



Briefing: Reconnecting New Zealanders: Future Border Settings Across Air and Maritime

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| | Action sought | Deadline |
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| Rt Hon Jacinda Ardern Prime Minister | agree/disagree to recs | 10 May 2022 |
| Hon Chris Hipkins Minister for COVID-19 Response | agree/disagree to recs | 10 May 2022 |
| Hon Dr Ayesha Verrall Associate Minister for COVID-19 Response | agree/disagree to recs | 10 May 2022 |

| Name | Position | Telephone | |
|-----------------|---------------------------|-----------|----------|
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Minister's Office

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Signed

Withdrawn

Comment for agency

Attachments: Yes/No

Briefing

Reconnecting New Zealanders: Future Border Settings Across Air and Maritime

To: Rt Hon Jacinda Ardern Prime Minister; Hon Chris Hipkins Minister for COVID-19 Response;
Hon Dr Ayesha Verrall Associate Minister for COVID-19 Response

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|------|-----------|----------------|--------------------------|
| Date | 9/05/2022 | Security Level | IN CONFIDENCE |
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Purpose

1. This briefing provides advice on the policy settings for international visitors arriving by air and sea, including vaccination requirements, pre-departure and on-arrival testing, and the option of mandatory travel insurance.

Executive Summary

2.

s9(2)(g)(i)
3. With COVID-19 now widespread in New Zealand, the role of the border in our response to COVID-19 is shifting to be open by default, with a focus on surveillance for new variants, protecting our health system from the burden of COVID-19 infected visitors, and being ready to respond to increases in risk.
4. Consideration now needs to be given to re-opening the maritime border to foreign vessels as soon as practicable, to align with the increasingly open air border and to enable the return (without need for an exemption) of cruise ships from October. Officials recommend lifting the ban on foreign vessels from 31 July to enable time for the necessary operational and legislative changes to be made.
5. Officials have reviewed the existing air border measures (vaccination, pre-departure and on-arrival testing) in light of the new purpose and to determine how the policy intent could be given effect at the maritime border. Aligning vaccination and testing requirements across the air and maritime borders is desirable, where possible, to give effect to the policy intent of border measures and ensure equitable treatment of visitors across both pathways.
6. Officials recognise, however, that there are some key differences between the borders which may impact relative risk and how settings are implemented. For example, many more passengers disembark at once, for relatively fleeting visits, at the maritime border and border agencies have little capacity for compliance checking at ports as compared to airports.

7. On balance, DPMC considers that the mix of settings that enables a more open approach, responsiveness, the detection of new variants, and protects the health system, while being both operationally and legally feasible are:
 - a) **Vaccination** continues to be a requirement at the air border through to September, with a further review in July, to protect our health system through the winter period.
 - b) Ministers have a choice of extending the vaccination requirements to maritime visitors with a low verification model or limiting the vaccination requirement to arrivals by air. Extending the vaccination requirement to visitors at the maritime border is feasible if verification by border agencies is not required and could be achieved by placing the obligation on cruise operators and other vessel operators instead.
 - c) **Pre-departure testing** (PDT) is removed after the variant plan is finalised, but no later than 31 July. Officials note that while the technical functionality of PDTs in the New Zealand Traveller Declaration (NZTD) can be turned on quickly, it will take at least a few weeks to fully resource manual checking of PDTs, and that random manual checks could be implemented within the first week;
 - d) **On-arrival testing** is maintained at the air border to detect new variants and inform any potential responses. This would be kept under review to ensure its scope is no wider than necessary to provide confidence in the efficacy of our Whole Genome Sequencing (WGS) border surveillance; and
 - e) Officials do not recommend expanding arrival testing at the maritime border due to significant implementation challenges, the lower relative risk, the limited surveillance utility gained by post arrival testing of these passengers, and because maintaining surveillance on all air arrivals will keep our ability to detect new variants high. Post arrival testing for vessel and cargo crew who are not required to meet vaccination requirements on arrival should remain.
8. These amendments will serve to reduce barriers to travel across both the air and maritime borders, enabling faster recovery of the aviation, tourism and cruise sectors, while still maintaining vigilance in detecting new variants and protecting our health system from an influx of visitors requiring hospitalisation for COVID-19.
9. Officials have explored the role that travel insurance can play in the safe growth of international traveller volumes and consider that it should be encouraged to ensure they can meet the costs of any treatment. Mandatory travel insurance is not a common requirement amongst our peers internationally and would be extremely difficult to verify.
10. Over time, we need to shift our measures out of emergency legislation into other legislative vehicles. As such, some of the proposals in this paper may require changes to primary legislation beyond the COVID-19 Act and officials will provide further advice on how and when this can be achieved.

