

COVID-19 HANDLING TASK FORCE

CIRCULAR LETTER

NUMBER 22 OF 2022

REGARDING

**HEALTH PROTOCOLS FOR INTERNATIONAL TRAVELS DURING THE CORONA VIRUS
DISEASE 2019 (COVID-19) PANDEMIC**

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 evaluation, adjustments are needed to control the mechanism for international travel.
2. Whereas based on the result of cross-sectoral evaluation toward the development of situation of COVID-19 at the National level, Circular Letter Number 19 of 2022 regarding Health Protocols for International Travels During The Corona Virus Disease 2019 (COVID-19) Pandemic with its Addendum are no longer in accordance with the dynamics of the development of handling the COVID-19 so it is necessary to be replaced.
3. Whereas based on the considerations as referred to in number 1, number 2, it is necessary to stipulate the Circular Letter regarding Health Protocols for International Travels during The Corona Virus Disease 2019 (COVID-19) Pandemic.

B. Purpose and Objective

The purpose of this Circular Letter is to implement health protocols for international travelers during the Covid-19 pandemic. The objective of this Circular Letter is to prevent an increase of Covid-19 transmission.

C. Scope

The scope of this Circular Letter is Health Protocol for international travelers.

D. Legal Basis

1. Law Number 4 of 1984 regarding Outbreak of Communicable Disease;
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 Implementation of Disaster Management;
6. Government Regulation Number 21 of 2020 regarding Large Scale Social Restriction to Accelerate the Handling of the Corona Virus Disease 2019 (COVID-19);
7. Presidential Regulation Number 1 of 2019 regarding National Board for Disaster Management, as amended by Presidential Regulation Number 29 of 2021 regarding Amendment of the Presidential Regulation Number 1 of 2019 regarding the National Board for Disaster Management;
8. Presidential Regulation Number 82 of 2020 regarding Committee of the Handling of the Corona Virus Disease 2019 (COVID-19) and National Economic Recovery, as amended by Presidential Regulation Number 108 of 2020 regarding Amendment of the Presidential Regulation Number 82 of 2020 regarding the Committee of the Handling of the Corona Virus Disease 2019 (COVID-19) and National Economic Recovery;
9. Presidential Decree Number 11 of 2020 regarding the Stipulation of the Corona Virus Disease 2019 (COVID-19) Public Health Emergency;
10. Presidential Decree Number 12 of 2020 regarding the Stipulation of the Non-Natural Disaster of the Spread of the Corona Virus Disease 2019 (COVID-19) as a National Disaster; and
11. Presidential Decree Number 24 of 2021 regarding the Stipulation of the Factual Status of the Corona Virus Disease 2019 (COVID-19) in Indonesia;
12. Resolution of the Limited Cabinet Meeting dated July 4, 2022.

E. Definition

1. International Travelers hereinafter referred to as PPLN (*Pelaku Perjalanan Luar Negeri*) means Indonesian Citizens (*Warga Negara Indonesia* or “**WNI**”)/Foreign Citizen (*Warga Negara Asing* or “**WNA**”) who are conducting international travels on the past 14 days.
2. Reverse-Transcriptase Polymerase Chain Reaction hereinafter referred to as RT-PCR means a type of diagnostic test which detects the genetic matter of the virus originating from a certain sample, such as *nasopharyngeal/oropharyngeal* swab test, by using the *reverse transcriptase* enzyme and *polymerase* chain reaction.
3. Quarantine means attempt of temporarily separating a healthy person 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 in the incubation period which aims to ensure that there are no symptoms and prevent the possibility of transmission.
4. Independent Health Monitoring means attempt of observe physical health conditions by each PPLN which aims to ensure that there are no symptoms of COVID-19 and prevent the possibility of transmission.
5. Isolation means an effort of temporarily separating persons who are sick and requires COVID-19 treatment or persons who have tested positive for COVID-19 based on diagnostic results from health persons with the aim of reducing the risk of transmission.
6. Vaccine certificate means a physical or digital document that proves a series of vaccinations has been received.
7. Community transmission is a condition of detected high transmission between residents in a region whose source of transmission comes from within the region itself.
8. Centralized Quarantine means a quarantine activity for PPLN that are concentrated in one place of quarantine accommodation, either in a government-owned location or a hotel.

