

SOP: TaifaCare e-Claims processing- Maternity services

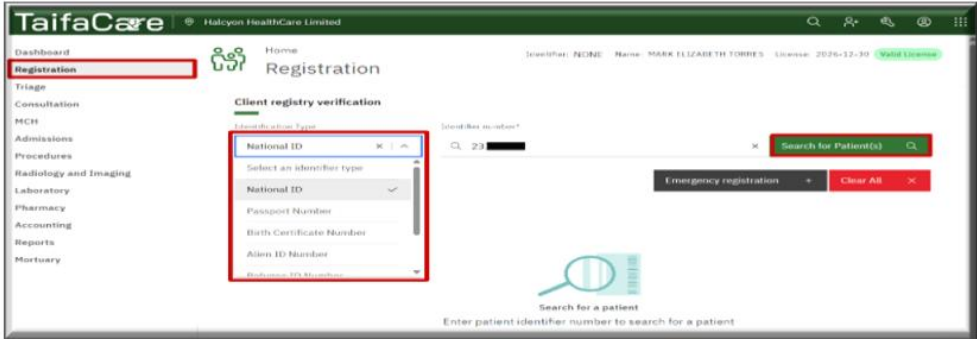
(Last update: July 2026)

TASK:	To guide users on how to navigate & process e-Claims in TaifaCare-KenyaEMR
OBJECTIVE:	Effectively process insurance claims within a facility.
WHO:	Finance Department, Billing Cashier, Clinical Officers
REQUIRED MATERIALS:	Functional TaifaCare Version 19.4.2 and above
DEPENDANCIES:	Facility HIE configuration, Adding clinical charges, Installation of Health ID and Staff training.
SUMMARY: The process e-claim feature in TaifaCare allows facilities to comfortably process insurance claims and share captured information in TaifaCare to the insurance databases through the HIE system.	

The workflow described in this user guide assumes that all bills are generated from the respective service points and that all claims are processed at Central Finance Unit for insurance payments.

It should be noted that for e-claims to be achieved from TaifaCare, the facility EMR must be configured with the correct Token that grants facility access to the Social Health Authority (SHA) portal via the Health Information Exchange protocol.

This user guide provides a clear and practical overview of the PHC- Maternity services workflow, it outlines the essential steps and documentation requirements needed to ensure accurate, timely and compliant claims processing.

No	Task Description	Screenshot
1.	Client Identification Refer to Patient Registration SOP available on our website Existing Patient - Search for the patient and confirm they are eligible and active on UHC for either PHC/SHIF - Send OTP for the patient to authorize access to their information. - Click check in to start the visit for self or check in applicable dependent.	 The screenshot shows the TaifaCare Registration page. The 'Registration' menu item is highlighted in the sidebar. The 'Client registry verification' section is active, showing a dropdown for 'National ID' selected. A search bar with the number '23' is visible, along with a 'Search for Patient(s)' button. There are also buttons for 'Emergency registration' and 'Clear All'.  The screenshot shows the OTP Verification screen. It prompts the user to 'Verify the phone number before OTP' with the number '254723****30'. It states 'The OTP will be valid for 1 minutes after it is sent.' There are 'Cancel' and 'Sending OTP...' buttons. A second window shows the OTP code '8 - 1 - 9 - 3' with a 'Verify' button and a '00:16 EXPIRING SOON' timer.  The screenshot shows the 'Revisit patient(s) (1)' screen. It displays patient information: 'MA***** MW***** WA***** ♀ Female', '22 yrs', '22-Jun-19', and '4'. It includes a 'CR Number' field and buttons for 'Check In' and 'Show dependents'.

2.

Starting a Client Visit

Fill the Visit Check in Form

Visit Details:

- Confirm visit Location
- Specify visit type and select Outpatient
- Select Patient Category as Triage.
- Queue Patient for the first point of service.
- Click Start visit to initiate the visit.

The system will display an Outpatient visit has been started successfully.

Start a visit

The visit is

New

Ongoing

In the past

Upcoming appointments

No upcoming appointments found

Visit Location

Select a location

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Visit Type

Search for a visit type

Outpatient

Inpatient

Casualty/Emergency

Patient Category

Triage

Walk-in

Select a triage room

Triage Room 2 - OPD

Discard

Start visit

✓ Visit started
Outpatient started successfully

3.

