

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
A00.0	Cholera due to Vibrio cholerae 01, biovar cholerae	6,000	1,800	4,200
A00.1	Cholera due to Vibrio cholerae 01, biovar eltor	6,000	1,800	4,200
A00.9	Cholera, unspecified	6,000	1,800	4,200
A01.0	Typhoid fever	10,000	3,000	7,000
A01.0+ J17.0*	Pneumonia in typhoid fever	15,000	4,500	10,500
A01.1	Paratyphoid fever A	10,000	3,000	7,000
A01.2	Paratyphoid fever B	10,000	3,000	7,000
A01.3	Paratyphoid fever C	10,000	3,000	7,000
A01.4	Paratyphoid fever, unspecified; Infection due to Salmonella paratyphi NOS	10,000	3,000	7,000
A02.0	Salmonella enteritis; Salmonellosis	10,000	3,000	7,000
A02.1	Salmonella septicaemia	10,000	3,000	7,000
A02.2	Localized salmonella infections	10,000	3,000	7,000
A02.2+ J17.0*	Pneumonia in salmonella infection	15,000	4,500	10,500
A02.8	Other specified salmonella infections	10,000	3,000	7,000
A02.9	Salmonella infection, unspecified	10,000	3,000	7,000
A03.0	Shigellosis due to Shigella dysenteriae; Group A shigellosis [Shiga-Kruse dysentery]	6,000	1,800	4,200
A03.1	Shigellosis due to Shigella flexneri; Group B shigellosis	6,000	1,800	4,200
A03.2	Shigellosis due to Shigella boydii; Group C shigellosis	6,000	1,800	4,200
A03.3	Shigellosis due to Shigella sonnei; Group D shigellosis	6,000	1,800	4,200
A03.8	Other shigellosis	6,000	1,800	4,200
A03.9	Shigellosis, unspecified; ; Bacillary dysentery NOS	6,000	1,800	4,200
A04.0	Enteropathogenic Escherichia coli infection	6,000	1,800	4,200
A04.1	Enterotoxigenic Escherichia coli infection	6,000	1,800	4,200
A04.2	Enteroinvasive Escherichia coli infection	6,000	1,800	4,200
A04.3	Enterohaemorrhagic Escherichia coli infection	6,000	1,800	4,200
A04.4	Other intestinal Escherichia coli infections	6,000	1,800	4,200
A04.5	Campylobacter enteritis	6,000	1,800	4,200
A04.6	Enteritis due to Yersinia enterocolitica	6,000	1,800	4,200
A04.7	Enterocolitis due to Clostridium difficile; Foodborne intoxication by Clostridium difficile; Pseudomembranous colitis	6,000	1,800	4,200
A04.8	Other specified bacterial intestinal infections	6,000	1,800	4,200
A04.9	Bacterial intestinal infection, unspecified. Bacterial enteritis NOS	6,000	1,800	4,200
A05.0	Foodborne staphylococcal intoxication	6,000	1,800	4,200
A05.2	Foodborne Clostridium perfringens [Clostridium welchii] intoxication. Enteritis necroticans. Pig-bel	6,000	1,800	4,200

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
A05.3	Foodborne Vibrio parahaemolyticus intoxication	6,000	1,800	4,200
A05.4	Foodborne Bacillus cereus intoxication	6,000	1,800	4,200
A05.8	Other specified bacterial foodborne intoxications	6,000	1,800	4,200
A05.9	Bacterial foodborne intoxication, unspecified	6,000	1,800	4,200
A06.1	Chronic intestinal amoebiasis	4,200	2,940	1,260
A06.2	Amoebic nondysenteric colitis	4,200	2,940	1,260
A07.0	Balantidiasis; Balantidial dysentery	6,000	1,800	4,200
A07.1	Giardiasis [lambliaosis]	6,000	1,800	4,200
A07.2	Cryptosporidiosis	6,000	1,800	4,200
A07.3	Isosporiasis; Infection due to Isospora belli and Isospora hominis; Intestinal coccidiosis; Isosporosis	6,000	1,800	4,200
A07.8	Other specified protozoal intestinal diseases; Intestinal trichomoniasis; Sarcocystosis; Sarcosporidiosis	6,000	1,800	4,200
A07.9	Protozoal intestinal disease, unspecified; Flagellate diarrhoea; Protozoal colitis; Protozoal diarrhoea; Protozoal dysentery	6,000	1,800	4,200
A08.0	Rotaviral enteritis	6,000	1,800	4,200
A08.1	Acute gastroenteropathy due to Norwalk agent; Small round structured virus enteritis	6,000	1,800	4,200
A08.2	Adenoviral enteritis	6,000	1,800	4,200
A08.3	Other viral enteritis	6,000	1,800	4,200
A08.4	Viral intestinal infection, unspecified; Viral enteritis NOS; Viral gastroenteritis NOS; Viral gastroenteropathy NOS	6,000	1,800	4,200
A08.5	Other specified intestinal infections	6,000	1,800	4,200
A09.0	Infectious diarrhea	6,000	1,800	4,200
A09.9	Acute gastroenteritis	6,000	1,800	4,200
A15.0	Tuberculosis of lung, confirmed by sputum microscopy with or without culture; Tuberculous Bronchiectasis, confirmed by sputum microscopy with or without culture; Tuberculous fibrosis of lung, confirmed by sputum microscopy with or without culture; Tuberculous pneumonia, confirmed by sputum microscopy with or without culture; Tuberculous pneumothorax, confirmed by sputum microscopy with or without culture	6,860	2,058	4,802

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
A15.1	Tuberculosis of lung, confirmed by culture only; Tuberculous Bronchiectasis, confirmed by culture only; Tuberculous fibrosis of lung, confirmed by culture only; Tuberculous pneumonia, confirmed by culture only; Tuberculous pneumothorax, confirmed by cul	6,860	2,058	4,802
A15.2	Tuberculosis of lung, confirmed histologically only; Tuberculous Bronchiectasis, confirmed histologically only; Tuberculous fibrosis of lung, confirmed histologically only; Tuberculous pneumonia, confirmed histologically only; Tuberculous pneumothorax	6,860	2,058	4,802
A15.3	Tuberculosis of lung, confirmed by unspecified means; Tuberculous Bronchiectasis, confirmed but unspecified whether bacteriologically or histologically; Tuberculous fibrosis of lung, confirmed but unspecified whether bacteriologically or histologically	6,860	2,058	4,802
A15.4	Tuberculosis of intrathoracic lymph nodes, confirmed bacteriologically & histologically; Tuberculosis of hilar lymph nodes, confirmed bacteriologically & histologically; Tuberculosis of mediastinal, lymph nodes, confirmed bacteriologically & histologically;	8,330	2,499	5,831
A15.5	Tuberculosis of larynx, trachea and bronchus, confirmed bacteriologically and histologically ; Tuberculosis of bronchus, confirmed bacteriologically and histologically; Tuberculosis of glottis, confirmed bacteriologically and histologically; Tuberculo	8,330	2,499	5,831
A15.6	Tuberculous pleurisy, confirmed bacteriologically and histologically [Tuberculosis of pleura, confirmed bacteriologically and histologically; Tuberculous empyema, confirmed bacteriologically & histologically	8,330	2,499	5,831
A15.7	Primary respiratory tuberculosis, confirmed bacteriologically and histologically	6,860	2,058	4,802
A15.8	Other respiratory tuberculosis, confirmed bacteriologically and histologically; Mediastinal tuberculosis, confirmed bacteriologically and histologically; Nasopharyngeal tuberculosis, confirmed bacteriologically and histologically; Tuberculosis of nose	8,330	2,499	5,831