Recommendations

We recommend you:

1. **Note** that with Omicron now widespread, the focus of border settings is on routinely detecting new variants and ensuring our health system is not impacted by COVID-19 infected visitors, as opposed to preventing cases arriving in New Zealand;
2. **Agree** to lift the ban on foreign-flagged vessels at 11.59pm Sunday 31 July 2022;

YES NO

3. **Note** that the Ministry of Health considers the public health risk at the maritime border is low and that an appropriate approach to managing the ongoing risks at the air and maritime borders would be to employ adjusted controls for each setting based on the risk at either border;

Vaccination requirements

4. **Note** that the Director-General of Health has recommended that the current vaccination requirements are maintained until the end of September to help reduce the burden on the health system from incoming travellers over the winter peak, and has expressed a preference for travellers being 'up to date' with their vaccinations (which could include a booster based on this definition in some countries);
5. **Note** there are significant operational implications associated with requiring travellers to be 'up to date' with their vaccinations, given that there would be differing definitions of these requirements in each jurisdiction;
6. **Agree** that vaccination requirements at the air border for non-New Zealand citizens, residents and Australian citizens ordinary resident in New Zealand are maintained until September, with an additional review of vaccination requirements by the Ministry of Health in July;

YES NO

7. **Direct** the Department of the Prime Minister and Cabinet, with the Ministry of Health and the Border Executive Board, to provide further advice on options for updating the vaccination requirement for arrivals at the air and maritime borders by the end of May;

YES NO

8. **Agree** to one of the following options for vaccination requirements for non-New Zealand citizens, residents and Australian citizens ordinary resident in New Zealand arriving at the maritime border:

EITHER:

8.1 Option 1 – Aligning the vaccination requirements for passengers arriving on recreational and cruise vessels with the air border requirements, noting that there would need to be a high-trust approach taken to compliance; or

YES / NO

8.2 Option 2 – Not implementing vaccination requirements for passengers arriving at the maritime border, noting that most cruise operators have their own vaccination requirements in place;

YES / NO

9. **Note** that if option 1 is selected, the Ministry of Health and the Border Executive Board will provide further advice on the implementation of any legal mechanisms and the approach to compliance for both recreational and cruise vessels;

Pre-departure testing

10. **Note** that while pre-departure testing may prevent some (but not all) travellers infected with new or existing variants from boarding flights and crossing the border to New Zealand, public health advice supports the removal of pre-departure testing;

11. **Agree** to remove the requirement for all travellers entering New Zealand by air to provide a pre-departure test after the Ministry of Health's variant plan is finalised and no later than 11.59pm Sunday 31 July;

YES / NO

12. **Note** that, if pre-departure testing were to be required again, for example if there were a significant variant of concern, Customs have advised that that the New Zealand Traveller Declaration could be updated quickly, and random manual checks could be reinstated within the first week;

Post arrival testing

13. **Note** that the Director-General of Health has recommended that on-arrival testing requirements remain in place given they remain an effective surveillance tool in detecting any new variants of concern;

14. **Agree** to maintain the current on-arrival testing requirements at the air border;

