



Guidance document for processing PM-JAY packages

Functional Septorhinoplasty

Procedures covered: 1

Specialty: ENT

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price (INR)
Functional Septorhinoplasty	Functional septo-rhinoplasty	S200055	SL008A	21,800

ALOS: 2 Days

Minimum qualification of the treating doctor:

Essential: MS/ DNB/ PG Diploma or equivalent (in ENT)

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Functional septo-rhinoplasty**, 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 signs, symptoms, examination.

Functional septo-rhinoplasty is a procedure that is used to address nasal obstruction secondary to anatomic nasal deformities in the nasal septum and external nasal framework.

Indications: Nasal obstruction associated with external nasal deformity

Causes:

- Post traumatic



- Developmental
- Congenital

Signs & Symptoms: nasal obstruction and external deformity like crooked nose, saddle nose etc.

Contraindications: Surgery should not be planned in children before completion of the development of facial skeleton (atleast 15 to 16 years of age)

Complications: Post-operative deformity, atrophy, fibrosis or numbness of the mucosal and submucosal skin, continued breathing difficulty

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	Functional septorhinoplasty
i. At the time of Pre-authorization	
a. Clinical notes (detailing signs, symptoms, examination findings, indications for doing the procedure, circumstances of the incident which led to disfigurement and advise for admission)	Yes
b. Clinical picture of the affected part along with full face of the patient and anterior rhinoscopy/ endoscopic picture showing deviated septum	Yes
ii. At the time of claim submission	
a. Indoor case papers	Yes
b. Operative/ procedure notes	Yes
c. 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:

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

- a. Detailed Clinical notes (including clinical signs & symptoms such as difficulty in breathing, examination findings, indications for doing the procedure, Evidence of the circumstances of the incident which led to disfigurement& advise for admission)? Yes
- b. Clinical picture of the affected part along with full face of the patient and anterior rhinoscopy/ endoscopic picture showing deviated septum? Yes

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

- a. Do OT notes detail the steps of surgery performed and outcomes of the surgery? Yes
- b. Are the documents available to show appropriate post-op care, advise including for follow-up? Yes
- c. Are post procedure photographs of the affected part available? Yes
- d. Is the discharge summary available? 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:

- a. Did the signs, symptoms, examination and clinical pictures confirm the need for functional septorhinoplasty? Yes
- b. Evidence of other causes of breathing difficulty (other than nasal septum deformity) ruled out? Yes

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

References:

- i. Septorhinoplasty: Our Experience, Indian Journal of Otolaryngology and Head & Neck Surgery, Sep 2017, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5581764/>
- ii. Can Functional Septorhinoplasty Independently Treat Obstructive Sleep Apnea, Plastic and Reconstructive surgery, Journal of the American Society of Plastic Surgeons, June 2015, https://journals.lww.com/plasreconsurg/Abstract/2015/06000/Can_Functional_Septorhinoplasty_Independently.9.aspx
- iii. Functional Septorhinoplasty in the Pediatric and Adolescent Patient, Int J Pediatric Otorhinolaryngology, Aug 2018, <https://pubmed.ncbi.nlm.nih.gov/29958624/>
- iv. Risks and complications in rhinoplasty, GMS Current Topics in Otorhinolaryngology - Head and Neck Surgery, 2007, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3199839/>