

(Copy)

The Office of Insurance Commission

Registrar Order No. 32/2557

re: Requirement of Amendments to Format and Content of Insurance Policies, and
Requirement of Rider Indicating Increased Daily Compensation for Non-Admitted Patients
(Day Cases)

By virtue of the second paragraph of section 29 of the Non-Life Insurance Act, B.E. 2535, the Registrar issues its order with the following details.

Clause 1. This order is called "Registrar Order No. 32/2557 re: Requirement of Amendments to Format and Content of Insurance Policies, and Requirement for a Rider Indicating Increased Daily Compensation for Non-Admitted Patients (Day Case)."

Clause 2. This order will be effective from 19 September 2014.

Clause 3. In this order:

"Insurance Policy That Offers Daily Compensation" means an insurance policy, an insurance agreement, or a rider offering more coverage, and that indicates daily compensation as part of the insurance coverage, if the insured needs treatment at a hospital, a medical facility, or other treatment institution, whatever it is called;" and

"Rider" means a rider indicating increased daily compensation for non-admitted patients (day cases), in the format and content provided in the rider attached at the end of this order.

Clause 4. If the company Issues the **Insurance Policy That Offers Daily Compensation**, it must do one of the following:

- (1) it must amend, or add a statement to the content of the Insurance Policy That Offers Daily Compensation, with the statement in the Rider attached at the end of this order; or
- (2) it must issue a Rider to be attached thereto.

If the company is unable to perform the act prescribed in the first paragraph, it can issue insurance policies that offer daily compensation, and that have been approved by the registrar, until 15 November 2014. The format and content provided in the Rider attached at the end of this order are deemed part of those insurance policies.

Clause 5. The Rider is deemed part of the insurance policies that offer daily compensation, that were issued for the insured before this order became effective, and remain valid, regardless of whether the company has issued the Rider for the insured.

This order is issued on 19 September 2014.

- Signed -

(Mr. Pravej Ongartsittigul)

Secretary general of the Office of Insurance Commission,
the registrar

Remarks

This order is issued, because the advancement of medical diagnoses and treatment by surgery means that the insured who are under insurance policies that offer daily compensation may no longer need to stay overnight in hospitals or medical facilities. This order is issued to be fair to the insured.

Rider Indicating Increased Daily Compensation for Non-Admitted Patients (Day Cases)

It is agreed that this Rider indicates increased daily compensation in the case of the insured getting sick or having an injury that needs surgery, which would usually require the insured to be an inpatient in order to be eligible for the insurance coverage. However, thanks to medical advancement, certain diagnoses and treatments no longer require the patient to stay in hospital. Therefore, the Company will pay daily compensation of one day for the following surgical diagnoses or treatment, as if the insured were issued to an inpatient eligible for daily compensation:

1. extracorporeal shock wave lithotripsy (ESWL);
2. coronary angiograms / cardiac catheterization;
3. extra capsular cataract extraction with intra ocular lenses;
4. laparoscopy;
5. endoscopy;
6. sinus operations;
7. excision of breast masses;
8. bone biopsy;
9. amputation;
10. liver aspiration;
11. bone marrow aspiration;
12. spinal tap;
13. thoracentesis / pleuracentesis / thoracic aspiration / thoracic paracentesis;

14. abdominal paracentesis / paracentesis tapping;
15. curettage / dilatation & curettage / fractional curettage;
16. colposcopy / loop diathermy;
17. marsupialization of Bartholin's cysts; and
18. gamma knife treatment.

(The Company may add more treatments as appropriate, considering modern technologies.)

If the insured (an inpatient or an outpatient) needs at least two diagnoses or treatments due to the same disease or for the same reason, and each diagnosis or treatment is no more than days apart, they are deemed the same diagnosis or treatment.(maximum 90 days apart).

Any insurance coverage, exception, or condition to which this Rider is attached, and that does not contradict this Rider, remains in the same effect.