



Guidance document for processing PM-JAY packages

Nerve Biopsy

Procedures covered: 1

Specialty: Neurosurgery

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price (INR)
Nerve Biopsy excluding Hensens	Nerve Biopsy excluding Hensens	S800048	SN050A	7,000

ALOS: 2 Days

Minimum qualification of the treating doctor:

Essential: MCh/DNB/Equivalent in (Neurosurgery)

Special empanelment criteria/linkage to empanelment module: Care at Tertiary Hospital

Disclaimer:

For monitoring and administering the claim management process of **Nerve Biopsy excluding Hensens**, 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:

Nerve biopsy is a valuable tool in the diagnostic work-up of peripheral neuropathies (PNP). A nerve biopsy is usually performed only when other clinical, laboratory and electrophysiological methods have failed to clarify the cause of disease. Histologic analysis of nerve tissue may identify treatable conditions or narrow the differential diagnosis enough to change management.

Indication for Nerve biopsy

- Vasculitic Neuropathy
- Sarcoid Neuropathy

- Neuropathies associated with infection
- Inflammatory demyelinating polyneuropathy
- Polyneuropathy associated with monoclonal gammopathy
- Ischemic neuropathy
- Amyloid neuropathy
- Metachromatic leukodystrophy
- Lymphoma
- Toxic neuropathy
- Hereditary neuropathy

Selecting the nerve for biopsy

- Distal lower limbs – Sural nerve or peroneal nerve
- Upper limbs – Superficial radial nerve or a branch of the ulnar nerve
- Progressive optic neuropathy – Optic nerve biopsy

Types of nerve biopsy

- Fascicular biopsy
- Whole biopsy

Complications

- Sensory loss
- Problems with wound healing
- Failure to make a diagnosis

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	Nerve Biopsy excluding hensen
i. At the time of Pre-authorization	
Clinical notes	Yes
Clinical Evaluation	Yes
Planned line of treatment	Yes
ii. At the time of claim submission	
Detailed Indoor case papers (ICPs)	Yes

Histopathological examination	Yes
Detailed Procedure / operative notes	Yes
Detailed discharge summary	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:

2.2.1 At the time of pre-authorization processing- For pre-authorization processing doctor (PPD):

- Clinical notes - detailed history, signs & symptoms, planned line of treatment, and indication for procedure?
- Prior to nerve biopsy, a complete clinical, electrophysiological and laboratory workup was documented?

2.2.2 At the time of claim processing- For claims processing doctor (CPD)

- Are the detailed ICPs with daily vitals and treatment details?
- Are the detailed procedure / Operative Notes available?
- Is the Discharge summary with follow-up advise at the time of discharge?
- Was the histopathological examination done?

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:

- Was indication of nerve biopsy documented? Yes

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

References



1. Midha R, Elmadhoun TMI. Peripheral nerve examination, evaluation, and biopsy. In: Winn HR, ed. *Youmans and Winn Neurological Surgery*. 7th ed. Philadelphia, PA: Elsevier; 2017:chap 245.
2. Weis J, Brandner S, Lammens M, Sommer C, Vallat JM. Processing of nerve biopsies: a practical guide for neuropathologists. *Clin Neuropathol*. 2012;31(1):7-23. doi:10.5414/np300468