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
A15.9	Respiratory tuberculosis unspecified, confirmed bacteriologically and histologically	6,860	2,058	4,802
A16.0	Tuberculosis of lung, bacteriologically and histologically negative; Tuberculous Bronchiectasis , bacteriologically and histologically negative; Tuberculous fibrosis of lung, bacteriologically and histologically negative; Tuberculous pneumonia, bac	6,860	2,058	4,802
A16.1	Tuberculosis of lung, bacteriological and histological examination not done; Tuberculous Bronchiectasis, bacteriological and histological examination not done; Tuberculous fibrosis of lung, bacteriological and histological examination not done; Tuberculo	6,860	2,058	4,802
A16.2	Tuberculosis of lung, NOS, without mention of bacteriological or histological confirmation; Tuberculous bronchiectasis, NOS, without mention of bacteriological or histological confirmation; Tuberculous fibrosis of lung, NOS, without mention of bact	6,860	2,058	4,802
A16.3	Tuberculosis of intrathoracic lymph nodes, without mention of bacteriological or histological confirmation; Tuberculosis of hilar lymph nodes NOS without mention of bacteriological or histological confirmation; Tuberculosis of intrathoracic lymph nodes,	8,330	2,499	5,831
A16.4	Tuberculosis of bronchus, NOS, without mention of bacteriological or histological onfirmation; Tuberculosis of glottis, NOS, without mention of bacteriological or histological onfirmation; Tuberculosis of larynx, NOS, without mention of bacteriologic	8,330	2,499	5,831
A16.5	Tuberculous pleurisy, without mention of bacteriological or histological confirmation; Tuberculosis of pleura, NOS, without mention of bacteriological or histological confirmation; Tuberculous empyema, NOS, without mention of bacteriological or his	8,330	2,499	5,831
A16.7	Primary respiratory tuberculosis without mention of bacteriological or histological confirmation; Primary respiratory tuberculosis NOS; Primary tuberculous complex	6,860	2,058	4,802

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
A16.8	Other respiratory tuberculosis, without mention of bacteriological or histological confirmation; Mediastinal tuberculosis, NOS without mention of bacteriological or histological confirmation; Nasopharyngeal tuberculosis, NOS without mention of bacteriological	8,330	2,499	5,831
A16.9	Respiratory tuberculosis unspecified, without mention of bacteriological or histological confirmation; Respiratory tuberculosis NOS; Tuberculosis NOS	6,860	2,058	4,802
A21.2+ J17.0*	Pneumonia in tularemia	15,000	4,500	10,500
A22.1+ J17.0*	Pneumonia in anthrax	15,000	4,500	10,500
A31.0	Pulmonary mycobacterial infection; Infection due to Mycobacterium avium, Mycobacterium intracellulare [Battey bacillus]; Mycobacterium kansasii	15,000	4,500	10,500
A37.0	Whooping cough due to Bordetella pertussis	7,420	2,226	5,194
A37.0+ J17.0*	Pneumonia in whooping cough due to Bordetella pertussis	15,000	4,500	10,500
A37.1	Whooping cough due to Bordetella parapertussis	7,420	2,226	5,194
A37.1+ J17.0*	Pneumonia in whooping cough due to Bordetella parapertussis	15,000	4,500	10,500
A37.8	Whooping cough due to other Bordetella species	7,420	2,226	5,194
A37.8+ J17.0*	Pneumonia in whooping cough due to Bordetella species other than pertussis or parapertussis	15,000	4,500	10,500
A37.9	Whooping cough, unspecified	7,420	2,226	5,194
A37.9+ J17.0*	Pneumonia in whooping cough	15,000	4,500	10,500
A42.0+ J17.0*	Pneumonia in actinomycoses	15,000	4,500	10,500
A48.1	Legionnaires' disease	15,000	4,500	10,500
A53.0+ J17.0*	Pneumonia in nocardiosis	15,000	4,500	10,500
A54.8+ J17.0*	Pneumonia in gonorrhoea	15,000	4,500	10,500
A69.8+ J17.8*	Pneumonia in spirochaetal	15,000	4,500	10,500
A70+ J17.8*	Pneumonia in ornithosis	15,000	4,500	10,500
A78+ J17.8*	Pneumonia in Q fever	15,000	4,500	10,500
A90	Dengue without warning signs	10,000	3,000	7,000
A91.1	Dengue with warning signs	10,000	3,000	7,000
B01.2+ J17.1*	Pneumonia in varicella	15,000	4,500	10,500
B01.9	Varicella [chickenpox] without complication	2,800	840	1,960
B05.2+ J17.1*	Pneumonia in measles	15,000	4,500	10,500
B05.3+H76.1*	Measles complicated by Otitis Media	2,800	840	1,960
B05.4	Measles with intestinal complications	2,800	840	1,960
B05.9	Measles without complications	2,800	840	1,960
B06.8	Rubella with other complications	2,800	840	1,960
B06.8+ J17.1*	Pneumonia in rubella	15,000	4,500	10,500
B06.9	Rubella without complications	2,800	840	1,960
B09	Viral exanthem	2,800	840	1,960

