

Cancer Patient Support Program (BASMAH)

1. Introduction

Dubai Health Insurance Corporation (DHIC) under Dubai Health Authorities (DHA), as part of UAE 2021 vision and in alignment with Dubai Standards of Care has launched a Cancer Patient Support Program (BASMAH) with the objective to reduce cancer mortality in Dubai by the year 2021.

The Basmah program covers Cervical, Breast and Colorectal cancers.

Accordingly, Dubai Health Insurance Corporation under DHA (hereafter referred as DHIC) has updated the Table of Benefits of Essential Benefits Plan to ensure screening and treatment of cancer is seamlessly, equally and granted fairly to all eligible residents of Dubai irrespective of the annual coverage limit.

2. Enrolment into Basmah Program

I. Eligibility criteria

The Program is available **only** for

- a) Insured members holding a residence visa issued from the Emirate of Dubai with validity of not less than one year
- b) The mandate for coverage of Cancer is applicable only for insured **LSB** members, holding valid insurance policies or policies issued after the launch date of the mandate, with diagnosis of Cervical, Breast or Colorectal cancer, subject to eligibility and treatment criteria being met.
- c) The above would apply for existing and new residents in the Emirate of Dubai who are not diagnosed with cancer before entering the country.
- d) Existing and new residents who were diagnosed with cancer prior to entering the country will become eligible for enrolment only after one year of residence.
- e) Eligibility for enrollment into the program will be based only on confirmed Diagnosis from the Centre of Excellence(CoE)

II. Conditions for Enrolment

- a) Enrolment into the program is at the **sole** discretion of the insured member and subject to his/her consent.
- b) Only [The Insurer] has the right to enroll the insured into BASMAH.
- c) Insured with symptoms / already diagnosed with cancer shall be given the choice for enrolment into the program only once at the beginning of the treatment and/or when [The Insurer] is notified about the diagnosis.
- d) DHIC or its assignees is responsible and accountable for onboarding the insured and explain to him/her the responsibilities of DHIC or its assignees as detailed below.

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
DHA/DHI/HE/SOP/002	01	24/11/2020	25/11/2020	25/11/2022	1/2

Cancer Patient Support Program (BASMAH)

- e) Once the insured choose to opt out of the Program, he/she shall not be permitted to enroll into the Program later.
- f) Continuity of treatment is linked to validity of insured member's visa.

3. Terms and conditions of BASMAH Program

The insured members enrolled under the BASMAH program are covered for:

- a) Screening, healthcare services, investigations and treatments related to and associated complications of the cancers are covered under the BASMAH program.
- b) Screening for cancer is covered within the network offered by [The Insurer] - both public and private - for high-risk cases as defined in the guidelines; ([Breast Cancer](#), [Colorectal Cancer](#), and [Cervical Cancer](#)) and subject to a written preapproval. If provisionally diagnosed, subsequent confirmatory tests may be covered at any network providers. Member, who underwent diagnostic tests at a non-CoE provider and is referred to CoE post enrollment into BASMAH, may require taking another confirmatory test if deemed necessary by the CoE. Eligibility for confirmed enrolment in the program will only be based on confirmed diagnosis from the CoE.
- c) Treatment under the program is available **only** at facilities designated by DHIC as Centers of Excellence (CoEs) presently. Any other centers approved by DHIC in the future will be notified to the market.
- d) Coverage of Cancer would be up to the annual limit of the insurance policy, on direct billing and will **not** subject to any sublimit or copayment. Treatment beyond the policy annual limit for LSB members will be covered under the BASMAH fund provisioned by insurance companies and placed with the DHIC. The decision on eligibility for treatment is made by DHIC.
- e) Waiting period should be waived for patients already enrolled or having consented to enroll for treatment under the BASMAH Program. However, existing members undergoing treatment for cancer under the BASMAH program or newly diagnosed cases should declare if they want to enroll into the BASMAH program. Waiting period will continue to be applied for other conditions as per the respective policy terms and conditions.
- f) In case of an insurance scheme that mandates declaration of pre-existing conditions, intentional non-disclosure of the condition, thereby limiting [The Insurer] to assess the risk appropriately, will lead to the member being excluded from the BASMAH Program.
- g) An insured member shall benefit from the program only if he/she shows full commitment to the program by following the prescribed treatment plan including but not limited to booking appointments, complying with prescribed medications / investigations, etc. Adherence to treatment plan will be monitored by the DHIC or its assignee.

