# युनाइटेड इंडिया UNITED INDIA

### UNITED INDIA INSURANCE COMPANY LIMITED

#### CIRCULAR

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HO/Health/CIR/10/2020-21

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Re: Non-Medical Expenditure related to 'Covid-19' and 'Non Covid-19' Treatments,
Diagnostic Tests incidental to these treatments and Home Care Treatment

The Coronavirus Pandemic has presented certain challenges in processing of Health claims. Expenses traditionally considered as 'Non-Medical' has become an essential and integral part of treatment, Covid-19 diagnostic test has become a medical protocol for Non-Covid-19 treatments and treatment itself is being administered in different facilities other than Hospitals.

Stakeholders including the policyholders, intermediaries, TPAs and Operating Offices have been seeking clarity on the above issues. Taking into consideration the evolving industry practice and the regulatory advises, the following guidelines are being issued.

#### 1. Non-Medical Expenditure (NME):

#### a. For Covid-19 Patients:

- i. The major component of NMEs is the Personal Protective Equipment (PPE). PPEs may be allowed up to the following limits for treatment of Covid-19 Patients:
  - 1. Treatment in 'Isolation Ward': Rs. 1,300 per diem
  - 2. Treatment in 'Twin Isolation Ward': Rs. 1,800 per diem
  - 3. Treatment in 'Single Room': Rs. 2,400 per diem
  - 4. Treatment in 'ICU': Rs. 2,600 per diem
- ii. Other expenditure towards hand wash, shoe cover, caps, gown, face mask and such similar items may be subsumed under the room rent / ICU charges limit. Wherever the room rent / ICU charges are on actual basis, the same may be allowed with a co-pay of 50%.

#### b. For Non-Covid-19 Patients:

- Expenditure towards PPEs, hand wash, shoe cover, caps, gown, face mask and such similar items may be subsumed under the room rent / ICU charges limit.
   Wherever the room rent / ICU charges are on actual basis, the same may be allowed with a co-pay of 50%.
- ii. RT-PCR or any other approved test for 'Covid-19' may be allowed to Non-Covid-19 persons as per the rates approved by the State / UT Administration / Appropriate Government Authority up to a maximum of Rs. 3,000 provided the test is done as per medical protocol while availing hospitalization treatment for

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- a Non-Covid-19 ailment / disease / injury. The expenses shall become admissible only if the primary claim is admissible under the policy.
- iii. The above expenses as mentioned in clause 1.b.ii shall be admissible only once for chronic / repetitive treatments like dialysis and chemotherapy.
- c. Where, the policy already has 'Non-medical Expenses' as an Add-on cover, the Insured may be given a choice to prefer a claim under the said Add-on cover of the policy or as per the above provision.
- 2. Hospitalization: Treatment for COVID-19 is regulated by various government agencies / authorities. The policy shall cover treatments availed by insured members from hospitals / Isolation centers / community halls / schools / colleges / stadiums / railway coaches/ any other facility / make-shift or temporary hospital notified by the competent government authority to treat COVID-19. Treatments availed at these places shall be considered as hospitalization treatments.
- 3. Home Care Treatment: All our Retail and Group Health (excluding Government Schemes) shall cover 'Home Care Treatment'. Government Schemes shall continue to be governed by the Scheme as it is without any change. The coverage, terms, and conditions for 'Home Care Treatment' is given below. No specific endorsement needs to be passed on the policy to give effect to this cover.
  - a. Home Care Treatment means Treatment availed by the Insured Person at home for Covid-19 on positive diagnosis of Covid-19 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:
    - i. The Medical Practitioner advises the Insured Person to undergo treatment at home
    - ii. 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
    - iii. Daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained.
    - iv. Insured shall be permitted to avail the services as prescribed by the Medical Practitioner. Cashless facility shall be offered under home care expenses if the treatment is through a network provider.
    - v. 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 / TPA needs to be taken before availing such services.
  - b. In this benefit, the following shall be covered if prescribed by the treating Medical Practitioner and is related to treatment of COVID:
    - i. Diagnostic tests undergone at home or at diagnostics center
    - ii. Medicines prescribed in writing
    - iii. Consultation charges of the medical practitioner
    - iv. Nursing charges related to medical staff
    - v. Medical procedures limited to parenteral administration of medicines

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- vi. Cost of Pulse Oximeter, Oxygen cylinder and Nebulizer
- c. The benefit under this clause is limited to Rs. 15,000 per incident.
- d. Where, the policy already has 'Domiciliary Hospitalization' cover, the Insured may be given a choice to prefer a claim under the said Domiciliary Hospitalization cover of the policy or as per the above provision.
- e. The claim intimation clause should be adhered to.
- **4. Treatments at Private Facilities:** There are requests from clients seeking approval for taking treatments at private centers such as hospital-hotel tie ups.
  - a. Where any network provider has set up any such make-shift or temporary hospital, such make-shift or temporary hospital shall be regarded as the extension of the network provider and cashless facility shall be made available.
  - b. Treatments at locations / facilities not specifically approved / authorized by the concerned Government authority to treat Covid-19 shall not be admissible as a claim under a policy.
- 5. Quarantine: Quarantine is a restriction on the movement of those who may have been exposed to a communicable disease but do not have a confirmed medical diagnosis. Quarantine can be an 'Institutional Quarantine' generally maintained by the public authorities. People with travel history are normally lodged in such facilities. It can be a private facility like hotels, etc. People who do not wish to stay in Institutional Quarantine facilities may opt for private facilities. It can also be a home quarantine. As Quarantine is done only to restrict movement of persons who do not have a confirmed medical diagnosis, the expenses in case of Quarantine are not covered.

The TPAs are being notified by HO directly. The ROs / OOs may also bring this to the notice of the TPAs at the local level for faster communication.

This circular will be applicable retrospectively for all Covid-19 claims and shall remain effective till three months from the date of its issuance.

R C Agrawal

Dy. General Manager