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
B15.9	ACUTE HEPATITIS A WITHOUT HEPATIC COMA; HEPATITIS A (ACUTE)(VIRAL) NOS	8,260	2,478	5,782
B16.1	ACUTE HEPATITIS B WITH DELTA-AGENT (COINFECTION) WITHOUT HEPATIC COMA	8,260	2,478	5,782
B16.9	ACUTE HEPATITIS B WITHOUT DELTA-AGENT AND WITHOUT HEPATIC COMA; HEPATITIS B (ACUTE)(VIRAL) NOS	8,260	2,478	5,782
B25.0+ J17.1*	Pneumonia in cytomegalovirus disease	15,000	4,500	10,500
B34.1	Echovirus infection NOS	2,800	840	1,960
B34.2	Coronavirus infection, unspecified	2,800	840	1,960
B34.3	Parvovirus infection, unspecified	2,800	840	1,960
B34.4	Papovavirus infection, unspecified	2,800	840	1,960
B34.8	Other viral infections of unspecified site	2,800	840	1,960
B34.9	Viral infection, unspecified;	2,800	840	1,960
B37.1+ J17.2*	Pneumonia in candidiasis	15,000	4,500	10,500
B38.0+ J17.2*	Pneumonia in acute pulmonary coccidiomycosis	15,000	4,500	10,500
B38.1+ J17.2*	Pneumonia in chronic pulmonary coccidiomycosis	15,000	4,500	10,500
B38.2+ J17.2*	Pneumonia in pulmonary coccidioidomycosis	15,000	4,500	10,500
B39.0+ J17.2*	Pneumonia in acute pulmonary histoplasmosis capsulati	15,000	4,500	10,500
B39.1+ J17.2*	Pneumonia in chronic pulmonary histoplasmosis capsulati	15,000	4,500	10,500
B39.2+ J17.2*	Pneumonia in pulmonary histoplasmosis capsulati	15,000	4,500	10,500
B39.9+ J17.2*	Pneumonia in histoplasmosis	15,000	4,500	10,500
B44.0+ J17.2*	Pneumonia in invasive pulmonary aspergillosis	15,000	4,500	10,500
B44.1+ J17.2*	Pneumonia in other pulmonary aspergillosis	15,000	4,500	10,500
B50.9	Plasmodium falciparum malaria	2,800	840	1,960
B51.9	Plasmodium vivax malaria without complications	2,800	840	1,960
B52.9	Plasmodium malariae malaria without complications	2,800	840	1,960
B58.3+ J17.3*	Pneumonia in toxoplasmosis	15,000	4,500	10,500
B65.0+ J17.3*	Pneumonia in schistosomiasis due to Schistosoma hematobium	15,000	4,500	10,500
B65.1	Schistosomiasis due to Schistosoma mansoni [intestinal schistosomiasis]	2,800	840	1,960
B65.1+ J17.3*	Pneumonia in schistosomiasis due to Schistosoma mansoni	15,000	4,500	10,500
B65.2	Schistosomiasis due to Schistosoma japonicum	2,800	840	1,960
B65.2+ J17.3*	Pneumonia in schistosomiasis due to Schistosoma japonicum	15,000	4,500	10,500
B65.3	Cercarial dermatitis; Swimmer's itch	2,800	840	1,960
B65.8	Infection due to Schistosoma intercalatum, Schistosoma mattheei , Schistosoma mekongi	2,800	840	1,960

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
B65.8+ J17.3*	Pneumonia in schistosomiasis due to Schistosoma intercalatum; mattheei; mekongi	15,000	4,500	10,500
B65.9	Schistosomiasis, unspecified	2,800	840	1,960
B65.9+ J17.3*	Pneumonia in schistosomiasis	15,000	4,500	10,500
B77.8+ J17.3*	Pneumonia in ascariasis	15,000	4,500	10,500
B77.9	Ascariasis	2,800	840	1,960
B82.0	Intestinal helminthiasis, unspecified	2,800	840	1,960
B82.9	Intestinal parasitism, unspecified	2,800	840	1,960
E10.9	Non-insulin-dependent diabetes mellitus without complications	2,800	840	1,960
E14.9	Insulin dependent diabetes mellitus without complications	2,800	840	1,960
E16.0	Drug-induced hypoglycaemia without coma	5,670	1,701	3,969
E16.2	Hypoglycemia	2,800	840	1,960
E40	Kwashiorkor	8,190	2,457	5,733
E41	Nutritional marasmus; Severe malnutrition with marasmus	8,190	2,457	5,733
E43	Unspecified severe protein-energy malnutrition	8,190	2,457	5,733
E44.1	Mild protein-energy malnutrition	8,190	2,457	5,733
E86.1	moderate dehydration	2,800	840	1,960
E86.2	severe dehydration	2,800	840	1,960
E87.0	Hyperosmolality and hypernatraemia; Sodium [Na] excess; Sodium [Na] overload	2,800	840	1,960
E87.1	Hypo-osmolality and hyponatraemia	5,950	1,785	4,165
E87.2	Acidosis; Acidosis NOS; Lactic Acidosis; Metabolic Acidosis; Respiratory Acidosis	5,950	1,785	4,165
E87.3	Alkalosis; Alkalosis NOS; Metabolic Alkalosis; Respiratory Alkalosis	5,950	1,785	4,165
E87.4	Mixed disorder of acid-base balance	5,950	1,785	4,165
E87.5	Hyperkalaemia; Potassium [K] excess; Potassium [K] overload	5,950	1,785	4,165
E87.6	Hypokalaemia; Potassium [K] deficiency	5,950	1,785	4,165
E87.7	Fluid overload	5,950	1,785	4,165
E87.8	Other disorders of electrolyte and fluid balance, not elsewhere classified; Electrolyte imbalance NOS; Hyperchloraemia; Hypochloraemia; Other metabolic disorders	5,950	1,785	4,165
G43.0	Migraine without aura [common migraine]	3,850	1,155	2,695
G43.1	Migraine with aura [classical migraine]; Migraine aura without headache; Migraine, basilar; Migraine equivalents; Familial hemiplegic Migraine; Migraine with acute-onset aura; Migraine with prolonged aura; Migraine with typical aura	3,850	1,155	2,695
G43.2	Status migrainosus	3,850	1,155	2,695

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
G43.3	Complicated migraine	3,850	1,155	2,695
G43.8	Other migraine; Ophthalmoplegic migraine; Retinal migraine	3,850	1,155	2,695
G43.9	Migraine, unspecified	3,850	1,155	2,695
G44.0	Cluster headache syndrome; Chronic paroxysmal hemicrania; Chronic cluster headache; Episodic Cluster headache	3,850	1,155	2,695
G44.1	Vascular headache, not elsewhere classified; Vascular headache NOS	3,850	1,155	2,695
G44.2	Tension-type headache; Chronic tension-type headache; Episodic tension headache; Tension headache NOS	3,850	1,155	2,695
G44.3	Chronic post-traumatic headache	3,850	1,155	2,695
G44.4	Drug-induced headache, not elsewhere classified	3,850	1,155	2,695
G44.8	Other specified headache syndromes	3,850	1,155	2,695
H60.1	Cellulitis of external ear; Cellulitis of auricle; Cellulitis of external auditory canal	6,300	1,890	4,410
H60.2	Malignant otitis externa	6,300	1,890	4,410
H60.3	Other infective otitis externa; diffuse Otitis externa ; Haemorrhagic Otitis externa ; Swimmer's ear	6,300	1,890	4,410
H60.4	Cholesteatoma of external ear; Keratosis obturans of external ear (canal)	6,300	1,890	4,410
H66.9	Otitis media, unspecified; Otitis media NOS; Acute Otitis media NOS; Chronic Otitis media NOS	5,460	1,638	3,822
H81.0	Ménière's disease; Labyrinthine hydrops; Ménière's syndrome or vertigo	3,990	1,197	2,793
H81.1	Benign paroxysmal vertigo	3,990	1,197	2,793
H81.2	Vestibular neuronitis	3,990	1,197	2,793
H81.3	Other peripheral vertigo; Lermoyez' syndrome; Aural Vertigo ; Otogenic Vertigo; Peripheral NOS Vertigo	3,990	1,197	2,793
H81.4	Vertigo of central origin; Central positional nystagmus	3,990	1,197	2,793
H81.8	Other disorders of vestibular function	3,990	1,197	2,793
H81.9	Disorder of vestibular function, unspecified; Vertiginous syndrome NOS	3,990	1,197	2,793
H83.1	Labyrinthine fistula	3,990	1,197	2,793
H83.2	Labyrinthine dysfunction; Hypersensitivity of labyrinth; Hypofunction of labyrinth; Loss of function Of labyrinth	3,990	1,197	2,793
I00	Rheumatic fever without mention of heart involvement; Arthritis, rheumatic, acute or subacute involvement	7,070	2,121	4,949
I00+ J17.8*	Pneumonia in rheumatic fever	15,000	4,500	10,500
I10.1	Hypertension, stage II	9,000	2,700	6,300
I10.9	Essential Hypertension; malignant hypertension	9,000	2,700	6,300

