

## Guidance document for processing PM-JAY packages

### Application of Traction / P.O.P. casts / P.O.P. Spikas, Jackets

Procedures covered: 6

Specialty: Orthopedics

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Procedure price (INR)	ALOS (In days)
Application of Traction	Skeletal Traction with pin	S500084	SB002A	2,000	1
Application of Traction	Skin Traction	S500085	SB002B	700	1
Application of P.O.P. casts	Upper Limbs	S500082	SB003A	3,000	NA
Application of P.O.P. casts	Lower Limbs	S500082	SB003B	3,000	NA
Application of P.O.P. Spikas, Jackets	Spikas	S500034, S500056, S500083	SB004A	3,500	NA
Application of P.O.P. Spikas, Jackets	Jackets	S500034, S500056, S500083	SB004B	3,500	NA

#### Minimum qualification of the treating doctor:

**Essential:** Diploma in Orthopedics with 10 years of experience

**Desirable:** MS/DNB/Equivalent (in Orthopedics)

**Special empanelment criteria/linkage to empanelment module:** None

#### Disclaimer:

For monitoring and administering the claim management process of **Application of Traction / Application of P.O.P. casts / Application of P.O.P. Spikas & Jackets**, 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



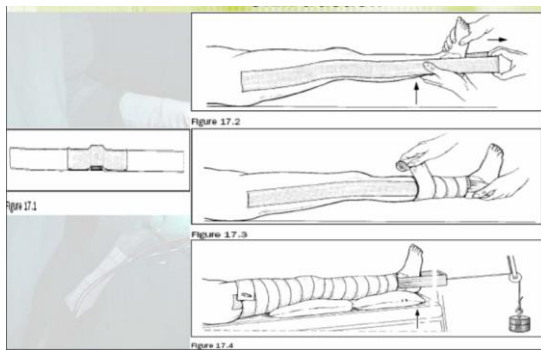
referral of cases to the appropriate level of care (as required) for treatment of patients under PMJAY and selection of corresponding Health Benefit Package.

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.

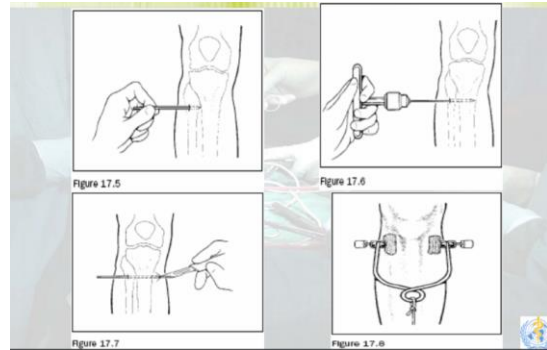
## 1.2 Clinical key pointers:

- Indications for **Application of Traction includes: (Skin and Skeletal traction)**
  - To restore and maintain alignment and length of bone in fractures/ dislocations.
  - To relieve pain due to muscle spasms, to immobilize limb to treat closed fractures or inflamed joints, to correct contracture deformities
- **Skin traction:**
  - Is applied by strapping the patient's affected lower limb and attaching weights.
  - In basic skin traction, usually traction tapes are applied to the lateral and medial aspects of the skin on the lower limb, and with the attached weight hung freely over the bed a generating pulling force is achieved.
  - To create a traction force over skin which is then transmitted through the soft tissues to the bone.
- **Skeletal traction:**
  - Skeletal Traction attaches directly to the bone, with the use of pins, wires, halo frame or tongs. It gives a strong steady continuous pull.
  - Is used for unstable fractures, soft tissue injuries.
  - Applied under a General Anesthetic, a traction bed and equipment may be used.
  - Skeletal Traction: Depends on the sites of pin placement, Skull traction, Extremity traction, Etc.

