



Guidance document for processing PM-JAY packages

Small Arterial Aneurysms Repair

Procedures covered: 1

Specialty: CTVS/Neurosurgery

Package name	Procedure name	HBP 2.0 code	HBP 2.1 code	Package price (INR)
Peripheral Arterial Surgeries	Small Arterial Aneurysms Repair	New Package	SV019U	70,000

ALOS (In days): 7 Days

Minimum qualification of the treating doctor:

Essential: MCh/ or equivalent (in Cardiothoracic Surgery, Vascular Surgery), Mch/DNB/Equivalent (in Neurosurgery).

Special empanelment criteria/linkage to empanelment module: Tertiary Care Facilities

Disclaimer:

For monitoring and administering the claim management process of **Small Arterial Aneurysms Repair** 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:

A peripheral aneurysm is an enlargement or weakened area in an artery other than aorta.

Peripheral arterial aneurysm can occur in:

- Popliteal artery (which runs down the lower part of thigh and knee)
- A mesenteric (splenic, hepatic, or celiac) aneurysm occurs in an artery located in the abdomen, but not in the aorta.
- Femoral artery (located in the groin)
- Carotid artery (located in the neck)
- Arteries in the arms
- Arteries supplying blood to the kidneys or bowel (a visceral aneurysm).

Signs & Symptoms:

- Peripheral arterial aneurysms are usually asymptomatic at the time of detection or may present with symptoms when there is local compression of other structures, such as nerves or veins, with ischemia, or rarely with rupture.
- Thrombosis or embolism (or rarely, aneurysm rupture) causes extremities to be painful, cold, pale, paresthetic, or pulseless.
- Infectious aneurysms may cause local pain, fever, malaise, and weight loss.

Diagnosis: Ultrasound, CT angiography, and magnetic resonance angiography.

Indications:

- All symptomatic peripheral aneurysms should be repaired.
- In asymptomatic patients, to prevent potential complications, the reported indications to repair are size >20 mm, high-grade thrombus and poor run-off vessels.
- Aneurysm ligation without revascularization is typically reserved for cases of aneurysm rupture with hemodynamic instability

Treatment:

- Open repair and endovascular repair are both options in treating peripheral artery aneurysms.
- Open surgical management includes procedures like simple ligation of the artery proximally and distally, graft interposition, bypass with synthetic or autologous grafts, primary repair, aneurysm ligation.

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	Small Arterial Aneurysms Repair
i. At the time of Pre-authorization	
a. Clinical notes with indication and admission notes.	Yes
b. Relevant investigations – Ultrasound/ CT angiography/ MRA reports	Yes
ii. At the time of claim submission	
a. Detailed Indoor case papers (ICPs)	Yes
b. Detailed procedure/ operative notes	Yes
c. 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. Were patient's clinical notes and investigation reports Ultrasound/ CT angiography/ MRA suggestive of the procedure? Yes

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

References:

1. Hall, H. A., Minc, S., & Babrowski, T. (2013). Peripheral artery aneurysm. The Surgical clinics of North America, 93(4), 911–ix. <https://doi.org/10.1016/j.suc.2013.04.008>.
2. Bahcivan M, Keceligil HT, Kolbakir F, Gol MK. Surgical treatment of peripheral artery aneurysms. Hellenic J Cardiol. 2010 Jan-Feb;51(1):37-41. PMID: 20118042.
3. Hosn MA, Xu J, Sharafuddin M, Corson JD. Visceral Artery Aneurysms: Decision Making and Treatment Options in the New Era of Minimally Invasive and Endovascular Surgery. Int J Angiol. 2019;28(1):11-16. doi:10.1055/s-0038-1676958