



Guidance document for processing PM-JAY packages

Total Knee Replacement

Procedures covered/ procedure count: 2

Specialty: Orthopedics

Procedure name	HBP 1.0 code	HBP 2.0 code	Procedure price
Primary - Total Knee Replacement	S500096	SB039A	80,000
Revision - Total Knee Replacement	New package	SB039B	1,30,000

ALOS: 5-7 days

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:

Disclaimer:

For monitoring and administering the claim management process of Primary - Total Knee Replacement and Revision - Total Knee 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:

a. Primary Osteoarthritis in elderly

- Pain refractive to conservative management
- Knee pain that hinders walking, climbing stairs, or getting in and out of a chair

- Knee pain that interferes with sleep or does not subside with rest
- Inability to cope with side effects of pain relief medication
- Knee swelling that does not respond to treatment and that limits bending or straightening the knee
- Significant bowing in or out of the knee usually genu varum
- History of frequent locking episodes
- Joint instability
- Narrowed Joint space in standing X Ray
- No evidence of infection
- Age >55 years

b. Secondary Arthritis

- Post Trauma
- Systemic Joint diseases like Rheumatoid arthritis, Osteonecrosis and other type of inflammatory arthritis

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	Primary - Total Knee Replacement	Revision - Total Knee Replacement
i. At the time of Pre-authorisation		
a. Clinical notes with indication for surgery	Yes	Yes
b. X-ray / CT of Knee labelled with patient ID, date and side (Left/ Right)	Yes	Yes
c. Pre-op X – ray of the affected knee shows implant	No	Yes
ii. At the time of claim submission		
a. Indoor case papers	Yes	Yes
b. Post op clinical photograph	Yes	Yes
c. Post op X-ray of the operated knee showing the implant. The X-ray is labelled with patient ID, date and side (Left/ Right)	Yes	Yes
d. Invoice / bar code of implant	Yes	Yes
e. Detailed operative / procedure note	Yes	Yes
f. Discharge Summary	Yes	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 of knee show the presence of implant? – Yes
- II. If the patient is undergoing Revision knee replacement, does the pre-op X-ray of knee show the presence of implant? – Yes
- III. If the indication of surgery is primary osteoarthritis (& there is no history of trauma to the joint and no systemic joint disease), then is the patient age >55 years? - Yes

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