







Health Benefit Packages (HBP) 2.0

State Health Agency
Uttar Pradesh



Key changes

-  Introduction of 237 new packages
-  Introduction of stratified packages
-  Discontinuation of 554 packages
-  Prices increased for 270 packages
-  Prices reduced for 57 packages
-  Separation of implant / high end consumable in total price

New Concepts Introduced



Definition

HBP 1.0-Was used for all packages included in Package Master under AB-PMJAY since its implementation. There were only PACKAGES. HBP 2.0-Package is a broad term that includes different types of “Procedures”.

Example

Package-‘Cholecystectomy’

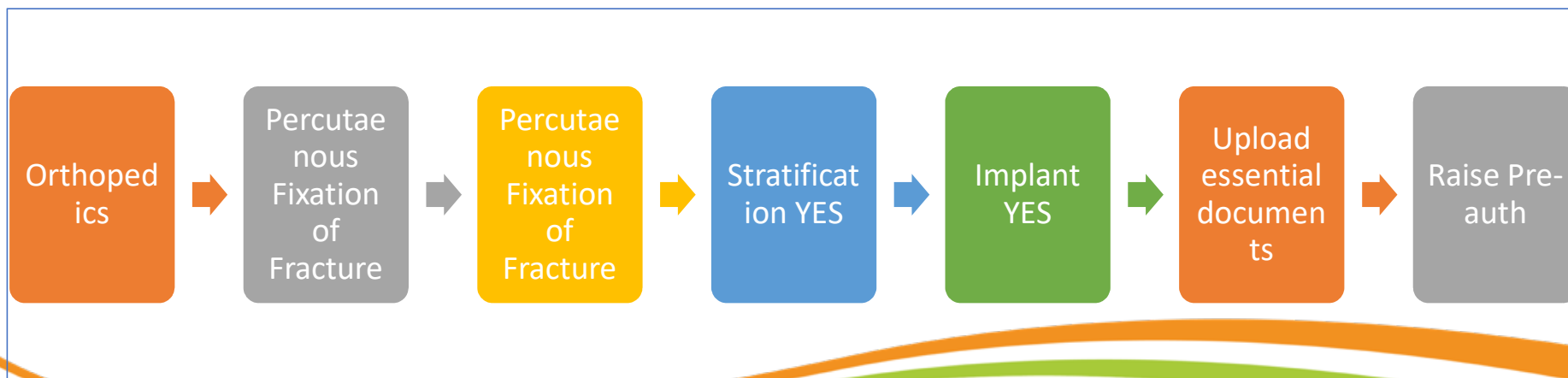
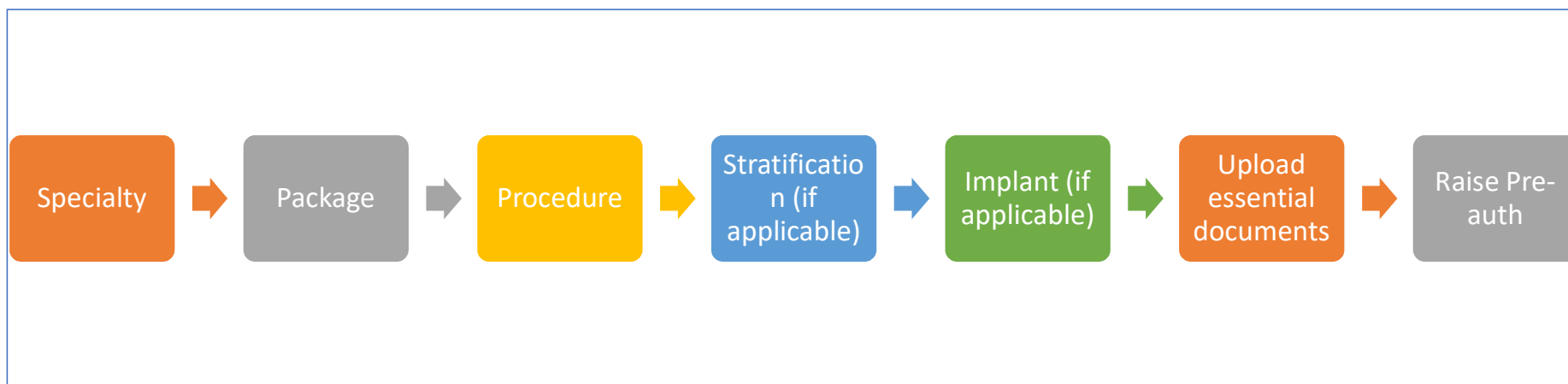
Procedure-4 types of intervention according to anatomical site and type of surgery:

