

Frequently Asked Questions

FAQs

Frequently asked questions

Topic	Question	Answer
Coding	<ul style="list-style-type: none">• Which coding sets should be used in eClaimLink?	<ul style="list-style-type: none">• All Coding sets announced on the eClaimLink website should be utilized.• Certain exceptions are also announced to limit the sets that cant be used such as (E and M codes... etc)
Coding	<ul style="list-style-type: none">• How will we map all our internal codes?• Some codes can have multiple matches?	<ul style="list-style-type: none">• eClaimLink users have to map their codes to the published standard codes.• The provider can utilize the closest standard code, and support it with the Non-Standard-Code observation to reflect the intended service code. exceptions• If further description is needed, it can be provided in an observation "Description".• All codes that need to be reconsidered can be submitted to the DMCC@eclaimLink.ae email, where they will be reviewed by the medical coding committee and if found valid, they will be allowed or appended to the announced code sets.

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Coding	<ul style="list-style-type: none">• Non-Standard-Codes	<ul style="list-style-type: none">• To facilitate the easier reporting of the eClaim transactions within the transition period the following non-standard-codes will be allowed for items that could not be mapped to the standard coding sets:<ul style="list-style-type: none">• CPT = 00000• HCPCS = 00000• Drug = 0000-000000-0000• DENTAL = 00000• Dubai Service List = 00
Coding	<ul style="list-style-type: none">• What about drugs that do not exist in the Dubai Drug Code?• How will we be billing non-Registered items?	<ul style="list-style-type: none">• Nonregistered drugs can be submitted using the Non-Standard-Code for drugs 0000-000000-0000• Once the nonstandard code is used, the facility will input the drug details in the non-standard-Code observation on the needed activity• A Drug registration process will be announced by the DHA – Pharma department to register all these items.• Starting from Jan-2013 the system will accept only the registered items within the DDC. Exceptions are granted for facilities that have sent a list of items to be registered to the DHA Pharma Department and have not received the DDC codes yet.

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Coding eProviderLink Sample	<p>Utilizing Non-Standard-Code</p> <ul style="list-style-type: none"> Example: <ul style="list-style-type: none"> Internal Service Code = 12345 CPT1 = 86140 CPT2 = 86146 <p>Using eClaimLink: (on the activity level)</p> <ul style="list-style-type: none"> Enter CPT Details in the Code – Description Field Enter the Internal Service code value in the Non-Std code field.

Activities [1] (Click to show activities)

Activity Inserted Successfully

Type	Code - Description	Qty	Gross	Net	Pt.Sh	Start	Clinician	Obs #
CPT	86140 - C-REACTIVE PROTEIN	1	0.00	0.00	0.00	15/07/2012 16:01	DHA-P-0252148 - SADAF AHMAD	0

Non-Std code:	Type:	Code - Description:	Qty:	Gross:	Net:	Patient Share:
12345	CPT	86146 - BETA 2 GLYCOPROTEIN I ANTIBODY EACH		0.00	0.00	0.00
Start:	Authorization:	Clinician:	Description: (Optional)			
15/07/2012 16:01		DHA-P-0252148 - SADAF AHMAD				

[show observations](#)

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<p>Coding</p> <p>XML Sample</p>	<p>Utilizing Non-Standard-Code</p> <ul style="list-style-type: none"> <u>Example:</u> <ul style="list-style-type: none"> Internal Service Code = 12345 CPT1 = 86140 CPT2 = 86146 <p>Using Legacy System:</p> <ul style="list-style-type: none"> Activity Level = code of the CPT within the package. Observation Level = Internal Service Code 	<pre> <Activity> <ID>111111112</ID> <Start>08/06/2012 23:53</Start> <Type>3</Type> <Code>86140</Code> <Quantity>1</Quantity> <Net>119.68</Net> <Clinician>DHA-P-11111111</Clinician> <Observation> <Type>Text</Type> <Code>Non-Standard-Code</Code> <Value>12345</Value> <ValueType>Non-Standard-Code</ValueType> </Observation> </Activity> <Activity> <ID>111111113</ID> <Start>08/06/2012 23:53</Start> <Type>3</Type> <Code>86146</Code> <Quantity>1</Quantity> <Net>100</Net> <Clinician>DHA-P-11111111</Clinician> <Observation> <Type>Text</Type> <Code>Non-Standard-Code</Code> <Value>12345</Value> <ValueType>Non-Standard-Code</ValueType> </Observation> </Activity> </pre>

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Coding	<ul style="list-style-type: none">• How will packages be billed in the system? One package will contain several items under one package price	<ul style="list-style-type: none">• Provider needs to enter all the package components in standard coding, using the exact or closes code for each of the components separately.• Package price will be assigned to the major code within the package, and the rest of the items will have price as 0.• On each of the package activities, an additional observation with code (Non-Standard-Code) will be added to include the internal package service number that is agreed upon for billing with the provider.
Coding	<ul style="list-style-type: none">• What are the new requested additional codes in the Observation?	<ul style="list-style-type: none">• Non-Standard-Code (Optional): used whenever the facility wants to use an internal code that is agreed upon with the payer, during the transition period.• Description (Optional): used whenever the facility wants to write additional details that will clarify the activity.• Presenting-Complaint (Mandatory): used for any consultancy code there should be a follow up description entered by the physician.

