



COVID-19

International Assistance

Pyramid Temi Group's *Medical Assistance Provider*

PACE First, as an international assistance partner to a large percentage of insurance underwriters in their region of the world, regularly supports **leisure, corporate and expats globally** when there are critical incidents.

This support **regularly includes medical and security case response**, and providing **information and context** to help clients prevent incident wherever and whenever possible.

There has been a significant amount of misinformation regarding assistance capabilities during pandemic events, and specifically around the **Wuhan novel coronavirus/ 2019-nCoV – now, officially known as Covid-19**.

This report contains **PACE First timeline** to provide some context from the perspective of an international assistance capability.

JANUARY 20TH

Just a few days after the second reported fatality in mainland China, we were in contact with colleagues working as Public Health Emergency Officers within the US Department of Defense, Department of Health and Human Services, Department of Public Safety and points-of-contact working with Australian government agencies to better understand the developing risk to our travellers.

Many of our colleagues voiced concern of potential under-reporting, and that the available information on the R0 (basic reproduction number factor) and incubation period would likely increase in the coming days / weeks. At the time, the reported RO was 1.4 and incubation / contagious timeline was expected to be 7 days – very similar in scope to previous SARS events. Anecdotal information available to them raised concern of a potential R0 of 2.5 and 14 day incubation, with a longer contagious timeframe, significantly increasing risk of increased spread.

Those numbers have subsequently increased beyond expected levels, and some more recent studies state Covid-19 may have an R0 of ~6 and a few patients have experienced incubation periods of up-to 24 days.

We immediately began reporting this information to insured client with significant projects and exposures in the region, and some did opt at that early stage to delay non-critical travel.

In the coming days, we saw the Wuhan quarantine, limited Beijing containment and cancellations of large-scale Lunar New Year celebrations put-in-place.

JANUARY 24TH

We received notifications that both US and French governments would schedule emergency flights to help evacuate citizens from the quarantine areas, and that the Australian government was also working with Qantas to schedule at least one evacuation as well.

There were few corporate insurance clients within the quarantine area, but we did receive several requests for “options” to support repatriations. Under any normal circumstance, be-that a medical case, civil unrest, post-natural disaster, conflict or threat – we would activate normal response capabilities and conduct aero-medical, ground, air or sea evacuation based-upon availability, suitability, safety and time.

Case management during a global pandemic is significantly limited, and it is important to understand that – even with the best quality corporate travel or expatriate insurance policy that covers every possible response “under-the-sun” – the ability to respond to these cases is generally limited to inter-government liaison support.

We have seen and heard claims of mass-evacuation from the epicentre of the novel coronavirus, but this is often exaggerated. Can flights be booked from areas immediately outside of quarantine areas, and transit be arranged through “third-countries” without a travel-ban to return home? – yes.

As an international assistance provider, is it responsible to use the knowledge of international travel “loopholes” or “workarounds” to do this for our clients – when so much is still being discovered about Covid-19? – we suppose that is an ethical and business decision, but we have opted to work within WHO guidelines and in-partnership with government agencies to support our clients.