

# Addendum 40 to DOH Claims & Adjudication Rules

Version

V2012

Including the Mandatory Tariff Pricelist Application Rules.



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DEPARTMENT OF HEALTH

## 1. Purpose of this Document.

This Addendum is issued to define the adjudication rules of IR-DRG claims with reported Hospital Acquired Conditions (HACs) which are not Present On Admission (POA) following the 2021 codeset and retire addendum 33.

## 2. Effective Date:

01 January 2024

## 3. List of HACs:

1. Foreign Object Retained After Surgery
2. In-Hospital Fall and Trauma
3. Air Embolism
4. Blood Incompatibility
5. Stage III and IV Pressure Ulcers
6. Manifestations of Poor Glycemic Control
7. Catheter -Associated Urinary tract infection/UTI
8. Vascular Catheter-Associated Infection
9. SSI, Mediastinitis following Coronary Bypass Graft (CABG)
10. SSI following Bariatric Surgery for Obesity
11. SSI following Certain Orthopedic Procedures of Spine, Shoulder and Elbow
12. SSI following Cardiac Implantable Electronic Device (CIED) Procedures
13. DVT/PE following Total Knee or Hip Replacement
14. Iatrogenic Pneumothorax with Venous Catheterization
15. MRSA (Methicillin resistant Staphylococcus aureus)
16. Clostridium difficile (C.Diff)

## 4. Claims and Adjudication Rules

1. All diagnoses including the HACs shall be reported with the appropriate POA indicator in accordance with the Data Elements and as set out in the DoH Data Standards and Procedures ([www.doh.gov.ae/shafafiya/dictionary](http://www.doh.gov.ae/shafafiya/dictionary)).
2. Providers shall not receive the higher payment for cases when one or a combination of the listed conditions is acquired during the hospitalization and has an impact on the IR-DRG severity.
3. If IR-DRG severity level is affected by the listed HACs (higher severity), IR-DRG shall be grouped excluding HACs and claimed accordingly.
4. Procedures related to the management of HACs shall be reported in the same claim as activity lines with Zero value but excluded from IR-DRG grouper calculation and payment.

5. DRG outlier payment shall exclude activities (services, procedures, drugs, consumables etc.) related to the management of HACs.

### 5. Appendix I:

SI.No	Hospital Acquired Conditions (HAC)	Diagnosis Codes	Codes for Medical Procedures
1	Foreign Object Retained After Surgery	T81.500A, T81.501A, T81.502A, T81.503A, T81.504A, T81.505A, T81.506A, T81.507A, T81.508A, T81.509A, T81.510A, T81.511A, T81.512A, T81.513A, T81.514A, T81.515A, T81.516A, T81.517A, T81.518A, T81.519A, T81.520A, T81.521A, T81.522A, T81.523A, T81.524A, T81.525A, T81.526A, T81.527A, T81.528A, T81.529A, T81.530A, T81.531A, T81.532A, T81.533A, T81.534A, T81.535A, T81.536A, T81.537A, T81.538A, T81.539A, T81.590A, T81.591A, T81.592A, T81.593A, T81.594A, T81.595A, T81.596A, T81.597A, T81.598A, T81.599A, T81.60XA, T81.61XA, T81.69XA	All Medical and Surgical discharges
2	In-Hospital Fall and Trauma	Any injury caused by the following external cause codes during the hospital stay: W01.OXXA,	All Medical and Surgical discharges

