QATAR NATIONAL HEALTHCARE CODING AND TERMINOLOGY STANDARDS

DIRECTIVE

MINISTRY OF PUBLIC HEALTH

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1. OVERVIEW

The Ministry of Public Health (MOPH) is embarking on a journey to transform the country's integrated care services. As part of this journey, the MOPH is implementing various national solutions, including National Health Information Exchange called the Qatar Health Information Exchange Hub (QHIE-Hub), Qatar Health Insurance Solution (QHIS), and Qatar Pharmaceutical Track and Trace System (QPTTS).

Healthcare Coding and Terminology Standards are the foundation for achieving semantic interoperability for sharing health information among Provider Systems and integrating health data with national solutions to provide better care to the public of Qatar.

This document addresses key questions: what are the key drivers for this directive, what scope, who pays for licenses, what are timelines, who authorize the directive, where to reach for any clarification, and definitions of key terms used in this document (see appendix).

2. SCOPE

This directive applies to all entities (public and private) that store, use, process, and/or exchange Patient's clinical data for the stated domains in the table below under section 4.

3. KEY DRIVERS FOR NATIONAL STANDARDS

- Improve overall care delivery and Patient outcomes
- Consistent definition and names of clinical data (e.g., diagnosis, medications, procedures, tests, clinical observations, etc.) across all entities
- Alleviate Patient safety risks (inconsistent usage of local codes may lead to inaccurate interpretation of the laboratory results, clinical observations, immunization, and allergies)
- Reduce duplicate laboratory tests and procedures, which results in improving Patient satisfaction, reducing Patient safety risks, and reducing the overall cost
- Improve clinical quality control across entities
- Enable comparability and analysis of consolidated clinical data and clinical measures
- Improve medical claims processing and reporting
- Enable data aggregators; HIEs rely on consistent and accurate clinical data for:
  - Improve care continuity across facilities
  - Improve clinical documentation
  - Improve public health reporting
  - Reliable data for population health initiatives
  - Reliable data for medical research
- Improve visibility into the controlled substance utilization and Pharmaceutical products movements (supply chain)
- Enable effective Pharmaceutical products recall
- Semantic interoperability is imperative to the success of local, regional and national surveillance
- Allow effective global communication on outbreaks

4. MANDATED NATIONAL STANDARDS

The following Coding and Terminology Standards have been acknowledged by the National eHealth Committee and approved by National eHealth Data Quality, Standards, and Policies sub-Committee. All the billing/insurance Coding Standards have been approved by the Qatar National Clinical Coding Committee (QNCC).

Domains		Mandated National Standard	Temporary/Interim Support[1]
Diagnosis	Administrative/Billing	ICD-10-CM	ICD-10-AM
	Clinical	SNOMED CT	
Laboratory	Clinical (Orders/Results)	LOINC	
	Billing	CPT	
Immunization	Clinical	CVX	
	Billing Vaccine	QNDC	
Allergy	Drug Allergies	QNDC	
	Food Substance/Environmental Allergies	SNOMED CT	
Procedure	Outpatient Services and Procedures	CPT	QACS
	Inpatient Services and Procedures	CPT	ACHI
	Other Medical Services (e.g., Medical Equipment and Supplies)	HCPCS	
Inpatient Grouper	Billing	IR-DRG	AR-DRG
Radiology/Imaging	Clinical (Orders/Results)	LOINC	
	Billing	CPT	
	Image Payload	DICOM	
Pharmacy	Drug Code / Classification (Clinical and Billing)	QNDC	
	Logistics (Pharma Products)	GS1 – GTIN	
Dental	Procedures (Clinical and Billing)	CDT	ASDSG
	Clinical Diagnosis	SNOMED CT (SNODENT Ref Set)	
Clinical Observation (e.g., Vitals)	Clinical	LOINC	

5. LICENSING

Most of the above Coding Systems (e.g., ICD-10-CM, LOINC, CPT) require users to abide by terms and conditions to use the content. Provider Systems and Payer Systems must refer to the official source of each Coding System to review the terms and conditions before using it.

MOPH will provide the licenses for the following Code Systems to Provider Systems and Payer Systems by **Q1 2023** (projected): **CPT, HCPCS, IR-DRG, SNOMED CT, CDT**
MOPH has already published Qatar specific National Standards: **QNDC, QACS** (formerly known as QOCS)
The following coding standards are free to use, ensuring users abide by terms and conditions to use the content: **ICD-10-CM, LOINC, CVX**

1 Temporary/interim Support to Coding standards is for period up to 3 years from the effective date of the mandate.

MOPH is publishing the implementation guides for the above Coding Domains, which describe the National Standards, sources to download the Code Systems, implementation approach, key activities and resources required for the implementation, official websites, and other resources.

6. KEY TIMELINES

6.1.   MANDATED NATIONAL CODING AND TERMINOLOGY STANDARDS

- Healthcare providers must start preparing their systems to participate in MOPH National Initiatives. The timeline for this mandate is effective as of January 1, 2023. The timelines for National Solutions are listed below.

