



## Guidance document for PM JAY package

### Peripheral arterial injury repair (without bypass)

Procedures covered/ Procedure Count: 1

Specialty: CTVS

Package name	Procedure Name	HBP 1.0 code	HBP 2.0 code	Package price	ALOS
Peripheral arterial injury repair (without bypass)	Peripheral arterial injury repair (without bypass)	New Package	SV021A	30,000	4 days

**Minimum qualification of the treating doctor:**

**Essential:** M.Ch./DNB/ equivalent (Cardiothoracic Surgery)

**Special empanelment criteria/linkage to empanelment module:** Cardiothoracic Surgery OT

**Disclaimer:**

For monitoring and administering the claim management process of **Peripheral arterial injury repair (without bypass)**, 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:**

Traumatic peripheral vascular injury is a significant cause of disability and death either in civilian environments or on the battlefield. Penetrating trauma and blunt trauma are the most common forms of vascular injuries. Besides, iatrogenic arterial injury (IAI) is another pattern of vascular trauma. The management of peripheral vascular injuries has been improved in different environments and wars.

There are different types of vascular injuries, such as vasospasm, contusion, intimal flaps, intimal disruption or hematoma, external compression, laceration, transection and focal wall defects, etc. The main clinical manifestations of vascular injuries are shock following massive hemorrhage and limb necrosis due to tissue and organ ischemia.

#### Diagnosis

Ultrasound, computed tomography angiography (CTA) and magnetic resonance angiography (MRA) are most valuable for assessment of peripheral vascular injuries. Angiography remains the gold standard for diagnosing vascular trauma. Immediate hemorrhage control and rapid restoration of blood flow are the primary goals of vascular trauma treatment.

#### Management

There are many operative treatment methods for vascular injuries, such as vascular suture or ligation, vascular wall repair and vascular reconstruction with blood vessel prostheses or vascular grafts. Surgical operation is still the primary treatment for vascular injuries.

### 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	Peripheral arterial injury repair (without bypass)
<b>i. At the time of Pre-authorization</b>	
a. Clinical notes	Yes
b. Duplex USG report	Yes
<b>ii. At the time of claim submission</b>	
a. Procedure / Operative notes	Yes
b. 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	Peripheral arterial injury repair (without bypass)
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<b>i. Pre-auth processing Doctor (PPD)</b>	
a. Clinical notes - detailed history, signs & symptoms, indication for procedure	Yes
b. Was the duplex USG report submitted?	Yes
<b>ii. Claims processing Doctor (CPD)</b>	
a. Are the detailed Procedure / Operative notes submitted?	Yes
b. Is there a Detailed Discharge Summary mentioning date of follow-up submitted?	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:**

1. Was the Clinical notes suggestive of peripheral arterial injury? Yes

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

#### **References**

1. Liu JL, Li JY, Jiang P, et al. Literature review of peripheral vascular trauma: Is the era of intervention coming? *Chin J Traumatol*. 2020;23(1):5-9.