YES / NO

15. **Direct** the Ministry of Health to provide a transition plan no later than the end of June for arrival testing at the air border that:

15.1 reviews the ongoing proportionality of the measure

15.2 recommends a time when arrival testing can be reviewed or otherwise adapted, and

15.3 sets out how this fits into the broader surveillance approach, and how and when arrival testing could be strengthened in response to risk, if required, including the legal mechanism outside of emergency powers;

YES / NO

16. **Agree** that on-arrival testing will continue for maritime cargo and vessel crew who are not required to meet vaccination requirements on arrival, and are currently subject to post arrival testing requirements;

YES / NO

17. **Agree** that on-arrival testing for all other maritime arrivals, such as those arriving by cruise ships and other recreational vessels, will not be implemented due to operational challenges and limited surveillance given sufficient surveillance will be maintained at the air border;

YES / NO

Travel insurance

18. **Note** that since February 2020 the Ministry of Health has taken the approach that COVID-19 treatment was generally available to 'non-eligible' people under clause B23 of the Health and Disability Services Eligibility Direction 2011 because of the public health risk they pose and the need to encourage people to access testing and treatment for COVID-19, to align with the elimination strategy – but that the Ministry now advises that there is no longer strong public health rationale to provide funded COVID-19 treatment to travellers who are ineligible for publicly funded services;

19. **Note** that some travellers may enter New Zealand without appropriate travel insurance policies;

20. **Agree** that travel insurance for COVID-19 related medical care is not made mandatory at this time, but that it is strongly encouraged through enhanced communications;

YES / NO

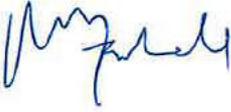
Legal framework

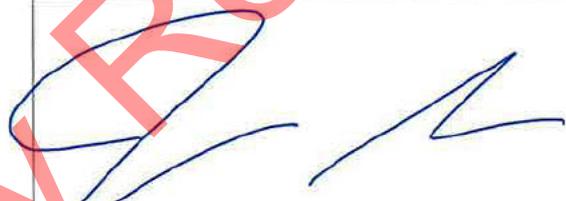
- 21. **Note** that requirements for international arrivals (such as pre-departure testing, vaccination and on-arrival testing) are implemented under emergency powers and that maintaining such requirements into the future would require new primary legislation;
- 22. **Direct** officials to provide advice on what new primary legislation would be required to maintain the requirements post arrivals agreed beyond the duration of the current Epidemic Notice;

YES / NO

- 23. **Agree** to proactively release this report, subject to any appropriate withholding of information that would be justified under the Official Information Act 1982.

YES / NO


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Head of Strategy & Policy
...../9/5/2022


Rt Hon Jacinda Ardern
Prime Minister
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Hon Chris Hipkins
Minister for COVID-19 Response
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Hon Dr Ayesha Verrall
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Context

11. The role of the border in our response to COVID-19 continues to evolve as the risk posed by international arrivals shifts compared to domestic risk. We have moved away from the Keep It Out approach towards more open borders. All people arriving from overseas by air are required to return a negative pre-departure test, not board a flight to New Zealand if they are exhibiting COVID-19 symptoms, be fully vaccinated (unless New Zealand citizens or residents¹) and undertake two rapid antigen tests (RATs) upon arrival in New Zealand (maritime arrivals disembarking are also required to undertake these two tests), report the results and get a PCR if positive. While these measures are significantly less onerous than previous settings, they still present some barriers to travel to New Zealand.
12. Attachment A outlines New Zealand's current border settings across air and maritime.
13. With Omicron now widespread, we consider that our border settings should focus on routinely detecting new variants and ensuring our health system is not significantly impacted by COVID-19 infected visitors. Over time we are moving towards the border being 'open by default', while still being able to respond to threats (e.g., new variants) as they emerge. As such, it is time to review our air and maritime border settings in line with this new purpose.
14. Ministers have decided that the air border should be open to tourists and visitors by 31 July and have asked for further advice regarding lifting the ban on foreign vessels. This would open up the maritime border to cruise ships and recreational vessels. Until this takes effect, arrivals by sea are limited to crew and New Zealand-flagged vessels. We now need to consider the alignment of requirements for visitors across both the air and maritime borders to ensure that there is a simple and clear approach to border settings, while still allowing for the inherent differences between each.

