



**THE ORIENTAL INSURANCE COMPANY LIMITED  
HEAD OFFICE**

**CIRCULAR**

**Deptt:Health**

**21.07.2020**

**TO ALL ROs,DO's/BO's/EC's/IAD/IT/VIGILANCE/ OSTC-FARIDABAD**

**Re : Guidelines on various components related to COVID19 Claims**

COVID 19 pandemic has presented us with unprecedented challenges in terms of servicing & all the stakeholders be it Insurers, Network Providers, our Marketing Force or TPA's have hold fort to ensure optimal services are rendered to our Policyholders in these difficult times.

MOHFW/State Health bodies/IRDAI/GI Council have been modifying their directives on various aspects pertaining to COVID-19 Treatment based on the dynamics of the situation and our endeavor has been to keep the workforce updated of the same.

We are pleased to share consolidated advisories on various issues/components pertaining to COVID19 treatment to assist all stakeholders in servicing our Policyholders:

**1. COVID 19 TEST**

**A. FOR COVID POSITIVE PATIENTS :**

Sr. No.	COMPONENT	GUIDELINE
1	ADMISSIBILITY	Admissible
2	COST	As per State Negotiated Rates or Extant ICMR Guidelines, whichever is Lesser
3	FREQUENCY	As per Extant Clinical Management & Discharge Guidelines of Ministry of Health & Family Welfare (MoHFW)

**B. FOR NON COVID PATIENTS :**

Sr. No.	COMPONENT	GUIDELINE
1	ADMISSIBILITY	<ul style="list-style-type: none"> <li>❖ Wherever a COVID Test is prescribed to a Non-COVID patient by a treating Medical Practitioner/Doctor, same shall be considered as Pre-Hospitalisation or Hospitalisation expenses as per the terms &amp; conditions of the policy Contract.</li> <li>❖ Claim for Test shall become admissible only if the main Hospitalisation claim is admissible under the policy.</li> </ul>
2	COST	As per State Negotiated Rates or Extant ICMR Guidelines, whichever is Lesser
3	FREQUENCY	<b>1 Test per Insured during Policy Period</b> for all ailments including chronic/repetitive/Daycare treatments like dialysis and chemotherapy

**2. PERSONAL PROTECTIVE EQUIPMENT (PPE) KIT**

**A. FOR COVID POSITIVE PATIENTS :**

**i) NUMBER OF PPE's**

As per MoHFW guidelines, PPE consists of 7 components i.e Goggles, FaceShield, Mask, Gloves, Coverall/Gowns(With or Without Aprons),Head Cover & Shoe Cover. Each component & its Rationale use has been defined by MoHFW.A reference guide on Number of PPE based on General Duty

Schedule may be :

Sr. No.	OCCUPANCY	MAXIMUM NUMBER OF PPE
1	ISOLATION WARD	1 PPE PER DAY
2	SINGLE ROOM	2 TO 3 PPE PER DAY
3	ICU/CCU/VENTILATOR	4 TO 5 PPE PER DAY

ii) **COST OF PPE**

Based on extant directives of various State Health Authorities/Govt. Cost of PPE Set ( 7 Components) may be capped at :

INR 812 TO INR 1087 **OR**  
NET PROCUREMENT COST + UPTO 10% , **WHICHEVER IS LESSER.**

**B. FOR NON COVID PATIENTS**

Expenses for 1 PPE Kit Per Hospitalisation are admissible subject to the Fact that main Hospitalisation claim is admissible under the Policy. Cost as per Point No. 2.A.ii.

**GENERAL CONDITIONS :**

- ❖ Abovementioned references under 2.A are MAXIMUM ESTIMATED/CAPPED LIMITS wrt number & Cost of PPE's used during COVID treatment.
- ❖ Reasonable & Customary Clause is Applicable wrt use of Number of PPE's or Individual Components of PPE's.
- ❖ Usage of PPE must be in compliance of Extant MoHFW guidelines & Actual usage to be documented.
- ❖ Duty Roster of Hospital for COVID patients to be verified in order to arrive at Actual Usage of PPE's/Components thereof.
- ❖ Hospitals to be encouraged to use indigenous PPE Kits as per our Honourable Prime Minister's Appeal.
- ❖ Policy Terms & Conditions will be paramount while reimbursing Expenses for PPE/Components thereof.

