



Republic of the Philippines  
**PHILIPPINE HEALTH INSURANCE CORPORATION**

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**PHILHEALTH CIRCULAR**

No. 35  
18, s-2009

**TO : ALL ACCREDITED INSTITUTIONAL HEALTH CARE PROVIDERS OF THE NATIONAL HEALTH INSURANCE PROGRAM, PHILHEALTH REGIONAL VICE PRESIDENTS, CLAIMS PROCESSING UNITS AND ALL OTHERS CONCERNED**

**SUBJECT : Philippine ICD-10 Modifications 1<sup>st</sup> edition**

The Department of Health (DOH) recently released Department Circular No. 2009 – 0089 re: Handbook on Philippine ICD-10 Modifications, 1<sup>st</sup> Edition such that the same should be used as reference in coding of illnesses in claim applications.

Some illnesses and codes in the said modification are however, not included in PhilHealth Circular 18, s-2009 on the Revised Case Type Classification for 2009 (implementation date: July 1, 2009 admissions). Thus, attached is a list of new codes found in the Philippine ICD-10 Modification and their corresponding case type classification (see Annex E). The said annex may be attached to Annexes A, B, C, and D of PhilHealth Circular No. 18 series of 2009 for quick reference.

For claims processing purposes:

1. All claims for diseases coded using either the existing ICD-10 or the Philippine ICD 10 Modification codes are deemed acceptable by the Corporation, thus such claims with admission date **prior to October 1, 2009** should not be returned to sender (RTS). However, assignment of corresponding case type shall be based on existing ICD 10 codes and its applicable case type classification as per PhilHealth Circular 18, s-2009.
2. Claims with admissions **beginning October 1, 2009** shall be coded using the Philippine ICD 10 Modification with corresponding case type as provided in Annex E of this circular.

All other provisions and issuances inconsistent with this circular are hereby repealed, modified and amended accordingly.

Please be guided accordingly.

**DR. REY B. AQUINO**

President and CEO

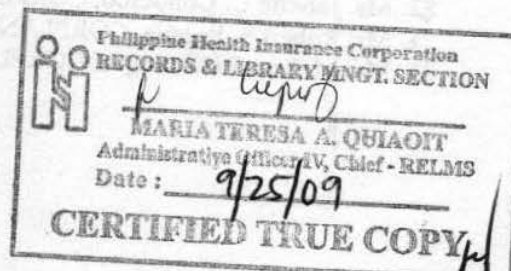
Date signed: 9/25/09

**PhilHealth**

San Francisco Health



OP-SO9-16164



## Annex E

	CODE	DESCRIPTION	CASE TYPE CLASSIFICATION
1	A01.0	ENTERIC FEVER	A
2	A01.00	Typhoid Psychosis, culture proven	A
3	A01.01	Typhoid Psychosis, clinically proven	A
4	A09	DIARRHEA [GASTROENTERITIS]	A
5	A09	Infectious Diarrhea	A
6	A09	Diarrhea with no Dehydration	A
7	A09	Infectious Diarrhea with no Dehydration	A
8	A09	GASTROENTERITIS	A
9	A09	Acute Gastroenteritis (AGE)	A
10	A09	Acute Gastroenteritis (AGE) with no signs of Dehydration	A
11	A09, E86.0	Diarrhea with some Dehydration	A
12	A09, E86.0	Infectious Diarrhea with mild Dehydration	A
13	A09, E86.0	Infectious Diarrhea with some Dehydration	A
14	A09, E86.0	Diarrhea with mild Dehydration	A
15	A09, E86.0	Acute Gastroenteritis (AGE) with mild/some Dehydration	A
16	A09, E86.1	Diarrhea with moderate Dehydration	A
17	A09, E86.1	Diarrhea with marked Dehydration	A
18	A09, E86.1	Infectious Diarrhea with moderate Dehydration	A
19	A09, E86.1	Infectious Diarrhea with marked Dehydration	A
20	A09, E86.1	Acute Gastroenteritis (AGE) with moderate/ marked Dehydration	A
21	A09, E86.2	Infectious Diarrhea with severe Dehydration	B
22	A09, E86.2	Diarrhea with severe Dehydration	B
23	A09, E86.2	Acute Gastroenteritis (AGE) with severe Dehydration	B
24	A09, E86.9	Diarrhea with Dehydration (level of Dehydration not specified)	A
25	A09, E86.9	Infectious Diarrhea with Dehydration (level of Dehydration not specified)	A
26	A09, E86.9	Acute Gastroenteritis (AGE), with Dehydration (level unspecified)	A
27	A15.1	MDRTB confirmed by Culture	B
28	A16.0	PTB class 3, 4 by X-ray Confirmation and Bacteriologically and Histologically negative	A

