

Leo Hohmann's Special Report: Medical Profession Implements WHO Digital Diagnosis Code for the Unvaxxed

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Guest post by Leo Hohmann

Doctors will be 'incentivized' by the government to start asking more questions about your vax status

A set of international codes are used by the medical industry for billing purposes under Medicare-Medicaid and the private insurance companies, but it's not just about billing.



These codes are part of the International Classification of Disease (ICD) system set forth by the United Nations World Health Organization and they're about to get far more invasive.

This system was originally created after World War II for the purpose of tracking the diagnosis of major diseases within a population. But over the years, there have been 11 major revisions, and with each revision the data being collected on each individual has become more precise and all-inclusive. And it's also become more coercive, to the point where it's become impossible for doctors to get reimbursed by insurance companies if they don't upload all the requested data points.

According to an [April 2016 article](#) in the *American Journal of Neuroradiology*, "Across the years, it has become an integral part of the payment infrastructure of the U.S. healthcare system along with the Current Procedural Terminology (CPT) coding system for medical procedures."

The ICD system really grew into an electronic data-mining beast with the passage by Congress of the Affordable Care Act (Obamacare) in 2012. The digitization of healthcare records was fully implemented with the upgrade to ICD-10 after two congressional delays in 2016.

Since then, there has literally been a numeric code created for almost any diagnosis you can think of, and some you would never think of (*Search "[crazy ICD-10 codes](#)" and you will see what I'm talking about*).

Fast forward now to April 2022. This is when the federal Centers for Medicare and Medicaid (CMS) announced a new code that anyone who is awake and aware of the growing medical tyranny should be concerned about. After some delays, the new code was rolled out in October 2022



and became available to nearly every medical clinic and hospital in January 2023.

What is this new code? It's **Code Number Z28.310**. This is the code for a very peculiar “diagnosis” since it's not a diagnosis at all, but an invasion of privacy and likely to be used against many people in the future. This is the code your doctor will log into the computer system that is accessed by government and private health insurers ***informing them of your Covid vaccine status.***

These are internationally recognized codes for very specific medical conditions for insurance and government purposes. They are accessible worldwide should you be overseas and have a health issue that needs to be treated.

I recently interviewed a fully licensed M.D., a physician who practices in a Midwestern state and has full hospital privileges. This doctor's name will remain anonymous because if it were to get out, he could end up losing his job. On January 12, he informed me that Code Z28.310 went live in his state.

“Yesterday (January 11) it showed up for the first time in any kind of hospital paperwork I'd seen,” the doctor told me.

If diagnostics aren't entered properly, a doctor may not get reimbursed. Now that this new code is officially required by government and private insurance providers, doctors will likely now be “incentivized” to ask about your vax status, he said. That means they get financial payouts whenever the government decides there's a “meaningful use” for this data.

I had no idea that doctors were being bought off in this way.



This system appears to be the way the military-industrial-biomedical complex will identify and separate out those who have submitted to their digital identification system, which starts with being “up to date” on your shots – endless shots. As the late Dr. Zev Zelenko and others have said, these continuous boosters will become a “gateway to transhumanism.”

The powers that be at the United Nations and World Economic Forum have a “need to know” when it comes to those who reject this demonic transitioning of the human race, which the transhumanists refer to as an “upgrade” to “humanity 2.0.”

“I’ve never used this diagnosis code, never would for any patient,” the doctor told me in a follow-up interview this week. “I never even knew it existed until last week.”

He explained that Z28.3 is the diagnostic code for being under-vaccinated generally, but it gets more specific from there.

“It’s non-specific,” the doctor explained. “But with Covid they added the 1 after the 3 (Z28.31), so Covid is the only vaccine they’re specific for. Then they added a second digit if you’re partially vaccinated and didn’t get any of the boosters.”

These codes could continue to get more specific to the point that they also log in codes for why you refuse Big Pharma’s ineffective and unsafe – but very profitable – injections.

The doctor told me he saw one patient’s diagnosis code that was specific for refusing the vaccine due to his schizophrenia.

“A lot of people with schizophrenia are paranoid of shots and different treatments, so his doctors were attributing him (as unvaxxed) on that



basis,” the doctor said.

So it doesn't take too much of an imagination to see how this system could be abused.

What about if you continually refuse your doctor-recommended vaccines? Could you end up being diagnosed with mental illness? The doctor I spoke with agreed that this is not far-fetched. And once you get diagnosed with a mental disorder, you can lose many of your constitutional rights. You essentially become a second-class citizen.

“You could technically get a diagnosis of schizophrenia from any medical doctor, but usually they will refer you to a psychiatrist to make that diagnosis,” he said.

And that's not the only thing to be concerned about with regard to this new diagnostic code.

