



Guidance document for processing PM-JAY packages

Malaria

Procedures covered: 2

Specialty: General Medicine, Pediatric Medical Management

Package name	Procedure name	HBP code 1.0	HBP code 2.0	Package price (INR)
Malaria	Malaria	M100014	MG003A	General Ward- 1,800 HDU – 2,700 ICU without ventilator– 3,600 ICU with Ventilator– 4,500
Malaria	Complicated malaria	M100051, M200085, M200074	MG003B	General Ward- 1,800 HDU – 2,700 ICU without ventilator– 3,600 ICU with Ventilator– 4,500

ALOS: 3-5 Days

Minimum qualification of the treating doctor:

Essential: MBBS

Desirable: MD / DNB (General Medicine / Pediatric Medicine)

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **Malaria, Complicated Malaria** 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 MoHFW guidelines are also included in the document for better understanding of the SHA teams, Insurance companies and TPAs. 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.

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 Malaria only if diagnosis made is backed by clinical manifestation



- a. Fever
- b. Chills with Sweats
- c. Headaches
- d. Nausea and vomiting
- e. Body aches
- f. General malaise

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	Malaria , Complicated Malaria
i. At the time of Pre-authorization	
a. Clinical Notes including evaluation findings, indications for the procedure, and planned line of treatment	Yes
b. Peripheral smear/RMT test report	Yes
c. Blood report (CBC, MP, Platelet.)	Yes
ii. At the time of claim submission	
a. Detailed Indoor case paper	Yes
b. Post treatment Blood investigation report (CBC, MP, Platelet etc.)	Yes
c. Detailed 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:

Mandatory documents	Complicated Malaria
i. At the time of pre-authorization processing- For pre-authorization processing doctor (PPD):	

a. Was the detailed Clinical notes – detailed history, signs & symptoms, detailed treatment line submitted?	Yes
b. Was the Peripheral smear/RMT test report submitted?	Yes
c. Was the Blood report (CBC, MP, Platelet etc.) reports submitted?	Yes
ii. At the time of claim processing- For claims processing doctor (CPD):	
a. Detailed ICPs (Indoor case paper) with daily vitals and line of treatment submitted?	Yes
b. Post treatment Blood reports (CBC, MP, Platelet etc.) submitted?	Yes
c. Was the Discharge summary with follow-up advise at the time of discharge 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:

- I. Did the patient have any of the symptoms like fever with or without chills or sweating, severe breathlessness, internal or external bleeding, convulsions followed by coma, decreased urine output, acute dyspnoea? Yes
- II. Is the MP test positive? Yes
- III. Was patient treated with IV antimalarial, IV fluids, IV Dextrose, Steroids NSAIDS?

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

References:

1. CDC guidance document on Malaria (<https://www.cdc.gov/malaria/about/disease.html#severe>)
2. WHO guideline on treatment of malaria (https://www.who.int/docs/default-source/documents/publications/gmp/guidelines-for-the-treatment-of-malaria-eng.pdf?sfvrsn=a0138b77_2)
3. MoHFW document of management of Malaria cases