Manage Active visits

When a visit is started successfully, the client will be automatically queued in the Active visits Queue.

Located under;

**Accounting Module-Active Visits Tab,
Select Date Range accordingly.**

Locate the client and **click** the 3 dots on the far right against the client's name to Manage the visit.

Active visit | Patient Bill | Bills Today | Claims | Pre-Authorization

Date range: Today

Active visits
Patients with an ongoing visit within the selected date range.

Search visits

Patient name	Visit type	Location	Start date
Unit Test One	Outpatient	Halcyon HealthCare Li...	Today, 15:07
M [REDACTED]	Outpatient	Halcyon HealthCare Li...	Today, 15:02

Items per page: 10 | 1-2 of 2 items | Manage visit

4.

Confirm Payment Eligibility

- Check Patient is **not** exempted from payments
- Select **Insurance** as the payment method
- Select **SHA** as the Insurance Scheme
- Select SHA Benefit Package as **SHA-8-SC-02-Maternity, Neonatal and Child health services**
- Select SHA Interventions as
 - **Cesarean Section**
 - **Virginal delivery**

NB:// *Both interventions do not require pre-authorization*

- Add the first chargeable service as applicable.

Mode of payment

Is patient exempted from payment?

☐ Yes
 ☒ No

Payment method

Insurance

Insurance scheme

SHA

Policy number

CR6898437491842-2

Active Schemes: PHC | SHIF ⓘ

Active

Is this an elective visit?

☒ No
 ☐ Yes

SHA Benefit Packages

Package

SHA-08-SC-02 — Maternity, Neonatal and Child health services

SHA Interventions

Interventions

Choose an intervention

Cesarean Section — No preauth needed

Vaginal Delivery — No preauth needed

Cancel

Save & Close ⓘ

3.	Authenticate and Verify Client 1. Use Biometrics Verify the client's fingerprints against government verification records. Once the OTP is verified, the patient visit will be started.	
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Clinical Workflow

