

# National Health Insurance Principles for Processing Operations of Partially Covered Special Materials

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- I. These Principles are established to process operations related to special materials partially covered by the NHI (hereinafter referred to as Special Materials) in accordance with the provisions in Article 45 of the National Health Insurance Act.
- II. The Insured may choose the Special Materials designated by the Insurer as the maximum benefit when deemed necessary by doctors from the contracted medical care institution and pay the difference. The maximum benefit mentioned in the preceding paragraph may be determined based on the price of the most similar functional category item setting by National Health Insurance. If the most similar functional category has two or more types, it can be set at the highest price category.
- III. Special Materials in which the Insured pays the difference must have one of the following additional functions or effects in comparison to existing Special Materials that are fully covered by the NHI and are for the same use. They shall also be deemed as items that cannot be fully covered by the NHI:
  - (I) Improved durability.
  - (II) Improved convenience for the patient's use.
  - (III) Conducive to monitoring medical condition
  - (IV) Improved compatibility with certain equipment or devices.
  - (V) Capability of improving appearance or comfort for customized.
- IV. The principle and the method of setting the maximum amount of difference to be paid :
  - (I) After the Special Material is collected, the insurer shall monitor the

charges for Special Material each year. If covered one of the following requirements, the insurer may set the maximum amount of difference to be paid:

1. Priority set that for Special Material items of partial coverage of the same function category, the difference between the difference to be paid among a contracted medical care institution is large (the difference range is calculated by the coefficient of variation).
  2. The items reflected by the public are verified to be higher than the international price and are unreasonable after verifying the sum of the health insurance payment points of the same functional category and the difference to be paid.
  3. The items reflected by the public are verified by the fee standards of a contracted medical care institution violate the provisions of Article 22, Paragraph 2 of the Medical Care Act.
- (II) When setting the maximum amount of difference to be paid, it could be determined with reference to the following information:
1. The situation of domestic market sales.
  2. International prices.
  3. Information on the difference to be paid of contracted medical care institutions.
- V. The procedure for including Special Materials within the scope of partial coverage:
- (I) The holder of the medical device license shall make proposals to the Insurer when recommending each Special Material item to be included in the scope of NHI benefits.
  - (II) The Insurer may first conduct a medical technology evaluation on the item recommended for partial coverage.
  - (III) If the recommended item belongs to the same or a similar function category that has been included in the Special Material items in which the Insured pays the difference, the Insurer may include such item as a Special Material item of partial coverage.
  - (IV) A Special Material item of partial coverage which belongs to a new function category shall, upon agreement of the Insurer, be presented jointly with implementation date to the National Health Insurance Committee (NHIC) for discussion before submission to the competent

authority for approval and announcement of the category.

- VI. A contracted medical care institution may charge fees when providing to the Insured a Special Material item of partial coverage in accordance with the following provisions:
- (I) The fee standard shall be reported to the local competent authority of public health for approval.
  - (II) The name, maximum NHI benefit, amount paid by the public, product characteristics, side effects, and treatment efficacy in comparison to NHI-covered items of the partially covered Special Material item shall be announced on the institution's website or in plain sight.
  - (III) Except for emergencies, the doctor shall deliver the description form to the Insured or his/her family two days prior to the operation or disposition, and offer sufficient explanations to the Insured or his/her family. Furthermore, the doctor and the Insured or his/her family shall sign on the form in duplicate. One of the copies shall be retained by the Insured or family member, and the other shall be retained in the medical records.
  - (IV) After the Insured or his/her family obtain the relevant medical information, the contracted medical care institution shall also explain the charges to them and allow them sufficient time to consider before signing the consent form in duplicate; one of the copies shall be retained by the Insured, and the other shall be retained in the medical records.
  - (V) The specification of Section (3) shall specify the name, maximum NHI benefit, amount paid by the public, product characteristics, reason of use, important notices, side effects, and efficacy in comparison to NHI-covered items of the partially covered Special Material item.
  - (VI) The consent form mentioned in Section (4) shall specify the name, item code, medical equipment license number, quantity, NHI benefit limit, amount paid by the public, and the total amount paid by the Insured of the partially covered item.
  - (VII) A receipt shall be produced and issued to the Insured or his/her family for retention. A statement shall also be attached,

which details the name, item code, quantity, maximum NHI benefit, amount paid by the public, and total amount paid by the Insured, for the Insured or his/her family's retention.

- VII. For adding, canceling, or altering the fee standards of partially covered items, the contracted medical care institution shall upload the changes to the designated address via the NHI network service system (VPN) in the format specified by the Insurer, so that the Insurer can compile and publish the price information on its website for public inquiry.
- VIII. Special Materials which have one of the following conditions could consider to be deemed as items that be fully covered by the NHI:
  - (1) The same purpose Special Materials that national health insurance has paid in full have dropped out of the market because the free market competition, and which have become routine use.
  - (2) The new evidence combined with the curative effect and price reduction proves that the difference to be paid item has been cost-effective.