



Guidance document for processing PM-JAY packages

Fracture - setting nasal bone

Procedures covered: 1

Specialty: ENT

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price (INR)
Fracture - setting nasal bone	Fracture - setting nasal bone	S200037	SL010A	8,000

ALOS (in Days): 2

Minimum qualification of the treating doctor:

Essential: MS/ DNB/ or Equivalent (in ENT)

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Fracture - setting nasal bone**, 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 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:

Proceed for surgery only if diagnosis made is backed by clinical presentation and investigations.

Nasal bone is the commonest facial bone prone for fracture owing to the prominent projection of the bone in the face. It can occur in isolation or in combination with other facial soft tissue and bony injuries which mandates thorough evaluation of patients presenting with facial trauma for a timely detection and management of nasal bone fractures.

Indications for surgery:

- New onset or worsened nasal obstruction
- New onset nasal deformity which patient wishes for correction
- Septal hematoma

Timing of surgery-

- Within 3-4 hours of trauma prior to onset of soft tissue swelling
- After resolution of soft tissue swelling, but before 2 weeks of trauma (time for onset of fracture healing)
- Immediately in the presence of septal hematoma/ abscess

Contra-indications

- Inadequate assessment of displaced fracture due to soft tissue swelling
- Skull base fracture
- CSF leak
- Meningitis

Common complications

- Septal hematoma/ abscess
- Bleeding
- Persistent/ inadequate reduction

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	Fracture - setting nasal bone
i. At the time of Pre-authorization	
a. Clinical notes (detailing signs, symptoms, examination findings, planned line of treatment & advise for admission)	Yes
b. X-ray/CT report of the affected part	Yes
c. Medico-legal case (MLC) / First information report (FIR) for traumatic injuries and circumstances of the incident which led to fracture (In applicable cases)	Yes
ii. At the time of claim submission	
a. Detailed Indoor Case Papers (ICPs)	Yes
b. Detailed Procedure / Operative Notes	Yes
c. Post procedure X-ray	Yes
d. Post procedure clinical photograph of the affected part	Yes
e. 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:

Mandatory document	Fracture - setting nasal bone
i. At the time of pre-authorization processing- For pre-authorization processing doctor (PPD)	
a. Was the Clinical notes, detailing signs, symptoms, examination findings, planned line of treatment & advise for admission submitted?	Yes
b. Was the X-ray/CT report of the affected part confirming the diagnosis and justify the procedure submitted?	Yes
c. Was the still photograph of the affected part submitted?	Yes
ii. At the time of claim processing- For claims processing doctor (CPD)	
a. Are detailed indoor case papers submitted?	Yes
b. Was detailed Procedure / operative Notes submitted?	Yes
c. Was the post procedure X-ray of the affected part submitted?	Yes
d. Was the post procedure clinical photograph of the affected part submitted?	Yes
e. Was the detailed discharge summary submitted?	Yes

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 the clinical note and X-ray/CT report indicative of procedure? Yes

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

References:

- Alvi, Sirhan, Bilal Anwar, and Bhupendra C. Patel. "Nasal Fracture Reduction." StatPearls [Internet]. StatPearls Publishing, 2019.
- Bailey, Byron J., Jonas T. Johnson, and Shawn D. Newlands. "Head and neck surgery." Otolaryngology 1 (2006): 336-361.



3. Kerr, Alan G. Scott-Brown's Otolaryngology No-3 Otology. London: Butter worth, 1987, 1987.