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
I11.0	Hypertensive heart disease with (congestive) heart failure; Hypertensive heart failure	9,000	2,700	6,300
I11.9	Hypertensive heart disease without (congestive) heart failure; Hypertensive heart disease NOS	9,000	2,700	6,300
I12.0	Hypertensive renal disease with renal failure; Hypertensive renal failure	9,000	2,700	6,300
I12.9	Hypertensive renal disease without renal failure; Hypertensive renal disease NOS	9,000	2,700	6,300
I13.0	Hypertensive heart and renal disease with (congestive) heart failure	9,000	2,700	6,300
I13.1	Hypertensive heart and renal disease with renal failure	9,000	2,700	6,300
I13.2	Hypertensive heart and renal disease with both (congestive) heart failure and renal failure	9,000	2,700	6,300
I13.9	Hypertensive heart and renal disease, unspecified	9,000	2,700	6,300
I15.0	Renovascular hypertension	9,000	2,700	6,300
I15.1	Hypertension secondary to other renal disorders	9,000	2,700	6,300
I15.2	Hypertension secondary to endocrine disorders	9,000	2,700	6,300
I15.8	Other secondary hypertension	9,000	2,700	6,300
I15.9	Secondary hypertension, unspecified	9,000	2,700	6,300
I25.0	Atherosclerotic cardiovascular disease, so described	2,800	840	1,960
I25.1	Atherosclerotic heart disease; Coronary artery atheroma; Coronary artery atherosclerosis; Coronary artery disease; Coronary artery sclerosis	2,800	840	1,960
I25.3	Aneurysm of heart; Mural aneurysm; Venticular aneurysm	2,800	840	1,960
I25.4	Coronary artery aneurysm; Coronary arteriovenous fistula, acquired	2,800	840	1,960
I25.5	Ischaemic cardiomyopathy	8,400	2,520	5,880
I25.6	Silent myocardial ischaemia	8,400	2,520	5,880
I25.8	Other forms of chronic ischaemic heart disease	8,400	2,520	5,880
I25.9	Chronic ischaemic heart disease, unspecified; Chronic Ischaemic heart disease NOS	8,400	2,520	5,880
J03.0	Streptococcal tonsillitis	2,800	840	1,960
J03.8	Acute tonsillitis due to other specified organisms	2,800	840	1,960

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
J03.9	Acute tonsillitis, unspecified; Acute tonsillitis NOS; Acute Follicular tonsillitis; Acute Gangrenous tonsillitis; Acute Infective tonsillitis; Acute Ulcerative tonsillitis	2,800	840	1,960
J06.0	Acute laryngopharyngitis	2,800	840	1,960
J06.8	Other acute upper respiratory infections of multiple sites	2,800	840	1,960
J06.9	Acute upper respiratory infection, unspecified; Acute upper respiratory disease; Upper respiratory infection NOS	2,800	840	1,960
J11.0	Influenza with pneumonia, virus not identified; Influenzal (broncho) pneumonia, unspecified or specific virus not identified	4,620	1,386	3,234
J11.1	Influenza with other respiratory manifestations, virus not identified; Influenza NOS; Influenzal Acute upper respiratory infection, unspecified or specific virus not identified; Influenzal laryngitis, unspecified or specific virus not identified; Influen	4,620	1,386	3,234
J11.8	Influenza with other manifestations, virus not identified; Encephalopathy due to influenza, unspecified or specific virus not identified; Influenzal gastroenteritis, unspecified or specific virus not identified; Acute influenzal myocarditis, unspecified o	4,620	1,386	3,234
J12.02	Adenoviral pneumonia, moderate risk	15,000	4,500	10,500
J12.12	Respiratory syncytial virus pneumonia, moderate risk	15,000	4,500	10,500
J12.22	Parainfluenza virus pneumonia, moderate risk	15,000	4,500	10,500
J12.32	Human metapneumovirus pneumonia, moderate risk	15,000	4,500	10,500
J12.92	Viral pneumonia, moderate risk	15,000	4,500	10,500
J13.2	Pneumonia [bronchopneumonia] due to Streptococcus pneumoniae, moderate risk	15,000	4,500	10,500
J14.2	Pneumonia [bronchopneumonia] due to Haemophilus influenzae, moderate risk	15,000	4,500	10,500
J15.02	Pneumonia due to Klebsiella pneumoniae, moderate risk	15,000	4,500	10,500
J15.12	Pneumonia due to Pseudomonas, moderate risk	15,000	4,500	10,500
J15.22	Pneumonia due to staphylococcus, moderate risk	15,000	4,500	10,500
J15.32	Pneumonia due to streptococcus, group B, moderate risk	15,000	4,500	10,500
J15.42	Pneumonia due to other streptococci, moderate risk	15,000	4,500	10,500

