



## Guidance document for processing PM-JAY packages

### Cleft Lip and Cleft Palate Surgery (Per Stage)

**Packages covered: 1**

**Specialty: Pediatric Surgery/ Oral & Maxillofacial Surgery/ Plastic & Reconstructive Surgery**

Package name	HBP 1.0 code	HBP 2.0 code	Package price
Cleft Lip and Cleft Palate Surgery (Per stage)	S1400034, S100145, S100146, S100147, S1600009	SS001A	15,000/-

**ALOS: 3 Days**

**Minimum qualification of the treating doctor:**

**Essential:** MS/ DNB/ equivalent (General surgery), DNB/MCh/ equivalent (Plastic surgery), DNB/MCh/ equivalent (Pediatric surgery)

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

**Disclaimer:**

For monitoring and administering the claim management process of Cleft Lip and Cleft Palate Surgery (Per stage), 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. 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<sup>i</sup>**

##### **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:**

- Difficulty in feeding: new born child is not able to breast feed properly due to child's inability to suck efficiently. Nipples for bottle feeding present the same problem.
- Difficulty in swallowing, as liquids or foods come out the nose.

- c. Nasal speaking voice and various speech problems.
- d. May have malformed and missing teeth.

#### 1.4 Mandatory documents- For healthcare providers

Following documents should be uploaded by the concerned hospital staff at the time of pre-authorisation and claims submission:

Mandatory document	Cleft Lip and Cleft Palate Surgery (Per Stage)
<b>i. At the time of Pre-authorisation</b>	
Clinical notes	Yes
Clinical Photography	Yes
<b>ii. At the time of claim submission</b>	
Indoor case papers (ICPs)	Yes
Detailed operative notes	Yes
Post procedure clinical photograph	Yes
Pre-anesthesia check-up report	Yes
Discharge summary	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:**

**2.2.1 At the time of pre-authorization processing- For pre-authorisation processing doctor (PPD):**

- a. Clinical notes - detailed history, signs & symptoms, indication for procedure?
- b. Clinical Photograph?

**2.2.2 At the time of claim processing- For claims processing doctor (CPD)**

- a. Are the detailed ICPs with daily vitals and line of treatment?
- b. Is pre-anesthesia check-up report available?



- c. Are the detailed procedure / Operative Notes available?
- d. Is the Discharge summary with follow-up advise at the time of discharge?
- e. Post treatment clinical Photograph?

### **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:**

- a. Has the patient presented with congenital cleft lip and cleft palate which may be complete or incomplete or submucous / with or without cleft lip?  
Yes
- b. Is there evidence of cleft palate on clinical photograph? Yes

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

---

<sup>i</sup>References: Standard Treatment Guidelines, Mahatma Phule Jeevandayee Arogya Yojana, Govt. of Maharashtra