



## Guidance document for processing PM-JAY packages

### Ureterostomy/ Uretero-ureterostomy

Procedures covered: 3

Specialty: Urology, Pediatric Surgery

Package name	Procedure name	HBP 1.0 code	HBP 2.0 code	Package price (INR)	ALOS (Days)
Ureterostomy	Ureterostomy (Cutaneous)	S700042	SU027A	20,000	2
Uretero-ureterostomy	Open	S700022	SU028A	25,000	3
Uretero-ureterostomy	Lap.	S700023	SU028B	25,000	3

#### Minimum qualification of the treating doctor:

**Essential:** MCh/DNB or Equivalent (in Urology, Pediatric Surgery)

**Special empanelment criteria/linkage to empanelment module:** Tertiary care and Laparoscopic surgery facility availability

#### Disclaimer:

For monitoring and administering the claim management process of **Ureterostomy, Uretero-ureterostomy** for 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:**

Proceed with **Ureterostomy/ Uretero-ureterostomy** only if diagnosis made is backed by clinical manifestation



- a. Bladder cancer
- b. Spinal cord injury
- c. Malfunctioning of the bladder
- d. Birth defect e.g spina bifida

### 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	Ureterostomy	Uretero-ureterostomy
<b>i. At the time of Pre-authorization</b>		
a. Clinical notes including evaluation findings, indication for procedure, and planned line of management	Yes	Yes
b. CT / MRI report	Yes	NA
c. Intravenous pyelogram (IVP)/CT/ CT-IVP, +/-DTPA renal scan report	NA	Yes
<b>ii. At the time of claim submission</b>		
Detailed Indoor case papers with Treatment given	Yes	Yes
Detailed Operative /Procedure notes	Yes	Yes
Intra-operative photograph	NA	Yes
Clinical Photograph of the stoma created	Yes	NA
Detailed Discharge Summary	Yes	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 documents	Ureterostomy	Uretero-ureterostomy
<b>At the time of pre-authorization processing- For pre-authorization processing doctor (PPD):</b>		
a. Clinical notes - detailed history, signs & symptoms, indication for procedure	Yes	Yes
b. Was the CT / MRI report submitted?	Yes	NA

c. Was the IVP/CT/ CT-IVP, +/-DTPA renal scan report submitted?	NA	Yes
<b>At the time of claim processing- For claims processing doctor (CPD)</b>		
a. Are the detailed Indoor case papers submitted?	Yes	Yes
b. Was the Detailed Procedure/Operative notes submitted?	Yes	Yes
c. Did the clinical photograph show evidence of stoma creation?	Yes	NA
d. Was the Intra-operative photograph submitted?	NA	Yes
e. Was the Detailed discharge summary submitted?	Yes	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:**

- I. Does the imagining report show any presence of obstruction or indication for surgery?  
Yes

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

#### **References:**

1. [https://uroweb.org/wp-content/uploads/Guidelines\\_WebVersion\\_Complete-1.pdf](https://uroweb.org/wp-content/uploads/Guidelines_WebVersion_Complete-1.pdf)
2. Indications and outcome of patients undergoing cutaneous ... ([www.ijsurgery.com](http://www.ijsurgery.com) › [isj](#) › [article](#) › [download](#))
3. [https://www.researchgate.net/publication/221923522\\_Laparoscopic\\_Ureteroureterostomy](https://www.researchgate.net/publication/221923522_Laparoscopic_Ureteroureterostomy)
4. [https://www.jpurology.com/article/S1477-5131\(18\)30631-4/fulltext](https://www.jpurology.com/article/S1477-5131(18)30631-4/fulltext)