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
J15.52	Pneumonia due to Escherichia coli, moderate risk	15,000	4,500	10,500
J15.62	Pneumonia due to other aerobic Gram-negative bacteria; Pneumonia due to Serratia marcescens, moderate risk	15,000	4,500	10,500
J15.72	Pneumonia due to Mycoplasma pneumoniae, moderate risk	15,000	4,500	10,500
J15.92	Bacterial pneumonia [bronchopneumonia], moderate risk	15,000	4,500	10,500
J16.02	Chlamydial pneumonia, moderate risk	15,000	4,500	10,500
J18.02	Bronchopneumonia, moderate risk	15,000	4,500	10,500
J18.12	Lobar pneumonia, moderate risk	15,000	4,500	10,500
J18.22	Hypostatic pneumonia, moderate risk	15,000	4,500	10,500
J18.92	Community-acquired pneumonia III (This classification utilized the American Thoracic Society recommendation. This is equivalent to CAP, moderate risk in the Philippine Clinical Practice Guidelines on the Diagnosis, Empiric Management, and Prevention of Community-acquired Pneumonia in Immunocompetent Adults, 2010 update)	15,000	4,500	10,500
J20.0	Acute bronchitis due to Mycoplasma pneumoniae	2,800	840	1,960
J20.1	Acute bronchitis due to Haemophilus influenzae	2,800	840	1,960
J20.2	Acute bronchitis due to streptococcus	2,800	840	1,960
J20.3	Acute bronchitis due to coxsackievirus	2,800	840	1,960
J20.4	Acute bronchitis due to parainfluenza virus	2,800	840	1,960
J20.5	Acute bronchitis due to respiratory syncytial virus	2,800	840	1,960
J20.6	Acute bronchitis due to rhinovirus	2,800	840	1,960
J20.7	Acute bronchitis due to echovirus	2,800	840	1,960
J20.8	Acute bronchitis due to other specified organisms	2,800	840	1,960
J20.9	Acute bronchitis, unspecified	2,800	840	1,960
J22	Unspecified acute lower respiratory infection	2,800	840	1,960
J40	Bronchitis, not specified as acute or chronic	2,800	840	1,960
J45.00	Predominantly allergic asthma; Allergic bronchitis NOS; Allergic rhinitis with asthma; Atopic asthma; Extrinsic allergic asthma; Hay fever with asthma; in Acute Exacerbation	9,000	2,700	6,300
J45.10	Nonallergic asthma; Idiosyncratic asthma; Intrinsic nonallergic asthma, in Acute Exacerbation	9,000	2,700	6,300
J45.80	Mixed asthma, in Acute Exacerbation	9,000	2,700	6,300
J45.90	Bronchial Asthma in Acute Exacerbation	9,000	2,700	6,300
J46	Status asthmaticus; Acute severe asthma	9,000	2,700	6,300

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
K04.0	Pulpitis; Pulpal abscess; Pulpal polyp; Acute pulpitis; Hyperplastic chronic pulpitis; Ulcerative chronic pulpitis; Suppurative pulpitis	2,800	840	1,960
K04.1	Necrosis of pulp; Pulpal gangrene	2,800	840	1,960
K04.2	Pulp degeneration; Denticles; Pulpal calcifications; Pulpal stones	2,800	840	1,960
K04.3	Abnormal hard tissue formation in pulp; Secondary or irregular dentine	2,800	840	1,960
K04.4	Acute apical periodontitis of pulp origin; Acute apical periodontitis NOS	2,800	840	1,960
K04.5	Chronic apical periodontitis; Apical or periapical granuloma; Apical periodontitis NOS	2,800	840	1,960
K04.6	Periapical abscess with sinus; Dental abscess with sinus; Dentoalveolar abscess with sinus	2,800	840	1,960
K04.7	Periapical abscess without sinus; Dental abscess NOS; Dentoalveolar abscess NOS; Periapical abscess NOS	2,800	840	1,960
K04.8	Radicular cyst; Periodontal apical cyst; Periapical cyst; Residual radicular cyst	2,800	840	1,960
K04.9	Other and unspecified diseases of pulp and periapical tissues	2,800	840	1,960
K11.2	Sialoadenitis	5,810	1,743	4,067
K21.0	Gastro-oesophageal reflux disease with oesophagitis; Reflux oesophagitis	4,270	1,281	2,989
K21.9	Gastro-oesophageal reflux disease without oesophagitis; Oesophageal reflux NOS	4,270	1,281	2,989
K25.3	Gastric ulcer, acute / Acute erosion of stomach/ Pylorus peptic ulcer / Stomach peptic ulcer without haemorrhage or perforation	4,270	1,281	2,989
K27.3	Acute Peptic/ Gastroduodenal ulcer, site unspecified, without haemorrhage or perforation	4,270	1,281	2,989
K27.6	Chronic or unspecified Peptic/ Gastroduodenal ulcer, site unspecified, with both haemorrhage and perforation	8,960	2,688	6,272
K27.9	Peptic/ Gastroduodenal ulcer, unspecified as acute or chronic, without haemorrhage or perforation	4,270	1,281	2,989
K29.1	Other acute gastritis	4,270	1,281	2,989
K29.2	Alcoholic gastritis	4,270	1,281	2,989
K29.3	Chronic superficial gastritis	4,270	1,281	2,989
K29.4	Chronic atrophic gastritis; Gastric atrophy	4,270	1,281	2,989

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
K29.5	Chronic gastritis, unspecified; Chronic Antral gastritis; Chronic Fundal gastritis	4,270	1,281	2,989
K29.6	Other gastritis; Giant hypertrophic gastritis; Granulomatous gastritis; Menetrier's disease	4,270	1,281	2,989
K29.7	Gastritis, unspecified	4,270	1,281	2,989
K29.8	Duodenitis	4,270	1,281	2,989
K30	Dyspepsia	2,800	840	1,960
K31.0	Acute dilatation of stomach; Acute distension of stomach	2,800	840	1,960
K31.1	Adult hypertrophic pyloric stenosis; Pyloric stenosis NOS	4,620	1,386	3,234
K31.2	Hourglass stricture and stenosis of stomach	4,620	1,386	3,234
K31.3	Pylorospasm, not elsewhere classified	4,620	1,386	3,234
K31.4	Gastric diverticulum	4,620	1,386	3,234
K31.5	Obstruction of duodenum; Constriction of duodenum; Stenosis of duodenum; Stricture of duodenum; Chronic duodenal ileus	4,620	1,386	3,234
K31.6	Fistula of stomach and duodenum; Gastrocolic fistula; Gastrojejunal fistula	4,620	1,386	3,234
K31.7	Polyp of stomach and duodenum	4,620	1,386	3,234
K31.8	Other specified diseases of stomach and duodenum; Achlorhydria; Gastroptosis; Hourglass contraction of stomach	4,620	1,386	3,234
K31.9	Disease of stomach and duodenum, unspecified	2,800	840	1,960
K52.0	Gastroenteritis and colitis due to radiation	6,000	1,800	4,200
K52.1	Toxic gastroenteritis and colitis	6,000	1,800	4,200
K52.2	Allergic and dietetic gastroenteritis and colitis; Food hypersensitivity gastroenteritis or colitis	6,000	1,800	4,200
K52.8	Other specified noninfective gastroenteritis and colitis; Eosinophilic gastritis or gastroenteritis	6,000	1,800	4,200
K52.9	Noninfective gastroenteritis and colitis, unspecified; Diarrhoea specified as noninfective, or NOS in countries where the conditions can be presumed to be of noninfectious origin; Enteritis specified as noninfective, or NOS in countries where the conditions can be presumed to be of noninfectious origin	6,000	1,800	4,200
K56.0	Paralytic ileus; Paralysis of bowel; Paralysis of colon; Paralysis of intestine	7,070	2,121	4,949
K58.0	Irritable bowel syndrome with diarrhoea	6,000	1,800	4,200
K59.0	Constipation	2,800	840	1,960
K74.0	Hepatic fibrosis	10,570	3,171	7,399

