

No.: .....

Reference No.: 1733/1439/3531/

Date: .....

Date: 17/11/1439 H (30/07/2018 G)

Attachments: .....

Attachments: 16 connected attachments

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### **Urgent Circulation**

#### **To All Qualified Companies and Accredited Healthcare Service Providers**

In reference to the Cooperative Health Insurance Law and Executive Regulations thereof, the Unified Health Insurance Policy amended by Ministerial Decision No. (1R/18/3), dated (12/05/1439 H) (29/01/2018 G); based on what has been observed during field visits to insurance relationship parties, as well as the consideration of complaints submitted to the CCHI about the noncompliance of some insurance relationship parties with the Council's Laws and instructions; and in confirmation of the CCHI's continuity, represented by the General Secretariat thereof, to make constant updates to all that serve the insured and to develop the relationship between insurance relationship parties, the General Secretariat of the CCHI would like to confirm the necessity to comply with the following:

#### **First: Endured Rate (Co-Payment) Specified in the Unified Health Insurance Policy of the Cooperative Health Insurance Law:**

Upon the issuance of the health insurance policies, the insurance companies shall adhere to the endured rates (co-payment) for each insurance category as long as they are stipulated by contracting and within the unified health insurance policy. Consequently, employers or insurance companies may not add any other endured rates, and health insurance companies shall print endured rates on health insurance cards in accordance with what is agreed upon with employers. Such rates are as follows:

#### **Deductible:**

MPN: (0-20%) Max 75 SR

OHN: (0-20%) Max 300 SR

OCN: (0-20%) Max 100 SR

- A. Mandatory Provider Network (MPN).
- B. Outside Hospital Network (OHN).
- C. Outside Complex Network (OCN).

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**Second: Endured Rate Amount (Co-Payment) Calculation Mechanism:**

The insured shall pay the endured rate amount (if any) set out in the policy according to the contract of the healthcare service provider with the insurance company. Therefore, the healthcare service provider shall calculate the deductible amount on the insured from the net cost of services after calculating the discounts that the insurance companies receive, not the gross cost thereof.

**Third: Replacement of Healthcare Service Provider from MPN:**

- A. Insurance Companies may not, after issuing the policy to the employers, remove or replace any healthcare service provider from the medical network specified thereto during the policy validity period unless they find a clear violation by the healthcare service provider in providing the services, such as fraud or when terminating the contract by the healthcare service provider; provided that the latter provides a replacement thereof with the same level and coordinate with policyholders, taking into account the specified warning period and cancellation terms stipulated in the concluded contract therebetween. If a service provider is removed from the MPN, it shall continue to receive valid policies previously approved therefor until the date of expiry thereof.
- B. Insurance companies shall notify the CCHI upon the replacement of service providers from an insurance category to another.

**Forth: MPN Inclusion by Insurance Companies:**

Insurance companies shall include the MPN and contact numbers therewith on websites thereof and shall periodically update the same.

**Fifth: Update the Enduring Treatment Costs Approval Application Forms (UCAF/DCAF):**

- A. DCAF2.0 and UCAF2.0 amended forms related to enduring treatment costs approval application standards shall be applicable as from 01/10/2018. Furthermore, accredited service providers shall be required to have patients' signatures on such forms in case they are filled on papers.

**(Handwritten Signature)**

Kingdom of Saudi Arabia  
Council of Cooperative Health Insurance (CCHI)  
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**Sixth: Screening Urgent Cases to which Endured Rate (Co-Payment) Is Inapplicable:**

The endured rate (co-payment) shall not be collected from the insured in urgent cases of (1- Urgent resuscitation, 2- Emergency, 3- Urgent) levels of urgent medical care levels. It can also be referred to the annex attached to the Private Health Institutions Law and its Regulations approved by the Ministry of Health (MOH), which specifies according to the urgent cases screening link on MOH portal:

<https://www.moh.gov.sa/eServices/Licences/Documents/22.pdf>

**Seventh: Patients Free Follow Up within at Least 14 Days for the Same Case:**

Healthcare service providers shall provide free follow up to the patient within at least 14 days for the same case diagnosed in the first check-up pursuant to Article (4/7) of the Executive Regulations of the Private Health Institutions Law issued by the Ministerial Decree No. (1019377), dated (28/05/1439 H) (14/02/2018 G), which stipulates that “private health institutions shall provide free follow up to patients within at least 14 days for the same cases diagnosed in the first check-up.”

Therefore, the General Secretariat of the CCHI, out of its concern for the quality of medical services provided to the insured, expects all qualified companies and service providers to comply with the above-mentioned, knowing that such compliance will be followed up through several means including field visits by field visit team, continuous awareness messages to be sent to the insured by the CCHI, as well as complaints that are submitted to the CCHI, and the appropriate actions will be taken regarding non-compliance therewith.

Best regards...

**Secretary-General**

(Handwritten Signature)

**Muhammad bin Suleiman Al-Hussein**