6.2.   QATAR HEALTH INSURANCE SOLUTION (QHIS)

- Pertinent coding standards must be used for claims reimbursement. These standards include: ICD-10-CM/AM, CPT/ACHI, HCPCS, IR-DRG/AR-DRG, QACS, CDT/ASDSG, and QNDC.
- Timeline for insurance system go-live: Q1 2023 (projected)

6.3.   QATAR PHARMACY TRACK AND TRACE (QPTTS)

- Pertinent coding standards must be used for the Pharmacy Track and Trace system: QNDC and GS1 – GTIN (Pharma products).
- Timeline for Pharmacy Track and Trace system go-live: Q2 2023 (projected)

6.4.   QATAR HEALTH INFORMATION EXCHANGE – HUB (QHIE-HUB)

- All the above coding standards (see table above) must be used for Health Information Exchange based on the provider's scope of data sharing.
- Timeline for QHIE-Hub pilot go-live: Q2 2023 (projected)

6.5.   EHEALTH DATA STANDARD IMPLEMENTATION GUIDELINES

- The eHealth department has developed the Implementation Guides per data domain, which inform health systems about the National Standards and provide an explanation of how they are defined, used, licensed, and implemented. The Data Quality, Standards and Policy (DQSP) sub-committee has approved these guides.
- These guidelines will be published in Q1 2023

6.6.   MEDICAL CODING TRAINING SCHOOL

- Implementation of Medical coding standards will require upgrading the skills of clinical coders. Therefore, MoPH will invite proposals from interested parties to open/establish Medical Coding schools/institutions in the State of Qatar. The registered schools/institutes will train, certify professionals to work at all Healthcare Providers, Health Insurance Payors, and Authorities and build a human resource pool to meet the current and future medical coders and coding requirements in the State of Qatar.
- The medical coding training school scope document will be published in Q1 2023

7. APPROVAL AND ENDORSEMENT AUTHORITY

7.1. NATIONAL EHEALTH COMMITTEE AND NATIONAL EHEALTH DATA QUALITY, STANDARDS AND POLICIES SUB-COMMITTEE

The eHealth Department was established by Emiri Decree No.10 of 2016 Article 14, with the following responsibilities and functions (among many other functions):

- Proposing legislations and developing standards and regulations regarding the optimal usage of electronic environments to provide health services in the country, such as the confidentiality of personal health information and data, the method of storage and access to the system and coding
- Coordinating between the public health services providers to ensure harmony between their electronic systems to store and transfer information between them seamlessly

The National eHealth Committee and National eHealth Data Quality, Standards and Policies sub-Committee were established.

7.2. QATAR NATIONAL CLINICAL CODING COMMITTEE (QNCCC)

In accordance with Ministerial Decree no. 7 of 2022, amending ministerial decree no (15) of 2017 (Formation of Qatar National Clinical coding committee), the Health Financing and Insurance Department conducted Qatar National Clinical Coding Committee (QNCCC) meeting on August 28, 2022. The nominated members unanimously agreed and made the following recommendation on the implementation of

- Mandate the Insurance Data Set (IDS V5.0): IDS V 5.0 to be adopted as National Standard for Claims submission and remittance
- Mandate QNDC as a National Standard for Insurance. Qatar National Drug Code to be adopted as National Standard for Submission of Pharma and Drugs claims
- Mandate Administrative/Billing Coding National Standards

8. CONTACTS

Please reach out to the following respective contacts for questions and clarifications on any of the National Healthcare Coding and Terminology Standards.

8.1. HEALTH INSURANCE/BILLING DOMAINS

MedicalCoding@moph.gov.qa

8.2. CLINICAL DOMAINS

eHealth@moph.gov.qa

9. **APPENDIX**

9.1. GLOSSARY AND DEFINITIONS

Abbreviation	Full Name
ACHI	Australian Classification of Health Interventions
AR-DRG	Australian Refined - Diagnosis Related Groups
ASDSG	Australian Schedule of Dental Services and Glossary
CDT	Current Dental Terminology
CPT	Current Procedural Terminology
CVX	Vaccine Administered Code Set
DICOM	Digital Imaging and Communications in Medicine
DQSP	Data Quality, Standards and Policy
GS1 - GTIN	General Specifications - Global Trade Item Number
HCPCS	Healthcare Common Procedure Coding System
HCP	Healthcare Provider
ICD-10-AM	International Classification of Diseases, Tenth Revision, Australian Modification
ICD-10-CM	International Classification of Diseases, Tenth Revision, Clinical Modification
IR-DRG	International Refined - Diagnosis Related Groups
LOINC	Logical Observation Identifiers Names and Codes
MOPH	Ministry of Public Health
QHIE-Hub	Qatar Health Information Exchange Hub
QHIS	Qatar Health Insurance Solution
QNCCC	Qatar National Clinical Coding Committee
QNDC	Qatar National Drug Code
QACS	Qatar Ambulatory Categories Services
QPTTS	Qatar Pharmaceutical Track and Trace
SNODENT	Systematized Nomenclature of Dentistry
SNOMED CT	Systematized Nomenclature of Medicine - Clinical Terms

Term	Definition
Code System	A master catalog of a particular set of codes (e.g., CPT, LOINC, Local Code System). It is also known as the "Coding System".
Cross-maps	Mappings between two Code Systems (e.g., HCP Local Code System to LOINC).
Healthcare Provider Local Codes	A catalog of a particular set of codes developed to meet local system needs. These may or may not be linked to International or National Standards.
Healthcare Provider	A Healthcare Provider is a person or entity that provides medical care or treatment. Healthcare providers include doctors, nurse practitioners, midwives, radiologists, labs, hospitals, urgent care clinics, medical supply companies, and other professionals, facilities, and businesses that provide such services.
Local Code System	A catalog of codes that are developed without a National Standard.
National Standard	A standard mandated for the health sector to use for exchanging the Patient's medical information with other Healthcare Provider Systems and National Solutions.
Payer System	A system used by the health insurance company that sets service rates, collect payments, process claims, and pay provider claims. Payer Systems such as Insurance Benefit Systems, Claims Submission Systems, Adjudicating Systems, etc.
Provider System	A system used by the Healthcare Provider to provide health care services to the Patient (e.g., EMR, Lab System, Pharmacies).
Temporary/Interim Support	Temporary/interim Support to Coding Standards is for up to 3 years from the mandate's effective date.