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
K74.1	Hepatic sclerosis	8,260	2,478	5,782
K74.2	Hepatic fibrosis with hepatic sclerosis	10,570	3,171	7,399
K74.3	Primary biliary cirrhosis; Chronic nonsupparative destructive cholangitis	9,240	2,772	6,468
K74.4	Secondary biliary cirrhosis	6,860	2,058	4,802
K74.5	Biliary cirrhosis, unspecified	6,860	2,058	4,802
K74.6	Other and unspecified cirrhosis of liver; Cirrhosis of liver NOS; Cryptogenic cirrhosis of liver; Macronodular cirrhosis of liver; Micronodular cirrhosis of liver; Mixed type cirrhosis of liver; Portal cirrhosis of liver; Postnecrotic cirrhosis of liver;	10,570	3,171	7,399
L02.0	Cutaneous abscess, furuncle and carbuncle of face	2,800	840	1,960
L02.1	Cutaneous abscess, furuncle and carbuncle of neck	2,800	840	1,960
L02.2	Cutaneous abscess, furuncle and carbuncle of trunk; Cutaneous abscess, furuncle and carbuncle of Abdominal wall; Cutaneous abscess, furuncle and carbuncle of Back [any part, except buttock]; Cutaneous abscess, furuncle and carbuncle of Chest wall; Cutaneous abscess, furuncle and carbuncle of Groin; Cutaneous abscess, furuncle and carbuncle of Perineum; Cutaneous abscess, furuncle and carbuncle of Umbilicus	2,800	840	1,960
L02.3	Cutaneous abscess, furuncle and carbuncle of buttock; Cutaneous abscess, furuncle and carbuncle of Gluteal region	2,800	840	1,960
L02.4	Cutaneous abscess, furuncle and carbuncle of limb, Axilla, Hip & Shoulder	2,800	840	1,960
L02.8	Cutaneous abscess, furuncle and carbuncle of other sites: Head [any part, except face]; Scalp	2,800	840	1,960
L02.9	Cutaneous abscess, furuncle and carbuncle, unspecified; Furunculosis NOS	2,800	840	1,960
L03.0	Cellulitis of finger and toe; Infection of nail; Onychia; Paronychia; Perionychia	6,720	2,016	4,704
L03.1	Cellulitis of other parts of limb, Axilla; Cellulitis of Hip;Cellulitis of Shoulder	6,720	2,016	4,704
L03.2	Cellulitis of face	6,720	2,016	4,704
L03.3	Cellulitis of trunk;Cellulitis of Abdominal wall;Cellulitis of Back [any part]; Cellulitis of Chest wall;Cellulitis of Groin;Cellulitis of Perineum;Cellulitis of Umbilicus	6,720	2,016	4,704

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
L03.8	Cellulitis of other sites; Cellulitis of Head [any part, except face];Cellulitis of Scalp	6,720	2,016	4,704
L03.9	Cellulitis, unspecified	6,720	2,016	4,704
L72.0	Epidermal cyst	2,800	840	1,960
L72.1	Trichilemmal cyst; Pilar cyst; Sebaceous cyst	2,800	840	1,960
L72.2	Steatocystoma multiplex	2,800	840	1,960
L72.8	Other follicular cysts of skin and subcutaneous tissue	2,800	840	1,960
L72.9	Follicular cyst of skin and subcutaneous tissue, unspecified	2,800	840	1,960
M00.16	Pneumococcal arthritis and polyarthritis, Lower leg	6,790	2,037	4,753
M00.19	Pneumococcal arthritis and polyarthritis, Site unspecified	6,790	2,037	4,753
M00.29	Other streptococcal arthritis and polyarthritis, Site unspecified	6,790	2,037	4,753
M00.82	Arthritis and polyarthritis due to other specified bacterial agents upper arm	6,790	2,037	4,753
M00.90	Pyogenic arthritis, unspecified; Infective arthritis NOS multiple sites	6,790	2,037	4,753
M00.91	Pyogenic arthritis, unspecified; Infective arthritis NOS shoulder region	6,790	2,037	4,753
M00.93	Pyogenic arthritis, unspecified; Infective arthritis NOS forearm	6,790	2,037	4,753
M00.94	Pyogenic arthritis, unspecified; Infective arthritis NOS hand	6,790	2,037	4,753
M00.95	Pyogenic arthritis, unspecified; Infective arthritis NOS pelvic region and thigh	6,790	2,037	4,753
M00.96	Pyogenic arthritis, unspecified; Infective arthritis NOS lower leg	6,790	2,037	4,753
M00.97	Pyogenic arthritis, unspecified; Infective arthritis NOS ankle and foot	6,790	2,037	4,753
M00.98	Pyogenic arthritis, unspecified; Infective arthritis NOS other sites	6,790	2,037	4,753
M00.99	Pyogenic arthritis, unspecified; Infective arthritis NOS site unspecified	6,790	2,037	4,753
M06.01	Seronegative rheumatoid arthritis, shoulder region	4,900	1,470	3,430
M06.09	Seronegative rheumatoid arthritis, site unspecified	4,900	1,470	3,430
M06.19	Adult-onset Still's disease, site unspecified	6,790	2,037	4,753

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
M06.36	Rheumatoid nodule, lower leg	4,900	1,470	3,430
M06.45	Inflammatory polyarthropathy, pelvic region and thigh	4,900	1,470	3,430
M06.49	Inflammatory polyarthropathy, site unspecified	4,900	1,470	3,430
M06.81	Other specified rheumatoid arthritis, shoulder region	4,900	1,470	3,430
M06.86	Other specified rheumatoid arthritis, lower leg	4,900	1,470	3,430
M06.87	Other specified rheumatoid arthritis, ankle and foot	4,900	1,470	3,430
M06.89	Other specified rheumatoid arthritis, site unspecified	4,900	1,470	3,430
M06.90	Rheumatoid arthritis, unspecified, multiple sites	4,900	1,470	3,430
M06.91	Rheumatoid arthritis, unspecified, shoulder region	4,900	1,470	3,430
M06.93	Rheumatoid arthritis, unspecified, forearm	4,900	1,470	3,430
M06.94	Rheumatoid arthritis, unspecified, hand	4,900	1,470	3,430
M06.95	Rheumatoid arthritis, unspecified, pelvic region and thigh	4,900	1,470	3,430
M06.96	Rheumatoid arthritis, unspecified, lower leg	4,900	1,470	3,430
M06.97	Rheumatoid arthritis, unspecified, ankle and foot	4,900	1,470	3,430
M06.98	Rheumatoid arthritis, unspecified, other sites	4,900	1,470	3,430
M06.99	Rheumatoid arthritis, unspecified, site unspecified	4,900	1,470	3,430
M10.00	Idiopathic gout; Gouty bursitis; Primary gout multiple sites	4,900	1,470	3,430
M10.01	Urate tophus of heart shoulder region	4,900	1,470	3,430
M10.02	Urate tophus of heart upper arm	4,900	1,470	3,430
M10.03	Idiopathic gout; Gouty bursitis; Primary gout forearm	4,900	1,470	3,430
M10.04	Urate tophus of heart hand	4,900	1,470	3,430
M10.05	Urate tophus of heart pelvic region and thigh	4,900	1,470	3,430
M10.06	Idiopathic gout; Gouty bursitis; Primary gout lower leg	4,900	1,470	3,430
M10.07	Urate tophus of heart ankle and foot	4,900	1,470	3,430
M10.08	Urate tophus of heart other sites	4,900	1,470	3,430
M10.09	Urate tophus of heart site unspecified	4,900	1,470	3,430
M10.10	Lead-induced gout multiple sites	4,900	1,470	3,430
M10.29	Drug-induced gout site unspecified	4,900	1,470	3,430
M10.30	Gout due to impairment of renal function multiple sites	4,900	1,470	3,430
M10.36	Gout due to impairment of renal function lower leg	4,900	1,470	3,430
M10.39	Gout due to impairment of renal function site unspecified	4,900	1,470	3,430

