

To All General and Health Insurers (except ECGC & AIC)**Ref:** IRDAI/HLT/REG/CIR/163/06/2020**Date:** 26-06-2020**Guidelines on Covid Standard Health Policy****To****All General and Health Insurers (except ECGC & AIC)****Guidelines on Covid Standard Health Policy****A. Preamble:**

1. In view of the global pandemic Covid 19, the Authority has decided to mandate all general and health insurers to offer Individual Covid Standard Health Policy with the following objectives:
 - To have a Covid specific product addressing basic health insurance needs of insuring public related to Covid.
 - To have a standard product with common policy wordings across the industry
2. Towards this, the following Guidelines on Covid Standard Health Policy are issued under the provisions of Section 34 (1) (a) of Insurance Act, 1938.
3. All general and health insurers shall offer the Covid Standard Health Policy by duly complying with the following guidelines.
4. The Covid Standard Health Policy shall have One Basic mandatory cover as specified in these Guidelines which shall be uniform across all General and Health Insurers.

5. One Optional Cover specified in these Guidelines, shall be offered along with the Covid Standard Health Policy within the sum insured. The total amount payable in respect of Covers B (I) (11) (12) (13) (14) (15) and B(II) (18) shall not exceed 100% of the Sum Insured during a policy period. The premium payable towards this Optional Cover shall be specified separately so as to enable policyholders to choose and pay based on the need.
6. The insurer may determine the price keeping in view the covers proposed to be offered subject to complying with the norms specified in the IRDAI (Health Insurance) Regulations, 2016 and Guidelines notified there under.
7. The Base Cover of Covid Standard Health Policy shall be offered on Indemnity basis whereas Optional Cover shall be made available on Benefit Basis.
8. The Covid Standard Health Policy shall offer a policy tenure of three and half months (3 ½ months), six and half months (6 ½ months), and nine and half months (9 ½ months) including waiting period.
9. Every General and Standalone Health Insurer, who has been issued a Certificate of Registration to transact General and/or Health Insurance Business, shall mandatorily offer this product. However, if any insurer is currently not offering health insurance products at all, the above stipulation will not apply to those.
10. The Covid Standard Health Policy shall comply with all the provisions of Insurance Regulatory and Development Authority of India (IRDAI) (Health Insurance) Regulations, 2016, all other applicable Regulations, Guidelines on Standardization in Health Insurance (Ref: IRDA/HLT/REG/CIR/146/07/2016) dated 29th July, 2016, Guidelines on Product Filing in Health Insurance Business (Ref: IRDA/HLT/REG/CIR/150/07/2016) dated 29th July,

2016, Guidelines on Standardization of Exclusions in Health Insurance Contracts (Ref: IRDAI/HLT/REG/CIR/177/09/2019) dated 27th September, 2019 and other applicable Guidelines as amended from time to time.

B. Construct of Covid Standard Health Policy: The Covid Standard Health Policy shall offer the following:

I. Base cover:

11. **COVID Hospitalization Expenses:** The Hospitalization expenses incurred by the insured person for the treatment of Covid on Positive diagnosis of Covid in a government authorized diagnostic centre. This section shall cover the following:

- a) Room, Boarding, Nursing Expenses as provided by the Hospital / Nursing Home.
- b) Surgeon, Anesthetist, Medical Practitioner, Consultants, Specialist Fees (including consultation through telemedicine as per Telemedicine Practice Guideline of 25th March 2020) whether paid directly to the treating doctor / surgeon or to the hospital.
- c) Anesthesia, blood, oxygen, operation theatre charges, surgical appliances, ventilator charges, medicines and drugs, costs towards diagnostics, diagnostic imaging modalities, PPE Kit, gloves, mask and such other similar expenses

(Expenses on Hospitalization for a minimum period of 24 hours are admissible.)
- d) Intensive Care Unit (**ICU**) / Intensive Cardiac Care Unit (**ICCU**) expenses.
- e) Expenses incurred on road Ambulance subject to a maximum of Rs.2000/- per hospitalization.

