

General Circular pursuant to the Health Insurance Law (No 11 of 2013) of the Emirate of Dubai
General Circular Number 02 of 2016 (GC 02/2016)

Subject of this General Circular	Internal Coding Elimination and Coding Standards in eClaimLink
Applicability of this General Circular	This circular applies to all parties involved in providing healthcare services (hospitals, clinics, polyclinics, laboratories and radiology centers), except pharmacies, in the Emirate of Dubai and those who are enrolled as Payers in the eClaimLink platform.
Purpose of this General Circular	To communicate to the market updated details of Internal Coding Elimination and Coding standards in eClaimLink.
Authorized by	Dr. Haidar Al Yousuf, Director, Health Funding Department, Dubai Health Authority
Drafted by	Altijani Hussin, Health Funding Department
Publication date	29 th February 2016
This document replaces	Not applicable
This document has been replaced by	Not applicable
Effective date of this General Circular	1 st June 2016
Grace period for compliance	Three Calendar Months

Objective of this General Circular

To communicate to the market **updated** details of Internal Coding Elimination and Coding standards in eClaimLink.

Internal Coding Elimination and Coding Standards

As per General Circular 9 of 2016 (GC09/2015), by 1st January 2016 complete CPT code lists must be used for any services that are rendered on or after 1st January 2016. In addition to the guidelines outlined in General Circular 9 of 2016 (GC09/2015), the eClaimLink business and validation rules will be adjusted to block the use of the Non-Standard-Code on the DHPO, and ultimately enforce the elimination of internal coding.

The Non-Standard Code observation element was previously utilized within the eClaimLink transaction to accommodate the communication of additional information related to the activities between the payers and the providers. Below is the description of the Non-Standard Code observation detail that will no longer be accepted on the DHPO.

Type	Code	Value	ValueType	Description	XML format
Text	Non-Standard-Code		Other	Code utilized to link a given activity to an internal service code agreed upon between the payer and the provider.	<pre><Observation> <Type>Text</Type> <Code>Non-Standard-Code</Code> <Value>ABC##</Value> <ValueType>Other</ValueType> </Observation></pre>

Bundles and Packages

Bundles and packages are permitted provided that the individual items within a bundle or package are CPT coded and included in the below observation elements:

Type	Code	Value	ValueType	Description	XML format
Grouping	PackageID		Other	Package ID to enable the linking of a given activity to a given package that facilitates a discounted price.	<pre><Observation> <Type>Grouping</Type> <Code>PackageID</Code> <Value>ABC##</Value> <ValueType>Other</ValueType> </Observation></pre>
Grouping	BundleID		Other	Bundle ID to enable the linking of a given activity to a given package that facilitates a discounted price.	<pre><Observation> <Type>Grouping</Type> <Code>BundleID</Code> <Value>ABC##</Value> <ValueType>Other</ValueType> </Observation></pre>

Timelines and Deadlines

1st June 2016 - All coding standards and updates to the business and validation rules, outlined in this GC will be applied.