9. PPLN under the age of 18 years old and requires special protection means a 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 the narcotics, alcohol, psychotropic substances, and other addictive substances; children who are victims of pornography; children with HIV/AIDS; children who are a victims of abduction, sale, and/or trafficking; children who are victims of physical and/or psychological violence; children who are victims of sexual crimes; children who are victims of terrorist networks; children with disabilities, children who are victims of abuse and neglect; children with deviant social behavior; and children who are victims of stigmatization from labelling related to their parents' condition.
10. Dispensation means a decision by an authorized government official as a form of approval of the request of community members which is an exception to a prohibition or order in accordance with applicable regulations.
11. S-Gene Target Failure hereinafter referred to as SGTF means a type of test by using the molecular detection method or the Nucleic Acid Amplification Test (NAAT) which able to see the failure of detection of the S gene when other genes are detected as screening marker for variants that have a high spike mutation level (S) such as the SARS-Cov-2 variant B.1.1.529.
12. Confirmed positive COVID-19 case without symptoms means a person who is confirmed of testing positive for COVID-19 and has no clinical symptoms.
13. Confirmed positive COVID-19 case with mild symptoms means a person who is confirmed of testing positive for COVID-19 with symptoms such as fever, cough, fatigue, anorexia, shortness of breath, myalgia, and other unspecified symptoms, without any evidence of pneumonia virus or without hypoxia.
14. Confirmed positive COVID-19 case with moderate symptoms means a person who is confirmed of testing positive for COVID-19 with clinical signs of pneumonia such as fever, cough, shortness of breath, rapid breathing without sign of severe pneumonia such as oxygen saturation below 93% in room air.

15. Confirmed positive COVID-19 case with severe symptoms means a person who is confirmed of testing positive for COVID-19 with clinical signs of pneumonia such as fever, cough, shortness of breath, and rapid breathing accompanied by one of the symptoms, namely a respiratory rate of over 30 times per minutes, severe respiratory distress, or an oxygen saturation of below 93% in room air.
16. Medical Evaluation means the act of mobilization with medical emergency standards for people with COVID-19 positive based on RT-PCR examinations from an area to the referral hospital or isolation/treatment place.

F. Protocol

1. PPLN enter the territory of Indonesia through the entry point of international travels as follows:
 - a. Airports:
 - i. Soekarno Hatta, Banten;
 - ii. Juanda, East Java;
 - iii. Ngurah Rai, Bali;
 - iv. Hang Nadim, Riau Islands;
 - v. Raja Haji Fisabilillah, Riau Islands;
 - vi. Sam Ratulangi, North Sulawesi;
 - vii. Zainuddin Abdul Madjid, West Nusa Tenggara;
 - viii. Kualanamu, North Sumatera;
 - ix. Sultan Hasanuddin, South Sulawesi;
 - x. Yogyakarta, Special Region of Yogyakarta;
 - xi. Sultan Iskandar Muda, Aceh;
 - xii. Minangkabau, West Sumatera;
 - xiii. Sultan Mahmud Badaruddin II, South Sumatera;
 - xiv. Adisumarmo, Central Java;
 - xv. Syamsuddin Noor, South Kalimantan; and