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	CODE	DESCRIPTION	CASE TYPE CLASSIFICATION
29	A16.1	PTB class 3,4 by X-ray Confirmation and Bacteriological and Histological examination not done	A
30	A16.2	PTB	A
31	A16.2	PTB class 3,4 by X-ray confirmation without mention of Bacteriological and Histological Confirmation	A
32	A91.0	Dengue Hemorrhagic Fever, Stage I	A
33	A91.1	Dengue Hemorrhagic Fever, Stage II	B
34	A91.2	Dengue Hemorrhagic Fever, Stage III	C
35	A91.3	Dengue Hemorrhagic Fever, Stage IV (Dengue Shock Syndrome)	C
36	A91.9	Dengue Hemorrhagic Fever	A
37	D37.0 M8000/1	Nasopharyngeal Mass	A
38	E14.3† H28.09*	Diabetic Cataract	A
39	E14.6, K31.9	DIABETIC GASTROPATHY	A
40	E14.6, K31.9	DIABETIC HYPERMOTILITY	A
41	E14.7, I21.9, I63.9	DIABETIC MACROVASCULAR DISEASE	B
42	G93.4† E90*	METABOLIC ENCEPHALOPATHY	C
43	H25.20	Cataract, senile, hypermature, left	A
44	H25.20	Cataract, senile, Morgagnian type, left	A
45	H25.21	Cataract, senile, hypermature, right	A
46	H25.21	Cataract, senile, Morgagnian type, right	A
47	H25.22	Cataract, senile, hypermature, bilateral	A
48	H25.22	Cataract, senile, Morgagnian type, bilateral	A
49	H25.29	Cataract, senile, hypermature	A
50	H25.29	Cataract, senile, Morgagnian type	A
51	H25.90	Cataract, left (patient's age ≥50)	A
52	H25.90	Cataract, immature, left (patient's age ≥50)	A
53	H25.90	Cataract, mature, left (patient's age ≥50)	A
54	H25.90	Cataract, senile, left	A
55	H25.90	Cataract, senile, immature, left	A
56	H25.90	Cataract, senile, mature, left	A

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CODE		DESCRIPTION	CASE TYPE CLASSIFICATION
57	H25.91	Cataract, right (patient's age $\geq 50$ )	A
58	H25.91	Cataract, immature, right (patient's age $\geq 50$ )	A
59	H25.91	Cataract, mature, right (patient's age $\geq 50$ )	A
60	H25.91	Cataract, senile, right	A
61	H25.91	Cataract, senile, immature, right	A
62	H25.91	Cataract, senile, mature, right	A
63	H25.92	Cataract, bilateral (patient's age $\geq 50$ )	A
64	H25.92	Cataract, immature, bilateral (patient's age $\geq 50$ )	A
65	H25.92	Cataract, mature, bilateral (patient's age $\geq 50$ )	A
66	H25.92	Cataract, senile, bilateral	A
67	H25.92	Cataract, senile, immature, bilateral	A
68	H25.92	Cataract, senile, mature, bilateral	A
69	H25.99	Cataract (patient's age $\geq 50$ )	A
70	H25.99	Cataract, immature, (patient's age $\geq 50$ )	A
71	H25.99	Cataract, mature, (patient's age $\geq 50$ )	A
72	H25.99	Cataract, senile	A
73	H25.99	Cataract, senile, immature	A
74	H25.99	Cataract, senile, mature	A
75	H26.090	Cataract, left (patient's age $< 50$ )	A
76	H26.090	Cataract, immature, left (patient's age $< 50$ )	A
77	H26.090	Cataract, mature, left (patient's age $< 50$ )	A
78	H26.090	Infantile Cataract, immature, left	A
79	H26.090	Infantile Cataract, mature, left	A
80	H26.090	Juvenile Cataract, immature, left	A
81	H26.090	Juvenile Cataract, mature, left	A
82	H26.090	Presenile Cataract, immature, left	A
83	H26.090	Presenile Cataract, mature, left	A
84	H26.091	Cataract, right (patient's age $< 50$ )	A



