

General Circular pursuant to the Health Insurance Law (No 11 of 2013) of the Emirate of Dubai

General Circular Number 6 of 2015 (GC 06/2015)

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| Subject of this General Circular | Enforcement of the Health Insurance Law as it applies to resident expatriates by linkage to the visa application system |
| Applicability of this General Circular | This General Circular is relevant to the following: <ul style="list-style-type: none"> All insurance companies holding a Dubai Health Insurance Permit All health insurance claims management companies (TPAs) holding a Dubai Health Insurance Permit All employers who sponsor individuals on a Dubai Residence Visa (including Free Zone established entities) All health insurance intermediaries holding a Dubai Health Insurance Intermediary Permit |
| Purpose of this General Circular | To advise all concerned parties of the imminent implementation program to ensure compliance with the Law |
| Authorised by | Dr Haidar Al Yousuf, Director, Health Funding Department |
| Drafted by | Robin Ali, Consultant, Health Funding Department |
| Publication date | 16 June 2015 |
| This document replaces | Not applicable |
| This document has been replaced by | Not applicable |
| Effective date of this General Circular | Immediately upon publication |
| Grace period for compliance | None |

Preamble

The Law was signed in November 2013 becoming effective in February 2014. The implementation plan consisted of three deadlines based upon workforce size of each company as follow:

- Phase 1: 31 October 2014 for all companies employing more than 1000 employees
- Phase 2: 31 July 2015 for all companies employing more than 100 and up to 1000 employees
- Phase 3: 30 June 2016 for companies employing up to and including 100 employees and all spouses, dependents and domestic staff

Please note that the above are **deadlines** and **not** commencement dates. The commencement date for all phases began with the implementation of the Law

Method of enforcement

To ensure that all sponsors comply with their responsibilities, Health Funding Department (HFD) has partnered with GDRFA so that no new visa will be issued or an existing one renewed where the individual concerned does not have health insurance coverage in place at the time of visa application or renewal

Responsibilities

Insurance companies, health insurance claims management companies (TPAs) and employers and other sponsors all have responsibilities to ensure the smooth implementation of the enforcement process (see **Appendix B** to this General Circular)

Timelines

The enforcement system will become live on 1 August 2015 which coincides with the previous day's deadline for all Phase 2 employers. Therefore, all employers with more than 100 employees at the time of visa application or renewal will be tested for compliance beginning 1 August 2015

Definition of "workforce size"

HFD understands that GDRFA classifies size of workforce at the Trade License level, the company named on the Trade License usually being the sponsor. Occasionally, the classification may be at a group level where a number of subsidiaries share the same ultimate ownership and that ultimate owner is the sponsor. **Employers should check with GDRFA where the sponsor differs from the company specified on the Trade License to determine in which implementation Phase they fall**

Employers with changing workforce sizes

The GDRFA system is dynamic since the size of an employer's workforce at any particular time has implications for a number of legal and other requirements. Therefore an employer with currently, say, 90 employees need only comply before the end of Phase 3, i.e. 30 June 2016. However, should that employer's headcount exceed 100 before that deadline, the dynamic nature of the GDRFA system will reclassify that employer as a Phase 2 employer. This means that after the point where he crosses the 100 threshold, any subsequent visa applications will not be approved if the employee does not have insurance in place

The way it works

The GDRFA will check with HFD's electronic Member Register to see if an insurance plan exists. If it does, the application can proceed. If the individual cannot be found on the Member Register the application will be rejected.

The Member Register is populated by the insurance company based upon data supplied by the employer. It is therefore essential that employers supply in a timely manner all data requested by the insurer. It is also essential that the insurance company populate the Member Register on an almost real time basis (initially overnight updates will be required). (See **Appendix C** for the data required from employers and other sponsors)

The Member Register is a more robust and controlled replacement to the previous Person Register which was not widely populated due to employer's not providing the required data or insurance companies not updating it regularly

Both employers and insurance companies have responsibilities under the new system to play their part. If either does not then visa applications will be rejected

Parallel paper based system

Since many people holding insurance will not as yet be on the Member Register, insurers were instructed in November 2014 in Procedural Notice Number 2 of 2014 (PN 02/2014) to issue a paper Certificate of Health Insurance (CHI) (see **Appendix A** to this General Circular) in respect of each individual for which they issue health insurance cover

The Member Register will be fully operational by 1 October 2015. As sponsors take out insurance for the first time or as they renew their existing schemes, insurance companies will update the Member Register

However, this means that by updating and adding to the member register only as and when schemes fall due for renewal, it would take 12 months, i.e. until October 2016 before all members are on the register.

