RIZIV-INAMI

20/12/2023

Dear software vendors,

A new care trajectory has been designed for patients with diabetes. You will find more information about this trajectory on the website of RIZIV/INAMI on this place.

This new care trajectory implies an **impact on the software used by prescribers** (GPs) in private and group cabinets, to prescribe in first line (ambulatory) settings. The changes therefore do not apply to hospital, specialist or pharmacy software vendors.

Changes to be done by software providers **by 1/1/2024**:

1. The nomenclature code for general practitioners (private and group practices) will change: the nomenclature code for **pre-trajectory diabetes** (102852) should be rendered impossible for use in the facturation as of 1/1/2024. Instead, the new nomenclature codes for **start trajectory diabetes type 2** (400374) should be used.
2. For patients who attend medical houses (using a flat rate), the pseudo code for pre-trajectory diabetes (109594) should be rendered impossible for use as of 1/1/2024. Instead, the new pseudo codes (400396) should be used.
   Please note that NO transition period is provided for this.

Changes to be done by software providers **by 1/2/2024**:

3. In the options where the GP selects the reimbursement instructions for a medicinal prescription, a new option called “type 2 diabetes start-up process” should be added. This belongs to the minimum list of reimbursement options obligatory to be offered to prescribers in the field “instructionforreimbursement” as instructed in the technical instructions of Recip-e in the guideline called “Recip-e_contents-guidelines_Kmehr 1.28-1-VMN” (link).The list of other reimbursement instructions has been completed. The texts are as follows in FR and NL:

FR	NL
trajet de démarrage diabète type 2	Opstarttraject diabetes type 2

While these changes will not require a homologation process prior to 1/2/2024, please note that Recip-e might audit aspect n° 3 in the homologation process that is planned in Q2 2024 for all softwares.