- | | |
|--------------------------------------|---------------------------------------|
| I. Without exploration of CBD – Open | III. Without exploration of CBD – Lap |
| II. With exploration of CBD- Open | IV. With exploration of CBD-Lap |

Implication

- Package Cost=Procedure cost + Implant cost/Consumable cost (wherever applicable)
- Incentive will be calculated on PROCEDURE cost only and NOT PACKAGE COST.

Chronology of Package Selection



Stratified procedures

Definition

Stratified packages are those where a procedure may be performed in different ways. Cost of package will depend upon type of stratification. There are 6 types of stratification:

1. According to number of implant
2. According to type of implant (plate, screw, K-wire, etc.)
3. According to type of anesthesia (Local v/s General)
4. According to laterality (Unilateral v/s Bilateral)
5. Bed Category (Routine Ward, HDU, ICU +/- Ventilator)
6. Etiology (Infective v/s Non-Infective)

Example

The procedure of 'Incision and Drainage of Abscess' is split into two stratified procedures with a price differential of ₹5,000 between them.

- i. Incision and Drainage of Abscess under Local Anaesthesia
- ii. Incision and Drainage of Abscess under General Anaesthesia

Cross specialty procedures

Definition

Some procedures can be performed under multiple specialties (Eg. General Surgery, Orthopedics, ENT, etc.). In HBP 1.0 price would differ according to specialty. In HBP 2.0, these irregularities have been removed and there is uniform price for the same procedure across all specialties.

Example

A. Temporary pacemaker implantation:

1. Included under Cardiology in HBP 1.0 code (S1200021)
2. Included under Cardiology & CTVS in HBP 2.0 (MC014A). Can be blocked for either for same price.

B. Cholecystectomy:

1. Included under General Surgery in HBP 1.0
2. Included under General & Pediatric Surgery in HBP 2.0

Definition

Some procedures have to be performed together and should be reimbursed at 100% rates when blocked together with the primary procedure. These are called Add-On procedures.

Example

Negative Pressure Wound Therapy (NPWT) in Plastic & Reconstructive Surgery is an add-on package for ₹2,000:

1. In HBP 1.0, price of package would reduce to ₹1000 when booked with another package
2. In HBP 2.0, full payment of ₹2000 would be made when blocked with another package

Implications

- Primary procedures are identified in the TMS to reduce misuse
- Add-on procedures will be reimbursed 100% and not at 50% like in HBP 1.0

Stand-alone procedures

Definition

There are some procedures that can be abused by combining with other procedures. These kind of procedures have been defined as stand-alone procedures. **They cannot be booked in combination with any other procedure.**

Example

1. **‘Exploratory laparotomy’** (HBP 1.0-S100190/HBP 2.0- SG035A) in General & Pediatric Surgery is now a standalone package and may not be booked in combination with other packages
2. **‘Laparoscopic Adhesiolysis’** (HBP 1.0- S400027/HBP 2.0-SO023A) in OBG is also a standalone procedure

Implications

- Prevention of booking of unnecessary additional procedures
- Reduced vulnerability to fraud & abuse
- Overall cost saving

Follow up procedures

Definition

Some procedures require prolonged follow ups beyond the limit of 15 days as included in the coverage of the scheme- including medical interventions with utilization of consumables and consultations with the treating doctor. They are called “Follow-up Packages”.

Example

- **Primary procedure-** Colostomy (HBP 1.0-S100018/HBP 2.0- SG023A)
- **Follow-up procedure- 2 Follow-up procedures in this case:**
 - i. ‘Stoma Management, Follow up of Colostomy (SG097B). Can be booked only after 15 days of Colostomy and then every 2 months thereafter till the closure of stoma.
 - ii. Closure of Stoma (SG024A)

Implications

1. Only certain procedures have been identified as “follow-up” procedures
2. Primary packages to which the follow-up package would be aligned have also been identified
3. Can only be booked after providing satisfactory documentary proof that the primary procedure was conducted on the patient, after pre-decided time has passed since primary procedure.