		W01.10XA, W01.110A, W01.111A, W01.118A, W01.119A, W01.190A, W01.198A, W04.XXXA, W05.0XXA, W06.XXXA, W07.XXXA, W08.XXXA, W17.89XA, W18.11XA, W18.12XA, W18.2XXA, W18.30XA, W18.31XA, W18.39XA	
3	Air Embolism	T80.0XXA	All Medical and Surgical discharges
4	Blood Incompatibility	T80.30XA, T80.310A, T80.311A, T80.319A, T80.39XA	All Medical and Surgical discharges
5	Stage III and IV Pressure Ulcers	L89.003, L89.004, L89.013, L89.014, L89.023, L89.024, L89.103, L89.104, L89.113, L89.114, L89.123, L89.124, L89.133, L89.134, L89.143, L89.144, L89.153, L89.154, L89.203, L89.204, L89.213, L89.214, L89.223, L89.224, L89.303, L89.304, L89.313, L89.314, L89.323, L89.324, L89.43, L89.44, L89.503, L89.504, L89.513, L89.514, L89.523, L89.524, L89.603, L89.604, L89.613, L89.614, L89.623, L89.624, L89.813, L89.814, L89.893, L89.894, L89.93, L89.94	All Medical and Surgical discharges
6	Manifestations of Poor Glycemic Control	E08.00, E08.01, E08.10, E08.11, E09.00, E09.01, E09.10, E09.11, E10.10, E10.11, E11.00, E11.01, E11.10, E11.11, E13.00, E13.01, E13.10, E13.11, E15	All Medical and Surgical discharges
7	Catheter - Associated Urinary tract infection/UTI	T83.510A, T83.511A, T83.512A, T83.518A	51701, 51702, 51703

8	Vascular Catheter-Associated Infection	T80.211A, T80.212A, T80.218A, T80.219A, T85.71XA, T85.735A	All Medical and Surgical discharges
9	SSI, Mediastinitis following Coronary Bypass Graft (CABG)	T82.7XXA, J98.51	33510, 33511, 33512, 33513, 33514, 33516, 33517, 33518, 33519, 33521, 33522, 33523, 33530, 33533, 33534, 33535, 33536, 33572, 35500, 35600, 92937, 92938, 92941, 92943
10	SSI following Bariatric Surgery for Obesity	K68.11, K95.01, K95.09, K95.81, K95.89, T81.40XA, T81.41XA, T81.42XA, T81.43XA, T81.44XA, T81.49XA	43631, 43632, 43633, 43644, 43645, 43770, 43771, 43772, 43773, 43774, 43775, 43842, 43843, 43845, 43846, 43847, 43848, 43886, 43887, 43888, 43999
11	SSI following Certain Orthopedic Procedures of Spine, Shoulder and Elbow	T81.40XA, T81.41XA, T81.42XA, T81.43XA, T81.44XA, T81.49XA, T84.60XA, T84.610A, T84.611A, T84.612A, T84.613A, T84.614A, T84.615A, T84.619A, T84.63XA, T84.69XA, T84.7XXA, K68.11	<p><b>Spine</b> 20930, 20931, 20932, 20933, 20934, 20936, 20937, 20938, 20939, 22010, 22015, 22206, 22207, 22208, 22210, 22212, 22214, 22216, 22220, 22222, 22224, 22226, 22505, 22818, 22819</p> <p><b>Elbow</b> 20605, 20606, 20802, 23930, 23931, 24065, 24066, 24071, 24073, 24075, 24076, 24077, 24079, 24155, 24200, 24201, 24220, 24310, 24320, 24330, 24331, 24340, 24370, 24371, 24586, 24587, 24600, 24605, 24615, 24620, 24635, 24800, 24802</p> <p><b>Shoulder</b> 20610, 20611, 23030, 23031, 23035, 23065, 23066, 23071, 23073, 23075, 23076, 23077, 23078, 23330, 23333, 23334, 23335, 23350, 23395, 23397, 23405, 23406, 23420, 23472, 23473, 23474, 23575, 23650, 23655, 23660, 23665, 23670, 23675, 23680, 23700, 23920, 23921, 23929, 24310, 24320, 29035, 29040, 29044, 29046, 29055, 29065, 29105, 29240, 29710, 29805, 29806, 29807, 29819, 29820, 29821, 29822, 29823, 29824, 29825, 29826, 29827, 29828</p>
12	SSI following Cardiac Implantable	K68.11, T81.40XA, T81.41XA, T81.42XA, T81.43XA, T81.44XA,	33206, 33207, 33208, 33210, 33211, 33212, 33213, 33214, 33215, 33216, 33217, 33218, 33220, 33221, 33222, 33223, 33224, 33225,