12. **Home Care Treatment Expenses:** Insurer shall cover the costs of treatment of COVID incurred by the Insured person on availing treatment at home maximum up to 14 days per incident provided that:

- a) The Medical practitioner advises the Insured person to undergo treatment at home.
- b) 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.
- c) Daily monitoring chart including records of treatment administered duly signed by the treating doctor is maintained.
- d) Insured shall be permitted to avail the services as prescribed by the medical practitioner. Cashless or reimbursement facility are offered under homecare expenses subject to claim settlement policy disclosed in the website of the Insurer.
- e) 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. Insurer shall respond to approval request within 2 hrs of receiving the last necessary requirement.

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

- a. Diagnostic tests undergone at home or at diagnostics centre
- b. Medicines prescribed in writing
- c. Consultation charges of the medical practitioner
- d. Nursing charges related to medical staff
- e. Medical procedures limited to parenteral administration of medicines
- f. Cost of Pulse oximeter, Oxygen cylinder and Nebulizer

Subject to other terms, conditions and exclusions of the policy, expenses payable during the Policy period shall not in aggregate exceed the maximum Sum Insured as specified in the Policy Schedule against this Benefit.

13. AYUSH Treatment: The Medical expenses incurred on hospitalization under AYUSH (as defined in IRDAI (Health

Insurance) Regulations, 2016) systems of medicine for the treatment of Covid on Positive diagnosis of Covid in a government authorized diagnostic centre shall be covered up to the Sum Insured without any sub-limits.

14. **Pre-Hospitalization** medical expenses incurred for a period of 15days prior to the date of hospitalization/home care treatment following an admissible claim under this policy shall be covered. Pre hospitalization expenses shall also cover the costs of diagnostics towards Covid.
15. **Post-Hospitalization** medical expenses incurred for a period of 30days from the date of discharge from the hospital/completion of home care treatment, following an admissible claim under this policy shall be covered.
16. No deductibles are permitted in this product.
17. The Policy shall include the cost of treatment for any comorbid condition including pre-existing comorbid condition (s)along with the treatment for Covid.

II.Optional cover:

18. **Hospital Daily Cash:** The Company will pay 0.5% of sum insured per day for each 24 hours of continuous hospitalization for treatment of Covid following an admissible hospitalization claim under this policy.

The benefit shall be payable maximum up to 15 days during a policy period in respect of every insured person.

C. Other Norms applicable:

Sl.No	Particulars	Norms Applicable
1.	Plan Variants	No plan variants are allowed.
2.	Distributions Channels	Covid Standard Health Policy may be distributed across all distribution channels including Micro Insurance

		<p>Agents, Point of sale persons and Common Public Service Centres.</p> <p>Distribution of Covid Standard Health Policy shall be governed by the regulations of concerned distribution channels.</p> <p>In addition to the number of products allowed to be marketed as per IRDAI circular ref: IRDAI/INT/ CIR/ PSP/ 019/01/2020 dated 13th January, 2020 "Covid Standard Health Policy" is also allowed to be marketed by Point of Sale.</p>
3.	Family Floater	Covid Standard Health Policy shall be offered on family floater basis also.
4.	Definition of family	<p>Family consists of the proposer and any one or more of the family members as mentioned below:</p> <p>(i) legally wedded spouse.</p> <p>(ii) Parents and Parents-in-law.</p> <p>(iii) dependent Children (i.e. natural or legally adopted) between the day 1 of age to 25 years. If the child above 18 years of age is financially independent, he or she shall be ineligible for coverage.</p>
5.	Category of Cover	The Base Cover of Covid Standard Health Policy shall be offered on indemnity basis whereas Optional Cover shall be made available on Benefit Basis.
6.	Minimum and Maximum Sum Insured	<p>The minimum sum insured under Covid Standard Health Policy shall be Rs 50,000/- (Fifty Thousand only)</p> <p>Maximum limit shall be Rs 5,00,000/-(5 Lakh) (in the multiples of fifty thousand)</p>
7	Policy Period	Covid Standard Health Policy shall be offered with a policy term of

