

**COVID-19 HANDLING TASK FORCE
CIRCULAR LETTER
NUMBER 17 YEAR 2022
ABOUT
INTERNATIONAL TRAVEL HEALTH PROTOCOLS DURING THE CORONA VIRUS
DISEASE PANDEMIC 2019 (COVID-19)**

A. Background

1. Whereas in order to follow up on the development of the situation of the spread of the SARS-CoV-2 virus in various countries in the world and the results of cross-sectoral evaluations, it is necessary to adjust the control mechanism for foreign travel.
2. Whereas based on the considerations as referred to in number 1, it is necessary to stipulate a Circular Letter regarding International Travel Health Protocols for International Travel During the 2019 Corona Virus Disease (COVID-19) Pandemic.

B. Purpose and Objective

The purpose of this Circular Letter is to implement health protocols for International Traveller during the COVID-19 pandemic. The purpose of this Circular Letter is to prevent an increase in the transmission of COVID-19.

C. Scope

The scope of this Circular Letter is Health Protocols for International Traveller.

D. Legal Basis

1. Law Number 4 of 1984 regarding Outbreaks of Infectious Diseases;
2. Law Number 24 of 2007 regarding Disaster Management;
3. Law Number 6 of 2011 regarding Immigration;
4. Law Number 6 of 2018 regarding Health Quarantine;
5. Government Regulation Number 21 of 2008 regarding the Implementation of Disaster Management;
6. Government Regulation Number 21 of 2020 regarding Large-Scale Social Restrictions in the Context of Accelerating Handling of Corona Virus Disease 2019 (COVID-19);
7. Presidential Regulation Number 1 of 2019 regarding National Disaster Management Agency, as amended by Presidential Regulation Number 29 of 2021 concerning Amendments to Presidential Regulation Number 1 of 2019 concerning the National Disaster Management Agency;
8. Presidential Regulation Number 82 of 2020 regarding the Committee for Handling Corona Virus Disease 2019 (COVID-19) and National Economic Recovery, as amended by Presidential Regulation Number 108 of 2020 concerning Amendments to Presidential Regulation Number 82 of 2020 concerning Committee for Handling Corona Virus Disease 2019 (COVID-19) and National Economic Recovery;
9. Decree of the President of the Republic of Indonesia Number 11 of 2020 regarding the Determination of the Public Health Emergency of Corona Virus Disease 2019 (COVID-19)

10. Decree of the President of the Republic of Indonesia Number 12 of 2020 regarding the Determination of Non-Natural Disasters Spreading Corona Virus Disease 2019 (COVID-19) as National Disasters;
11. Decree of the President of the Republic of Indonesia Number 24 of 2021 regarding Determination of the Factual Status of the Corona Virus Disease 2019 (COVID-19) Pandemic in Indonesia;
12. Resolutions of the Limited Cabinet Meeting on April 4, 2022.

E. Definition

1. International Traveller (*Pelaku Perjalanan Luar Negeri*), hereinafter referred to as PPLN is a person of either Indonesian citizenship (WNI) or foreign citizenship (WNA) who has travelled from abroad in the last 14 days.
2. Reverse-Transcriptase Polymerase Chain Reaction, hereinafter referred to as RT-PCR, is a type of diagnostic test that detects viral genetic material originating from certain samples, such as the nasopharyngeal/oropharyngeal swab test, using reverse-transcriptase enzymes and polymerase chain reactions.
3. Quarantine is an effort to temporarily separate healthy people or people who have been exposed to COVID-19 (either from a history of contact or a history of traveling to areas where community transmission has occurred) even though they have not shown any symptoms or are currently in the incubation period, which aims to ensure that there are no symptoms and prevent possible spread.
4. Self-monitoring of Health is an effort to monitor physical health conditions of each PPLN which aims to ensure that there are no symptoms and prevent possible spread of disease.
5. Isolation is an effort to temporarily separate someone who is sick and requires COVID-19 treatment or someone who is confirmed to have COVID-19 based on diagnostic results, from healthy people with the aim of reducing the risk of transmission.
6. Health insurance is proof of ownership of the guarantee to the insured to compensate any costs for treating COVID-19 which includes costs for treatment, surgery, and medicines.
7. Vaccine certificate is a physical document or digital proof that a series of vaccinations has been received.
8. Community transmission is a condition of high transmission that is detected between residents in one area whose source of transmission can come from within and/or outside the area.
9. Centralized quarantine is quarantine activity for PPLN who is concentrated in one quarantine accommodation place, either in quarantine locations owned by the government or hotels.
10. PPLN who is under 18 years of age and need special protection are children who are in an emergency situation; children in conflict with the law; children from minority and isolated groups; economically and/or sexually exploited children; children who are victims of abuse of narcotics, alcohol, psychotropic substances, and other addictive substances; children who are victims of pornography; children with HIV/AIDS; child victims of abduction, sale, and/or trafficking; child victims of physical and/or psychological violence; child victims of sexual crimes; child victims of terrorist networks; children with disabilities; child victims of abuse and neglect; children with