- xvi. Sultan Aji Muhammad Sulaiman Sepinggang, East Kalimantan.
- b. Seaports: All international seaports in Indonesia are open as entry points for international travels through the consideration from Directorate General of Sea Transportation of the Ministry of Transportation.
- c. Border Checkpoint:
 - i. Aruk, West Kalimantan;
 - ii. Entikong, West Kalimantan;
 - iii. Motaain, East Nusa Tenggara;
 - iv. Nanga Badau, West Kalimantan;
 - v. Motamasin, East Nusa Tenggara;
 - vi. Wini, East Nusa Tenggara;
 - vii. Skouw, Papua; and
 - viii. Sota, Papua.
- 2. The entry point as referred to number 1.a.x.i, 1.a.xii., 1.a.xiii, 1.a.xiv., 1.a.xv., and 1.a.xvi. are only intended as an entry point for PPLN involved in the Hajj program and will be opened within the period from June 4, 2022 to August 15, 2022.
- 3. PPLN are allowed to enter Indonesia while still following strict health protocols as stipulated by the Government.
- 4. PPLN WNA can enter the territory of Indonesia who meet the following criteria:
 - a. in accordance with the regulations regarding immigration regulated by Ministry of Law and Human Rights;
 - b. in accordance with the (bilateral) agreement scheme, such as the Travel Corridor Arrangement (TCA); and/or
 - c. obtained written special consideration/permission from the ministries/institutions.
- 5. The terms/condition to enter the territory of Indonesia through the entry point with following provisions:
 - a. comply with the provisions of health protocols as stipulated by the Government;

- b. PPLN is required to use *PeduliLindungi* application and download the application before departure;
- c. show the card/certificate (physical or digital) stating that they have been vaccinated for COVID-19 with a second dose for a minimum of 14 (fourteen) days prior to departure as a requirement of entering Indonesia with the following conditions:
 - i. WNI PPLN who have not received vaccines will be vaccinated at the entry point of international travel after a symptom check has been carried out at the entry point or at the quarantine facility after the RT-PCR examination has been conducted on the 4th day of quarantine with a negative result;
 - ii. WNA PPLN who are already in Indonesia and will conduct travel, whether domestically or internationally, shall be vaccinated through the program schemes or mutual cooperation (*gotong royong*) schemes in accordance with the laws and regulations;
 - iii. the card/certificate (physical or digital) of receiving the second dose of COVID-19 vaccine shall be written in English, other than the language of the origin state.
- d. The obligation to show the card/certificate of COVID-19 vaccination (physical or digital) as a referred to letter c are excepted for:
 - i. WNA PPLN holders of diplomatic visas and service visas related to official/state visit of foreign officials at the ministerial level and above and WNA who enter Indonesia with the Travel Corridor Arrangement scheme, in accordance with the principle of reciprocity while implementing strict health protocols;
 - ii. WNA PPLN who have not been vaccinated and intends to travel domestically and continue their travels with the aim of taking international flights out of the territory of the Republic of Indonesia, are allowed to not show their COVID-19 vaccination card/certificate as long as they do not leave the airport area

during transit waiting for international flights to be followed, with the following requirements:

- 1) has been authorized by the local Port Health Office (*Kantor Kesehatan Pelabuhan* or “**KKP**”) to carry out domestic travel with the aim of being able to continue its journey with international flights out of Indonesia; and
 - 2) show flight ticket schedules out of Indonesia for direct transit from the city of departure to the international airport in the territory of Indonesia with the final destination to the destination country.
- iii. PPLN under the age of 18 years old; and
 - iv. PPLN who have finished undergoing the isolation or treatment of COVID-19 and have been declared inactive to transmit COVID-19 however are unable to get the second dose vaccination, with the requirement of having to attach a doctor’s certificate from a Government Hospital of the country of departure stating that the person concerned is no longer actively transmitting COVID-19 or a COVID-19 recovery certificate;
 - v. PPLN with special health conditions or comorbid diseases which causes them to be unable to be vaccinated, with the requirement of having to 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 part in the COVID-19 vaccination.
- e. In the event the PPLN will carry out centralized quarantine with self-financing, it is required to show the receipt of payment confirmation for the reservation of a quarantine accommodation place from the accommodation providers while staying in Indonesia;
 - f. Upon arrival, PPLN shall conduct the examination of the symptoms of COVID-19, including body temperature check and continue the following provision:
 - i. in the event a PPLN is detected to have symptoms of COVID-19 and/or has a body temperature of above 37.5 degrees Celsius, it is required conduct RT-