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
DHA/DHI/HE/SOP/002	01	24/11/2020	25/11/2020	25/11/2022	2/2

Cancer Patient Support Program (BASMAH)

- h) A patient will be considered to have completed the treatment under BASMAH Program, subject to confirmation from the treating CoE physician.
- i) Any follow up /post-recovery treatment must be carried out **only** at facilities designated by DHIC as Centers of Excellence (CoEs).
- j) Failure to adhere to the treatment plan or absence from CoE by the enrolled member, without CoE physician consent, for more than one month will invalidate the member's eligibility and automatically terminate the member's enrollment in the program.

4. Terms and conditions for Policyholders with no previous insurance

- a) If an insured member presents with symptoms and/or is diagnosed with Breast Cancer, Colorectal Cancer or Cervical Cancer during the policy term, the standard process described above shall apply.
- b) If there is a member who is undergoing treatment for Breast, Colorectal or Cervical Cancer at the time of inception of their initial policy, he/she shall not be eligible for enrolment.

5. Terms and conditions for Policyholders changing insurance companies (payors)

- a) For those members who were diagnosed towards the end of the policy term and renewed with another Insurer before being offered the BASMAH program, the new Insurer is required to offer the program to the insured member.
- b) [The Insurer] is required to maintain continuity of cover and ensure enrolment of inherited members already enrolled into BASMAH program. To ensure that new insurers are aware of existing cases, a feature has been developed in the Payor Portal called "Policy Handover Check". As detailed in the portal user manual, [The Insurer] can run a new census list while quoting for new business (both group and individual policies) through the Policy Handover Check feature. The portal will produce an anonymous report stating the number of members offered BASMAH program, Screening Type, member verbal and/or written consent status and member program status within the uploaded census.

If the policy is placed with a new insurer, at the time of new census upload to the Portal, [The Insurer] will be able to view the BASMAH status. [The Insurer] should verify eligibility/ineligibility for members with program status as "Paused – Policy Expired" and inform DHIC or its assignee via e-mail within seven calendar days to ensure continuity of treatment or appropriate termination of cover.

- c) Any deviation identified by the new insurer from the previous insurer's report should be reported to DHIC.

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
DHA/DHI/HE/SOP/002	01	24/11/2020	25/11/2020	25/11/2022	3/2

Cancer Patient Support Program (BASMAH)

6. Criteria for fund management / utilization

- a) Insured members diagnosed with cancer will benefit from coverage under the respective policy as per general terms and conditions of the policy up to the applicable annual benefit limit.
- b) LSB members, who are enrolled into the BASMAH program, will benefit from the extended coverage over and above their annual benefit limit.
- c) The fund will be managed by DHA Fund Management Committee on behalf of [The Insurer]. For this, [The Insurer] should deposit the agreed fund amount into the Cancer PSP Trust Account on monthly basis as detailed in the Procedural Notice ([PN 03/2019](#)).
- d) For eligible cases, CoE will submit the pre-authorization request. TPA will have to notify DHIC or its assignee when 75% of the annual benefit limit of the policy is utilized. The DHA Fund Management Committee will make decisions thereafter on coverage.
- e) However, after approval of the fund, at expiry of the policy, if the member has not utilized upto the Annual Benefit Limit, then the difference in amount should be settled back by the Insurer to DHA RCM against claims raised via Eclaimlink.

7. Referral Process

- a) For confirmed cases, Physicians/Network Provider is required to inform the patient of the test result and provide relevant advice about the program before sharing the test results with [The Insurer].
- b) Physicians/Network Providers should share test results within maximum 2 days of receipt with [The Insurer].
- c) [The Insurer] should confirm that Network Provider Physician has advised the member of the test results before enrolling the member into the program.
- d) [The Insurer] should contact member within 24 hours of receipt of test result and offer enrolment into the BASMAH Program. Patients will have up to **seven (7)** calendar days to respond to [The Insurer].
- e) [The Insurer] should refer enrolled members to the Patient Support Program Provider assigned by the DHA within 2 days of receipt of consent from the patient (should be recorded) via the DHA PSP Payor Portal (“Portal”).

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
DHA/DHI/HE/SOP/002	01	24/11/2020	25/11/2020	25/11/2022	4/2

Cancer Patient Support Program (BASMAH)

- f) Physicians are **obliged** to follow the proposed guidelines and report clinical progress to DHIC as per the protocol.

