



## Guidance document for processing PM-JAY packages

### Surgery for Arterial Aneurysm –Vertebral

Procedures covered: 1

Specialty: CTVS/Neurosurgery

Package name	Procedure name	HBP 2.0 code	HBP 2.1 code	Package price (INR)
Peripheral Arterial Surgeries	Surgery for Arterial Aneurysm –Vertebral	New Package	SV019W	70,000

**ALOS (In days):** 7 Days

#### Minimum qualification of the treating doctor:

**Essential:** MCh/ or equivalent (in Cardiothoracic Surgery, Vascular Surgery), Mch/DNB/Equivalent (in Neurosurgery)

**Special empanelment criteria/linkage to empanelment module:** Tertiary Care Facilities

#### Disclaimer:

For monitoring and administering the claim management process of **Surgery for Arterial Aneurysm – Vertebral** 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:**

Vertebral artery (VA) aneurysms comprise approximately one-third of posterior circulation aneurysms. They are morphologically variable, and located critically close to the cranial nerves and the brainstem.

Vertebral Artery aneurysms include

- Vertebral Artery - posterior inferior cerebellar artery (PICA) aneurysms
- Vertebro-basilar junction aneurysms
- Distal posterior inferior cerebellar artery aneurysms, and
- Aneurysms located along the distal Vertebral Artery.

**Clinical Manifestations:** Subarachnoid hemorrhage, medullary compression, cranial neuropathies, and ischemic events

**Diagnosis:** CT-Angiography, Magnetic resonance angiography (MRA) and Digital Subtraction Angiography (DSA)

**Surgical Management:** Microsurgical clipping is the most effective treatment of vertebral artery aneurysms, in which a small metal clip is used to stop blood flow into the aneurysm.

### 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	Surgery for Arterial Aneurysm – Vertebral
<b>i. At the time of Pre-authorization</b>	
a. Clinical notes with indication and admission notes.	Yes
b. Relevant investigations - CT Angiography / MRA/ Digital Subtraction Angiography (DSA) reports	Yes
<b>ii. At the time of claim submission</b>	
a. Detailed Indoor case papers (ICPs)	Yes
b. Detailed procedure/ operative notes	Yes
c. Detailed discharge summary	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. Was the patient's CT Angiography / MRA/ Digital Subtraction Angiography (DSA) report suggestive for the procedure? Yes

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

#### References:

1. Ravi Kumar C V, Palur R S, Satish S, Rao B R. Vertebral artery aneurysms. Neurol India [serial online] 2000 [cited 2021 Apr 14];48:161. Available from: <https://www.neurologyindia.com/text.asp?2000/48/2/161/1554>
2. Hanna Lehto, Mika Niemelä, Riku Kivisaari, Aki Laakso, Behnam Rezai Jahromi, Ferzat Hijazy, Hugo Andrade-Barazarte, Reza Dashti, Juha Hernesniemi, Intracranial Vertebral Artery Aneurysms: Clinical Features and Outcome of 190 Patients, World Neurosurgery, Volume 84, Issue 2, 2015, Pages 380-389, ISSN 1878-8750, <https://doi.org/10.1016/j.wneu.2015.03.034>.
3. Zhao, X., Wang, H., Liu, J., Zhang, Z., & Li, Z. (2019). Endovascular treatment of vertebral artery dissecting aneurysm: A single-center experience. Experimental and therapeutic medicine, 18(6), 4838–4844. <https://doi.org/10.3892/etm.2019.8128>.
4. Yilmaz, Tevfik MD; Turan, Yahya MD; Ceviz, Adnan MD Surgical Therapy of a Vertebral Artery Aneurysm With Saccular and Fusiform Segments, Journal of Craniofacial Surgery: July 2014 - Volume 25 - Issue 4 - p 1549-1551 doi: 10.1097/SCS.0000000000000854