



Guidance document for processing PM-JAY packages

Animal bites (Excluding Snake Bite)

Procedures covered: 1

Specialty: Emergency Room Packages

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price (INR)
Animal bites (Excluding Snake Bite)	Animal bites (Excluding Snake Bite)	M700004	ER003A	1,700

ALOS: 3 Days

Minimum qualification of the treating doctor:

Desirable: MBBS

Essential: MD/DNB or Equivalent in Emergency Medicine/General medicine

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Animal bites (Excluding Snake Bite)**, 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:

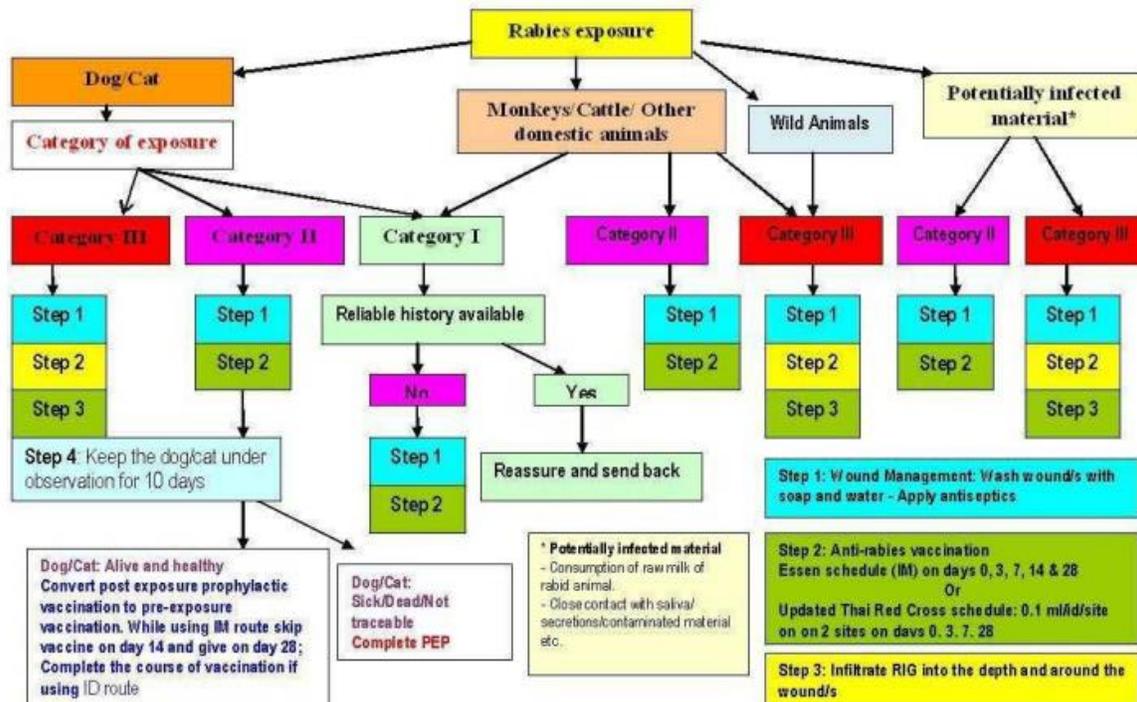
Proceed for treatment only if diagnosis made is backed by clinical signs, symptoms, examination.

The most common animals globally responsible for human rabies deaths are dogs (97%), cats (2%), mongoose, jackals, and other wild animals (1%).

Etiology: Bite wounds from cats and dogs can occur without provocation, but provoked bites, such as disturbing animals while they are eating, are more common.

- Unprovoked bites by wild or sick-appearing animals (dogs, cats, raccoons, foxes and bats) further raise underlying concerns about likelihood of rabies exposure.
- A major concern in all bite wounds is subsequent infection caused by bacteria, and, more rarely, viruses. Depending on the animal, various species of bacteria are found in the animal mouth, and many resulting infections are polymicrobial.
- **Prognosis:** Local infection and cellulitis are the leading causes of morbidity, sepsis is a potential complication of bite wounds, particularly *C. canimorsus* (DF-2) sepsis in immunocompromised individuals. *Pasteurella multocida* infection (the most common infection contracted from cat bites) also may be complicated by sepsis. Meningitis, osteomyelitis, tenosynovitis, abscesses, pneumonia, endocarditis, and septic arthritis are additional concerns in bite wounds.
- **Major diseases:** Rabies is primarily a disease of terrestrial and airborne mammals, including dogs, wolves, foxes, coyotes, jackals, cats, bobcats, lions, mongooses, skunks, badgers, bats, monkeys and humans. The dog has been, and still is, the main reservoir of rabies in India. Other animals, such as monkeys, jackals, horses, cattle and rodents, seem to bite incidentally on provocation, and the fear of rabies leads the victim to seek post-exposure prophylaxis.

Decision Tree: Guide to Post Exposure Prophylaxis (PEP)



*National Guidelines on rabies Prophylaxis, India.



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	Animal bites (Excluding Snake Bite)
*If this procedure is performed in emergency ward, the preauthorization is not mandatory.	
i. At the time of Pre-authorization	
a. Clinical Notes including classification of bites, evaluation findings, indications for the procedure, and planned line of treatment	Yes
b. Pre-clinical photograph	Yes
ii. At the time of claim submission	
a. Detailed Indoor Case Papers (ICPs)	Yes
b. Clinical Notes with complete treatment details including no. of doses of vaccine with dates (as needed)	Yes
c. Invoice / bar code sticker of the vaccine (If its applicable)	Yes
d. Discharge summary and follow-up advice	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	Animal bites (Excluding Snake Bite)
*If this procedure is performed in emergency ward, the preauthorization is not mandatory.	
i. At the time of pre-authorization processing- For pre-authorization processing doctor (PPD)	
a. Was the Clinical Notes including classification of bites, evaluation findings, indications for the procedure, and planned line of treatment submitted?	Yes
b. Was the pre-clinical photograph submitted?	Yes
ii. At the time of claim processing- For claims processing doctor (CPD)	
a. Are the detailed Indoor case papers and including no. of doses of vaccine with dates (as needed) submitted?	Yes



b. Was the Invoice / bar code sticker of the vaccine submitted? (If its applicable)	Yes
c. Is the discharge summary with follow-up advise at the time of discharge?	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:**

- a. Are the Classification of animal bite and pre-clinical photograph submitted are indicative of procedure? Yes

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

References:

1. Sudarshan, Mysore Kalappa, and Ravish Shankaraiah Haradhanalli. "Facilities and services of postexposure prophylaxis in anti-rabies clinics: A national assessment in India." *Indian journal of public health* 63.5 (2019): 26-26.
2. <https://ncdc.gov.in/WriteReadData/l892s/File557.pdf>
3. Stevens, Dennis L., et al. "Practice guidelines for the diagnosis and management of skin and soft-tissue infections." *Clinical Infectious Diseases* 41.10 (2005): 1373-1406.
4. Sheetal, Vyas, et al. "Animal bite management practices: study at three municipal corporation hospitals of Ahmedabad." *Nat J Comm Med* 1.2 (2010): 75-8.
5. Abrahamian, Fredrick M. "Dog bites: bacteriology, management, and prevention." *Current infectious disease reports* 2.5 (2000): 446-453.