Therefore, to speed up the process, all insurers must populate the new Member Register with their existing member data for all schemes and individual policies with renewal dates falling from 1 January 2016 up to 30 September 2016. This update must be completed between the Member Register operational date of 1 October 2015 and 1 January 2016

Insurance companies should therefore begin collecting data as soon as possible allowing them just over 6 months to collect the data in respect of these schemes and 3 months to upload it before the deadline

Between now and 31 December 2015, where an individual is not discovered on the Member Register, GDRFA will ask to see the CHI for that individual

From 1 January 2016, the paper based system will end since all individuals will be discoverable on the Member Register

APPENDIX A

Insurance company
logo

Certificate of Health Insurance

شهادة التأمين الصحي

| | | |
|--|-------|---|
| Name of employer/sponsor | _____ | اسم صاحب العمل / الكفيل |
| Effective date of insurance policy | _____ | التاريخ الفعلي لبوليصة تأمين |
| Enrolment date for this insured member (if different to the above) | _____ | تاريخ قيد العضو المؤمن عليه (إذا كان مختلفاً عما سبق) |
| Insured member's full name | _____ | الاسم الكامل للمؤمن |
| Insured member's UID number | _____ | الرقم الموحد للمؤمن |
| Expiry date of insurance policy | _____ | تاريخ انتهاء بوليصة التأمين |
| Number of persons holding a visa under this employer/sponsor (complete as applicable) | _____ | عدد الأشخاص الذين يحملون تأشيرة صاحب العمل / الكفيل (تملاً حسب الحالة) |
| Lower salary band employees | _____ | شعبة الموظفين منخفضي الرواتب |
| Other employees | _____ | باقي شعب الموظفين |
| Total employees | _____ | العدد الاجمالي للموظفين |
| Spouses insured (if any) | _____ | أزواج المؤمن (إن وجد) |
| Dependents insured (if any) | _____ | أبناء المؤمن (إن وجد) |

This certificate confirms that the above named insured member has been provided with health insurance that meets or exceeds the minimum benefit levels as stipulated by Dubai Health Authority.
(This certificate is valid for 30 days from its issue date)

هذه الشهادة تؤكد أن العضو المؤمن أعلاه توفر له التأمين الصحي الذي يلبي أو يتجاوز المستوى الأدنى من منافع التغطية الصحية كما هو منصوص عليه من قبل هيئة الصحة في دبي.
(هذه الشهادة صالحة لمدة 30 يوماً من تاريخ الإصدار)

| | | |
|--------------------------|-------|-------------------|
| Authorised signatory | _____ | التوقيع المعتمد |
| Full name | _____ | الاسم بالكامل |
| Designation/job title | _____ | المسمى الوظيفي |
| Date of this certificate | _____ | تاريخ هذه الشهادة |
| Company stamp | _____ | ختم الشركة |

Appendix B Summary of responsibilities

Insurance companies (and Health insurance claims management companies (TPAs) where there is no insurance company involvement)

- To notify all Phase 1 and Phase 2 clients of the introduction of the insurance verification process linked to visa applications
- To collect all required data from employers and other sponsors for the purpose of the Member Register (whether directly or via a Health Insurance Intermediary)
- To update the Member Register on overnight runs with additions, deletions, new schemes
- To continue to issue CHIs in respect of every insured individual (and for members of any self-funded schemes they administer)
- To report to HFD any sponsor who it discovers has not complied with the Phase 1 or Phase 2 deadlines

Health insurance intermediaries

- To notify all Phase 1 and Phase 2 clients of the introduction of the insurance verification process linked to visa applications
- To collect all required data from client employers and other sponsors for the purpose of the Member Register or to allow the insurance company (or TPA where self-funded) direct access to the employer or other sponsor to do so
- Where the intermediary collects the data, to provide it to insurers (or TPA where self-funded) in a timely manner and in the format requested

Employers and other sponsors

- To ensure that where they intend to apply for a new or renew an existing visa they have health insurance cover in place for that individual(s) (applies to Phase 1 and Phase 2 employers only at present)
- To provide to insurers (or TPA where self-funded) or to its health insurance intermediary (e.g. broker, agent or consultant) all data required for the purpose of the Member Register in a timely manner and in the format requested
- To ensure that they are in possession of a Certificate of Health Insurance issued by the insurance company (or TPA where self-funded)

Appendix C

Data required from employers and other sponsors for Member Register

The following is an indication only of the fields required. A circular and schema will be issued showing exactly the descriptions of the required data and confirming which will be mandatory

| Person | Mandatory |
|---------------------|-----------|
| FirstName | Y |
| SecondName | Y |
| FamilyName | Y |
| ContactNumber | N |
| BirthDate | Y |
| Gender | Y |
| Nationality | Y |
| PassportNumber | Y |
| Marital Status | Y |
| Email | N |
| Emirate | Y |
| ResidentialLocation | Y |
| WorkLocation | Y |
| Salaryband | Y |
| Commission | Y |
| EmiratesIDNumber | Y |
| UIDNumber | Y |
| Member | |
| ID | Y |
| Relation | Y |
| RelationTo | Y |