### Skin traction



### Skeletal traction



- Indications for **Application of P.O.P. casts:**

- Casts and splints provide immobilization of the extremities or spine following injuries, or in cases of other abnormalities of bone or soft tissues
- Use plaster or fiber glass to construct casts and splints.
- If necessary, wood and cardboard will serve as temporary splints
- Casts are wrapped circumferentially around the extremity, providing more rigid fixation than splints
- Use a splint for acute injuries to allow room for swelling.

### Indications for Application of P.O.P. Spikas & Jackets:

- **Spika splints** are generally noncircumferential and used in injuries are often acute and continued swelling can occur. Usually Spika splint used for scaphoid, Lunate injuries, First metacarpal fractures,

### 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 documents	A.T. Skeletal Traction with pin	A.T. Skin Traction	Application of P.O.P. casts	Application of P.O.P. Spikas	Application of P.O.P. Jackets
<b>i. At the time of Pre-authorization</b>					
a. Clinical notes with indication for surgery	Yes	Yes	Yes	Yes	Yes
b. Clinical photograph of affected part	Yes	Yes	Yes	Yes	Yes

c. X-ray labelled with patient ID, date and side (Left/ Right) of affected limb.	Yes	Yes	Yes	Yes	Yes
<b>ii. At the time of claim submission</b>					
a. Detailed Indoor case papers (ICPs)	Yes	Yes	Yes	Yes	Yes
b. Post Procedure clinical photograph with pins.	Yes	No	No	No	No
c. Post Procedure clinical photograph with POP cast	No	No	Yes	No	No
d. Post Procedure clinical photograph with POP Spika	No	No	No	Yes	No
e. Post Procedure clinical photograph with POP Jacket	No	No	No	No	Yes
f. Detailed Procedure / Operative Notes.	Yes	Yes	Yes	Yes	Yes
g. Discharge Summary	Yes	Yes	Yes	Yes	Yes

## **PART II: GUIDELINES FOR PROCESSING TEAM**

**2.1 Objective:** To provide guidance to the pre-authorisation 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:**

<b>Mandatory documents</b>	A.T. Skeletal Traction with pin	A.T. Skin Traction	Application of P.O.P. casts	Application of P.O.P. Spikas	Application of P.O.P. Jackets
<b>i. At the time of pre-authorization processing- For pre-</b>					

<b>authorization processing doctor (PPD)</b>					
a. Clinical notes with indication for surgery submitted?	Yes	Yes	Yes	Yes	Yes
b. Clinical photograph of affected part	Yes	Yes	Yes	Yes	Yes
c. X-ray labelled with patient ID, date and side (Left/ Right) -affected limb with indication for surgery	Yes	Yes	Yes	Yes	Yes
<b>ii. At the time of claim processing- For claims processing doctor (CPD)</b>					
a. Are the detailed Indoor case papers (ICPs) with daily vitals and treatment details?	Yes	Yes	Yes	Yes	Yes
b. Post Procedure clinical photograph with pins submitted?	Yes	No	No	No	No
c. Post Procedure clinical photograph with POP cast submitted?	No	No	Yes	No	No
d. Post Procedure clinical photograph with POP Spika	No	No	No	Yes	No
e. Post Procedure clinical photograph with POP Jacket	No	No	No	No	Yes
f. Are the detailed procedure / Operative Notes available?	Yes	Yes	Yes	Yes	Yes
g. Is the Discharge summary with follow-up advise at the time of discharge?	Yes	Yes	Yes	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:**

- I. Was the clinical photograph and X ray of the affected part indicative of procedure? Yes

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

#### **References:**

1. Redemann S, Modalities for immobilization. In Maher A, Salmond S, Pellino T, (Ed.), Orthopaedic Nursing. Chapter 12; pp311-318. Philadelphia: W B Saunders. 2002.
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5. Essential Health Technologies Clinical Procedures: Orthopedic techniques, World health Organization.
6. Howes DS, Kaufman JJ, Plaster splints: TECHNIQUES AND INIDCATIONS. Am fam physician.