

General Circular pursuant to the Health Insurance Law (No 11 of 2013) of the Emirate of Dubai
General Circular Number 09 of 2015 (GC 09/2015)

Subject of this General Circular	Internal Coding Elimination and Coding Standards in eClaimLink
Applicability of this General Circular	This notice applies to all parties involved in providing healthcare services in the Emirate of Dubai (hospitals, clinics, polyclinics, laboratories and radiology centers), except pharmacies, are licensed by DHA or MoH, and those who are enrolled as providers in the eClaimLink platform.
Purpose of this General Circular	To communicate to the market details of Internal Coding Elimination and Coding standards in eClaimLink.
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Drafted by	Altijani Hussin, Health Funding Department
Publication date	1 st November 2015
This document replaces	Not applicable
This document has been replaced by	Not applicable
Effective date of this General Circular	Immediately upon publication
Grace period for compliance	None

Objective of this General Circular

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

Internal Coding Elimination and Coding Standards

All Provider/Payers are required, as per the mandate to revise all contractual agreements to be in line with initial DMCC Release - Medical Coding Guidelines 2013-01-09 - (<https://www.eclaimlink.ae/downloads/CodingGuidelines.pdf>)

1. Internal Coding Elimination

- Providers are responsible for producing a CTP or CDT coded price list, depending on the type of services provided.
- Instances where one to one mapping is valid, must be applied without a tariff change.
- This exercise will allow for adjustment of tariff on a cost neutral basis for all contractually bound parties. However, price **increases** are dependent on eligibility of a Provider to increase prices for 2016, as per **Procedural Notice Number 3 of 2015 (PN 03/2015)** and will only come into effect following DHA approval.
- Any codes that require a tariff adjustment following mapping, must be discussed and agreed upon by all contractually bound parties. There may be some tariff adjustment required in circumstances where multiple internal codes are mapped to a single CPT code.

- By 1st January 2016 complete CPT code lists must be used for any services that are rendered on or after 1st January 2016.
- Changes to mapping and any prices cannot be applied retrospectively to any unsettled or pending claims from previous years.
- Bundles and packages are permitted provided that the individual items within a bundle or package are CPT coded.

NOTE: CPT 4 – 2012 update and billing guidelines are the current eClaimLink standards that all parties in the market are required to adhere to.

Timelines and Deadlines

- **1st January 2016** - All coding standards outlined in this General Circular must be met.
- **1st January 2016** - Payers/TPA are required to submit to DHA a report stating the percentage of internal codes and highlighting, with evidence any Providers who have refused to comply with this General Circular or have not yet commenced this exercise. Instructions will be sent to Payers/TPA prior to 1st January 2016.

Non Compliance

All market participants are encouraged to report, with evidence, to HFD via DataHFD@dha.gov.ae any instances where another party is non-compliant with the requirements of this General Circular.