



Reference: COVID-19 Data Request  
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## Circular 29 of 2020: Claims information for beneficiaries treated for COVID-19

To measure and monitor the impact of coronavirus (COVID-19) on medical schemes and beneficiaries, the Council for Medical Schemes (CMS) requests medical schemes and exempted insurers providing indemnity products that are conducting the business of a medical scheme, to submit data for all cases of COVID-19. Beneficiaries suspected, diagnosed and treated for COVID-19 must be identified using the applicable ICD-10 code and the [NICD case definition](#).

### COVID-19 Case Definition

On the 2 April 2020, the NICD published the following definitions:

Confirmed cases: a person with laboratory confirmation (RT – PCR assay) of infection with the COVID-19 virus, irrespective of clinical signs and symptoms. Symptomatic cases are considered infectious from 2 days before symptom onset to 14 days after symptom onset.

Person under investigation: a person with acute respiratory illness with sudden onset of at least one of the following: cough, sore throat, shortness of breath or fever [ $\geq 38^{\circ}\text{C}$  (measured) or history of fever (subjective)] irrespective of admission status.

Probable case: a person under investigation (PUI) for whom the report from laboratory testing for the COVID-19 virus is inconclusive or who tested positive on an approved pan-coronavirus assay.

Furthermore, CMS' [benefit definition](#) on coronavirus recommends screening for the following high-risk patients as defined by the NICD:

- those who have an acute respiratory illness and who, in the 14 days prior to onset of symptoms, met at least one of the following epidemiological criteria:
  - Were in close contact with a confirmed or probable case of SARS-CoV-2 infection
  - Had a history of travel to areas with local transmission of SARS-CoV-2; (NB Affected countries will change with time, consult NICD [website](#) for current updates)
  - Worked in or attended a health care facility where patients with SARS-CoV-2 infections were being treated.
  - Admitted with severe pneumonia of unknown aetiology.

Updated case definitions may be found [here](#). Further COVID-19 Technical Resources may be found [here](#). COVID-19 is included in the list of Notifiable Medical Conditions (NMC), accessible [here](#).

#### Timing of data submissions and frequency of data submissions

It is envisaged that the bulk of COVID-19 related data will emanate from 01 February 2020, however, medical schemes and exempted insurers are encouraged to share any data preceding this period, should it exist. Medical schemes are requested to submit data to the CMS on a weekly basis through the [CMS' Web portal](#) and [XML Schema Definitions](#) starting from 16 April 2020.

Details on data specification and data layout are contained on the attached spreadsheet: [COVID-19 Data Specification](#). The data specification must be read in conjunction with the Healthcare Utilisation Annual Statutory Return Technical Guideline for the preparation of data Version 8.0 and [Circular 17 of 2020](#).

Medical schemes are requested to use the anonymised "unique person identifier" consistently. By sending new data using this field, previous records matching this field for a beneficiary will be deleted as it does not merge previous rows, it overwrites them.

Insurers that were granted exemption must use the provided [excel spreadsheet template](#) to submit data to the following email address: [Demarcationcovid19@medicalschemes.com](mailto:Demarcationcovid19@medicalschemes.com)

Officials from the CMS will be at hand to address all technical queries relating to this data request on the email: [covid19@medicalschemes.com](mailto:covid19@medicalschemes.com).

Your cooperation will be highly appreciated.

Yours sincerely,



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