

Addendum 39 to DOH Claims & Adjudication Rules

Version

V2012

Including the Mandatory Tariff Pricelist Application Rules.



دائرة الصحة
DEPARTMENT OF HEALTH

1. Purpose of this Document.

This Addendum is issued to update the IFHAS packages for the Comprehensive Screening Program following the 2021 codeset update and retire addendum 31.

2. Effective Date:

01 January 2024

3. Service Codes:

Code	Short Code Description	Long Code Description	Price
52-21	Comprehensive Screening Major Package for male & female (age 18-39 years)	Comprehensive Screening Major Package for male & female (age 18-39 years) for consultation & Labs including the following services every 3 years: <ul style="list-style-type: none"> • 99201 • 96127 • 36415 • 82947 • 83036 • 80061 • 82565 	220
52-22	Comprehensive Screening Major Package for male & female (age 40-64 years)	Comprehensive Screening Major Package for male & female (age 40-64 years) for consultation & Labs including the following services every 3 years <ul style="list-style-type: none"> • 99201 • 96127 • 36415 • 82947 • 83036 • 80061 • 82565 	220
52-23	Comprehensive Screening Major Package for male & female (age 65-75 years)	Comprehensive Screening Major Package for male & female (age 65-75 years) for consultation & Labs including the following services every 3 years: <ul style="list-style-type: none"> • 99201 • 96127 • 36415 • 82947 • 83036 • 80061 • 82565 	220

52-24	Comprehensive Screening Minor Package for male & female (age 65-75 years)	Comprehensive Screening Minor Package for male & female (age 65-75 years) for vision & hearing including the following services annually: <ul style="list-style-type: none"> • 92551 • 99173 	52
52-25	Comprehensive Screening Oral Health Package for male & female (age 18-75 years)	Comprehensive Screening Oral Health Package for male & female (age 18-75 years) for oral examination & oral hygiene including the following services annually: <ul style="list-style-type: none"> • 01103 • 13211 	105
52-26	Colon Cancer Screening male & female (age 40-75 years)	Colon Cancer Screening Package for male and female (age 40-75 Years) including the following services every 10 years: <ul style="list-style-type: none"> • 99201 • G0105 	868
52-27	Cervical Cancer Screening for female (age 25-29 years)	Cervical Cancer Screening Package for female (25-29 Years) including the following services every 3 years: <ul style="list-style-type: none"> • 99201 • 88142 	130
52-28	Cervical Cancer Screening for female (age 30-65 years) for eligible groups based on PCSP standard	Cervical Cancer Screening Package for female (30-65 Years) including the following services every 5 years: <ul style="list-style-type: none"> • 99201 • 88142 • 87623 or 87624 or 87625 	246
52-29	Lung Cancer Screening for (High Risk) male & female (age 55-75 years)	Lung Cancer Screening Package for male & female (age 55-75 Years) for (high risk only, heavy smokers) including the following services annually: <ul style="list-style-type: none"> • 99201 • 71271 	373
52-30	Standalone Screening Mammography for female for eligible groups based on PCSP standard	Standalone Screening Mammography for female every 2 years (77067) for eligible groups based on PCSP standard	293
52-31	Standalone Screening Fecal immunochemical test (FIT) for eligible groups based on PCSP standard	Standalone Screening Fecal immunochemical test (FIT) annually (82274) for eligible groups based on PCSP standard	57
52-32	Standalone Screening Abdominal Aortic Aneurysm for eligible groups based on PCSP standard	Standalone Screening Abdominal Aortic Aneurysm once in a lifetime (76706) for eligible groups based on PCSP standard	202

52-33	Standalone Screening DEXA scan for eligible groups based on PCSP standard	Standalone Screening DEXA scan every 3 years (77080) for eligible groups based on PCSP standard	133
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4. Claims and Adjudication Rules

- The screening program codes 52-21 to 52-33 must be only reported with Encounter Type 7 = Nationals Screening. Refer to Table 1 for the list of appropriate screening codes for each age group and gender.
- An observation must be reported in the eClaim with the use of Codes 52-21 to 52-33 as defined in Routine Reporting Requirements published on <https://www.doh.gov.ae/en/Shafafiya/reporting>
- For the services that are included in the service codes, providers are required to report the codes as activity line at claims level but keep charges at a value of zero as a prerequisite for reimbursement.
- All activities within each screening package are required in order to bill for a comprehensive screening package service code, missing activities due to medical reasons would be accepted for payment purposes based on proper documentation.
- Reimbursement for codes 52-21 to 52-33 shall not be allowed with CPTs 99201-99215, 99401– 99412, 96160 and 99381-99387; if billed by the same facility, for the same patient, same principal diagnosis (Comprehensive Screening) on the same date of service.
- “E&M Follow up within one week” rule shall not be applicable to service codes 52-21 to 52-33. Hence, reimbursement shall be allowed for subsequent Evaluation and Management office visit, if deemed medically necessary.
- Coding and reimbursement of subsequent services (as below) shall be based on the medical necessity determined by the initial screening outcomes or services prescribed by DOH comprehensive screening program standard. Whereby;
 - Preventive medicine counseling CPT codes (99401 – 99412, 96160) shall be allowed for patients with established medium to high risk factors and/or further investigation or diagnostic services on any abnormal finding detected from the screening services.
 - In the absence of established risk factor or for subsequent encounter after counseling was commenced, and where abnormal finding were detected; such

encounters shall be billed and reimbursed using the E&M codes as a medical condition and not a preventive service.

- In case of duplication of tests between IFHAS and other screening programs under Thiqa within a period of 90 days, the cost of that test will be subject to recovery.
- Eligibility of the above codes will be as per the DOH Comprehensive Screening Program standard.

Table 1: Expected Screening map per gender & age group

Expected Screening map per age & gender

Package Description	Code	Male			Female		
		Age 18-39-Year-old	Age 40-64-Year-old	Age 65-75-Year-old	Age 18-39-Year-old	Age 40-64-Year-old	Age 65-75-Year-old
Comprehensive Screening Major Package for male & female (age 18-39 years)	52-21	52-21			52-21		
Comprehensive Screening Major Package for male & female (age 40-64 years)	52-22		52-22			52-22	
Comprehensive Screening Major Package for male & female (age 65-75 years)	52-23			52-23			52-23
Comprehensive Screening Minor Package for male & female (age 65-75 years)	52-24			52-24			52-24
Comprehensive Screening Oral Health Package for male & female (age 18-75 years)	52-25	52-25	52-25	52-25	52-25	52-25	52-25
Colon Cancer Screening male & female (age 40-75 years)	52-26		52-26	52-26		52-26	52-26
Cervical Cancer Screening for female (age 25-29 years)	52-27				52-27 / 52-28*		
Cervical Cancer Screening for female (age 30-65 years)	52-28					52-28	
Lung Cancer Screening for (High Risk) male & female (age 55-75 years)	52-29		52-29**	52-29**		52-29**	52-29**
Standalone Screening Mammography for female eligible groups based on PCSP standard	52-30					52-30	52-30
Standalone Screening Fecal immunochemical test (FIT) for eligible groups based on PCSP standard	52-31		52-31	52-31		52-31	52-31
Standalone Screening Abdominal Aortic Aneurysm for eligible groups based on PCSP standard	52-32			52-32			
Standalone Screening DEXA scan for eligible groups based on PCSP standard	52-33			52-33			52-33

* Cervical Cancer Package according to age (25-29 yrs. for Srv. 52-27), (30-65 yrs. for Srv. 52-28)

** High risk only (heavy smokers) at CCAD