

OFFICE MEMORANDUM

Sub: Mandatory COVID-19 testing of SARI cases under AB PM-JAY

The Packages for 'Testing for COVID-19' have been made live in TMS.

In view of the ongoing Pandemic of COVID-19, it is imperative that the system starts capturing the COVID-19 status of the individuals who are likely to be suffering from the infection. The WHO global influenza surveillance standards define the surveillance case definitionsⁱ for influenza-like illness (ILI) and severe acute respiratory infections (SARI) as follows:

ILI is an acute respiratory infection with: Measured fever of $\geq 38\text{ C}^\circ$ and cough; with onset within the last 10 days.

SARI is an acute respiratory infection with: History of fever or measured fever of $\geq 38\text{ C}^\circ$; and cough; with onset within the last 10 days; and requires hospitalization.

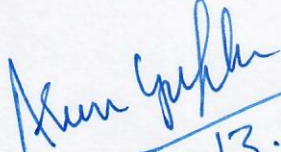
Since ILI cases do not require hospitalisation, they are unlikely to seek treatment under AB PM-JAY, however PM-JAY beneficiaries having SARI may be getting admitted under AB PM-JAY. It is an opportunity to test the infection status of these patients. Hence, till the time pandemic is going on, testing for COVID-19 is made mandatory under AB PM-JAY for any case getting admitted for following packages:

- Pneumonia
- Severe Pneumonia
- Respiratory Failure due to any cause
- Type 1/2 Respiratory Failure
- Any other package which may fit into the latest guidelines of ICMR/MoHFW/State Government issued from time to time on the subject of 'whom to test'.

SHAs are requested to identify packages in their respective state specific package list which may fit into the definition of SARI and make the 'Testing for COVID-19' mandatory for them. Claims for such packages may not be paid by SHAs unless these COVID-19 testing is done wherever indicated. If any such packages are identified by SHA the list may be communicated to NHA so that necessary IT changes can be made. NHA shall be reviewing and keeping watch on utilization of the 'Testing for COVID-19' package in all states/UTs.

Copy of latest guidelines of ICMR, dated 9th April 2020 is enclosed (as annex-1). SHAs and EHCPs are requested to keep themselves informed about guidelines by regularly visiting websites of MOHFW and ICMR.

Dated: 13.04.2020
Encl: As above


(Dr. Arun Gupta)
Executive Director
HN & QA
13.4.2020

**INDIAN COUNCIL OF MEDICAL RESEARCH
DEPARTMENT OF HEALTH RESEARCH**

Strategy for COVID19 testing in India (Version 4, dated 09/04/2020)

1. All symptomatic individuals who have undertaken international travel in the last 14 days
2. All symptomatic contacts of laboratory confirmed cases
3. All symptomatic health care workers
4. All patients with Severe Acute Respiratory Illness (fever AND cough and/or shortness of breath)
5. Asymptomatic direct and high-risk contacts of a confirmed case should be tested once between day 5 and day 14 of coming in his/her contact

In hotspots/cluster (as per MoHFW) and in large migration gatherings/evacuees centres

6. All symptomatic ILI (fever, cough, sore throat, runny nose)
 - a. Within 7 days of illness – rRT-PCR
 - b. After 7 days of illness – Antibody test (If negative, confirmed by rRT-PCR)