



DALMOR

**MEDICAL ADMINISTRATION
TRAINING INSTITUTE**

COURSE OVERVIEW | STANDARDS AND GUIDELINES ON ICD10 CODING

Introduction

- ≡ The Coding and Funding of Medical Scheme Claims
- ≡ Acronyms and Abbreviations
- ≡ Master Industry Table

Module 1. South African Code of Ethics for Clinical Coders

- ≡ Coder's Ethical Principles
- ≡ Application of this Code

Module 2. Valid and Invalid Codes

- ≡ Introduction
- ≡ Valid Primary and Secondary Codes

Module 3. Sequencing Rule and Sequencing of ICD-10 Codes

- ≡ Introduction

Module 4. Coding Definitions

- ≡ Primary Diagnosis and Code
- ≡ Primary Malignancy

- ≡ Secondary Diagnosis and Codes
- ≡ Secondary Malignancy
- ≡ Maternity Codes
- ≡ Morphology Codes
- ≡ Combination Coding

Module 5. Clinical Validation Rules

- ≡ General Rules
- ≡ PMB Conditions
- ≡ Different ICD-10 codes on Different Claims
- ≡ Pre-authorisation versus Claims
- ≡ ICD-10 codes not appropriate for patient age
- ≡ ICD-10 codes not appropriate for patient gender

Module 6. ICD-10 code Rule for Claim Data Capturing and Submission

- ≡ General Rules
- ≡ Role of Software/PMA and Switching Companies
- ≡ PHISC Technical Document Part 1
- ≡ Data capturing on Practice Management Software
- ≡ Printing Paper Claims from PMA Software
- ≡ Submitting electronic claims from PMA Software
- ≡ Receipt of electronic claims by third parties
- ≡ Translation of claims and sending to medical schemes or administrators by third parties
- ≡ Receipt of electronic claims by medical schemes or administrators