- deviant social behaviour; and children who are victims of stigmatization from labelling related to their parents' condition.
11. Dispensation is a decision from relevant government authorities as a form of approval over citizens' application, which is an exception towards a ban or order in accordance to laws and regulations.
 12. S-Gene Target Failure, hereinafter referred to as SGTF is a type of test using molecular detection method or Nucleic Acid Amplification Test (NAAT) which is able to see failure of S gene detection when other genes are detected as screening markers of high spike (S) mutation such as SARS-Cov-2 variant B.1.1.529.
 13. Confirmed COVID-19 positive case without symptoms is someone who is confirmed to be COVID-19 positive and there are no clinical symptoms found.
 14. Confirmed COVID-19 positive case with mild symptoms is someone who is confirmed to be COVID-19 positive with symptoms such as fever, coughing, fatigue, anorexia, shortness of breath, myalgia (muscle aches), and other unspecified symptoms, without signs of viral pneumonia nor hypoxia.
 15. Confirmed COVID-19 positive case with medium symptoms is someone confirmed to be COVID-19 positive with clinical signs of pneumonia such as fever, coughing, difficulty of breathing, and faster breathing without signs of severe pneumonia such as oxygen saturation under 93% in room air.
 16. Confirmed COVID-19 positive case with severe symptoms is someone confirmed to be COVID-19 positive with clinical signs of pneumonia such as fever, coughing, difficulty of breathing, and faster breathing, with any of the following symptoms: breathing frequency of more than 30 times a minute, severe distress of breathing, or oxygen saturation of under 93%.
 17. Medical Evacuation is a mobilisation with medical emergency standard to someone confirmed as COVID-19 positive in accordance to RT-PCR testing from an area to a referred hospital or a treatment/isolation point.

F. Protocol

1. PPLN enters Indonesia through the following international travel entry points:
 - a. Airports:
 - i. Soekarno Hatta, Banten;
 - ii. Juanda, Jawa Timur;
 - iii. Ngurah Rai, Bali;
 - iv. Hang Nadim, Kepulauan Riau;
 - v. Raja Haji Fisabilillah, Kepulauan Riau;
 - vi. Sam Ratulangi, Sulawesi Utara;
 - vii. Zainuddin Abdul Madjid, Nusa Tenggara Barat;
 - viii. Kualanamu, Sumatera Utara;
 - ix. Sultan Hasanuddin, Sulawesi Selatan; dan
 - x. Yogyakarta, Daerah Istimewa Yogyakarta.
 - b. Sea Ports:
 - i. Tanjung Benoa, Bali;

- ii. Batam, Kepulauan Riau;
 - iii. Tanjung Pinang, Kepulauan Riau;
 - iv. Bintan, Kepulauan Riau;
 - v. Nunukan, Kalimantan Utara;
 - vi. Tanjung Balai Karimun, Kepulauan Riau; dan
 - vii. Dumai, Riau.

- c. Cross-border Posts:
 - i. Aruk, Kalimantan Barat;
 - ii. Entikong, Kalimantan Barat; dan
 - iii. Motaain, Nusa Tenggara Timur.