	Electronic Device (CIED) Procedures	T81.49XA, T82.6XXA, T82.7XXA	33226, 33227, 33228, 33229, 33230, 33231, 33233, 33234, 33235, 33236, 33237, 33238, 33240, 33241, 33243, 33244, 33249, 33262, 33263, 33264, 33270, 33271, 33272, 33273, 33274, 33275, 33285, 33286, 33289
13	DVT/PE following Total Knee or Hip Replacement	I26.93, I26.94, I26.99, I26.02, I26.09, I26.92, I82.401, I82.402, I82.403, I82.409, I82.411, I82.412, I82.413, I82.419, I82.421, I82.422, I82.423, I82.429, I82.431, I82.432, I82.433, I82.439, I82.441, I82.442, I82.443, I82.449, I82.451, I82.452, I82.453, I82.459, I82.461, I82.462, I82.463, I82.469, I82.491, I82.492, I82.493, I82.499, I82.4Y1, I82.4Y2, I82.4Y3, I82.4Y9, I82.4Z1, I82.4Z2, I82.4Z3, I82.4Z9, I82.621, I82.622, I82.623, T81.72XA, T84.81XA, T84.86XA	27120, 27122, 27125, 27130, 27132, 27134, 27137, 27138, 27447, 27486, 27487, 27488
14	Iatrogenic Pneumothorax with Venous Catheterization	J95.811	36555, 36556, 36557, 36558, 36560, 36561, 36563, 36565, 36566, 36568, 36569, 36570, 36571, 36572, 36573, 36578, 36580, 36581, 36582, 36583, 36584, 36585, 36589, 36590, 36597
15	MRSA (Methicillin resistant Staphylococcus aureus)	A41.01, A41.02, A49.01, A49.02, B95.61, B95.62, J15.211, J15.212	All Medical and Surgical discharges
16	Clostridium difficile (C.Diff)	A04.71, A04.72, B96.7	All Medical and Surgical discharges

## 6. Appendix II: Present on Admission (POA) Indicator

Indicator	Description	Payment
Y	Diagnosis was present at time of inpatient admission.	Not Applicable. Payment is made for condition when a HAC is present.

N	Diagnosis was not present at time of inpatient admission.	Applicable. No payment is made for condition when a HAC is present.
U	Documentation insufficient to determine if condition was present at the time of inpatient admission.	Applicable. No payment is made for condition when a HAC is present.
W	Clinically undetermined. Provider unable to clinically determine whether the condition was present at the time of inpatient admission.	Not Applicable. Payment is made for condition when a HAC is present.
1	Diagnosis exempt from POA Indicator reporting.	Usually no effect on DRG or payment.

## 7. References:

- 1) [www.doh.gov.ae/shafafiya/dictionary](http://www.doh.gov.ae/shafafiya/dictionary)
- 2) [https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/icd10\\_hacs](https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/icd10_hacs)
- 3) <https://www.safetyandquality.gov.au/our-work/indicators/classification-of-hospital-acquired-diagnoses>
- 4) <https://www.safetyandquality.gov.au/our-work/indicators/hospital-acquired-complications>
- 5) <https://www.safetyandquality.gov.au/publications-and-resources/resource-library/classification-hospital-acquired-diagnoses-chadx>
- 6) <https://www.isdscotland.org/Products-and-Services/Terminology-Services/Clinical-Coding-Guidelines/Docs/Coding%20Guidelines%20No.%2017,%20January%202006.pdf>
- 7) <https://acdis.org/articles/qa-code-assignment-hospital-acquiredhealthcare-associated-conditions>