Salient Features

- i. **Package= Procedure + Implant/High-end consumable (wherever applicable)**
- ii. In many packages, the final total cost (including procedure and implant / consumable) is given. In other packages, costs of procedure and implant / consumable is given separately.
- iii. HBP 2.0 provisions for use of multiple implants within a procedure and independently accounts for the price of each implant used.
- iv. There is a cap on the maximum number of implants that will be reimbursed in a procedure.
- v. Price of implant will be included in the price of the selected procedure
- vi. Price of the implant will be added to the procedure price at the back-end by the TMS and will be reflected in the final reimbursement.

Static priced procedures

Definition

In HBP 1.0 cost of implant was included in cost of package. In HBP 2.0, the implant rates have been separately configured in TMS. **Those procedures where either no implant/consumable is used or definitive number and type of implants are used are defined as Price Static procedures.**

Example

Procedure Name	Procedure Price	Implant/Consumable	Implant Price	Number of Implant	Price - Static
Cataract	4500	Intra-ocular lens	3000	1	7500
Total Hip Replacement	31,000	Implant for Total Hip Replacement – Cementless	60,000	1	91,000

Dynamic priced procedures

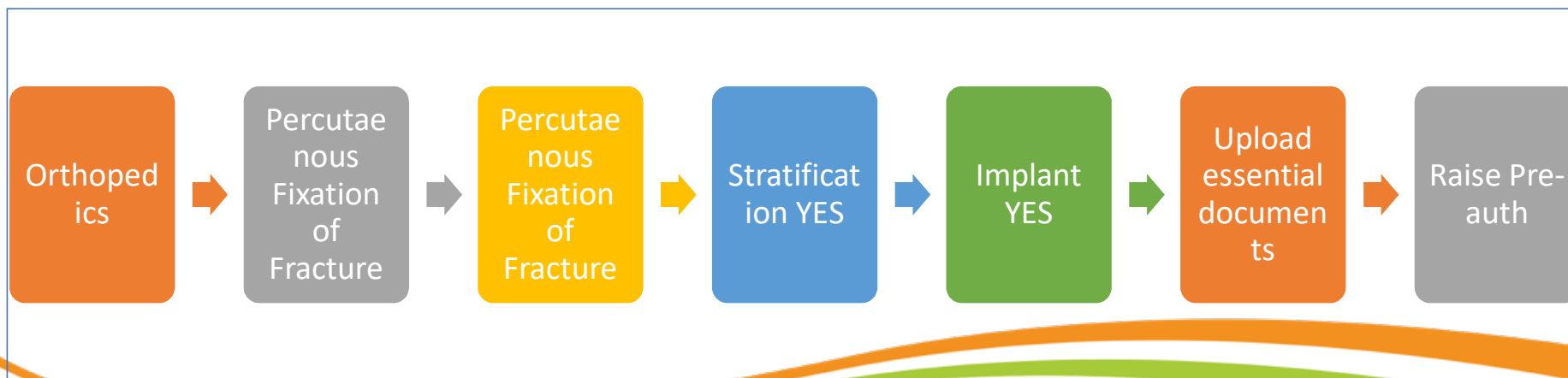
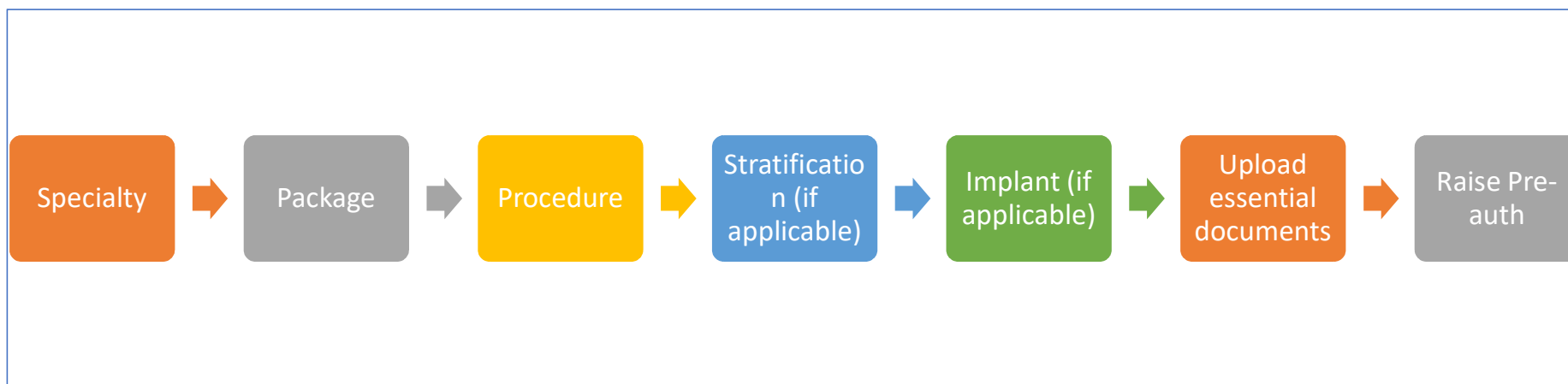
Definition

