);
3	Term of public service provision	2) e-government web portal (hereinafter referred to as the AED).
4	Form of public service provision	When contacting PHC organizations (directly or by telephone):
5	Result of public service provision	1) from the moment the patient shall submit the documents to the PHC organization - no more than 10 (ten) minutes;
6	The amount of payment charged from the service recipient in the provision of public services, and methods of its collection in cases provided for by the legislation of the Republic of Kazakhstan	2) the maximum allowable waiting time for the delivery of documents is 10 (ten) minutes;
7	Service provider and information objects schedule	1) PHC organization - from Monday to Saturday (Monday - Friday from 8.00 to 20.00 without interruption, on Saturday from 9.00 to 14.00), except weekends (Sundays) and holidays according to the Labor Code of the Republic of Kazakhstan;
8	List of documents and information requested from the service recipient for the provision of public service	2) AED - around the clock, with the exception of technical breaks associated with repair work (when the patient applies after the end of working hours, on weekends and holidays, according to the Labor Code of the Republic of Kazakhstan,

		applications are accepted and the results of the provision of state services are issued the next working day).
9	Grounds for refusal to provide public services established by the legislation of the Republic of Kazakhstan	<p>1) establishing the inaccuracy of the documents submitted by the patient for receiving a public service, and (or) the data (information) contained in them;</p> <p>2) the absence of attachment to this medical organization providing primary health care in accordance with the order of the Minister of Health of the Republic of Kazakhstan dated November 13, 2020 № IP DSM-194/2020 "On approval of the rules for attaching individuals to health care organizations providing primary health care" (registered in the Register of state registration of regulatory legal acts under № 21642)</p> <p>.</p>
10	Other requirements taking into account the specifics of the provision of public services	<p>The patient can receive the state service in electronic form by means of the subject's cellular communication subscriber number registered on the AED by transmitting a one-time password or by sending a short text message as a response to the AED notification. The patient has the opportunity to receive a public service in electronic form through the AED, subject to the presence of an EDS.</p> <p>The digital document service is available to users authorized in the mobile application.</p> <p>To use a digital document, you must be authorized in a mobile application using an EDS or a one-time password, then go to the "Digital documents" section and select the required document.</p> <p>For people with disabilities, there is a ramp, a call button, a tactile track for the blind and visually impaired, a waiting room, a rack with sample documents.</p>

List of basic requirements for the provision of public services "Calling a doctor at home

Footnote. The title of Annex 6 - as amended by the order of the Minister of Health of the Republic of Kazakhstan dated 27.03.2024 № 10 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

Footnote. Annex 6 as amended by Order of the Minister of Health of the Republic of Kazakhstan dated 27.03.2024 № 10 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

1	Name of service provider	Primary health care provider
2	Methods of public service provision	1) Medical organization providing primary health care (hereinafter referred to as PHC organization) (in direct contact or by telephone of the patient, as well as through medical information systems); 2) e-government web portal (hereinafter referred to as AED).
3	Term of public service provision	When contacting the PHC organization (directly or by telephone): 1) from the moment the patient submits the documents to the PHC organization - no more than 10 (ten) minutes; 2) the maximum allowable waiting time for the delivery of documents is 10 (ten) minutes; 3) the maximum allowable service time by the PHC organization is 10 (ten) minutes; when accessing through the portal: from the moment the patient shall submit documents to the PHC organization - no more than thirty (30) minutes. Public service with direct appeal or by phone to the organization of PHC shall be provided on the day of appeal. Public service through AED shall be provided on the day of application for AED.
4	Form of public service provision	Electronic (partially automated) / paper
		1) in direct contact or by telephone - an entry in the PHC organization's call log and an oral response indicating the date and time of the doctor's visit;

5	The result of the public service (or its proxy)	<p>2) in electronic format when contacting the AED - notification in the form of the status of an electronic application in your personal account.</p> <p>At the same time, after accepting the request for the provision of public services, the patient shall be provided with medical assistance at home at the prescribed time.</p>
6	The amount of payment charged from the service recipient in the provision of public services, and methods of its collection in cases provided for by the legislation of the Republic of Kazakhstan	The public service shall be provided free of charge.
7	Service provider and information objects schedule	<p>1) PHC organization - from Monday to Saturday (Monday - Friday from 8.00 to 20.00 without interruption, on Saturday from 9.00 to 14.00), except weekends (Sundays) and holidays according to the Labor Code of the Republic of Kazakhstan;</p> <p>2) AED - round the clock, with the exception of technical breaks associated with repair work (when the patient applies after the end of working hours, on weekends and holidays in accordance with the labor legislation of the Republic of Kazakhstan, applications shall be accepted and the results of the provision of state services shall be issued the next working day).</p>
8	List of documents and information requested from the service recipient for the provision of public service	<p>1) to the PHC organization: an identity document in direct contact or an electronic document from the digital document service (for identification);</p> <p>2) for AED: request in electronic form.</p> <p>The PHC organization shall receive information about identity documents or an electronic document from the digital document service (for identification) from the relevant state information systems through the AED.</p> <p>Service providers shall receive digital documents from the digital document service through the implemented integration, subject to the consent of the owner of the</p>

