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NRP: NEW HOSPITAL ADMISSION SYMPTOMATIC CASES AS NEW INDICATORS FOR STATES IN PHASE 1 THAT HAVE ACHIEVED VACCINATION RATE OF AT LEAST 50% OF THE ADULT POPULATION

The NSC Special Session and National Recovery Council (NRC) chaired by YAB Prime Minister, YAB Tan Sri Dato' Haji Muhyiddin Yassin this week has considered and decided to use a new indicator viz 'Number of new hospital admission symptomatic cases' as one of the National Recovery Plan (NRP) phase transition indicators. This decision was made on the advice of health experts, as well as international and domestic experience, with the observation that the risk of COVID-19 transmission decreased in line with increasing vaccination rates of the adult population.

The NRC also decided that the indicator would only replace existing indicators (i.e. the number of new daily COVID-19 cases) when the vaccination of a state in Phase 1 has reached a rate of at least 50% of the adult population. A benchmark for symptomatic cases used is based on daily hospital admissions for the number of patient cases in Categories 3, 4, and 5. The threshold values for the number of symptomatic cases are as follows:

Phase Transition	Symptomatic Case per day (nationwide value threshold)	Symptomatic cases per day/ 100,000 inhabitants
Phase 1 to Phase 2	2,000	6.1
Phase 2 to Phase 3	1,000	3.0
Phase 3 to Phase 4	400	1.3

In the assessment for the transition from one phase to the next, it is still subject to the need to meet all indicators, including ICU capacity utilization and vaccination rates of the adult population.

For example, for the Klang Valley, Johor, Negeri Sembilan, Kedah, and Melaka which are still in Phase 1, when they reach a vaccination rate of at least 50% of the adult population, the case indicator to be used is the new hospital admission symptomatic cases. Next, the state can only move to Phase 2 if it reaches the threshold value of a new hospital admission symptomatic cases (6.1 per 100,000 population) and the level of ICU utilization capacity ("Medium").

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This decision was also taken after the risk of transmission was clearly under control in the states of Sarawak and Labuan province, with a significant reduction in symptomatic cases and which require treatment in ICU wards. Although Sarawak and Labuan are facing full ICU ward capacity utilization during June, however after vaccination rates reached 50% in July, the use of ICU ward capacity has decreased for both and reached the "Adequate" level.

Thus, risk assessment to consider the opening of economic and social activities would be more accurate if based on the number of category 3, 4, and 5 symptomatic cases, compared to referring to the number of new daily cases. For example, although new daily cases in Sarawak hit 400 a day, the number of new patients of Categories 3, 4, and 5 are less than 10 patients or 2% of daily cases.

Countries like the United Kingdom have also taken the approach of focusing on symptomatic case rates and, have continued to allow for the opening of economic and social activities based on its risk assessment, i.e. the number of symptomatic cases being low although the number of new cases is still high.

Since the beginning of the announcement of NRP, the Government has emphasized that NRP needs to be dynamic, on which all approaches taken are based on data and science. This includes setting indicators and threshold values for phases of transition. The use of these new indicator values will be able to improve risk assessment in considering the opening of economic and social activities in the context of the NRP phases of transition.

YB Tengku Datuk Seri Utama Zafrul Tengku Abdul Aziz Minister of Finance and Coordinating Minister of the National Recovery Plan Ministry of Finance Putrajaya August 7, 2021

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