



CIRCULAR

Reference: ICD-10 Dictionary
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Circular 35 of 2014: Generics Dictionary – The ICD-10 Dictionary

It has come to the attention of the Council for Medical Schemes (CMS) that the *Generics Dictionary* has published “*The ICD-10 Dictionary*” in their May/June 2014 publication.

The specific publication features a Prescribed Minimum Benefit (PMB) indicator behind certain of the codes. Below, please find an extract from the specific publication.

B02.9	Herpes Zoster, uncomplicated	Zoster without complication	
B20.3	HIV & viral infections	HIV disease resulting in other viral infections	Y
B20.4	HIV & candida	HIV disease resulting in candidiasis	Y
B20.6	HIV & PCP	HIV disease resulting in <i>Pneumocystis jirovecii</i> pneumonia	Y
B20.9	HIV & parasitic diseases	HIV disease resulting in unspecified infectious or parasitic disease	Y
B23.1	HIV & lymphadenopathy	HIV disease resulting in (persistent) generalized lymphadenopathy	Y
B24	HIV	Unspecified human immunodeficiency virus [HIV] disease	Y

The CMS wishes to instruct all healthcare stakeholders that the specific publication should not be used to identify PMB conditions. PMB conditions may only be coded in accordance with the ICD-10 Master Industry Table published in 2013.

In isolation, ICD10 codes alone are seldom adequate to correctly identify PMB benefits since the PMB regulations define PMB benefits as a diagnosis with specified severity, in relation to specified treatment, and payment as a PMB benefit (from the risk pool and not medical savings accounts or other benefits), is subject to the application of managed care interventions (formularies, DSPs, evidence based medicine and the use of DSPs).

Schemes must capture all submitted ICD10 codes, as many of these may trigger a potential PMB benefit, including some codes which are not present on the current PMB code list developed by the CMS as a guide. Where appropriate, additional clinical information must be used to verify if a claim qualifies as a PMB benefit.

This additional information includes but is not limited to:

1. The setting (e.g. hospital or not)
2. The nature and severity of the condition or injury
3. The procedure or treatment
4. The drugs used
5. Co-morbidities
6. The age and gender of the patient
7. Pathology or radiology results
8. Response to previous therapy
9. The hospital discharge summary

All stakeholders are urged to obtain the latest ICD-10 Master Industry Table published in 2013 on the National Department of Health website [here \(http://www.health.gov.za/icddoc.php\)](http://www.health.gov.za/icddoc.php).

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