- 2. PPLN is allowed to enter Indonesia while still following strict health protocols set by the Government.
- 3. WNA PPLN is allowed to enter Indonesia with the following restrictions:
 - a. In accordance with the regulations regarding immigration affairs set by ministry of law and human rights;
 - b. In accordance with bilateral agreement schemes, such as the Travel Corridor Arrangement (TCA); and/or
 - c. Obtain special consideration/permission in writing from the relevant Ministry/Agency.
- 4. Terms/conditions of entry into Indonesian territory through entry points are as follows:
 - a. Comply with the provisions of health protocols set by the Government;
 - b. PPLN is required to use the PeduliLindungi application and download the application before departure;
 - c. Show a card/certificate (either in physical or digital form) as evidence of administration of his/her second dose of COVID-19 vaccine at least 14 (fourteen) days before departure as a requirement to enter Indonesia with the following conditions:
 - i. PPLN WNI who is unvaccinated will be vaccinated in the foreign travel entry point after RT-PCR testing during departure shows a negative result or in the quarantine point after a second RT-PCR test shows a negative status;
 - ii. PPLN WNA who is unvaccinated will be vaccinated in the foreign travel entry point after RT-PCR testing during departure shows a negative result or in the quarantine point after a second RT-PCR test shows a negative status, with the following conditions:
 - 1) Is aged 6 - 17 years;
 - 2) holds a diplomatic residence permit and service stay permits; and/or
 - 3) holds a limited stay permit card (*Kartu Izin Tinggal Terbatas* or KITAS) and a permanent residence permit card (*Kartu Izin Tinggal Tetap* or KITAP).
 - iii. PPLN WNA who is already in Indonesia and will travel, both domestically and internationally, is required to vaccinate through government

- program or *gotong royong* scheme in accordance with statutory regulations;
- iv. The card/certificate (physical or digital) on the administration of the second COVID-19 vaccine dose shall be written in English, in addition to the language of the country of origin.
- d. The obligation to show a COVID-19 vaccination card/certificate (physical or digital) as described in letter c is excepted for:
- i. PPLN WNA status holding diplomatic visas and service visas related to official/state visits of foreign officials at ministerial and above level and WNA entering Indonesia under the Travel Corridor Arrangement scheme, according to the principle of reciprocity while still implementing strict health protocols;
 - ii. PPLN WNA who is unvaccinated and intend to travel domestically with the aim of taking international flights out of the territory of the Republic of Indonesia, will not need to show their COVID-19 vaccination card/certificate as long as they do not leave the airport area during transit for international flights, with the following conditions:
 - 1) Has been permitted by the Local Port Health Office to carry out domestic trips with the aim of being able to continue their flights out of Indonesia; and
 - 2) Shows the schedule of flight tickets outside Indonesia for direct transit from the departure city to the international airport in the territory of the Republic of Indonesia with the final destination to the destination country.
 - iii. PPLN under 18 years of age; and
 - iv. PPLN with special health conditions or comorbid diseases that prevent them from receiving vaccines, with the condition that they must attach a doctor's certificate from a Government Hospital of the country of departure stating that the person concerned has not and/or is unable to take the COVID-19 vaccination.
- e. Show negative results of RT-PCR testing in the country/region of origin whose samples are taken within a maximum period of 2 x 24 hours before the departure time and attached at the time of the health examination;
- f. In the event that PPLN carries out self-funded centralized quarantine, they are required to show receipt of payment confirmation for the booking of quarantine accommodations from the accommodation provider while staying in Indonesia;
- g. PPLN who was confirmed of COVID-19 in 30 days at maximum before departure and has been declared inactive from transmitting COVID-19, is excepted from the obligation to show a card/certificate of COVID-19 vaccination and negative results of RT-PCR testing before departure, provided that they are obliged to carry out re-testing of RT-PCR at arrival and submit a medical certificate or COVID-19 recovery certificate from a Government Hospital of country of origin or ministry who conducts state affairs in the health sector, which states that such person is now inactive from transmitting COVID-19;
- h. For PPLN WNA, submit evidence of registration of health insurance which includes funding of COVID-19 treatment and Medical Evacuation to a referred