- PCR with cost borne by the government for the WNI and the cost borne by independently for WNA.
- ii. in the event a PPLN is detected to have no symptoms of COVID-19 and have body temperature below 37.5 degrees Celsius, it is allowed continue travel with following conditions:
 - 1) for PPLN who have not been vaccinated or have been vaccinated for COVID-19 with a first dose for a minimum of 14 (fourteen) days prior to departure, are required to conduct quarantine for 5 x 24 hours;
 - 2) for PPLN who have received vaccination for COVID-19 with a second or third dose for a minimum of 14 (fourteen) days prior to departure, are allowed to continue travel;
 - 3) for PPLN under the age of 18 years old and/or require special protection, the quarantine arrangements will follow the provisions that apply to their parents or caregivers/travel companions; or
 - 4) for PPLN with special health conditions or comorbid diseases which causes the traveler to be unable to be vaccinated COVID-19 and PPLNs who have been completed isolation or treatment of COVID-19 and have been declared inactive in transmitting COVID-19 however are unable to get the second dose of vaccination, are allowed to continue travel.
 - g. After sampling of the RT-PCR test upon arrival as referred to in letter f.i., PPLN continue with:
 - i. examination of the immigration documents and customs documents;
 - ii. baggage collection and baggage disinfection;
 - iii. pick-up and drop-off directly to the hotel, lodging accommodation, or place of residence;
 - iv. waiting the result of RT-PCR test in the hotel room, rooms at lodging accommodation, or place of residence; and

- v. not allowed to leave the hotel room, rooms at lodging accommodation, or place of residence and are not allowed to interact with other people before the result of RT-PCR test shows a negative result.
- h. In the event that the RT-PCR test upon arrival as referred to in letter f.i shows a negative result, to be followed with the following provisions:
 - i. for PPLN who are unable to be vaccinated or they have been vaccinated for COVID-19 with a first dose for a minimum of 14 (fourteen) days prior to departure, are required to conduct quarantine for 5 x 24 hours;
 - ii. for PPLN who have been vaccinated for COVID-19 with a second or third dose for a minimum of 14 (fourteen) days prior to its departure, are allowed to continue travel;
 - iii. for PPLN under the age of 18 years old and/or requiring special protection, then quarantine arrangements shall follow the provisions applied to their parents or caregivers/travel companions;
 - iv. for PPLN with special health conditions or comorbid diseases which causes the traveler to be unable to be vaccinated for COVID-19, are allowed to continue the travel.
- i. In the event the PPLN has obtained a negative result upon confirmation of examination from the RT-PCR test upon arrival are allowed to continue the travel as referred to in letters h.ii and h.iv, are recommended to carry out independent health monitoring of the symptoms of COVID-19 for 14 (fourteen) days by implementing the health protocols;
- j. In the event that the results of the RT-PCR test upon arrival as referred in letter f.i, shows a positive result, then follow-up will be carried out with the following provisions:
 - i. if there are no symptoms or are experiencing mild symptoms, the isolation/treatment shall be carried out in a isolation hotel or centralized isolation facility stipulated by government or self-isolation at the place of

- residence with isolation/treatment times as recommended by the Ministry of Health; or
- ii. if accompanied with moderate symptoms or severe symptoms, and/or with uncontrol comorbid diseases, the isolation or treatment shall be carried at a COVID-19 referral hospital pursuant to the recommendation of the doctor and the suggestion of Ministry of Health; and
 - iii. all the cost for the treatment of COVID-19 and the medical evacuation for WNA are borne independently, while for WNI are borne by government.
- k. Quarantine obligation as referred to in letters f.ii.1) and h.i are carried out with the following provisions:
- i. For WNI PPLN, namely Indonesian Migrant Workers (*Pekerja Migran Indonesia* or “**PMI**”); Students that have completed their studies abroad; Government Employees returning from overseas official trips; or Representative of Indonesia in international competitions or festivals shall conduct centralized quarantine with the cost borne by government in accordance with the Decree of the Head of the COVID-19 Task Force regarding Quarantine Places and Obligation of RT-PCR for Indonesian Citizens of International Travelers;
 - ii. For WNI PPLN outside of the criteria as referred to number i shall conduct quarantine at a centralized quarantine accommodation place with costs borne independently; and
 - iii. For WNA PPLN outside of outside from the head of foreign representatives and families of the head of foreign representatives shall conduct quarantine at the quarantine accommodation place with costs borne independently.
- l. For PPLN which unable to be vaccinated or have been vaccinated for COVID-19 with a first dose and conduct quarantine for 5 x 24 hours, are require to conduct RT-PCR test on the 4th day of quarantine;

