



Guidance document for processing PM-JAY packages

Oral Submucous Fibrosis (OSMF) Treatment

Procedures covered:1

Specialty: Oral Maxillo Facial Surgery

| Package name | Procedure name | HBP 1.0 code | HBP 2.0 code | Package price (INR) |
|---|--|--------------|--------------|---------------------|
| Release of fibrous bands & grafting - in (OSMF) treatment under GA (per side) | Release of fibrous bands & grafting - in (OSMF) treatment under GA | S1600005 | SM007A | 3,000 |

ALOS:

- Release of fibrous bands &/ or grafting - in (OSMF) treatment under GA - **1-5 days**
- Under LA: **Ambulatory**

Minimum qualification of the treating doctor:

Essential: MDS (Oral Maxillo-facial surgery)

Special empanelment criteria/linkage to empanelment module: None

Disclaimer:

For monitoring and administering the claim management process of **OSMF (Oral Submucous Fibrosis) Treatment**, 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, surgical, and therapeutic management of patient. In that respect the hospitals and physicians/surgeons 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.

OSMF: Oral submucous fibrosis (OSMF) is an oral precancerous condition characterized by inflammation and progressive fibrosis of the submucosal tissues resulting in marked rigidity and trismus. OSMF still remains a dilemma to the clinicians due to elusive pathogenesis and less well-defined classification systems. Based on clinical findings is classified into:

Stage 1: stomatitis, ulcers

Stage 2: Fibrosis in healing vesicles

Stage 3: Leukoplakia, speech and hearing defect

Causes:

- Multifactorial
- Local factor: chilies, Areca Nuts
- Systemic Factors: Nutritional deficiency, Genetic predisposition, autoimmunity

Symptoms:

- Burning sensation, blisters, ulcerations, excessive salivation, defective gustatory sensation, dryness of mouth, mouth opening 20-30mm - **Early Symptoms**
- Blanched, slightly opaque, white fibrous bands, fixation or shortening of uvula, inability to blow whistle, difficulty in swelling, nasal voice, mouth opening < 20mm - **Advanced Symptoms**

Examination:

- Blanching seen on ventral surface of tongue, floor of mouth and restricted movement of tongue.
- Blanching seen over buccal mucosa.
- Decreased mouth opening in OSMF patient
- Soft Palate and Faucial pillar showing redness
- Blanching showing shrunken uvula

Investigations:

- **X-ray:** OPG/ CBCT/CT/ Lateral Oblique and PA mandible.
Either of the following Investigation required on Surgeon's prescriptions:
- Histopathology: Biopsy report/Special Stains (Van Gieson's Stain, Masson's Trichome) or
- IHC Markers: Heat shock Protein, Cystatin C, Endothelial Markers -CD31, CD 34, CD 105, Basic Fibroblastic growth Factors or
- Serological Blood Chemistry: Iron, Vitamin B12, ESR, Lipid Profile or
- Immunofluorescence/Immunohistochemical or
- Tissue culture

Indications for OSMF: Indicated in following cases

- In Smokers, Tobacco chewers etc.

Contraindications: Difficult to do treatment in cases of Chronic consumption of areca nuts, betel leaf, tobacco chewers etc.

Complications:

- Recurrence
- Malignancy

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 | Oral Submucous Fibrosis (OSMF) Treatment |
|---|--|
| i. At the time of Pre-authorization | |
| a. Clinical notes (detailing signs, symptoms, examination findings, clinical photographs (intraoral & extraoral) indications for doing the procedure & advise for admission). | Yes |
| b. X-ray: OPG/ CBCT/CT/ Lateral Oblique and PA mandible | Yes |
| ii. At the time of claim submission | |
| a. Indoor case papers & Consent (informed written) | Yes |
| b. Procedure note/ operative note & Anesthesia notes | Yes |
| c. Investigation reports (post procedure): Histopathology report showing OSMF to confirm the existence | 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-authorization processing doctor (PPD):

- Detailed Oral & Maxillofacial Clinical notes & Clinical photographs (including clinical signs & symptoms such as difficulty in breathing, examination findings, indications for doing the procedure & advise for admission) submitted ? Yes
- X-ray report of proven OSMF showing fibrous growth? 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. Post-operative clinical photograph (intraoral & extraoral, with maximal interincisal mouth opening) Yes
- d. Document required for Investigation of OFMS:
 - Post-operative radiological imaging (in 2 planes)
 - Histopathology report Biopsy / FNAC showing fibrous growth

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 chief complaints, history, signs, symptoms, examination reports confirm the presence of OSMF? Yes
- b. X-Ray & Histopathology reports confirm the presence of OSMF? Yes

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

References:

- i. Resident manual of Trauma, to the Face, Head, Neck -1st Edition (2012):
<https://www.semanticscholar.org/paper/Resident-Manual-of-Trauma-to-the-Face-%2C-Head-%2C-and-Edition/fb6590c3df10ab5cb632da766096cd17f88fd44f>
- ii. Textbook of Oral and Maxillofacial Surgery By Dr.Neelima Anil Malik-3rd Edition:
https://www.academia.edu/37335369/Textbook_of_Oral_and_Maxillofacial_Surgery_3rd_ed_2012_pdf
- iii. Textbook of Oral and Maxillofacial Surgery By Dr.Neelima Anil Malik-4th Edition
- iv. Surgical management of OSMF:
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3304202/>
- v. OSMF: newer proposed classification:
[https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5773997/#:~:text=Oral%20submucous%20fibrosis%20\(OSMF\)%20is,less%20well%2Ddefined%20classification%20systems.](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5773997/#:~:text=Oral%20submucous%20fibrosis%20(OSMF)%20is,less%20well%2Ddefined%20classification%20systems.)