- hospital with the minimum compensation equal to those set by undertaker, manager, or local government;
- i. Upon arrival, PPLN is required to undergo monitoring of symptoms related to COVID-19 including body temperature checking, followed by:
 - i. In the event that PPLN is detected to have symptoms of COVID-19 and/or has a body temperature of 37.5 degrees or above, is obliged to conduct RT-PCR testing, funded by the government for WNI and self-funded for WNA; or
 - ii. In the event that PPLN has no detected symptoms of COVID-19 and has a body temperature of under 37.5 degrees, he/she is allowed to continue his/her travel, provided that:
 - 1) For PPLN who is not able to receive vaccination or had received the first dose of vaccination at least 14 days before departure, is quarantined for 5 x 24 hours;
 - 2) For PPLN who had received second or third dose of vaccination at least 14 days before departure, is allowed to continue their travels;
 - 3) For PPLN under 18 years old and/or needs special protection, then quarantine rules of their parent(s) and travel guardian will also be applied to them;
 - 4) For PPLN with special medical condition or comorbid which cause them to be unvaccinated or unable to receive COVID-19 vaccinations, he/she is allowed to continue travelling, but only if he/she has provided a medical certificate Government Hospital of country of origin which states that the PPLN has not and/or is not able to receive COVID-19 vaccination.
 - j. After sampling of RT-PCR after arrival as described in letter i.i., PPLN may continue travelling with the following conditions:
 - i. Immigration and customs documents checking;
 - ii. Luggage collection and disinfection;
 - iii. Picked-up and directly delivered to hotel, accommodation, or living place;
 - iv. Wait for RT-PCR testing results in the hotel room, inn accommodations, or living place; and
 - v. Is not allowed to leave the hotel room, room in the living accommodations or living place, and is not allowed to interact with others before RT-PCR testing shows a negative result.
 - k. In the event that the of the RT-PCR re-examination upon arrival as referred to in letter i.i show negative results, the following conditions will apply:
 - i. For PPLN who is not able to receive vaccination or had received the first dose of vaccination at least 14 days before departure, is quarantined for 5 x 24 hours;
 - ii. For PPLN who had received second or third dose of vaccination at least 14 days before departure, is allowed to continue their travels;
 - iii. For PPLN under 18 years old and/or needs special protection, then quarantine rules of their parent(s) and travel guardian will also be applied to them;

- iv. For PPLN with special medical condition or comorbid which cause them to be unvaccinated or unable to receive COVID-19 vaccinations, he/she is allowed to continue travelling, but only if he/she has provided a medical certificate Government Hospital of country of origin which states that the PPLN has not and/or is not able to receive COVID-19 vaccination.
- l. In the event that the RT-PCR re-examination upon arrival shows a negative result and the PPLN is allowed to continue travelling in accordance to letter k.ii. and k.iv., PPLN is advised to conduct self-monitoring of his/her own health towards COVID-19 symptoms for 14 days and comply to health protocols
- m. In the event that the results of the RT-PCR re-examination upon arrival as referred to in letter e show positive results, follow-up will be carried out with the following provisions:
 - i. If without symptoms or experience mild symptoms, they will be isolated or treated in isolation hotels or centralized isolation facilities set by the government or conduct self-isolation in his/her accommodation with period of isolation/treatment in compliance to recommendation of the ministry undertaking state affairs in the health sector; or
 - ii. if with moderate or severe symptoms, and/or with uncontrolled comorbidities, they will be isolated or treated at a COVID-19 referred hospital with period of isolation/treatment in compliance to recommendation of the ministry undertaking state affairs in the health sector; and
 - iii. All costs borne from COVID-19 treatment and medical evacuation for WNA will be self-funded, however the government will fund such costs for WNI.
- n. Quarantine obligation as mentioned in letter i.ii.1) and letter k.i. is conducted with the following conditions:
 - i. For WNI PPLN, namely Indonesian Migrant Workers (*Pekerja Migran Indonesia* or PMI); Students who have completed their studies abroad; Government employees returning from International official trips; or Indonesian Representatives in international competitions or festivals undergo centralized quarantine at the expense of the government in accordance with the Decree of the Head of the COVID-19 Handling Task Force concerning Quarantine Places and RT-PCR Obligations for Indonesian Citizens Traveling Internationally;
 - ii. For PPLN WNI outside the criteria as referred to in number i, shall undergo quarantine in a centralized quarantine accommodation at their own expense; and
 - iii. For PPLN WNA other than the head of the foreign representative and the family of the head of the foreign representative, shall undergo quarantine in a centralized quarantine accommodation at their own expense.
- o. For PPLN who has not received vaccination or has received first dose of vaccination and is quarantined with the duration of 5 x 24 hours, is obliged to conduct second RT-PCR testing on the fourth day of quarantine;
- p. In the event that the RT-PCR retest as referred to in letter o shows a negative result, PPLN WNI/WNA is allowed to continue travelling and is advised to self-quarantine for 14 days and comply to health protocols;