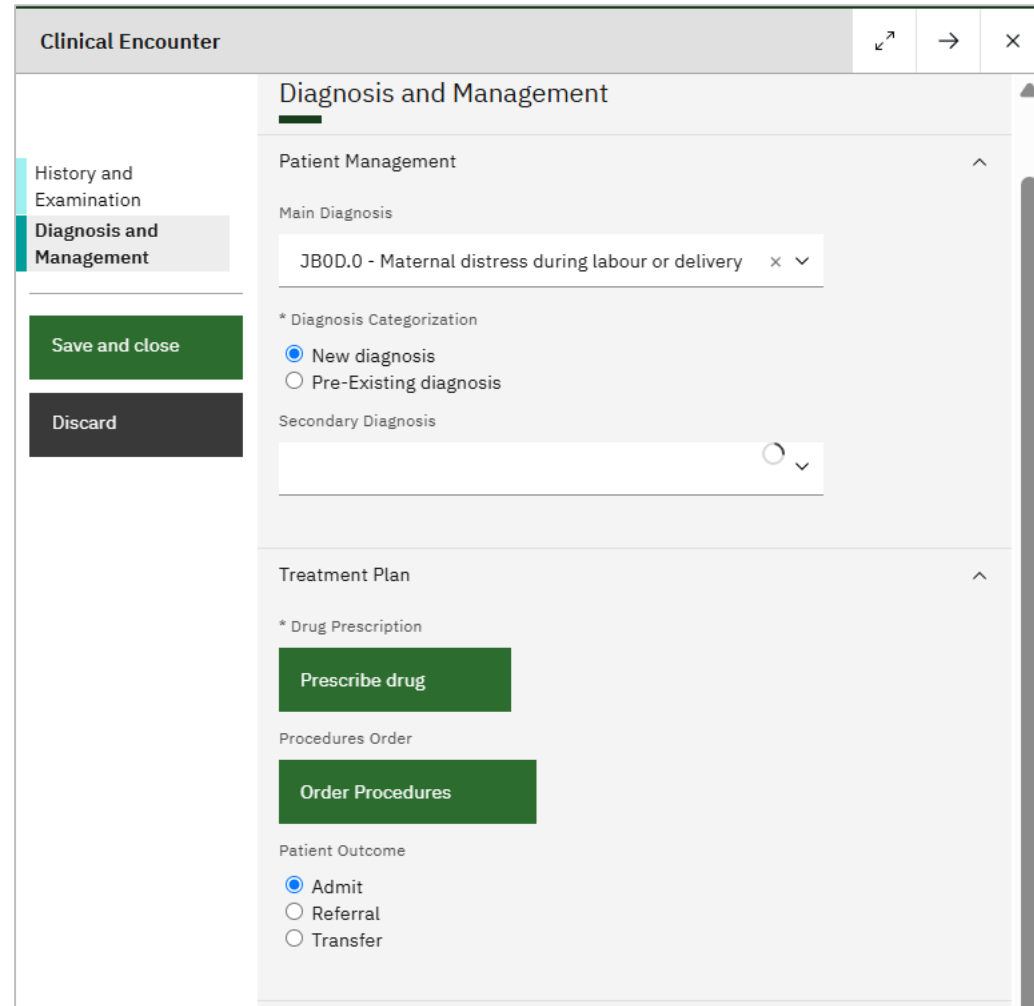
No	Task Description	Screenshot								
4.	1. Triage Client From MCH Triage queue, pick a client and call for service. Document the Triage form and queue client for Clinical services	Triage Triage Save and close Discard Triage Visit Details * Date: 02/07/2026 * Provider: admin - Mark Elizabeth Torres * Location: Halcyon HealthCare Limited Complaints and History of complaints * Patient having complaint(s) today? Yes No Presenting complaints Complaint Abdominal pain Duration (Days) 1 Onset Status Gradual Latest Vitals <table><tr><td>Temp °C 38°C</td><td>Pulse (bpm) 94 bpm</td><td>Blood Pressure (mmHg) 120/76 mmHg</td><td>Resp. Rate 18 br/min</td></tr><tr><td>SpO₂ 95 %</td><td>Weight 62 kg</td><td>Height 161 cm</td><td>BMI 23.9 kg/m²</td></tr></table>	Temp °C 38°C	Pulse (bpm) 94 bpm	Blood Pressure (mmHg) 120/76 mmHg	Resp. Rate 18 br/min	SpO ₂ 95 %	Weight 62 kg	Height 161 cm	BMI 23.9 kg/m²
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SpO ₂ 95 %	Weight 62 kg	Height 161 cm	BMI 23.9 kg/m²							

2. Clinical Review

Access the Clinical encounter form and fill in the Key areas that must be completed for the processing claims:

- Document presenting complaints as highlighted from Patient History section.
- Document Clinical Impression from History and Examination Section.
- Document Main Diagnosis from the Diagnosis and Management section.
- Admit client to Labour ward.

NB: The Medical Officer or Clinical Officer documenting the Clinical management form should have a valid License, since their name will appear in the claim form.



The screenshot displays the 'Clinical Encounter' form with the 'Diagnosis and Management' section active. The left sidebar shows 'History and Examination' and 'Diagnosis and Management' tabs. The main area is divided into sections: 'Patient Management' (containing 'Main Diagnosis' with a dropdown menu showing 'JB0D.0 - Maternal distress during labour or delivery'), '* Diagnosis Categorization' (with radio buttons for 'New diagnosis' and 'Pre-Existing diagnosis'), 'Secondary Diagnosis' (with a dropdown menu), 'Treatment Plan' (containing '* Drug Prescription' with a 'Prescribe drug' button, 'Procedures Order' with an 'Order Procedures' button, and 'Patient Outcome' with radio buttons for 'Admit', 'Referral', and 'Transfer'). A 'Save and close' button is visible in the sidebar.

3. Admission to labor ward

A clinician will request admission to the labour ward.

The request will queue the client under Awaiting admissions queue.

Once a client is admitted and assigned a bed, further Clinical review can be documented in the system as required.

