

9th April 2021

Dear Valued Doctors,

2021 Aon MMI: Advisory on National Covid-19 Immunisation Programme

With the recent initiation and introduction of Covid-19 vaccine by the Malaysian Authority, Aon MMI explains the relevant sections and how will your MMI policy trigger given the arise of a circumstance relating to the administration of the vaccine.

What are the relevant sections?

Malaysia's COVID-19 Vaccine Portfolio

As of February 2021, Malaysia has secured 66.7 million doses of COVID-19 vaccines through the COVAX Facility and advance purchases from five vaccine manufacturers. Of the five vaccine manufacturers, the Pfizer-BioNTech vaccine has obtained conditional approval from the Drug Control Authority (DCA) and the National Pharmaceutical Regulatory Agency (NPR) on the 8th of January 2021. The remaining four COVID-19 vaccine candidates are still pending approval from NPR. The supply of vaccines from these five suppliers will be received in stages by Malaysia starting February 2021, subject to NPR approval.

Who are the target groups and the respective phases?

PHASE 1 (February – April 2021)

Priority group 1

Frontliners comprising of public and private healthcare personnel



500,000
people

Priority group 2

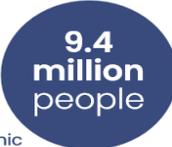
Frontliners consisting of essential services*, defence and security personnel

* Will be updated from time to time by JKJAV

PHASE 2 (April – August 2021)

Priority group 1

Remainder of healthcare workers as well as those in essential services and defence and security personnel



9.4
million
people

Priority group 2

Senior citizens (those aged 60 and over), high-risk group with chronic diseases such as heart disease, obesity, diabetes and high blood pressure and people with disabilities (OKU)*

* The information will be reviewed periodically

Pandemic control measures

PHASE 3 (May 2021 – February 2022)

Priority group

Adult population aged 18 years and above (citizens & non-citizens)

Priority will be given to those in the red zones; followed by those in yellow zones and finally those in green zones



Target
13.7
million
people/
more

Pandemic control measures

Source: MOH

Commercial Risk Solutions

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What are the types of vaccines?

Types of vaccines	mRNA	Viral vector	Inactivated virus
Primary content and how it reacts 	mRNA sequence which enters the individual cell to produce the specific virus protein	Contains modified (vector) virus to transport the antigen genetic code. The human cell will produce the targeted protein	Virus that have been killed using high heat, chemical or radiation
Function 	Uses the mRNA molecule to stimulate the immunity in order to recognise the targeted virus protein	A safe viral vector is used to deliver the genetic material of the targeted virus and stimulating the human immune response	Virus that has been killed and used to stimulate the human immune response
Advantages 	<ul style="list-style-type: none"> • Simple and quick to produce • Does not require living component and synthetically produced. • Triggers an adaptive immune response 	<ul style="list-style-type: none"> • Proven technology • Triggers an adaptive reaction for a more effective immune response 	<ul style="list-style-type: none"> • Proven technology • Suitable for those who have a weak immune system • Easy to produce
Challenges 	<ul style="list-style-type: none"> • Some mRNA vaccines require extremely cold storage conditions • Used as a vaccine for the first time in medical history 	<ul style="list-style-type: none"> • Complex manufacturing process • Important to ensure the virus vector is safe to be used 	<ul style="list-style-type: none"> • High manufacturing cost
Example	None	Ebola, Vaccines for livestock	Polio, Japanese Encephalitis & Rabies
Vaccine candidate	<ul style="list-style-type: none"> • Moderna • Pfizer/BioNTech 	<ul style="list-style-type: none"> • AstraZeneca • CanSino Biologics • Johnson & Johnson • Sputnik V 	<ul style="list-style-type: none"> • Sinovac

Analysis & compilation: The Academy of Sciences Malaysia

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Moving on to how will the MMI policy trigger in the event of circumstances arising during the administering of Covid-19 vaccine and how does the sections above act in favor in protecting you.

As of March 15th, 2021, five private hospitals have been identified as vaccination centres and the authorization on allowing private hospitals to procure the vaccines approved by NPRA (National Pharmaceutical Regulatory Agency) (Pfizer, AstraZeneca, and Sinovac) is amid being finalised. Below are some of the queries that you might have with the involvement in the inoculation:

1. What happens if I am involved in a medical negligence claim or problems arising from and/or relating to the administering of Covid 19 vaccine? Will my indemnity policy provider respond?

Yes, the Aon MMI policy will be triggered given the above circumstance occurs. To be in line with the current change in regulation, the Aon MMI policy will cover you on the above provided as a medical practitioner, you carry out your duty to the best of your ability and judgement. To give you further comfort and peace, please be informed of Section 10 of the Emergency Ordinance as explained in our previous newsletter, that as long as the emergency remains no legal proceedings, suit or prosecution can be brought against you in respect of the directions asked to be carried out under the PCID Act for Covid 19.

2. What if my patient returns with the possible side effect identified?
The monitoring of side effects and adverse effects following immunisation (AEFI) will be carried out through enhanced surveillance where vaccine recipients will receive a scheduled notification/ reminder through the MySejahtera application for them to report any AEFI experience. The AEFI report can also be made by health workers via the existing public healthcare system. Investigations for serious AEFI will be conducted carefully, whereby a special expert committee will be set up to assess AEFI cases and security issues related to the COVID-19 vaccines.

3. There are increased risks in the provision of clinical care and administering covid 19 vaccine. Do I need to increase the limit of my coverage?

Your reference point should always be the average number of patients you are treating as the MMI limit of indemnity is an aggregate limit, which means that the limit is shared amongst all claims arising from treatment given during the 12 month policy period. In view of the evolving situation, you may want to consider a higher limit given your patient take is more than usual.

4. Can my indemnity policy provider prevent me from being sued when it comes to Covid 19 patients?

As an indemnity policy provider, our lead insurer MPIGeneralli can only address the matter once they have been informed of any circumstance arising in relation to your medical service rendered regardless of it being related to or not to Covid 19 treatment and/or the inoculation. It is important that you inform Aon Malaysia of any known or potential circumstance as soon as you become aware of the possibilities.

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5. Is it mandatory for me to provide clarification on the possible side effects of the vaccine to my patients and obtain the consent on the form prior to administering the vaccine?

Yes, it is. Please be reminded that the patient has the right to accept or refuse the vaccination upon receiving complete clarification and thorough check from you based on the details outlined in the consent form.

To bring your doubts to ease, be informed that your service in the treatment for Covid-19 and inoculation to your patients is covered by the Malaysian Medical Indemnity (MMI) as it falls within your medical service ambit.

If you have any further queries, please feel free to contact us. Rest assured that we will walk through with you hand in hand while you serve the nation. Thank you once again for your utmost service.

Reminder: Please reach out to our MMI service team as soon as possible should you receive any claim made against you or for any circumstances that might turn into a claim material in order for us to advise you on the next step.

With Gratitude,

Aon MMI Team

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