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Licensing	<ul style="list-style-type: none">• New eClaimLink IDs different from the DHA-HRD	<ul style="list-style-type: none">• eClaimLink ID is provided to be a unique reference in the system to facilitate the tracking and monitoring of all transactions.• DHA-HRD current licensing structure changes with every renewal which will not work with the eClaimLink cycle.• A modified version of each license HRD unique ID was prepared to be using the eClaimLink and announced to the users in a list on the website, as well as through a message to all registered users.
Licensing	<ul style="list-style-type: none">• Which license sets should be used in the eClaimLink?	<ul style="list-style-type: none">• eClaimLink is utilizing licenses from DHA-HRD, HAAD, DHCC and MOH.• License sets will be updated periodically on the website, and will be available for all providers to update their systems.<ul style="list-style-type: none">• Clinician Licenses• Facility Licenses• Payer Licenses

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Licensing	<ul style="list-style-type: none">As being an Abu Dhabi (or any other Emirate) Provider licensed and governed by HAAD (or MoH or DHCC), do we need to enroll in Dubai eClaimLink?	<ul style="list-style-type: none">In order to ensure compliance and efficiency in Dubai's health insurance activities, DHA requests that all UAE healthcare providers, providing services to patients with Dubai health insurance policies, to complete the Provider Enrollment Process on the eClaimLink. The enrollment process is simple, free of charge, and only takes few steps to complete.The enrollment process does not require licensing by Dubai Health Authority. A valid HAAD, Dubai Health Care City, or Ministry of Health license is enough to complete the enrollment process.DHA will soon issue a circular to the insurance companies carrying Dubai policies to include in their networks the enrolled providers only.

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Billing	<ul style="list-style-type: none"> How will we finalize our price lists? Which items will be billed under which codes? 	<ul style="list-style-type: none"> Billing items depends on the contract between the Payer and Provider within the 6 months transition period.
Billing	<ul style="list-style-type: none"> What is reflected in the quantity of an activity with type=5 (Drug)? Unit or Pack? 	<ul style="list-style-type: none"> Billing items should be in the smallest granular unit when sent using the eClaims transactions.
Billing	<ul style="list-style-type: none"> If an error is detected in a claim and acknowledged by both Provider and Payer where the payment amount for an activity should have been less than the amount that was actually paid by the Insurance Company. How can this be handled in the DHPO? <p>Example case:</p> <ul style="list-style-type: none"> Provider requests for 1,000 AED in the ClaimSubmission. Payer pays 1,000 AED in RemittanceAdvice. Payer and Provider find out that the Payer should have paid only 800 AED. 	<ul style="list-style-type: none"> Recommended solution for example case: Provider sends a ReSubmission with <ul style="list-style-type: none"> Original Activity ID (-1,000 AED) amount. (The full paid amount must be returned) New Activity ID (+800 AED) amount. (The new requested amount must be submitted with a new Activity) Payer sends Remittance Advice with <ul style="list-style-type: none"> Payment (-1,000 AED) amount for the first activity. Payment (800 AED) amount for the new activity.

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e-Prescription	<ul style="list-style-type: none"> How can the payer deal with a Scientific Code requested within an eRxRequest? 	<ul style="list-style-type: none"> Use the Denial Code (PRC007 – Service has no contract price)
e-Prescription	<ul style="list-style-type: none"> Are refills allowed within the e-Prescription? 	<ul style="list-style-type: none"> Refills will not be allowed at this stage.
e-Prescription	<ul style="list-style-type: none"> What is the validity period for downloading an e-Prescription on the eRxHub/DHPO? 	<ul style="list-style-type: none"> e-Prescription downloading validity will be set to two weeks. Other dispensing controls are identified as part of the eClaimLink set of Business Rules and will be introduced later in 2014 with proper preparation periods based on the EDSC timelines.
e-Prescription	<ul style="list-style-type: none"> Is partial dispensing of a single activity on multiple visits allowed? 	<ul style="list-style-type: none"> Partial dispensing of an activity on multiple visits is not allowed. Activity will be deactivated by the DHPO as soon as it is dispensed.
e-Prescription	<ul style="list-style-type: none"> Is the zero code allowed to be used within the e-Prescription? 	<ul style="list-style-type: none"> Zero Codes will be disabled for all eClaimLink transactions starting January 1, 2014. All drugs must be registered and granted a code with the Dubai Health Authority Pharmaceuticals Department.

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e-Prescription	<ul style="list-style-type: none">• Are payers requested to send financial details in the PriorAuthorization replying to an eRxRequest?	<ul style="list-style-type: none">• Payers must send the financial elements on the Activity level during their PriorAuthorization reply when a trade name is used.
e-Prescription	<ul style="list-style-type: none">• Can a provider send a claim containing activities from different prescriptions?	<ul style="list-style-type: none">• Provider Claim can carry activities from the same prescription.
e-Prescription	<ul style="list-style-type: none">• How can facilities inside Dubai prepare e-Prescriptions to be dispensed outside Dubai?	<ul style="list-style-type: none">• Prescriptions written by Facilities inside Dubai to be dispensed outside Dubai will have a message (Can be dispensed only outside Dubai). A Business rule will be added to govern this.