



Guidance document for processing PM-JAY packages

Percutaneous Nephrolithotomy (PCNL)

Procedures covered: 2

Specialty: Urology

Package/ procedure name	HBP 1.0 code	HBP 2.0 code	Package price
PCNL (Percutaneous Nephrolithotomy)	S700024 S700025	SU007A	35,000
PCNL follow-up	S100153	SU093A	1,200

ALOS: 2 days

Minimum qualification of the treating doctor:

Essential: MS / M.Ch/ equivalent (Urology)

Special empanelment criteria/linkage to empanelment module:

Disclaimer:

For monitoring and administering the claim management process of **PCNL (Percutaneous Nephrolithotomy) and PCNL follow-up**, 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:

Proceed with PCNL (Percutaneous Nephrolithotomy) only if diagnosis made is backed by clinical manifestation

- Flank pain
- Hematuria

c. Colic may be associated with Fever, Nausea and vomiting

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	PCNL	PCNL (Follow-up)
i. At the time of Pre-authorization		
Clinical notes	Yes	NA
Intravenous Pyelogram (IVP) / NCCT/ CT-IVP	Yes	NA
Discharge summary of recent PCNL done	NA	Yes
ii. At the time of claim submission		
Operative notes	Yes	NA
Detailed Discharge Summary	Yes	NA
X-ray / USG post procedure	Yes	Yes (Only once)
Urine routine report	NA	Yes
Clinical notes mentioning the drugs provided	NA	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:

Mandatory documents	PCNL	PCNL (Follow-up)
Pre-auth processing Doctor (PPD)		
<i>Clinical notes-</i> detailed history, signs & symptoms, indication for procedure	Yes	NA

IVP / NCCT/ CT-IVP Showing presence of stone	Yes	NA
Discharge summary mentioning the date of the previous surgery and the follow up date	NA	Yes
Claims Processing Doctor (CPD)		
<i>Detailed operative notes</i> with indications and outcomes of the procedure	Yes	NA
<i>Discharge summary</i> with follow-up advise at the time of discharge	Yes	NA
X-ray / USG post procedure showing the procedure done	Yes	Yes (Only once)
Urine routine report	NA	Yes
Clinical notes mentioning the procedure done and the drugs provided	NA	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:

PCNL

- I. IVP / NCCT/ CT-IVP Showing presence of renal stone >20 mm >? Yes

PCNL (Follow up)

- I. Has the patient previously undergone PCNL? Yes, Mention the date of the operation.

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