Lifting the ban on foreign-flagged vessels

15. The maritime border was closed to foreign-flagged vessels early in New Zealand's COVID-19 response, with non-New Zealand flagged cruise ships and recreational vessels being unable to enter. Initially this took the form of a ban on cruise ships, before a broader foreign flagged vessel prohibition was implemented through clause 9 of the Maritime Border Order made under the COVID-19 Public Health Response Act 2020. This prohibition covered all foreign flagged vessels except cargo, fishing and foreign state ships, with exemptions available for other vessels on a case-by-case basis from the Director-General of Health.
16. It is now proposed that the prohibition on foreign flagged vessels is removed. The legal complexities of implementing this change will mean it will take officials a few weeks to work through the required changes to the Maritime Border Order. As such, officials recommend lifting the ban on foreign vessels at 11:59pm Sunday 31 July.

¹ Or exempt from vaccination requirements.

Vaccination requirements

Background to New Zealand's COVID-19 vaccination requirements

17. COVID-19 vaccination requirements for travellers who arrive by air were introduced on 1 November 2021 to reduce the risk of a COVID-19 outbreak as part of the ongoing elimination approach. Both New Zealand citizens and residence class visa holders (including Australian citizens ordinarily resident in New Zealand) arriving by air are now exempt from the vaccination requirements².
18. Since COVID-19 vaccination requirements were introduced, boosters have become available internationally. Domestically, New Zealand is implementing a definition of 'up to date' vaccination, which would include boosters³. However, border settings only include primary doses as a requirement for entry by air (i.e., either one or two shots, but not including boosters), and there are no vaccination requirements at the maritime border.
19. While travellers from Australia, Europe, the UK and the US have ready access to boosters, other jurisdictions have much more limited access. Requiring boosters as a condition of entry is not common internationally, and many countries are either removing vaccination requirements or requiring a primary course only.

Current purpose of COVID-19 vaccination requirements for international arrivals

20. There has been a shift in the purpose of requiring travellers (visitors and tourists in particular) to be vaccinated. The current objective is to reduce the severity of serious illness from COVID-19, and therefore the potential burden on the health system as we head into the winter period and borders reopen. Vaccinations also reduce the potential for new variants to emerge.
21. As of 11.59pm Sunday 8 May, the seven day average for border and community cases was 94 and 7,479 cases each day respectively. In the Omicron wave, just under one per cent of reported cases have been hospitalised in New Zealand. At these ratios, the impact on the health system of infectious non-citizen or resident arrivals will be manageable. We expect non-citizen or resident arrival numbers to continue to increase and the removal of a vaccination requirement would increase the proportion of arrivals that are infectious. Case numbers are at present falling around the world, however, which should moderate this effect somewhat. Daily border cases fluctuate, however, and are currently increasing in proportion to air arrivals.

Public health advice on vaccination requirements at the air and maritime border

22. The Ministry of Health has reviewed the COVID-19 vaccination requirements for international travellers by air and maritime to New Zealand. It considered whether existing vaccination requirements should be maintained, and, if so, whether there should be any updates to these requirements, such as requiring a booster.

² And those under 17 years, travellers with a medical exemption certificate, transit passenger passengers, and travellers otherwise exempt from vaccination.

³ See the Ministry of Health's briefing 'The Future of COVID-19 Vaccine Certificates' (HR20220782).