- m. In the event that the RT-PCR test as referred to letter l shows negative result, the WNI/WNA PPLN are allowed to continue travel and are recommended to carry out independent health monitoring of the symptoms of COVID-19 for 14 (fourteen) days and implement health protocols;
- n. In the event that the RT-PCR test as referred to letter l shows positive result, follow-up will be carried out with the following provisions:
 - i. if there are no symptoms or mild symptoms, isolation/treatment shall be carried out in isolation hotels or centralized isolation facilities stipulated by government or self-isolation at the place of residence with isolation/treatment times as recommended by the Ministry of Health; or
 - ii. if accompanied by moderate or severe symptoms, and/or with uncontrolled comorbid disease, the isolation/treatment shall be carried out at a COVID-19 referral hospital with isolation/treatment times pursuant to the recommendation of doctors and the suggestion of Ministry of Health; and
 - iii. all the cost of the treatment of COVID-19 and the medical evacuation of isolation/treatment for WNA are borne independently, while for WNI are borne by the government.
- o. In the event that the WNA PPLN is unable to finance the quarantine and/or their treatment when the RT-PCR test shows positive result, as referred to letter j, letter k.iii., and letter n, then the sponsor, Ministries/Institutions/State-Owned Enterprises (*Badan Usaha Milik Negara* or “**BUMN**”) who gives the consideration of entry permit for such WNA can be asked for the responsibility of the referred;
- p. The RT-PCR test examination as referred to in letter f.i and letter l may be requested with a written comparison by filling out the form that has been provided by the Port Health Office (KKP) or the Ministry of Health with the cost borne independently;

- q. Implementation of the RT-PCR comparison test as referred to in letter p is carried out concurrently or simultaneously by the KKP in 2 (two) laboratories for the purpose of SGTF comparison examination and the comparative examination of RT-PCR results, namely at: the Health Research and Development Agency (*Badan Penelitian dan Pengembangan Kesehatan* or Balitbangkes), Cipto Mangunkusumo National Central General Hospital (RSCM), Gatot Soebroto Army Central Hospital (RSPAD), Bhayangkara Raden Said Sukanto Hospital (RS. Polri), or other government laboratories (Environmental Health Engineering Centre, Regional Health Laboratory, or other government referral laboratories);
 - r. KKP International Airports and Seaports shall facilitate WNI or WNA international travelers who require emergency medical services upon arrival in Indonesia in accordance with the applicable laws and regulations;
 - s. Ministries/Institutions/Regional Governments that carry out the functions related to PPLN shall follow up this Circular Letter by issuing legal instruments that are in-line and are not in contradiction with the subject of this Circular Letter and applicable laws and regulations; and
 - t. Legal instruments as referred to in letter s are an inseperable part of this Circular Letter.
6. Quarantine accommodation as referred to number 5.k.ii and number 5.k.iii must obtain a recommendation from the COVID-19 Handling Task Force which has fulfilled the terms and conditions of the Indonesian Hotel and Restaurant Association for cleanliness, health, safety, and environment sustainability (CHSE) or the Ministry of Health for Jakarta and surrounding areas or the provincial health office in the regions related to the certification of the COVID-19 health protocol.
7. As the requirements for overseas departure from Indonesia, WNI PPLN above the age of 18 years old shall show the card/certificate (physical or digital) stating that they have been vaccinated for COVID-19 with a third dose (booster) through the *PeduliLindungi* application.

