



General Circular pursuant to the Health Insurance Law (No 11 of 2013) of the Emirate of Dubai

Subject of this General Circular	Cessation of Direct Billing Paper Claim Forms
Applicability of this General Circular	This Standard is applicable to all Healthcare Payers (Payers), Third Party Administrators (TPAs), Healthcare Providers (Providers) and Health Insurance Stakeholders in the Emirate of Dubai.
	This policy is integrated with other regulations, standards and circulars in Emirate of Dubai relevant to the Health Insurance Law (No 11 of 2013) of the Emirate of Dubai.
Purpose of this General Circular	 The General Circular serves to regulate: 1. The cessation of paper claim forms for direct billing 2. Patient consent to medical data transfer 3. Reiterate regulations relating to retention of medical records
Authorized by	Mihtab Mohamed El Mubarak, Dubai Health Insurance Corporation, Dubai Health Authority
Drafted by	Elie Samir Tohme, Dubai Health Insurance Corporation
	Talal Abdel Aziz, Dubai Health Insurance Corporation
Publication date	1 st November 2018
This document replaces	Not applicable
This document has been replaced by	Not applicable
Effective date of this General Circular	Immediately
Grace period for compliance	Not applicable

eClaimLink General Circular Number 10 of 2018 (GC 10/2018)

1 Preamble

- 1.1 The General Circular serves to:
 - 1.1.1 Regulate the use of paper claim forms for direct billing
 - 1.1.2 Determine appropriate methods for securing Patient consent to medical data transfer

2 Definitions

2.1 Paper Claim Form: A form completed by the Healthcare Provider (Provider) and submitted to the Healthcare Payer (Payer) or Third Party Administrator (TPA) for all direct billing claims. As per current market practice, Claim Forms typically consist of Member and Patient Information, Medical information, Patient declaration and Medical Practitioner Declaration.

3 The Cessation of Paper Claim Forms for Direct Billing

3.1 Payers/TPAs are required to cease, with immediate effect, requiring the completion of paper claim forms for direct billing, or the provision of claim forms as part of the Payer/TPA's authorisation process.





- 3.2 Providers are no longer required to complete the process of completing paper claim Forms for direct billing, subject to Providers adherence to Section 4.
- 3.3 Application of this policy will apply retrospectively.

4 Patient Consent to Medical Data transfer

- 4.1 The Ministry of Health Code of Conduct 1988 governing medical practitioners, pharmacists and other healthcare professionals licensed in the UAE (nurses and laboratory technicians, for example), requires complete confidentiality of information related to patients (including medical records, health problems and personal information related to the patient) and prohibits disclosure without the patient's prior informed consent.
- 4.2 On the basis of the above regulation, Providers are required to secure patient's consent for the disclosure of all medical details pertaining to insurance billing contained within the patient's medical record to Payers/TPAs.
- 4.3 Patient consent must be obtained by the Provider in writing on the first instance of a patient being identified as insured.
- 4.4 Revised patient consent must further be secured upon renewal, change of policy or Insurer.