		document provided by the user's registered cellular subscriber number by transmitting a one-time password or by sending a short text message as a response to the AED notification.
9	Grounds for refusal to provide public services established by the legislation of the Republic of Kazakhstan	<p>1) establishing the inaccuracy of the documents submitted by the patient for receiving a public service, and (or) the data (information) contained in them;</p> <p>2) the absence of attachment to this medical organization providing primary health care in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated November 13, 2020 № IP DSM-194/2020 "On approval of the rules for attaching individuals to health care organizations providing primary health care" (registered in the Register of state registration of regulatory legal acts under № 21642) .</p>
10	Other requirements taking into account the specifics of the provision of public services	<p>The patient can receive the state service in electronic form by means of the subject's cellular communication subscriber number registered on the AED by transmitting a lump sum password or by sending a short text message as a response to the AED notification.</p> <p>The patient has the opportunity to receive a public service in electronic form through the AED, subject to the presence of an EDS.</p> <p>The digital document service shall be available to users authorized in the mobile application.</p> <p>To use a digital document, you must be authorized in a mobile application using the EDS or a lump sum password, then go to the "Digital documents" section and select the required document.</p> <p>For people with disabilities, there is a ramp, a call button, a tactile track for the blind and visually impaired, a waiting room, a rack with sample documents.</p>

List of basic requirements for the provision of public services "Issuance of a certificate from a medical organization providing primary health care

Footnote. The title of Annex 7 – in the wording of the order of the Minister of Healthcare of the Republic of Kazakhstan dated 27.03.2024 № 10 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

Footnote. Annex 7 as amended by the order of the Minister of Healthcare of the Republic of Kazakhstan dated 27.03.2024 № 10 (shall enter into force upon expiry of ten calendar days after the day of its first official publication).

1	Name of service provider	Primary health care provider
2	Methods of public service provision	1) Medical organization providing primary health care (hereinafter referred to as the PHC organization);
3	Term of public service provision	2) e-government web portal (hereinafter referred to as the AED).
4	Form of public service provision	1) from the moment of the service recipient's request - when contacting the doctor, as well as when contacting the AED within no more than 30 (thirty) minutes, when calling home during the working day ;
5	The result of the public service (or its proxy)	1) certificate from a medical organization providing primary health care, issued in form № 027/y, approved by the order of the Acting Minister of Healthcare of the Republic of Kazakhstan dated October 30, 2020 № RK HM-175/2020 "On approval of forms of accounting documentation in the field of health care" (registered in the Register of State Registration of Regulatory Legal Acts under № 21579) when directly contacting PHC organizations signed by a district doctor or general practitioner , certified by a personal medical seal and the seal of the PHC organization ;
6	The amount of payment charged from the service recipient in the provision of public services, and methods of its collection in cases provided for by the legislation of the Republic of Kazakhstan	2) when applying for the AED - in the form of an electronic document signed by an electronic digital signature (hereinafter referred to as the EDS) of the PHC organization;
		1) the PHC organization - from Monday to Friday from 8.00 to 20.00 without a break, except for weekends

7	Service provider and information objects schedule	<p>and holidays according to the Labor Code of the Republic of Kazakhstan. At the same time, a request for a public service shall be accepted 2 hours before the end of the service provider's work (up to 18.00 on weekdays, before 12.00 on Saturday)</p> <p>.</p> <p>Patients shall be admitted on a first-come, first-served basis. Pre-recording and expedited maintenance shall not be provided;</p> <p>2) the AED - round the clock, with the exception of technical breaks associated with repair work (when the patient applies after the end of working hours, on weekends and holidays in accordance with the labor legislation of the Republic of Kazakhstan, applications shall be accepted and the results of the provision of state services shall be issued the next working day).</p>
8	List of documents and information requested from the service recipient for the provision of public service	<p>1) to the PHC organization: an identity document in direct contact or an electronic document from the digital document service (for identification);</p> <p>2) for AED: request in electronic form.</p> <p>The PHC organization shall receive information about identity documents or an electronic document from the digital document service (for identification) from the relevant state information systems through the AED.</p> <p>Service providers shall receive digital documents from the digital document service through the implemented integration, subject to the consent of the owner of the document provided by the user's registered cellular subscriber number by transmitting a lump sum password or by sending a short text message as a response to the AED notification.</p>
		<p>1) establishing the inaccuracy of the documents submitted by the patient for receiving a public service, and (or) the data (information) contained in them;</p>

9	Grounds for refusal to provide public services established by the legislation of the Republic of Kazakhstan	2) the absence of attachment to this organization of primary health care in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated November 13, 2020 № RK HM-194/2020 "On approval of the rules for attaching individuals to health care organizations providing primary health care" (registered in the Register of state registration of regulatory legal acts under № 21642) .
10	Other requirements taking into account the specifics of the provision of public services	<p>The patient can receive the state service in electronic form by means of the subject's cellular communication subscriber number registered on the AED by transmitting a one-time password or by sending a short text message as a response to the AED notification.</p> <p>The patient has the opportunity to receive a public service in electronic form through the AED, subject to the presence of the EDS.</p> <p>The digital document service shall be available to users authorized in the mobile application.</p> <p>To use a digital document, you must be authorized in a mobile application using the EDS or a one-time password, then go to the "Digital Documents" section and select the required document.</p> <p>For people with disabilities, there shall be a ramp, a call button, a tactile track for the blind and visually impaired, a waiting room, a rack with sample documents.</p>