23. They advise that, while vaccines continue to be effective in reducing the risk of severe disease and death due to COVID-19, they do not eliminate the risk of COVID-19 transmission (across all variants). The material benefit of the vaccination policy is to reduce the risk of visitors becoming severely unwell while in New Zealand and burdening the health system, which has the potential for travellers to displace New Zealanders' care (including non-COVID-19 care).
24. Public health advice is that there is now reduced rationale for vaccination requirements as a mandatory condition of entry to New Zealand at either the air or maritime border on the basis that COVID-19 is now widespread in the community and vaccines have limited impact on transmission. However, the Director-General has recommended that the current vaccination requirements are maintained until the end of September, with a review in July to ensure they remain fit for purpose⁴. The Director-General has noted that, while we may not see a material impact on community transmission from unvaccinated travellers, this will change over time as traveller volumes increase. The relaxation of border settings and airlines removing vaccination from their conditions of travel will see an increase in the volume of travellers and an increase in unvaccinated citizens and residence-class visa holders entering the country.
25. In addition, as receiving a booster dose of a COVID-19 vaccine reduces the likelihood of severe illness, but boosters are not available to all travellers, the Director-General's preference is that there is a requirement that travellers are 'up to date', according to their countries requirements, with their vaccinations (based on the definition in their country of origin), which could include a third (booster) dose if they are available in the traveller's country of origin.
26. The Ministry also advises that the public health risk at the maritime border, if opened to foreign vessels (e.g., cruise ships) is low. However, cruise ship passengers who become severely ill may still require hospital care in New Zealand and there remains concern about the capacity of the health system to meet the potential demand from COVID-19 positive passengers and crew.
27. Prior to the borders closing the vast majority of cruise arrivals were Australian and New Zealand citizens and this is likely to remain the case as voyages recommence.
28. Given the limited volume of travellers entering through the maritime border, and the effective risk-management procedures that cruise ships have on board, the Ministry considers there is limited rationale for introducing new vaccination requirements. Its view is therefore that an appropriate approach to managing the ongoing risks at the air and maritime borders would support adjusted controls for each setting, based on the risk in each context.

International comparison of vaccination requirements

29. According to the United Nations World Tourism Organisation, 23 jurisdictions, including Denmark, Ireland and the United Kingdom, have now lifted all COVID-related travel requirements, including the requirement to provide proof of vaccination. In Australia, Canada and the United States, while travellers continue to be required to provide proof of a complete primary course of an approved COVID-19 vaccine, there are no requirements about the maximum interval since last dose or booster dose.

⁴ DG Memo – Review of COVID-19 vaccination requirement for international travellers by air to New Zealand. Dated 14 April 2022.

30. While some jurisdictions, including Germany, Japan and South Korea, have implemented a maximum interval since last dose requirement that travellers must meet in order to be considered fully vaccinated, international settings are increasingly trending towards easing, rather than tightening, vaccination requirements.

Options for vaccination of incoming travellers at the air border

31. There are two immediate options for vaccination requirements at the air border:
- a) Option 1 – Extending the current vaccination requirements (usually two doses) until September. This option includes an end of July review to ensure that vaccination requirements remain fit for purpose.
 - b) Option 2 – Removing vaccination requirements, and instead using public health messaging to strongly encourage all travellers to keep up to date with their COVID-19 vaccinations.
32. Option 1 would help to avoid the strain on the health system from COVID-19 in the context of the health system which will also be managing an influx of other infectious diseases (such as flu and RSV) that will enter New Zealand as the border continues to re-open.
33. Option 2 would reduce barriers to travel to New Zealand from unvaccinated non-New Zealand citizens, residents and Australian citizens ordinary resident in New Zealand. However, this would increase the likelihood (while still small) of unvaccinated international travellers ending up in hospital over the winter period.

