



Guidance document for processing PM-JAY packages

Chalazion Removal

Packages covered/ package count: 1

Specialty: Ophthalmology

Package name	HBP 1.0 code	HBP 2.0 code	Package price (INR)
Chalazion Removal	New Package	SE007A	2,000

ALOS: 1 Day

Minimum qualification of the treating doctor:

Essential: MD/MS/ DNB/ PG Diploma/ equivalent (in Ophthalmology)

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Chalazion Removal**, 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 FICCI guidelines on Clinical pathway for Management of Pterygium are also included in the document for better understanding of the SHA teams, Insurance companies and TPAs. 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 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:

Proceed for Chalazion Removal Surgery only if diagnosis made is backed by clinical signs, symptoms, ophthalmic examination and does not respond to conservative medical therapy. Surgical specimen should be sent for histopathology if lesion is atypical.

- Early stage Chalazion small, red inflamed area of the eyelids
- After few days the inflammation can develop into painless and slow growing lump
- A chalazion can appear on the upper or lower eyelid

1.3 Mandatory documents- For healthcare providers

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

Mandatory document	Chalazion Removal
i. At the time of Pre-authorisation	
a. Clinical notes	Yes
b. Admission Notes	Yes
c. Clinical Photograph	Yes
ii. At the time of claim submission	
a. Operative/ procedure notes	Yes
b. Detailed Discharge summary	Yes
c. Histopathology report	Yes
d. Intraoperative photograph with time and date stamp	Yes

PART II: GUIDELINES FOR PROCESSING TEAM

PART III: GUIDELINES FOR IT

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:

- Did the clinical examination suggest presence of chalazion with following symptoms small, red inflamed area of the eyelids?

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

References:

- Chalazion, Standard treatment guidelines, Department of Public health and family Welfare, Madhya Pradesh (Page 231)
- <https://www.medicalnewstoday.com/articles/324215#pictures>