Clinical Form

Adding to: **Outpatient**

Current active visit · Halcyon HealthCare Limited

Admission Request

Save and close

Discard

Admission Request

Ward Details

* Inpatient patient disposition

☒ Admit to hospital

* Admit To Location

Labour ward

Ward Patients

List

Card

Awaiting Admission

Admitted

Discharge In

Discharged

Search

Date Queued	ID Number	Name	Gender	Age	Bed Number	Duration on Ward	Action
Today, 17:01	MJXY4F				--	0	Admit elsewhere Admit patient Cancel

4. Maternity Clinical management forms

A user will access the inpatient clinical forms from the client home page, inpatient module.

Sample Inpatient Clinical forms that can be filled for a client

Date & time	Visit type	Encounter type	Form name
01-Jul-2026, 18:27	Inpatient	Admission	In-Patient Admission Form
01-Jul-2026, 18:26	Inpatient	Consultation	Clinical Encounter
01-Jul-2026, 12:25	Inpatient	IPD Discharge	Inpatient Discharge Clinical Form
01-Jul-2026, 12:15	Inpatient	Doctor's Note	Doctor's Note Clinical Form
01-Jul-2026, 12:08	Inpatient	Transfer	In-Patient Admission Form
01-Jul-2026, 12:06	Inpatient	MCH Mother Consultation	Delivery
01-Jul-2026, 11:49	Inpatient	Pre-Operation Checklist	Pre-Operation Checklist Clinical ...
01-Jul-2026, 11:30	Inpatient	MCH Inpatient	Maternity Inpatient
01-Jul-2026, 11:25	Inpatient	Consultation	Clinical Encounter
01-Jul-2026, 10:46	Inpatient	Triage	Triage

5. Decision guide for a cesarean section delivery

By filling in the Labor care guide

This will support the decision on the delivery mode, as either **SVD** or **CS**.

Shared Decision Making	Assessment	Companion N: encourage Pain relief N: she declined
	Plan	Prepare for emergency CS
	Action	Emergency Caesarean section Prescribed

Ordering for a Delivery Procedure as applicable.

- Normal delivery
- cesarean Procedure

Note: Ensure all Investigation orders have been added as clinical charge items and have prices attached for each service. Raised orders will generate bills that can be accessed from the billing module.

Refer to the Lab Order SOP, Drug Orders SOP and Procedures Orders SOP for a detailed explanation on raising orders in TaifaCare-(K) system.

- Deliver the baby through the selected method and fill all applicable forms.
- Add all patient bill items for services and commodities issued to the client and the baby.
- Fill in the **Delivery form** and **Doctor's Notes** and **Discharge** the patient from Labour care and fill in the discharge summary form.

The system will queue the client to Discharge- in until the inpatient bill is cleared.

Add Procedures order
→
×

← Back to order basket

Payment methods	Prices
Insurance	KES 10,000.00

Test type

Cesarean section
×
↓

Operation category

Major
×
↓

Priority

Emergency
×
↓

6. Process the Client Bill

Click on the **Accounting Module** to access the services and items billed for the client. Click on the client's name to access the bill processing section.

NB: All applicable clinical charges should have a price in the system first.

Select the items to be billed by checking the Checkboxes against each Line item.

Click Payment Link under Total amount bill and select **Insurance payment** mode

Select **SHA** and applicable intervention. Process the payment, save and print the receipt for the client.

Line items

Items to be billed

☐

Search this table

No	Bill Item	Bill code	Status	Payment	Quantity	Price	Total
☒ 1	Adult Co...	0191-7	PAID	Insurance	1	299	299
☒ 2	Normal D...	0191-7	PAID	Insurance	1	10000	10000
☒ 3	Adult Co...	0191-7	PAID	Mobile M...	1	145	145
☒ 4	Ceasaria...	0191-7	PENDING	Insurance	1	25000	25000
☒ 5	Cotton W...	0191-7	PENDING	Mobile M...	1	280	280
☒ 6	Paraceta...	0191-7	PENDING	Insurance	1	280	280
☒ 7	Amoxicill...	0191-7	PENDING	Insurance	20	2	40

Total Amount

KES 36,044.00

Payments amount

KES 10,444.00

Amount due

KES 25,600.00

Payments

→

8.

