



Guidance document for processing PM-JAY packages

Excision Arthroplasty of Femur head

Procedures covered: 1

Specialty: Orthopedics

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Procedure price (INR)
Excision Arthroplasty of Femur head	Excision Arthroplasty of Femur head	S500018	SB033A	17,500

ALOS: 5 days

Minimum qualification of the treating doctor:

Essential: Diploma in Orthopedics with 10 years of experience

Desirable: MS/DNB/Equivalent in Orthopedics

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Excision Arthroplasty of Femur head** NHA shall be following these guidelines. This document has been prepared for guidance of PROCESSING TEAM and TRANSACTION MANAGEMENT SYSTEM of AB PM-JAY for the claims of procedures mentioned above. The hospitals can also refer to this document so that they have the insight on how the claims will be processed. However, this document doesn't provide any guidance on clinical and therapeutic management of patient. In that respect the hospitals and physicians may refer to any other relevant material as per the extant professional norms.

PART I: Guidelines for Clinicians and Healthcare Providers

1.1 Objective:

The purpose of this section is to act as a guidance & a clinical decision support tool for the clinicians in deciding the line of treatment, plan clinical management of patient and decide referral of cases to the appropriate level of care (as required) for treatment of patients under PMJAY and selection of corresponding Health Benefit Package.

It will also serve as a tool for hospitals to determine and submit the mandatory documents required for claiming reimbursement of health benefit package under PMJAY.

1.2 Clinical key pointers:

Definition: a surgical procedure to restore/realigning/reconstructing the function of hip joint or restored by resurfacing the head of femur. Excision arthroplasty excising a part of the deformed joint, there by relaxing the surrounding soft tissues, and thus correcting deformity.

Indications for Excision Arthroplasty of Femur:

- This procedure usually indicated for chronic deep-seated infections of the hip joint.
- Tuberculosis of Hip
- Aseptic loosening of hip
- Recurrent dislocation of the hip
- Failed internal fixation of femoral neck fractures

Procedure involved:

- The operation is called for in Acute pyogenic infection of the hip—haematogenous, from compound fracture, or from gunshot wound—in which the fever has not given way to more conservative measures, such as immobilization, daily aspiration, and chemotherapy by sulphanilamides or penicillin. Such a condition is dangerous and demands radical drainage. Cases can be divided into **two groups**.
- **In the first, group A**, the hip-joint is not yet ankylosed; the cavity may be distended with pus, or suppuration may be almost absent with symptoms just as severe and threatening as if it was considerable.
- In others infective material may already have leaked out to spread further sepsis between the muscular planes.
- **Group B contains** those cases in which ankylosis has already developed, and in which pus has escaped from the joint and burrowed into the intermuscular planes in various directions.

1.3. Mandatory documents- For healthcare providers

Following documents should be uploaded by the concerned hospital staff at the time of pre-authorization and claims submission:

Mandatory document	Excision Arthroplasty of Femur head
i. At the time of Pre-authorization	
a. Clinical notes with history, signs, symptoms, evaluation findings, indication for procedure, planned line of management and advice for admission	Yes
b. Clinical photograph of affected part	Yes
c. X-ray/MRI labelled with patient ID, date and side (Left/ Right) - affected limb	Yes
ii. At the time of claim submission	
a. Detailed Indoor Case Papers (ICPs)	Yes
b. Post-operative clinical photograph	Yes
c. Detailed Procedure / Operative Notes	Yes
d. Detailed Discharge summary	Yes

PART II: GUIDELINES FOR PROCESSING TEAM

PART III: GUIDELINES FOR TRANSACTION MANAGEMENT SYSTEM (TMS)

3.1 Objective: To enable setting up of cross check mechanisms/rule engines within the IT platform (TMS) to ensure compliance with STGs and to prevent fraud / abuse of the Health Benefit Package.

3.2 Below mentioned are the scenarios where a provision would be built in TMS for pop-ups:

I. Does the clinical notes and X-ray/MRI justify the need for operative procedure? Yes

Till the time the functionality is being developed, the processing doctors shall check the above manually.

References:

1. Brand, Richard A. "Acute pyogenic arthritis of the hip: an operation giving free access and effective drainage." *Clinical orthopaedics and related research* 466.2 (2008): 258-263.
2. Maheshwari, Jitendra, and A. Vikram Mhaskar. *Essential Orthopaedics (Including Clinical Methods)*. Jaypee Brothers, Medical Publishers Pvt. Limited, 2019.