- q. In the event that the RT-PCR retest as referred to in letter o show positive result, follow-up will be carried out with the following provisions:
 - i. if without symptoms or experience mild symptoms, he/she will be isolated or treated in isolation hotels or centralized isolation facilities set by the government or conduct self-isolation in his/her accommodation with period of isolation/treatment in compliance to recommendation of the ministry undertaking state affairs in the health sector; or
 - ii. if with moderate or severe symptoms, and/or with uncontrolled comorbidities, he/she will be isolated or treated at a COVID-19 referred hospital with period of isolation/treatment in compliance to recommendation of the ministry undertaking state affairs in the health sector.
 - iii. all costs borne from COVID-19 treatment and medical evacuation for WNA will be self-funded, however the government will fund such costs for WNI.
 - r. In the event that PPLN WNA is unable to pay for self-quarantine and/or treatment in a Hospital as described in letter m, letter n.iii, then Sponsor, the Ministry/Institution/State-Owned Enterprises that provides consideration for the entry permit for the WNA can be asked to undertake said responsibility;
 - s. The RT-PCR test examination as referred to in letter i.i. and letter o may be requested for a written comparison by filling out the form provided by the Port Health Office (KKP) or the Ministry in charge of health affairs at the expense of the inspection being borne by the PPLN;
 - t. The implementation of the RT-PCR comparison test as referred to in letter s is carried out altogether or simultaneously by KKP in 2 (two) laboratories for the purpose of SGTF comparison examination and RT-PCR comparison examination, namely at: Health Research and Development Agency (*Badan Penelitian dan Pengembangan Kesehatan* or Balitbangkes), Cipto Mangunkusumo Central General Hospital (*Rumah Sakit Umum Pusat Cipto Mangunkusumo* or RSCM), Gatot Soebroto Army Central Hospital (*Rumah Sakit Pusat Angkatan Darat Gatot Soebroto* or RSPAD), Bhayangkara Raden Said Sukanto Hospital (*Rumah Sakit Bhayangkara Raden Said Sukanto* or Polri Hospital) or other government laboratories (Environmental Health Engineering Centre, Regional Health Laboratory, or other government reference laboratories);
 - u. KKP International Airports and Seaports facilitate PPLN who need emergency medical services upon arrival in Indonesia in accordance with applicable regulations;
 - v. Ministries/Institutions/Regional Governments that carry out functions related to PPLN will follow up this Circular Letter by issuing legal instruments that are consistent and do not conflict with reference to this Circular Letter and the provisions of the applicable laws and regulations; and
 - w. The legal instrument as referred to in letter v is an inseparable part of this Circular Letter.
5. Quarantine accommodation as referred to in number 4.n.ii. and the number 4.n.iii. must obtain a recommendation from the COVID-19 Task Force that has met the terms