Price of procedures where more than 1 implant/high end consumables can be used are called Dynamic Priced Procedures. The cost of Implant(s) will be added to this price depending on number of implants used

Example

Procedure Name	Procedure Price	Implant Price	Maximum Multiplier	No. of Implants Used	Price - Dynamic
PTCA, inclusive of diagnostic angiogram	40,600	31,600	3	1	72,200
				2	1,03,800
				3	1,35,400
				4	1,35,400

Chronology of Package Selection-At a glance



Final Cost of Package

Definition

Final Procedure Price = Procedure price + Stratification rate (if any) + Incentive (if applicable) + Implant(s) rate (if any)

Example

Procedure Name	Procedure Price	Incentive	Stratification Type	Stratification Cost	Implant Type	Maximum Multiplier	Implant Cost	Final Package Price
Percutaneous Fixation of Fracture	3000	If Any to be calculated on procedure cost, i.e., 3000	Type of Anesthesia (LA/GA)	+5000 for General Anesthesia	K-wire/ Screw	1	2,000	1. Under LA= 5000 + incentive 2. Under GA= 10,000 + incentive

Section Summary

Criteria	HBP 1.0	HBP 2.0	Significance
Number of packages	1,393	872	Lesser number of packages
Number of procedures	x	1,574	More number of treatments
Duplicate packages	✓	x	Removed aberration
Nomenclature inconsistencies	✓	x	Standardization
Lateralization in packages	✓	x	Consolidated procedure selection
Rate inconsistencies	✓	x	Price standardization
Stratifications	x	✓	Price variance for surgical nuances
Cross specialty packages	x	✓	Access to packages across specialties
Add on packages	x	✓	100% reimbursement for procedures
Standalone packages	x	✓	Reduced fraud & abuse potential
Follow up procedures	x	✓	Improved continuity of care
Standardized nomenclature	x	✓	International acceptability

HBP 2.0 – The final picture

S. No.	Specialty	HBP 1.0	HBP 2.0	
			Packages	Procedures
1	Burns Management	12	6	20
2	Cardiology	39	20	26
3	Cardio-thoracic & Vascular surgery	92	34	113
4	Emergency Room Packages	4	3	4
5	General Medicine	72	76	98
6	General Surgery	253	98	152
7	Interventional Neuroradiology	15	10	15
8	Medical Oncology	52	71	263
9	Mental Disorders Packages	17	10	10
10	Neo-natal care Packages	10	10	10
11	Neurosurgery	83	54	82
12	Obstetrics & Gynecology	79	59	77
13	Ophthalmology	42	40	53
14	Oral and Maxillofacial Surgery	9	7	9
15	Orthopedics	101	71	132
16	Otorhinolaryngology	94	35	78
17	Pediatric Medical management	102	46	65
18	Pediatric surgery	34	19	35
19	Plastic & reconstructive Surgery	9	8	12
20	Polytrauma	12	10	21
21	Radiation Oncology	14	14	35
22	Surgical Oncology	48	76	120
23	Urology	161	94	143
24	Unspecified Surgical Package	1	1	1
Total		1393	872	1574



THANK YOU