

The eClaimLink Taskforce

31st October 2017

UPDATES

1. Prescriber compliance – enforcement of the eRx cycle & mandate of eRx Reference Number

eRx Reference number is not mandatory for prescriptions from Providers Outside of Dubai (OOD)

- Enhancements to be added to the eClaimLink eRx Pharmacy system to allow pharmacists to indicate OOD
- eRx reference number to be mandated early Q1 2018
- Volume of Prior Requests with missing reference number that are not from OOD providers to be monitored during Q1
- Announcement to be made to when DHPO validation rule will be enforced to block prior requests with missing eRx reference number
- Awareness campaign to be launch by December 2017

UPDATES

2. Pharmacist edit restrictions

Investigation completed

- Diagnosis cannot be changed once an eRx reference number is used to populate a Prior request.
- Without an eRx reference number the pharmacist must enter diagnosis
- Modification of the medication is allowed, as per stock and availability

UPDATES

3. Addition of emergency notification function to comply with market requirement of notifications within 24hrs

- Payers to be instructed to adjust systems to allow for eAuthorizations from all eClaimLink Providers
- To be mandated that an eAuthorization with encounter type 2 is sufficient to satisfy the 24hr notification policy for emergency.
- Create DSL for Emergency visit that complies with Health Insurance Law 11 of 2013 and definition of Emergency

UPDATES

4. Creating a cost estimate for an Authorization accurately

- Discussed internally, and agreed that the estimate is just an approximate figure
- Payers will need to set in place a process and create a confidence interval subject to the data they have on previous claims
- Adding more generic codes is not advised
- Providers must request for an updated Authorization, if there is an extension of stay or others services required

UPDATES

5. Universal dental observations

Requested:

- Adult Dentition Universal Numbering
- Adult Supernumerary Dentition Universal Numbering
- Primary Dentition Universal Numbering
- Primary Supernumerary Dentition Universal Numbering
- Code sets updated and will be released soon.

NEW Discussion Points

eAuthorization TAT - New Agenda Proposed by Garreth:

- eAuthorization TAT to be enforced and we propose the below TAT for approvals
- OP – within 6 hours
- IP – within 24 hours
- Provision for extending the validity of the approvals
- Provision for sending reminders for delay in reply from payer's on eAuth requests

NEW Discussion Points

Signs and Symptoms – New Agenda Proposed by Dr Anita:

- Signs & symptoms have to be added to allow claim clearance even if Diagnosis is established.

NEW Discussion Points

Resubmission - New Agenda Proposed by Mihtab:

- We are considering setting a market limit of 2 resubmissions for each claim followed by reconciliation.
- Each claim will have 1 claim ID and a max of 2 resubmission ID's, plus an additional RA if adjustment is required.
- No limit for non-network providers will result in extended cycles and delayed reconciliation.



The End

