



Guidance document for processing PM-JAY packages

Total Hip Replacement

Procedures covered/ procedure count: 4

Specialty: Orthopedics

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price*
Total Hip Replacement	Cemented	S500091	SB038A	35000
Total Hip Replacement	Cementless	S500092	SB038B	37000
Total Hip Replacement	Hybrid	S500093	SB038C	32000
Total Hip Replacement	Revision - Total Hip Replacement	New package	SB038D	40000

*Implant price extra

ALOS: 5-7 days

Minimum qualification of the treating doctor:

Essential: Diploma in Orthopedics with 10 years of experience

Desirable: MS/DNB in Orthopedics

Special empanelment criteria/linkage to empanelment module:

Disclaimer:

For monitoring and administering the claim management process of **Total Hip Replacement – Cemented, Total Hip Replacement – Cementless, Total Hip Replacement – Hybrid and Total Hip Replacement – Revision**, 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:

- Osteoarthritis
- Rheumatoid arthritis
- Osteonecrosis
- Pain Persists, despite pain medication
- Pain Worsens with walking, even with a cane or walker
- Pain Interferes with patient's sleep
- Affects the patient's ability to go up or down stairs
- Makes it difficult to rise from a seated position

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	Total Hip Replacement - Cemented	Total Hip Replacement - Cementless	Total Hip Replacement - Hybrid	Total Hip Replacement - Revision
i. At the time of Pre-authorization				
a. Clinical notes with indication for surgery	Yes	Yes	Yes	Yes
b. X-ray / CT of Hip labelled with patient ID, date and side (Left/ Right)	Yes	Yes	Yes	Yes
c. Pre-op X – ray of the affected hip shows implant	No	No	No	Yes
ii. At the time of claim submission				
a. Indoor case papers	Yes	Yes	Yes	Yes
b. Post op clinical photograph	Yes	Yes	Yes	Yes
c. Post op X-ray showing the implant. The X-ray is labelled with patient ID, date and side (Left/ Right)	Yes	Yes	Yes	Yes
d. Invoice / bar code of implant	Yes	Yes	Yes	Yes
e. Detailed OT note	Yes	Yes	Yes	Yes

f. Discharge Summary	Yes	Yes	Yes	Yes
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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 Post-op X- ray / CT of hip show the presence of implant? – Yes
- II. If the patient is undergoing Revision hip replacement, does the pre-op X-ray/ CT of hip show the presence of implant? - Yes

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