8. The provisions as referred to in number 7 are excepted to:
 - a. WNI PPLN with special health conditions or comorbid diseases which causes the traveler to be unable to be vaccinated COVID-19, with the requirement of having to attach a doctor's certificate from a government hospital stating that the person concerned has not and/or is unable to take part in the COVID-19 vaccination.
 - b. WNI PPLN who have completed isolation or treatment for COVID-19 and have been declared inactive in transmitting COVID-19 however are unable to get a third dose (booster) vaccination, with the requirement of having to attach a doctor's certificate from a government hospital or the Ministry of Health stating that the person concerned is no longer actively transmitting COVID-19 or a COVID-19 recovery certificate.
9. Dispensation in the form of an exception to quarantine obligations for WNI PPLN who have not received the second dose of vaccination in urgent circumstances (such as: having a life-threatening health condition, a health condition that requires special attention, or grief due to the death of a nuclear family member) with the requirement to follow the symptoms examination procedures relating COVID-19 as referred to number 5.f.
10. The application of dispensation in the form of an exception to quarantine obligation for WNI with urgent circumstances as referred to number 9 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 limited quotas based on the result of coordination agreement between Covid-19 Handling Task Force, the Coordinating Ministry for Maritime Affairs and Investment, and the Ministry of Health.
11. Strict health protocols as referred to in number 5 must meet the following terms and conditions:
 - a. The use of 3-ply masks must be done properly covering the nose, mouth, and chin while indoors or when in a crowd;

- b. Change the masks periodically every four hours and dispose of waste masks in the provided place;
 - c. Wash hands regularly using water and soap or hand sanitizer, especially after touching objects that other people have touched;
 - d. Maintain a minimum distance of 1.5 meters from other people and avoid crowds; and
 - e. It is advised not to speak one-way or two-way through telephone or in person throughout the trip by public transportation modes of land, rail, sea, river, lake, ferry, and air.
12. Every operator of transportation mode at the entry point for international travel is required to use the *PeduliLindungi* application.
 13. Supervision of the health quarantine of cargo ships and crews members in accordance with more specific and technical arrangements as determined by the Ministry of Health through monitoring by the Port Health Office (KPP) 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 authority shall jointly implement the control of travel of persons and safe public transportation from COVID-19 by establishing an Integrated Security Post;
2. Authorities, managers, and operators of public transportation assign supervision during the implementation of public transport operations;
3. Ministries/Institutions, the Indonesian National Army (TNI), National Police (POLRI), and the Regional Government has the right to stop and/or prohibit the of travel of persons on the basis of this Circular Letter and in accordance with applicable laws and regulations.
4. Ministries/Institutions, TNI, POLRI are assisted by the COVID-19 Handling Task Force at Airports and Seaports c.q. Port Health Office (KPP) of International Airports and Seaports shall conduct routine supervision to ensure compliance with the implementation

of health and quarantine protocols through telephone calls, video calls and field checks during this COVID-19 pandemic; and

5. Ministries/Institutions, TNI, POLRI, and Regional Government shall conduct disciplinary COVID-19 health protocol and law enforcement in accordance with the applicable laws and regulations.

H. Closing

1. This Circular Letter shall come into force on July 17, 2022 until a period that shall later be determined.
2. With this Circular Letter coming into force:
 - a. Circular Letter Number 19 of 2022 regarding Health Protocols for International Travels During the Corona Virus Disease 2019 (Covid-19) Pandemic; and
 - b. Addendum of Circular Letter Number 19 of 2022 regarding Health Protocols for International Travels During the Corona Virus Disease 2019 (Covid-19) Pandemic,is revoked and declared no longer in force.

This is so that it can be followed and carried out with full responsibility.

Stipulated in : Jakarta

Dated : July 8, 2022

Head of the National Agency for Disaster Management as the Head of the COVID-19 Handling Task Force,

(Signed and stamped)

Major General of the Indonesian National Army
Suharyanto, S.Sos., M.M.

Copied to:

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