



Guidance document for processing PM-JAY

Package

Medical/Neuro rehabilitation

Procedures covered: 1

Specialty: General Medicine, Pediatric Medical Management

Package name	Procedure name	HBP 2022 Code	Package price (INR)
Medical/Neuro rehabilitation	Medical Rehabilitation multiple disability	MG0120G	Rs 8100

ALOS (days): 5 Days

Minimum qualification of the treating doctor:

Essential: MBBS, BPT, BOT (Under supervision of Physical Medicine & Rehabilitation specialist)

Desirable: MD/DNB (General Medicine, Pediatric Medicine, Physical Medicine & Rehabilitation), DM/DNB (Neurology)

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Medical Rehabilitation multiple disability** for 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

**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.

Clinical key pointers:

Rehabilitation is defined as “a set of interventions designed to optimize functioning and reduce disability in individuals with health conditions in interaction with their environment. Rehabilitation is an essential part of universal health coverage along with promotion of good health, prevention of disease, treatment and palliative care. Rehabilitation helps a child, adult or older person to be as independent as possible in everyday activities and enables participation in education, work, recreation and meaningful life roles such as taking care of family.

Rehabilitation for multiple disability:

- Physical therapy
- Occupational therapy
- Speech therapy
- Respiratory therapy
- Cognitive rehabilitation
- Vocational rehabilitation
- Social skill training
- Psychotherapy

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	Medical/Neuro rehabilitation
i. At the time of Pre-authorization (PPD)	
Clinical Notes including evaluation findings and planned line of treatment	Yes
X-Ray/CT/MRI	Yes
Details past history with treatment records	Yes
Electroencephalogram (EEG) report in intellectual and learning disability	Yes
CT/MRI Brain report in CVA/Cerebral palsy/Brain injury/intellectual/learning disability	Yes
ii. At the time of claim submission (CPD)	
Indoor case papers with treatment given details	Yes
Discharge summary	Yes

PART II: GUIDELINES FOR PROCESSING TEAM

Objective: To provide guidance to the pre-authorization and claims processing team in ascertaining the medical necessity of procedure carried out vis a vis the patient's medical condition as evidenced by supporting documents/investigation reports etc., in deciding the admissibility and quantum of claim and compliance with mandatory documents by the hospital.

Following mandatory documents to be diligently reviewed by the pre-auth / claims processing personnel:

- **At the time of pre-authorization processing- For pre-authorization processing doctor (PPD)**
 - a. Are all the Clinical Notes including evaluation findings, planned line of treatment submitted? Yes/No
 - b. Are /X-Ray/CT/MRI report submitted? Yes/No
 - c. Is Details patient past history & treatment records submitted? Yes/No
- **At the time of claim processing- For claims processing doctor (CPD)**
 - d. Are the detailed Indoor case papers with daily vitals and line of treatment submitted? Yes/No
 - e. Is the discharge summary submitted with follow-up advise at the time of discharge? Yes/No



PART III: GUIDELINES FOR TRANSACTION MANAGEMENT SYSTEM (TMS)

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.

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

- I. Does past history with treatment records of patient & diagnostic report suggestive of rehabilitation treatment? Yes/No

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

References:

1. Spinal cord injury information page. National Institute of Neurological Disorders and Stroke. <https://www.ninds.nih.gov/Disorders/All-Disorders/Spinal-Cord-Injury-Information-Page>. Accessed 10.08.22.
2. Brain Injury Association of America. (n.d.). Guiding principles when selecting a brain injury rehabilitation program.
3. Jankovic J, et al., eds. Neurological rehabilitation. In: Bradley and Daroff's Neurology in Clinical Practice. 8th ed. Elsevier; 2022.
3. National Institute of Neurological Disorders and Stroke (NINDS). (2019). *Muscular dystrophy information page*. Retrieved from <https://www.ninds.nih.gov/Disorders/All-Disorders/Muscular-Dystrophy-Information-Page>
4. <https://www.en1neuro.com/services/intellectual-disability-treatment/>