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
M10.40	Other secondary gout multiple sites	4,900	1,470	3,430
M10.49	Other secondary gout site unspecified	4,900	1,470	3,430
M10.90	Gout, unspecified multiple sites	4,900	1,470	3,430
M10.91	Gout, unspecified shoulder region	4,900	1,470	3,430
M10.92	Gout, unspecified upper arm	4,900	1,470	3,430
M10.93	Gout, unspecified forearm	4,900	1,470	3,430
M10.94	Gout, unspecified hand	4,900	1,470	3,430
M10.96	Gout, unspecified lower leg	4,900	1,470	3,430
M10.97	Gout, unspecified ankle and foot	4,900	1,470	3,430
M10.98	Gout, unspecified other sites	4,900	1,470	3,430
M10.99	Gout, unspecified site unspecified	4,900	1,470	3,430
M19.00	Primary arthrosis of other joints; Primary arthrosis NOS multiple sites	4,900	1,470	3,430
M19.02	Primary arthrosis of other joints; Primary arthrosis NOS upper arm	4,900	1,470	3,430
M19.05	Primary arthrosis of other joints; Primary arthrosis NOS pelvic region and thigh	4,900	1,470	3,430
M19.06	Primary arthrosis of other joints; Primary arthrosis NOS lower leg	4,900	1,470	3,430
M19.08	Primary arthrosis of other joints; Primary arthrosis NOS other sites	4,900	1,470	3,430
M19.09	Primary arthrosis of other joints; Primary arthrosis NOS site unspecified	4,900	1,470	3,430
M19.10	Post-traumatic arthrosis of other joints; Post-traumatic arthrosis NOS multiple sites	4,900	1,470	3,430
M19.11	Post-traumatic arthrosis of other joints; Post-traumatic arthrosis NOS shoulder region	4,900	1,470	3,430
M19.12	Post-traumatic arthrosis of other joints; Post-traumatic arthrosis NOS upper arm	4,900	1,470	3,430
M19.19	Post-traumatic arthrosis of other joints; Post-traumatic arthrosis NOS site unspecified	4,900	1,470	3,430
M19.21	Other secondary arthrosis; Secondary arthrosis NOS shoulder region	4,900	1,470	3,430
M19.29	Other secondary arthrosis; Secondary arthrosis NOS site unspecified	4,900	1,470	3,430
M19.81	Other specified arthrosis shoulder region	4,900	1,470	3,430
M19.86	Other specified arthrosis lower leg	4,900	1,470	3,430
M19.87	Other specified arthrosis ankle and foot	4,900	1,470	3,430
M19.88	Other specified arthrosis other sites	4,900	1,470	3,430
M19.89	Other specified arthrosis site unspecified	4,900	1,470	3,430
M19.91	Arthrosis, unspecified shoulder region	4,900	1,470	3,430
M19.92	Arthrosis, unspecified upper arm	4,900	1,470	3,430
M19.93	Arthrosis, unspecified forearm	4,900	1,470	3,430
M19.94	Arthrosis, unspecified hand	4,900	1,470	3,430
M19.95	Arthrosis, unspecified pelvic region and thigh	4,900	1,470	3,430
M19.96	Arthrosis, unspecified lower leg	4,900	1,470	3,430
M19.97	Arthrosis, unspecified ankle and foot	4,900	1,470	3,430
M19.98	Arthrosis, unspecified other sites	4,900	1,470	3,430

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
M19.99	Arthrosis, unspecified site unspecified	4,900	1,470	3,430
N20.0	Calculus of kidney; Nephrolithiasis NOS; Renal calculus or stone; Staghorn calculus; Stone in kidney	2,800	840	1,960
N20.1	Calculus of ureter; Ureteric stone	2,800	840	1,960
N20.2	Calculus of kidney with calculus of ureter	2,800	840	1,960
N20.9	Urinary calculus, unspecified; Calculous pyelonephritis	2,800	840	1,960
N30.0	Acute cystitis	5,250	1,575	3,675
N30.1	Chronic Interstitial cystitis	5,250	1,575	3,675
N30.2	Other chronic cystitis	5,250	1,575	3,675
N30.3	Trigonitis; Urethrotrigonitis	5,250	1,575	3,675
N30.4	Irradiation cystitis	2,800	840	1,960
N30.8	Other cystitis; Abscess of bladder	9,730	2,919	6,811
N30.9	Cystitis, unspecified	5,250	1,575	3,675
N39.0	Urinary tract infection, site not specified	5,250	1,575	3,675
N40	Hyperplasia of prostate; Adenofibromatous hypertrophy of prostate; Adenoma (benign) of prostate ; Enlargement of prostate (benign); Fibroadenoma of prostate; Fibroma of prostate; Hypertrophy of prostate (benign); Myoma of prostate; Median bar (prostate),	6,440	1,932	4,508
N45.0	Orchitis, epididymitis and epididymo-orchitis with abscess; Abscess of epididymis or testis	5,530	1,659	3,871
N45.9	Orchitis, epididymitis and epididymo-orchitis without abscess; Epididymitis NOS; Orchitis NOS	5,530	1,659	3,871
N47	Redundant prepuce, phimosis and paraphimosis; Adherent prepuce; Tight foreskin	4,480	1,344	3,136
N61	Inflammatory disorders of breast; Acute abscess of non puerperal areola; Acute abscess nonpuerperal breast; Chronic abscess of nonpuerperal areola; Chronic abscess of nonpuerperal breast; Carbuncle of breast; Acute mastitis nonpuerperal, NOS; Acute inf	5,530	1,659	3,871
N73.0	Acute parametritis and pelvic cellulitis; Acute abscess of broad ligament; Acute abscess of parametrium; Acute pelvic cellulitis, female	6,300	1,890	4,410
N73.1	Chronic parametritis and pelvic cellulitis	6,300	1,890	4,410
O03.9	Spontaneous abortion, complete or unspecified, without complication	3,500	1,050	2,450
O20.0	Threatened abortion; Haemorrhage specified as due to threatened abortion	4,760	1,428	3,332