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	CODE	DESCRIPTION	CASE TYPE CLASSIFICATION
85	H26.091	Cataract, immature, right (patient's age <50)	A
86	H26.091	Cataract, mature, right (patient's age <50)	A
87	H26.091	Infantile Cataract, immature, right	A
88	H26.091	Infantile Cataract, mature, right	A
89	H26.091	Juvenile Cataract, immature, right	A
90	H26.091	Juvenile Cataract, mature, right	A
91	H26.091	Presenile Cataract, immature, right	A
92	H26.091	Presenile Cataract, mature, right	A
93	H26.092	Cataract, bilateral (patient's age <50)	A
94	H26.092	Cataract, immature, bilateral (patient's age <50)	A
95	H26.092	Cataract, mature, bilateral (patient's age <50)	A
96	H26.092	Infantile Cataract, immature, bilateral	A
97	H26.092	Infantile Cataract, mature, bilateral	A
98	H26.092	Juvenile Cataract, immature, bilateral	A
99	H26.092	Juvenile Cataract, mature, bilateral	A
100	H26.092	Presenile Cataract, immature, bilateral	A
101	H26.092	Presenile Cataract, mature, bilateral	A
102	H26.099	Cataract (patient's age <50)	A
103	H26.099	Cataract, immature, (patient's age <50)	A
104	H26.099	Cataract, mature, (patient's age <50)	A
105	H26.099	Infantile Cataract, immature	A
106	H26.099	Infantile Cataract, mature	A
107	H26.099	Juvenile Cataract, immature	A
108	H26.099	Juvenile Cataract, mature	A
109	H26.099	Presenile Cataract, immature	A
110	H26.099	Presenile Cataract, mature	A
111	H26.210	Uveitic Cataract, left	A
112	H26.211	Uveitic Cataract, right	A

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	CODE	DESCRIPTION	CASE TYPE CLASSIFICATION
113	H26.212	Uveitic Cataract, bilateral	A
114	H26.219	Uveitic Cataract	A
115	I67.8, G93.8	Reversible Ischemic Neurologic Deficit	B
116	J10.0	Avian Influenza with Pneumonia	Case Payment
117	J10.1	Avian Influenza	Case Payment
118	J10.1	Avian Influenza with Respiratory Manifestation/s except Pneumonia	Case Payment
119	J10.8	Avian Influenza with other Manifestations except Pneumonia and other Respiratory Manifestation/s	B
120	J18.9	Community Acquired Pneumonia (CAP) Organism not specified	A
121	J18.9, Y95	Nosocomial Pneumonia	B
122	J39.2	Nasopharyngeal Cystic Mass	A
123	J45.90	Bronchial Asthma in Exacerbation	A
124	J45.90	Bronchial Asthma in Acute Exacerbation (BAIAE)	A
125	J45.99	ASTHMA	A
126	J45.99	Asthmatic Bronchitis	A
127	J45.99	Bronchial Asthma	A
128	J45.99	Acute Bronchitis with Asthmatic Component	A
129	J45.99	Acute Bronchitis with Hyperactive Airways	A
130	J45.99	Asthmatic Bronchitis	A
131	J98.4	Lung Mass (without Diagnostic Imaging)	A
132	K31.9	GASTROPATHY	A
133	K31.9 Y56.0	NSAID GASTROPATHY	A
134	K76.0	NON-ALCOHOLIC STEATOHEPATITIS (NASH)	A
135	M35.9	SOFT TISSUE MASS	A
136	M79.09	SOFT TISSUE RHEUMATISM	A
137	N28.9	RENAL SCAR	A
138	O03.90	Imminent Abortion	A
139	O03.91	Inevitable Abortion	A
140	O03.99	Non-Induced Abortion	A

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CODE		DESCRIPTION	CASE TYPE CLASSIFICATION
141	O03.99	Spontaneous Abortion	A
142	O60.0	Preterm Labor, not resulting to Delivery	A
143	O60.1	Preterm Delivery	A
144	O60.1	Preterm Labor, resulting to Delivery	A
145	Q12.00	Congenital Cataract, left	A
146	Q12.01	Congenital Cataract, right	A
147	Q12.02	Congenital Cataract, bilateral	A
148	Q12.09	Congenital Cataract	A
149	R06.8	CHRONIC RESPIRATORY INSUFFICIENCY	A
150	R68.8	MULTIPLE ORGAN FAILURE	C
151	R91	Lung Mass (Non-specific abnormal findings on Diagnostic Imaging)	A
152	T65.8, T57.8, T57.1, T65.3 X49.99	Watusi Poisoning, accidental	B
153	T65.8, T57.8, T57.1, T65.3 X69.99	Watusi Poisoning, intentional self harm	B
154	Z03.0	PTB class 5	A
155	Z03.0	PTB suspect	A
156	Z03.0	MDRTB without Culture Sensitivity	A
157	Z20.1	PTB class 1,2	A
158	Z39.0	Non-institutional Delivery [Care and Examination immediately after Delivery]	A