- and conditions of the Indonesian Hotel and Restaurant Association for cleanliness, health, safety, and environmental sustainability - (CHSE) or the Ministry in charge of health affairs of Jakarta and its surrounding areas or the Provincial Office in charge of health affairs in the regions related to the certification of the COVID-19 health protocol.
6. Dispensation in the form of exception from quarantine obligations can be given to PPLN WNI who has not received the second dose of vaccine in urgent circumstances (such as: having a life-threatening health condition, a health condition that requires special attention, or grief because a main family member has died) provided that they follow the procedure for symptoms related to COVID-19 symptoms checking which includes body temperature checking as referred to in number 4.i.
 7. Applications for dispensation in the form of exception from quarantine obligations for WNI with urgent circumstances as referred to in number 6 are submitted at least 3 (three) days prior to arrival in Indonesia to the National COVID-19 Handling Task Force and can be granted selectively, individually, and with a limited quota based on the agreement between the Task Force for Handling COVID-19, the Coordinating Ministry for Maritime Affairs and Investment, and the Ministry of Health.
 8. The strict health protocols as described in number 4 has to comply to the following terms and conditions:
 - a. Wears a 3-layered cloth mask or medical mask which covers the nose, mouth, and chin;
 - b. Routinely change the worn mask every four hours, and dispose the mask in the provided spot;
 - c. Routinely wash hands with water and soap or hand sanitizer, especially after touching things touched by other people;
 - d. Keep a minimum 1.5 meter distance with others and avoid crowding/crowded places;
 - e. Is prohibited to talk one-way or two-way directly or through the use of telephones during trips through land, railways, sea, rivers, lakes, ferry, and air;
 - f. Is prohibited from eating and drinking in flights with the duration of under 2 hours, except for individuals required to consume medicine which in the event it is not done it may endanger safety or health of the person.
 9. Every operator of transportation modes at the entry point of international travel is required to use the PeduliLindungi application.
 10. Supervision of quarantine health of cargo ships and crews in accordance with more specific and technical arrangements stipulated by the Ministry of Health through monitoring by the Port Health Office of each entry point for international travel.

G. Monitoring, Control and Evaluation

1. The Regional COVID-19 Handling Task Force, which is assisted by the public transportation organizing authority, will jointly control people's travel and safe public transportation for COVID-19 by establishing an Integrated Security Post;
2. The authorities, managers and operators of public transportation assign supervision during the implementation of public transportation operations;
3. Ministries/Agencies, TNI, POLRI and Regional Governments have the right to stop and/or prohibit people from traveling on the basis of this Circular which is consistent and does not conflict with the provision of laws and regulations;

4. Ministries/Agencies, TNI, POLRI assisted by the Task Force for Handling COVID-19 Airports and Seaports *c.q.* The International Airport and Seaport Port Health Office (KKP) conducts routine supervision to ensure compliance with the implementation of health protocols and self-quarantine through telephone facilities, video calls and field checks during the COVID-19 pandemic; and
5. Authorized agencies (Ministries/Agencies, TNI, POLRI, and Regional Governments) shall carry out the disciplining of COVID-19 health protocols and law enforcement in accordance with the provisions of the applicable laws and regulations.

H. Conclusion

1. With the enactment of this Circular Letter, the following:
 - a. Circular Letter Number 15 of 2022 regarding International Travel Health Protocols During the Corona Virus Disease 2019 (COVID-19) Pandemic; and
 - b. Circular Letter Number 14 of 2022 regarding Health Protocols for Bubble System in the MotoGP 2022 Activity in Mandalika During the Corona Virus Disease 2019 (COVID-19) Pandemic are revoked and declared invalid.
2. This Circular Letter shall be effective from April 5, 2022 until a later date is determined.

Thus so it may provide guidance and carried out with full responsibility.

Set in Jakarta

On : April 5, 2022

Head of the National Disaster Management Agency
as Chair of the COVID-19 Handling Task Force,
[Stamped and Signed]

Letjen TNI Suharyanto, S.Sos., M.M.

Copied to:

1. The President of the Republic of Indonesia;
2. Vice President of the Republic of Indonesia;
3. Chairman of the Policy Committee for Handling Corona Virus Disease 2019 (COVID-19) and National Economic Recovery;
4. Ministers/Heads of Institution;
5. TNI Commander;
6. National Police Chief;
7. Head of the National Economic Recovery Task Force; and
8. Head of the Regional Corona Virus Disease 2019 (COVID-19) Handling Task Force.