



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
 CITY STATE CENTRE BUILDING
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January 17, 2001

PHILHEALTH CIRCULAR

No. 04 s-2001
file

TO : ALL ACCREDITED INSTITUTIONAL HEALTH CARE PROVIDERS, REGIONAL MANAGERS, CLAIMS PROCESSING DEPARTMENTS and ALL CONCERNED

SUBJECT : Guidelines in claims reimbursement in view of the implementation of the International Coding of Diseases Version 10 (ICD-10)

In support to the Department of Health's order for all hospitals to adopt the ICD-10 in their records and reports, PhilHealth hereby prescribe the gradual implementation of the said system in all hospital claim applications.

Hence, all concerned are advised to observe the following procedures starting with January 1, 2001 admissions:

1. In addition to the ICD-10 codes, hospitals should continue indicating the complete diagnosis on item 14 of PhilHealth Claim Form 2.
2. Claims without complete diagnosis will be returned to the hospital for completion of diagnosis and should be complied within 60 days from receipt of the RTH. Failure to comply will cause denial of the claim.
3. Claims with complete diagnosis but without ICD-10 codes shall still be processed but will be monitored for compliance by the Quality Assurance Research and Policy Development Group (QARPDG).

After the said grace period, all claim applications with diagnosis not coded using the ICD-10 shall be denied effective July 01, 2001 admissions.

For strict compliance.

ENRIQUE M. ZALAMEA
 President and CEO

RTBakad010901/ICD-10 @ MyDoc: Issuances

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