**3. BILLING OF HOSPITALISATION EXPENSES FOR TREATMENT OF COVID19**

All our retail & group indemnity Health Insurance policies cover hospitalization expenses incurred on treatment of COVID19 subject to terms & conditions of the policy contract. Billing for such Expenses to be done as under (**Whichever is Lesser of 3.a & 3.b**) :

a) **GOVERNMENT PRESCRIBED PACKAGE RATES** (No Discount to be applied on Subsidised Rates) **OR**

b) **AS PER AGREED SCHEDULE OF CHARGES (SOC)** Where Government Rates are not available/applicable , **WHICHEVER IS LESSER**

**4. EXPENSES FOR TREATMENT OF COVID19 IN MAKESHIFT/TEMPORARY/EXTENDED HOSPITALS :**

A make shift/temporary/Extended Hospital permitted by State/Central Government shall be regarded as Hospital or Network Provider and **Hospitalisation** claims to be settled as per following norms:

- ❖ Where Policyholder who is diagnosed as COVID19 Positive is **admitted** into any such makeshift or temporary Hospital on the advice of a Medical Practitioner or appropriate Government Authorities, Notwithstanding the definition of Hospital specified in terms & Conditions of the Policy contract, treatment costs to be settled.
- ❖ Where Any Network Provider has set up any such make shift/temporary/Extended Hospital, such make shift/temporary/Extended Hospital shall be regarded as the extension of the Network Provider and cashless facility to be made available as per terms mentioned under 3 (a) & (b)

- ❖ In case of make shift/temporary/Extended Hospital set up by Network Provider, The Provider is required to ensure sufficient manpower (nurses & doctors) as per norms. Further, the attached hospital is also required to provide oxygen supply, either in the form of oxygen concentrator or oxygen cylinder, in the extended COVID Hospital in case a patient requires oxygen support.
- ❖ The Network hospital shall provide all consumables like PPE Kit, N95 Mask, gloves, medicines and equipment like pulse-oximeter, thermometer, oxygen concentrator/ cylinder, etc. They shall also make necessary arrangements to provide resuscitation services (equipment, drugs & medical consumables) in the extended COVID Hospital in case there is a rapid deterioration in the clinical condition of the patient.

## 5. EXPENSES FOR HOME CARE TREATMENT OF COVID POSITIVE PATIENTS

### A. STANDARD RETAIL/GROUP/BANCASSURANCE POLICIES

Our Retail & Standard Group indemnity Health Insurance Policies will cover Expenses incurred on Home Care treatment **only in case** such expenses qualify for reimbursement as per Definition of **Domiciliary hospitalization prescribed by IRDAI.**

### B. CORONA KAVACH POLICY

Home Care Treatment **is covered** under CORONA KAVACH POLICY & defined as :  
Treatment availed by the Insured Person at home for Covid on positive diagnosis of Covid in a Government authorized diagnostic Centre, which in normal course would require care and treatment at a hospital but is actually taken at home maximum up to 14 days per incident provided that:

- ❖ The Medical practitioner advises the Insured person to undergo treatment at home.
- ❖ There is a continuous active line of treatment with monitoring of the health status by a medical practitioner for each day through the duration of the home care treatment.
- ❖ Daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained.
- ❖ Insured shall be permitted to avail the services as prescribed by the medical practitioner.
- ❖ In case the insured intends to avail the services of non-network provider claim shall be subject to reimbursement, a prior approval from the Insurer needs to be taken before availing such services.

In this benefit, the following shall be covered if prescribed by the treating medical practitioner and is related to treatment of COVID :

- ❖ Diagnostic tests undergone at home or at diagnostics Centre
- ❖ Medicines prescribed in writing
- ❖ Consultation charges of the medical practitioner
- ❖ Nursing charges related to medical staff
- ❖ Medical procedures limited to parenteral administration of medicines
- ❖ Cost of Pulse Oximeter, Oxygen cylinder and Nebulizer

## 6. QUARANTINE & ISOLATION EXPENSES – Not Payable

These advisories shall come into force **with immediate effect.** TPAs are being notified by HO directly. Regional Offices may also bring this to the notice of the TPAs at the local level for faster communication

**(Smita Srivastava)**  
**Deputy General Manager**