

Enabling Provisions Notice pursuant to the implementation of the National Platform for Health Information Exchange Services (**nphies**)

General Circular Number 5 of 2021(GC 05-2021)

Subject of this General Circular	Monitoring and compliance: cut off dates for clinical coding mapping from non-standard to standard codes and service list validation
Applicability of this General Circular	This General Circular applies to all health insurance market participants providing health insurance products, health insurance services or healthcare services in the Kingdom of Saudi Arabia
Purpose of this General Circular	This General Circular announces cutoff date for clinical coding mapping by health care providers and validation of service list mapping by payers
Publication date	
This document replaces	Not applicable
This document has been replaced by	Not applicable
Effective date of this General Circular	Immediately upon publication
Grace period for compliance	11 March 2021

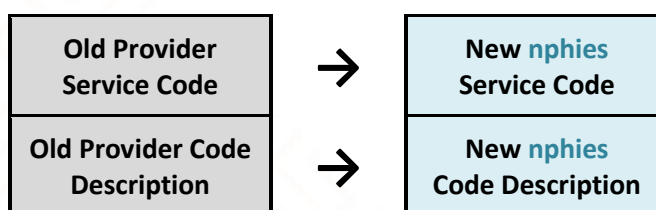
Objectives of this General Circular

- To confirm that **11 March 2021** is the deadline to send the mapped service code lists with **nphies** codes, which have been announced in the **provision PD02 - 2020** and have been modified in the **provision PD04 - 2020** for the Healthcare providers (HCPs), Health Insurance Companies (HICs), and Third-Party Administrators (TPAs).
- To confirm the deadline for Health Insurance Companies (HICs) and Third-Party Administrators (TPAs) to verify the mapped codes with **nphies** codes that have been updated by the healthcare providers.

What is the meaning of validating the updated service codes list which have been mapped to **nphies** codes?

After the Healthcare Provider (HCP) map their current internal codes with **nphies** codes, they shall send the updated list to the Health Insurance Companies (HICs) and Third-Party Administrators (TPAs) to complete the validation process. They will validate that the updated list is aligned to start their **nphies** transactions. Therefore, this exercise is for validating the new code mapping.

Below is an illustrative table showing the minimum data set that must be provided by the service provider to the Health Insurance Company and Third-Party Administrators:



The role of Healthcare Providers:

Healthcare Providers (HCPs) must submit their updated service codes list to the Health Insurance Companies (HICs) and Third-Party Administrators (TPAs).

The role of Health Insurance Companies (HICs) and Third-Party Administrators (TPAs):

Health Insurance Companies (HICs) and Third-Party Administrators (TPAs) must complete the validation of the updated service codes list.

Confirmation of completion of validation

Each **HIC and TPA** must complete the validation of the updated service codes lists of the HCPs. After that, they must notify CCHI of the completed validations by submitting the e-Forms that will be emailed to **nphies** champions during the validation period by **11 March 2021**.

Dealing with noncompliance

Noncompliance by health insurance market participants to complete the mapping process on **nphies** platform within the specified period will lead to applying the penalties mentioned in the implementation regulation of the Council of Cooperative Health Insurance.

For any enquiries related to this provision, please send an e-mail to the following address:
onboarding@cchi.gov.sa or contact **nphies** call center: 920004299