



Guidance document for PM JAY package

Double Valve Procedure

Procedures covered/ Procedure Count: 2

Specialty: CTVS

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price	ALOS
Double Valve Procedure	Double Valve Procedure	S1300021, S1300022	SV006A	142,000 + Cost of implant	10 days
Immediate reoperation- Double valve procedure	Double Valve Procedure	New Package	SV0031E	71,000 + Cost of implant	10days

Minimum qualification of the treating doctor:

Essential: M.Ch./DNB/equivalent (Cardiothoracic Surgery)

Special empanelment criteria/linkage to empanelment module: Cardiothoracic Surgery OT

Disclaimer:

For monitoring and administering the claim management process of **Double Valve Procedures**, 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:

For Clinical Pointers, refer to individual valve Guidance document/ Standard Treatment Guideline.

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	Double valve procedure	Immediate Reoperation-Double Valve procedure
i. At the time of Pre-authorization		
a. Clinical notes	Yes	Yes
b. Clinical notes indicating need for reoperation	No	Yes
c. Echo/Doppler report	Yes	Yes
ii. At the time of claim submission		
a. Procedure / Operative notes	Yes	Yes
b. Post procedure stills of ECHO with report	Yes	Yes
c. Detailed Discharge Summary	Yes	Yes
d. Barcode of implant, if used	Yes	Yes

PART II: GUIDELINES FOR PROCESSING TEAM

2.1 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.

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

Mandatory document	Double Valve procedure	Immediate reoperation-Double valve procedure
i. Pre-auth processing Doctor (PPD)		
a. Clinical notes - detailed history, signs & symptoms, indication for procedure	Yes	Yes

b. Clinical notes indicating need for reoperation	No	Yes
c. Was the Echo/ Doppler report suggestive of two valve pathology?	Yes	Yes
ii. Claims processing Doctor (CPD)		
a. Are the detailed Procedure / Operative notes submitted?	Yes	Yes
b. Does the Post procedure still of ECHO show repair/ replacement of both the valves?	Yes	Yes
c. Is there a Detailed Discharge Summary mentioning date of follow-up submitted?	Yes	Yes
d. Does the discharge summary mention need for reoperation?	No	Yes
e. Is the barcode of implant/ valve/ ring used submitted?	Yes	Yes

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:

1. Was the Echo/ Doppler report suggestive of two valve pathology? Yes

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