Close Client Bill

From Accounting module, Close the Patient bill to activate the Submit Claims button.

The Submit Claim Button will be available after the Bill closure.

Clicking the Submit Claim button will direct a user to the patient claims management page.


Test Testing ♂ Male
 26 yrs · 31-May-2000 ·

[Actions](#) ⋮
[Show more](#) ▾

Invoice Summary

[Print](#) 

Close Bill ×

Claims						
▼ Date Created	Authorization code	Service Type	Invoice Number	Claim status	Payer	
▼ 29 – Jun – 2026, 18:25	E6BTKQHALH	CAPITATION	INV/13545/72709	DRAFT	Not yet submitted	Submit claim 

9.

Client Claim form page:

- 1- Claim Status at EMR
- 2- Claims status at Payer
- 3- Review the claim Summary
- 4- Review added SHA interventions
- 5- Add required attachments, generate from the system or upload.
- 6- Confirm Chargeable Bill items
- 7- Confirm Diagnosis
- 8- Add a Doctor with a valid license to the claim

Submit claims to the payer after confirming all the information reviewed is okay.

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Dashboard
Registration
Triage
Consultation
MCH
Admissions
Procedures
Radiology and Imaging
Laboratory
Pharmacy
Accounting

MMW 42 yrs - 22-Jun-1984 - CR Number: Female

Pending (4) **Sent (2)** Pending resubmission (0) Closed (3) Paid (2)

Claims

Date Created	Authorization code	Service Type	Invoice Number	Claim status	Payer
03 - Jul - 2026, 09:47	FPKZ7CHGGZ	INPATIENT	0219-6	SUBMITTED (1)	MEDICAL REVIEW (2)

Claim Summary

Payer: Social Health Authority
Scheme: SHIF - Social Health Insurance Fund
Member Number: CR6898437491842-2
Service Type: INPATIENT
Use type: claim
Start date: 27-Feb-2025
End date: 27-Feb-2025
Invoice Number: 0219-6
Total billed: KES 24,819.00

Interventions (1)

SHA-88-006 Cesarean Section CASE BASED
Tariff (KES): KES 30,000.00

Attachments Upload attachments Generate documents

BIRTH NOTIFICATION ✓ DISCHARGE SUMMARY ✓ FINAL BILL ✓
CLAIM FORM ✓ THEATRE NOTES ✓ DISCHARGE SUMMARY ✓
FINAL BILL ✓ CLAIM FORM ✓

View
DISCHARGE_SUMMARY View
FINAL_BILL View
CLAIM_FORM View
THEATRE_NOTES View
BIRTH_NOTIFICATION View

Bill lines (1)

Adult Consultation
SHA-88-006 Cesarean Section

DIAGNOSES (1)

JAB8.Y Maternal care related to other specified multiple gesta

Doctors (1)

Dr JOHN WAITHAKA MUTHEE

- 10. Claims status and feedback from the payer**
- Send OTP to the client to validate the claim form, add OTP to submit the claim.
- Once submitted the Claim will move to the Sent tab, The Claims and Payer status will change according to the claims review processes, changing the status from Submitted to Approved or Rejected with reasons.
- Expand to view payer activities until the final Claim status is given and end a client visit.

Payer activity

Notes from SHA (2)

- MEDICAL_REVIEW adapter1 User (adapter@provider-uat.sha.go.ke)
- Loaded to payer
AUTOMATIC_CHECKS_DONE adapter1 User (adapter@provider-uat.sha.go.ke)

Timeline (5)

- 03-Jul-2026, 11:27 SUBMITTED_PAYER → MEDICAL_REVIEW
- 03-Jul-2026, 11:22 SUBMITTED_PAYER → AUTOMATIC_CHECKS_DONE
- 03-Jul-2026, 11:22 AUTOMATIC_CHECKS_DONE → SUBMITTED_PAYER
- 03-Jul-2026, 11:22 SUBMITTED_PROVIDER → AUTOMATIC_CHECKS_DONE
- 03-Jul-2026, 11:21 DRAFT_PROVIDER → SUBMITTED_PROVIDER

THE END