		three and half months (3 ½ months), six and half months (6 ½ months) and nine and half months (9 ½ months) including waiting period.
8	Modes of premium payment	Single premium
9.	Entry age	<p>Minimum entry age shall be 18 years for principal insured and maximum age at entry shall not be less than 65 years for all the insured members including principal insured.</p> <p>Dependent Child / children shall be covered from Day 1 of age to 25 years subject to the definition of 'Family'.</p>
10.	Benefit Structure	The benefit pay out should be explicitly disclosed in the format of application (Form – IRDAI-UNF-SCHP) along with other relevant documents.
11.	Underwriting	<p>The insurer shall specify the non-medical limit and relevant details explicitly in the format specified.</p> <p>5% discount in premium shall be provided to health care workers.</p>
12.	Renewal, Portability and Migration	Lifelong renewability, migration and portability stipulated under Regulation 13 and 17 of IRDAI (Health Insurance) Regulations, 2016 respectively are not applicable.
13.	Pricing	The premium under this product shall be pan India basis and no geographic location / zone based pricing is allowed.
14.	Comorbid Conditions	The Policy shall include the cost of treatment for any comorbid condition including pre-existing

		comorbid condition(s) along with the treatment for Covid.
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D: Construct of Terms and Conditions for Covid Standard Health Policy:

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19. The Policy Terms and Conditions of the Covid Standard Health Policy shall be in the format specified in Annexure – 1. Insurer may suitably modify the definitions and other clauses of the policy contract prospectively based on the Regulations or Guidelines that may be issued by the Authority from time to time.

E: Other Norms:

20. The nomenclature of the product shall be Corona Kavach Policy, succeeded by name of insurance company, (Corona Kavach Policy,). No other name is allowed in any of the documents.

21. The Proposal Form used for the product shall be subject to the norms specified under the Guidelines on Product Filing in Health Insurance.

22. Insurers shall mandatorily issue Customer Information Sheet as per the format specified in Annexure-2.

23. The Covid Standard Health Policy may be offered as MICRO Insurance Product subject to Sum Insured limits specified in IRDAI (Micro Insurance) Regulations, 2015, and other circulars / guidelines issued in this regard by the Authority from time to time.

24. The Covid Standard Health Policy shall be launched without prior approval of the Authority subject to complying with the following conditions.

- a. The product shall be approved by the Product Management Committee.
- b. Insurers shall obtain UIN for the Covid Standard Health Policy by filing the relevant particulars in Form – IRDAI-UNF-SCHP (as specified in Annexure – 3 of these Guidelines) along with a

certificate from Chief Compliance Officer that the product filed is in compliance with the norms specified under these guidelines.

- c. On review of the application, the Authority may call for such further information as may be required and may issue suitable directions which shall be retrospectively effected in respect of all contracts issued under this product.

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25. General and Health Insurers shall ensure that this product is compulsorily offered on or before 10th July, 2020.

26. In terms of the provisions of Regulation 4(iii) of IRDAI (Issuance of e-Insurance Policies) Regulations, 2016 providing policy document in physical form is mandatory when policies are issued in electronic form directly to the policyholders. Since features of Corona Kavach Policy shall be common across the industry and as the terms and conditions of the policy are specified by the Authority, with the objective of reducing the operating costs and to pass on this benefit of reduced operational cost to the policyholders by way of affordable premiums, insurers are allowed to issue the policy contract of Corona Kavach Policy in electronic / digital format. The digital form of the policy contract may be forwarded through email or a link shall be provided in the certificate of insurance. However, where policyholder specifically seeks the physical form of the policy contract, the same shall be provided by the insurer.

27. Every insurer offering Corona Kavach Policy shall provide a certificate of insurance to the policyholder indicating the availability of health insurance coverage. The certificate shall have a reference to access detailed terms and conditions of the policy contract. Insurers shall also clearly mention policy period (Policy Start Date to Policy End Date), effective policy period (from end of waiting period to end of policy period), waiting period (policy start date to end of policy period) in the Certificate of Insurance.

28. In terms of Clause 5 of Guidelines on short term health insurance policies Ref: IRDAI/HLT/REG/CIR/156/05/2020

dated 23rd June, 2020, the policies issued under these guidelines will remain valid till 31st March, 2021.

29. This has the approval of Competent Authority.

(DVS Ramesh)
General Manager

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