8. Responsibilities of DHIC and/or it's Assignee

As part of the BASMAH program, DHIC and/or its assignee is responsible for

- a) On boarding and training of the Payers
- b) Referrals of insured members to Centers of Excellence
- c) Arranging appointments on behalf of the insured at CoEs.
- d) Scheduling as appropriate, home visits/teleconsultation for registration and on boarding.
- e) Providing 24/7 access to medical helpline staffed with DHA licensed physicians who are accountable for
 - I. Advising and educating the insured about Cancer (Breast, Cervical and Colorectal) as per the guidelines
 - II. Prescribing medications, if required, and organizing medication delivery
 - III. Periodic follow up to ensure compliance to treatment plan
 - IV. Collecting feedback about the program
 - V. Reporting any adverse events to DHIC
- f) Providing BASMAH enrollees with access to a mobile application with features like voice, video and live chat, as well as appointment / medication reminders.
- g) Validating participation in the program in the event of any unplanned interruption from insured member's side i.e. interruption without information and/or prior-approval from the Insurance Provider or in the event of the "window of interruption" exceeding 30 days without any prior notification and valid supporting evidence.
- h) Sharing relevant reports with concerned parties.
- i) Any other services as deemed necessary.

9. Confidentiality

Confidential data related to medical records of the enrolled insured member shall be accessible only to the parties concerned including the Insurer, DHIC or its assignees and CoEs based on a disclaimer signed upon the free will of the insured member.

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
DHA/DHI/HE/SOP/002	01	24/11/2020	25/11/2020	25/11/2022	5/2

Cancer Patient Support Program (BASMAH)

For insured members, who have not consented to be part of BASMAH, only screening data will be uploaded to the DHA PSP Payer Portal for regulatory information.

10. Additional Conditions for Insurers/ Participating Insurers (PI) /TPA

- The CoE should be included in the relevant Network (catering to LSB members) of the Participating Insurers /TPAs.
- Preferred tariffs should be negotiated where members enrolled under the BASMAH program are referred to private providers for services unavailable at the CoE.

11. Member Engagement Reports

DHA assigned BASMAH (PSP) provider is required to send reports of member engagement on monthly basis.

The following KPIs are defined to measure engagement activities:

- Screening Penetration Ratio:** The DHA assigned PSP Provider is required to generate monthly reports showing the total number of insured lives who were screened against the total insured lives enrolled in the Emirate of Dubai.
- High Risk Population Percentage:** The DHA assigned PSP Provider is required to generate monthly reports showing the total number of insured lives who were tested positive after undergoing preliminary screening against total active (eligible) and screened lives they enrolled in the Emirate of Dubai.
- Diagnosis Percentage:** The DHA assigned PSP Provider is required to generate monthly reports showing confirmed positive cases against the total active (eligible), screened and high-risk insured lives enrolled in the Emirate of Dubai.
- Engagement Percentage:** The DHA assigned PSP Provider is required to generate monthly reports showing the number of the insureds with symptoms / already diagnosed with Cancer who agreed to be part of the BASMAH Program against total number of diagnosed cases.
- Enrollment Percentage:** The DHA assigned PSP Provider is required to generate monthly reports showing the number of the insured having Cancer (confirmed positive) who agreed to be part of the BASMAH Program against total number of diagnosed cases.
- Number of inbound & outbound calls:** The DHA assigned PSP Provider is required to generate monthly reports showing the number of inbound & outbound calls in both absolute count and percentage per enrolled life.

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
DHA/DHI/HE/SOP/002	01	24/11/2020	25/11/2020	25/11/2022	6/2

Cancer Patient Support Program (BASMAH)

- g) **Number of visits:** The DHA assigned PSP Provider is required to generate monthly reports showing the number of visits arranged in both absolute count and percentage per enrolled life.
- h) **Retention Rate:** The DHA assigned PSP Provider is required to generate monthly reports showing the number of insured members retained against the total number of insured members enrolled into the program.

All supporting documents for the above KPIs should be properly maintained and archived by [The Insurer] and the PSP Provider assigned by the DHIC for auditing purposes.

12. Non- LSB Members

Though the mandate of coverage of the BASMAH program is presently applicable only for LSB members, Non LSB members and their dependents can access relevant services at respective CoEs at subsidized rates. However, they will NOT be eligible to avail the benefit of the extended coverage over and above their annual benefit limit offered under the Basmah program.

The relevant consent form should be duly completed by the Non LSB members.

13. Communication

All communications related to the BASMAH program should be directed to DHIC-PSP@dha.gov.ae

14. Exceptions

Any exceptions to the above guidelines shall be at the sole discretion of DHIC.

ID	Issue#	Issue Date	Effective Date	Revision Date	Page#
DHA/DHI/HE/SOP/002	01	24/11/2020	25/11/2020	25/11/2022	7/2