



Guidance document for processing PM-JAY packages Ankle Fractures

Procedures covered:1

Specialty: Orthopedics

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Procedure price
Ankle Fracture	Open Reduction Internal Fixation	S500019	SB020A	14,000 + Price of Implant

ALOS: 5days

Minimum qualification of the treating doctor:

Essential: Diploma in Orthopedics with 10 years of experience

Desirable: MS/DNB in Orthopedics

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Ankle Fracture**, 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:

Indications for treatment of Ankle fracture:

- To restore and maintain stability and alignment of the joint, if possible, with normal anatomy of the ankle mortise.
- Optimize functional recovery and prevent post-traumatic arthritis.
- If treating an ankle fracture with surgery, consider operating on the day of injury or the next day.

The patient usually has

- History of inversion injury
- Pain, swelling, deformity of the ankle.
- Movements are decreased,
- Drawer's test, inversion and eversion stress tests may be positive.
- Note the color and condition of the skin.
- Examine the entire leg.

Clinical findings:

- Skin integrity, assessment of circulation and sensation, should be precisely documented at presentation.

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	Open Reduction Internal Fixation
i. At the time of Pre-authorization	
a. Clinical notes with indication for surgery	Yes
b. X-ray labelled with patient ID, date and side (Left/ Right) - affected limb.	Yes
c. Clinical photograph of affected part	Yes
ii. At the time of claim submission	
a. Post Procedure clinical photograph	Yes
b. Post op X-ray is labelled with patient ID, date and side (Left/ Right) showing affected part.	Yes
a. Barcode/Invoice of implant (Optional)	Yes
b. Detailed operative note	Yes
c. Discharge Summary including follow up advice	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. Does the Post-op X- ray / CT of Ankle shows the presence of implant? – Yes

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

References:

1. The Management of Ankle Fractures: British Orthopedic Association Standards for Trauma.
2. Fractures (non-complex): assessment and management Fractures: diagnosis, management and follow-up of fractures NICE Guideline NG38.