Here's where it gets interesting. At the G20 Summit held a couple of months ago in Indonesia in November 2022, the leaders of the world's 20 largest economies issued a joint statement that called on the nations of the world to implement a global **digital vaccine passport** system, based on standards set by the WHO, which would force international travelers to have a digital vaccine passport ID on their mobile phone. Without it, you would not be “allowed” to travel outside your home country, unless of course you're an illegal migrant trying to get to the U.S. or Europe from an “undeveloped” or “under developed” country.

We also know, from a **Forbes magazine article** published in February 2022, that nearly half of the states in America had already at that point signed the contracts and laid the infrastructure to implement digital



vaccine passports, so this same system could eventually be used to control, or at least monitor, the travel of Americans outside of their states.

Then we have the World Economic Forum's push toward Smart Cities, recently rebranded as "**15-Minute Cities**," which would monitor and restrict travel outside of one's city. Are you following me here? A digital system is being put in place that would have the capability of essentially locking down entire populations at any given time. All that would be needed is a declaration of a "public health emergency of international concern," or of "regional concern" and the U.S and E.U. are trying their hardest to turn that authority over to the WHO in the form of a new pandemic treaty.

Eventually, as we have been informed by Yuval Noah Harari, a top adviser to Klaus Schwab and the World Economic Forum, the plan is to put this digital surveillance technology not just on your mobile phone but "under the skin."

The doctor in the Midwestern state explained a medical terminology called "meaningful use" and how it's used to log personally identifiable



data on medical patients.

“If you ever wondered why they try to get your blood pressure and your weight every time you go to the doctor’s office, it’s because hospitals and physicians get reimbursed if they provide ‘meaningful use’ data. They get reimbursed better. They get bonuses. Doctors have monthly meetings with staff and administrators and this is how they get reimbursed higher, they get more money, if they provide that meaningful use data.”

He further explained that if the ICD-10 coding system requires doctors to find out their patients’ Covid vax status as part of the “meaningful use” data, then they will add that to their office charts and they will get reimbursed handsomely for providing this information to the government.

“Every time you go to the doctor’s, they will try to get this information out of you,” he said.

The U.S. expanded its ICD system under the presidency of Barack Obama and the adoption of the Affordable Care Act. Previously, the U.S. used the ICD-9 system, which required less specific and less invasive information on patients, “but then with the ICD-10 system all of a sudden, they got real specified. Instead of just high blood pressure it became, is this high blood pressure caused by spending too much time with your mother-in-law or is it because of this other thing, whatever it may be. It became very specific.”

According to the government’s [CMS website](#):

“ICD-10 also includes significant improvements over ICD-9 in coding primary care encounters, external causes of injury, mental disorders, and preventive health. The ICD-10 code sets’ breadth and granularity reflect advances in medicine and medical technology, as well as capture added

detail on socioeconomic, ambulatory care conditions, problems related to lifestyle, and the results of screening tests.”

In other words, ICD-10 coding became a tool for extraordinary data mining of Americans’ personal life histories.

When ICD-10 was implemented, that’s when the AARP got the contract to administer the program in the U.S.

It also got more rigid.

“As a doctor, you have to use the ICD-10 system to get reimbursed,” my doctor source told me.

Even if you do not have government or private insurance and pay strictly out of pocket, each and every diagnosis is still logged into the system.

“If you have an interaction with the healthcare system, you will have an ICD-10 code logged and assigned to your condition,” he said. “And all that data goes into a central database that was created under Obama so that the Electronic Medical Record systems (EMR), can talk to each other.”

“Nobody else is talking about this,” he told me.

Obamacare forced all doctors to use the EMR system in order to get reimbursed.

“Because up until eight or ten years ago, a lot of doctors were still using paper charts. It’s all digitized now.”

In fact, according to the [WHO website](#), that U.N. body has already rolled out an “upgraded” **ICD-11 system** and is working to get nations to adopt it.



When the U.S. federal government adopted ICD-10, it subsidized the transition, offering interest-free loans and grants that many doctors' offices used to pay for the upgraded EMR software systems.

“There were hundreds of millions of dollars allocated, but then you had to allow the government to come in and access your books whenever they want,” the doctor said. “But now you can't get reimbursed unless you go through this system. Virtually every doctor is a part of this system now.”

Bottom line: Be aware of what information you hand over to your doctor, because they essentially all work for the government now. That's who they are beholden to for reimbursement. And if your doctor asks too many questions that seem unrelated to the health issue you're being treated for, you may want to fire them and find a new one.

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JIM HOTT IS THE FOUNDER AND EDITOR OF THE GATEWAY PUNDIT, ONE OF THE TOP CONSERVATIVE NEWS OUTLETS IN AMERICA. JIM WAS AWARDED THE REED IRVINE ACCURACY IN MEDIA AWARD IN 2013 AND IS THE PROUD RECIPIENT OF THE BREITBART AWARD FOR EXCELLENCE IN ONLINE JOURNALISM FROM THE AMERICANS FOR PROSPERITY FOUNDATION IN MAY 2016.

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