

Guidance document for processing PM-JAY packages

Elbow replacement

Procedures covered: 1

Specialty: Orthopedics

Procedure name	HBP 1.0 code	HBP 2.0 code	Procedure price
Elbow replacement	S500097	SB037A	14,100 + Price of Implant

ALOS: 5days

Minimum qualification of the treating doctor:

Essential: MS/DNB in Orthopedics

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Elbow replacement**, 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:

- Elbow Joint replacement is performed when other interventions, medical and surgical, will not offer a satisfactory outcome. Underlying pathology includes:
 - Osteoarthritis, Rheumatoid arthritis (RA).
 - Complex fracture of the elbow, even in the elderly.
 - Severely damaged or torn soft tissues in the elbow, resulting in instability.
 - Malignancy in or around the elbow.
 - Poor results from previous elbow surgery.

- Indication for operation can be summarized as severe pain with radiological changes of joint destruction in the presence of failed conservative treatment, or the quality of the bone is not suitable for fixation.
- **Outcomes of an Elbow Replacement:**
 - Replaces the damaged joint surfaces with a synthetic joint.
 - a pain free, mobile elbow that enables patient to perform normal everyday activities.
- Currently, elbow replacement represents for patients with
 - Inflammatory conditions as well as selected patients with post-traumatic osteoarthritis.
 - Elderly patients with low, comminuted distal humerus fractures.
 - The salvage of distal humerus nonunion, Ankylosis.
 - Haemophilic arthropathy, and
 - Elbow reconstruction after tumor resection.
- This procedure may be associated with complications: including
 - Infection, Extensor mechanism dysfunction,
 - Periprosthetic fractures,
 - Wear, loosening, and osteolysis.

Fortunately, revision techniques developed over the last few years allow successful treatment of some of these complications.

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	Elbow Replacement
i. At the time of Pre-authorization	
a. Clinical notes	Yes
b. X-ray/ CT labelled with patient ID, date and side (Left/ Right)-affected limb justifying the surgery	Yes
ii. At the time of claim submission	
a. Post Procedure clinical photograph	Yes
b. Detailed discharge summary.	Yes
c. Detailed Procedure / Operative Notes.	Yes
d. Post op X-ray labelled with patient ID, date and side (Left/ Right)-affected limb, showing the implant	Yes
e. Invoice / bar code of implant	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 Elbow shows the presence of implant? – Yes

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

References:

1. Degreef I; Elbow arthroplasty: where are we today? A narrative review. Acta Chir Belg. 2016 Apr116(2):73-80. doi: 10.1080/00015458.2016.1147246.
2. Jenkins PJ, Watts AC, Norwood T, et al; Total elbow replacement: outcome of 1,146 arthroplasties from the Scottish Arthroplasty Project. Acta Orthop. 2013 Apr84(2):119-23. doi: 10.3109/17453674.2013.784658. Epub 2013 Mar 14.
3. Inagaki K; Current concepts of elbow-joint disorders and their treatment. J Orthop Sci. 2013 Jan18(1):1-7. doi: 10.1007/s00776-012-0333-6. Epub 2013 Jan 11.
4. Fajardo M, Kwon YW; The rise of the metal elbow. Bull Hosp Jt Dis (2013). 201371(1):24-31.
5. Aronowitz, J. G., and J. Sanchez-Sotelo. "Elbow arthroplasty." *Joint Replacement Technology*. Woodhead Publishing, 2014. 602-627.