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
O21.0	Mild hyperemesis gravidarum; Hyperemesis gravidarum, mild or unspecified, starting before the end of the 22nd week of gestation	4,760	1,428	3,332
O21.1	Hyperemesis gravidarum with metabolic disturbance; Hyperemesis gravidarum, starting before the end of the 22nd week of gestation, with metabolic disturbance such as carbohydrate depletion, dehydration, electrolyte imbalance	4,760	1,428	3,332
O21.2	Late vomiting of pregnancy; Excessive vomiting starting after 22 completed weeks of gestation	4,760	1,428	3,332
O21.8	Other vomiting complicating pregnancy; Vomiting due to disease classified elsewhere, complicating pregnancy	4,760	1,428	3,332
O21.9	Vomiting of pregnancy, unspecified	4,760	1,428	3,332
O23.0	Infections of kidney in pregnancy	4,760	1,428	3,332
O23.1	Infections of bladder in pregnancy	2,800	840	1,960
O23.2	Infections of urethra in pregnancy	2,800	840	1,960
O23.3	Infections of other parts of urinary tract in pregnancy	4,760	1,428	3,332
O23.4	Unspecified infection of urinary tract in pregnancy	2,800	840	1,960
O23.5	Infections of the genital tract in pregnancy	2,800	840	1,960
O23.9	Other and unspecified genitourinary tract infection in pregnancy; Genitourinary tract infection in pregnancy NOS	2,800	840	1,960
O60.0	Preterm labor, not resulting to delivery	4,760	1,428	3,332
O99.0	Anaemia complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332
O99.1	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332
O99.2	Endocrine, nutritional and metabolic diseases complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332
O99.3	Mental disorders and diseases of the nervous system complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332
O99.4	Diseases of the circulatory system complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332
O99.5	Diseases of the respiratory system complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332
O99.6	Diseases of the digestive system complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
O99.7	Diseases of the skin and subcutaneous tissue complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332
O99.8	Other specified diseases and conditions complicating pregnancy, childbirth and the puerperium	4,760	1,428	3,332
P08.2	Post-term infant, not heavy for gestational age; Fetus or infant with gestation period of 42 completed weeks or more (294 days or more), not heavy- or large-for-dates; Postmaturity NOS	5,250	1,575	3,675
R42	Dizziness and giddiness; Light-headedness; Vertigo NOS	3,990	1,197	2,793
R51	Headache; Facial pain NOS	3,850	1,155	2,695
R56.0	Febrile convulsions	4,900	1,470	3,430
R56.8	Other and unspecified convulsions; Fit NOS; Seizure (convulsive) NOS	4,900	1,470	3,430
S00.0	Superficial injury of scalp	2,800	840	1,960
S00.1	Contusion of eyelid and periocular area; Black eye	2,800	840	1,960
S00.2	Other superficial injuries of eyelid and periocular area	2,800	840	1,960
S00.3	Superficial injury of nose	2,800	840	1,960
S00.4	Superficial injury of ear	2,800	840	1,960
S00.5	Superficial injury of lip and oral cavity	2,800	840	1,960
S00.7	Multiple superficial injuries of head	2,800	840	1,960
S00.8	Superficial injury of other parts of head	2,800	840	1,960
S00.9	Superficial injury of head, part unspecified	2,800	840	1,960
S01.0	Open wound of scalp	2,800	840	1,960
S01.1	Open wound of eyelid and periocular area	2,800	840	1,960
S01.2	Open wound of nose	2,800	840	1,960
S01.3	Open wound of ear	2,800	840	1,960
S01.4	Open wound of cheek and temporomandibular area	2,800	840	1,960
S01.5	Open wound of lip and oral cavity	2,800	840	1,960
S01.7	Multiple open wounds of head	2,800	840	1,960
S01.8	Open wound of other parts of head	2,800	840	1,960
S01.9	Open wound of head, part unspecified	2,800	840	1,960
S61.0	Open wound of finger(s) without damage to nail; Open wound of finger(s) NOS	2,800	840	1,960
S61.1	Open wound of finger(s) with damage to nail	2,800	840	1,960
S61.7	Multiple open wounds of wrist and hand	2,800	840	1,960
S61.8	Open wound of other parts of wrist and hand	2,800	840	1,960
S61.9	Open wound of wrist and hand part, part unspecified	2,800	840	1,960
S81.0	Open wound of knee	2,800	840	1,960
S81.7	Multiple open wounds of lower leg	2,800	840	1,960

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
S81.8	Open wound of other parts of lower leg	2,800	840	1,960
S81.9	Open wound of lower leg, part unspecified	2,800	840	1,960
S91.0	Open wound of ankle	2,800	840	1,960
S91.1	Open wound of toe(s) without damage to nail; open wound of toe (s) NOS	2,800	840	1,960
S91.2	Open wound of toe(s) with damage to nail	2,800	840	1,960
S91.3	Open wound of other parts of foot; open wound of foot NOS	2,800	840	1,960
S91.7	Multiple open wounds of ankle and foot	2,800	840	1,960
T00.0	Superficial injuries involving head with neck	2,800	840	1,960
T00.1	Superficial injuries involving thorax with abdomen lower back and pelvis	2,800	840	1,960
T00.2	Superficial injuries involving multiple regions of upper limb(s)	2,800	840	1,960
T00.3	Superficial injuries involving multiple regions of lower limb(s)	2,800	840	1,960
T00.6	Superficial injuries involving multiple regions of upper limb(s) with lower limb(s)	2,800	840	1,960
T00.8	Superficial injuries involving other combinations of body regions	2,800	840	1,960
T00.9	Multiple superficial injuries, unspecified; Multiple abrasions NOS; Multiple nonthermal blisters NOS; Multiple bruises NOS; Multiple contusions NOS; Multiple haematomas NOS; Multiple nonvenomous insect bite NOS	2,800	840	1,960
T78.0	Anaphylactic shock due to adverse food reaction	5,320	1,596	3,724
T78.1	Other adverse food reactions, not elsewhere classified	4,340	1,302	3,038
T78.2	Anaphylactic shock, unspecified; Allergic shock NOS; Anaphylactic reaction NOS; Anaphylaxis NOS	5,320	1,596	3,724
T78.3	Angioneurotic oedema; Giant urticaria; Quinke's oedema	4,340	1,302	3,038
T78.4	Allergy, unspecified; Allergic reaction NOS; Hypersensitivity NOS; Idiosyncrasy NOS	4,340	1,302	3,038
T78.8	Other adverse effects, not elsewhere classified	4,340	1,302	3,038
T78.9	Adverse effect, unspecified	4,340	1,302	3,038
T79.3	Post-traumatic wound infection, not elsewhere classified	6,510	1,953	4,557

**ANNEX 5. LIST OF MEDICAL CASE RATES FOR PRIMARY CARE FACILITIES - INFIRMARIES/
DISPENSARIES**

ICD CODE	DESCRIPTION	Case Rate	Professional Fee	Health Care Institution Fee
T88.7	Unspecified adverse effect of drug or medicament; Adverse effect of correct drug or medicament properly administered; Allergic reaction to correct drug or medicament properly administered; Hypersensitivity to correct drug or medicament properly administered	4,340	1,302	3,038
Z39.0	Care and examination immediately after delivery	2,000	600	1,400