



Rule Category:
Medical

Ref: No:
2011-MN-0002

Version Control:
Version No 2.2

Effective Date:
April 01st, 2017

Revision Date:
April 2018

Hepatitis B and C (Plan wise coverage)

Adjudication Guideline



Abstract

For Members

Hepatitis is a disease that causes inflammation of the liver. Viral hepatitis, including hepatitis A, hepatitis B, and hepatitis C, are distinct diseases that affect the liver. Treatments for hepatitis also depend on the type, which is determined by confirmatory laboratory tests.

Treatment of Hepatitis B & C is covered only for those health insurance plans with the specific benefit, subject to policy terms and conditions.

For Medical Professionals

Treatment for hepatitis B and C is covered only for those health insurance plans with the specific benefit, subject to policy terms and conditions.

Approved by:
Daman

Responsible:
Medical Standards & Research

Related Adjudication rules:

- HCV adjunct therapy

Disclaimer

By accessing these Daman Adjudication Guidelines, you acknowledge that you have read and understood the terms of use set out in the disclaimer below:

The information contained in this Adjudication Guideline is intended to outline the procedures of adjudication of medical claims as applied by the National Health Insurance Company – Daman PJSC (hereinafter "Daman"). The Adjudication Guideline is not intended to be comprehensive, should not be used as treatment guidelines and should only be used for the purpose of reference or guidance for adjudication procedures and shall not be construed as conclusive. Daman in no way interferes with the treatment of patient and will not bear any responsibility for treatment decisions interpreted through Daman Adjudication Guideline. Treatment of patient is and remains at all times the sole responsibility of the treating Healthcare Provider. This Adjudication Guideline does not grant any rights or impose obligations on Daman. The Adjudication Guideline and all of the information it contains are provided "as is" without warranties of any kind, whether express or implied which are hereby expressly disclaimed. Under no circumstances will Daman be liable to any person or business entity for any direct, indirect, special, incidental, consequential, or other damages arising out of any use of, access to, or inability to use or access to, or reliance on this Adjudication Guideline including but without limitation to, any loss of profits, business interruption, or loss of programs or information, even if Daman has been specifically advised of the possibility of such damages. Daman also disclaims all liability for any material contained in other websites linked to Daman website.

This Adjudication Guideline is subject to the laws, decrees, circulars and regulations of Abu Dhabi and UAE. Any information provided herein is general and is not intended to replace or supersede any laws or regulations related to the Adjudication Guideline as enforced in the UAE issued by any governmental entity or regulatory authority, or any other written document governing the relationship between Daman and its contracting parties.

This Adjudication Guideline is developed by Daman and is the property of Daman and may not be copied, reproduced, distributed or displayed by any third party without Daman's express written consent. This Adjudication Guideline incorporates the Current Procedural Terminology (CPT®), which is a registered trademark of the American Medical Association ("AMA") and the CPT codes and descriptions belong to the AMA. Daman reserves the right to modify, alter, amend or obsolete the Adjudication Guideline at any time by providing one month prior notice.

Hepatitis B and C (Plan wise coverage)

Scope

The scope of this guideline is to list the plan wise coverage of Hepatitis B and C.

Adjudication Policy

Eligibility / Coverage Criteria

The coverage of treatment for hepatitis B and C for the various Daman plans are shown in the table below and it is subjected to policy SOB`s.

Daman Plans	Coverage of Treatment of Hepatitis B & C	Mode of Payment
Visitors plan	Not covered	NA
Basic plan	Not covered	NA
Enhanced Sahtak Plan	Not covered	NA
Enhanced Sahtak UG Plans	Not covered	NA
Enhanced Series except Plus plans	Not covered	NA
Enhanced Platinum Plus Enhanced Gold Plus Enhanced Silver Plus	Covered (Maximum Annual limit of AED 50,000 PPPY)	Reimbursement as per SOB
Core Series	Not covered	NA
Thiqa	Covered	Direct billing as per SOB
Premier/ Premier DNE	Covered	Direct billing as per SOB
Thiqa top up plans Premier TC1 Premier TC2 Premier TC3 Premier TC4 Enhanced Platinum Plus TC1 Enhanced Platinum Plus TC2 Enhanced Platinum Plus TC3 Enhanced Platinum Plus TC4 Enhanced Gold Plus TC1 Enhanced Gold Plus TC2 Enhanced Gold Plus TC3 Enhanced Gold Plus TC4 Enhanced Silver Plus TC1 Enhanced Silver Plus TC2 Enhanced Silver Plus TC3 Enhanced Silver Plus TC4 Enhanced Bronze TC1 Enhanced Bronze TC2 Enhanced Bronze TC3 Enhanced Bronze TC4 TC Plus 2 TC Plus 3 TC Plus 4	Covered	Direct billing with pre Authorization as per SOB
Essential Benefits Plan	Not covered	NA

Hepatitis B and C (Plan wise coverage)

Select Series except Plus plans	Not covered	NA
Select Platinum Plus Select Gold Plus Select Silver Plus	Covered (Maximum Annual limit of AED 50,000 Per Person)	Reimbursement as per SOB
Secure Series	Not covered	NA
Care Series	Not covered	NA
Classic Series	Not covered	NA
CoGenio Series	Covered	Direct billing as per SOB
Customized plans	Will be covered only if mentioned in the SOB	As per SOB

Requirements for Coverage

ICD, CPT and drug codes must be coded to the highest level of specificity.

Non-Coverage

Treatment for hepatitis B and C is specifically excluded under some Daman administered health insurance plans. Some benefit plans include a maximum allowable benefit for annual limit for treatment of hepatitis B & C. When the maximum allowable benefit is exhausted, coverage will no longer be provided even if the criteria for medical necessity are met.

Payment and Coding Rules

Please apply HAAD payment rules and regulations and relevant coding manuals for ICD, CPT, etc.

Adjudication Examples

Example 1

Question: A 45 year old male patient (holding Abu Dhabi plan), diagnosed with hepatitis B, has been prescribed Lamivudine.

Answer: The treatment will not be covered for this patient, as it is a general exclusion of the policy.

Example 2

Question: An Enhanced Gold Plus plan holder diagnosed with HCV has been advised to undergo therapy with Pegylated interferon.

Answer: The treatment will be covered on reimbursement basis, up to a maximum limit of AED 50,000 PPPY.

Appendices

A. References

1. Daman General exclusion lists.
2. Daman Schedule of benefits

B. Revision History

Date	Change(s)
01-02-2011	V 1.0 Release
01-07-2013	V 2.0: - New template - New plan names added
15-07-2014	V 2.1 - Disclaimer updated as per system requirements - Restored original effective date
01-03-2017	V 2.2 - New plan names - ICD 9 and ICD 10 codes updated