Requiring travellers to be 'up to date' with vaccination requirements is operationally difficult

34. We have also considered whether vaccination requirements could be strengthened by requiring travellers to be 'up to date' on vaccinations, while traveller volumes increase and until we reach the end of winter. This would provide enhanced protection for some travellers against severe illness, where 'up to date' includes a booster. Up to date vaccination also best addresses concerns of waning immunity (i.e., people that were last vaccinated over 6-9 months prior). However, it is operationally difficult to implement and there is currently there is no NZTD capability at the maritime border (should the vaccination requirement be extended to maritime visitors).
35. The Ministry of Health notes that 'up to date' vaccinations could change rapidly if additional doses or age groups were to be considered. This would require continuous updates if international travellers were required to be 'up to date' and could create confusion and uncertainty. The NZTD does not allow for determining differing vaccination requirements based on the traveller's country of origin, which is likely to create an additional administrative burden and increase processing times.
36. Many countries are yet to make booster doses widely available so the definition of 'up to date' will differ. It will also be difficult to determine what the 'up to date' vaccination schedule would look like for each traveller as the country they are departing from may not be the country in which they have received their vaccinations to date. Adding a requirement for travellers to be 'up to date' with their vaccinations would be complex from a communications perspective, as there would not be a consistent definition of the vaccination requirements for entry to New Zealand. This would add further complexity to the 'traveller journey'.

37. DPMC will provide further advice by the end of May on possible options for strengthening vaccination requirements, such as the requirement for boosters, being 'up to date' with vaccinations' or having a minimum interval from the last dose. As part of this advice, further consideration will also be given to the uptake of boosters amongst our most significant visitor markets.

Acquired immunity may help to boost protections

38. Immunity from prior COVID-19 infection is also effective in increasing an individual's protection. While recognising the role of infection related immunity in vaccination requirements would be too operationally complex to implement, as most populations have had widespread exposure to COVID-19, this is likely to enhance the protection offered by a primary course of vaccines for those travellers. The Ministry of Health is seeking further advice from the COVID-19 Vaccination Technical Advisory Group on this matter.

Recommendation: Maintaining vaccination requirements at the air border [legally privileged in part]

39. We recommend that vaccination requirements remain in place until September, with further advice from DPMC later this month, and an additional review by the Ministry of Health in July. This approach will balance the need for a system that is easily understood and able to be administered with the risks of travellers becoming severely unwell and placing a strain on the health system. Reviewing these settings in July will ensure the requirement remains proportionate.

40. [Legally privileged] s9(2)(h)

41.

42. s9(2)(g)(i)

Options for vaccination requirements at the maritime border

43. Consideration also needs to be given to whether vaccination requirements should be extended to visitors at the maritime border.
44. There are currently no vaccination requirements at the maritime border for arrivals on cargo and fishing vessels. This allows maritime crew changes to occur onshore (involving some

unvaccinated crew) and protects our maritime supply chains. There are existing measures in place for managing COVID-19 risk at the maritime border, for example through relevant vessel management plans, which enable safe loading/unloading from these vessels even when COVID-19 may be on board. We do not consider that there should be any additional vaccination requirements applied on cargo and fishing vessels.

45. There are differences between the air and maritime border, which mean that alignment of vaccination settings is not always desirable or possible. The Ministry of Health has advised that several key factors in the maritime context reduce the risk of overloading the health care system:
- a) Almost all passengers arriving by sea will arrive on cruise ships, which come with their own medical facilities;
 - b) Ships can be relocated in the event of an outbreak (for example, moving to a larger centre with more developed health facilities, if an outbreak happened to occur while the ship was in a more isolated area);
 - c) Passengers arriving by sea spend several days in transit as opposed to air arrivals with shorter transit times;
 - d) Maritime passengers consequently spend relatively little time ashore given the accommodation and other services provided on cruise ships (these facilities also provide for passengers to self-isolate on board their ship if required);
 - e) There are well-established infection prevention controls on cruise ships, which were designed in the context of Delta and have been used in other jurisdictions for some time.
46. The cruise industry has indicated that vaccination and pre-departure tests will be a commercial requirement for all crew and passengers (irrespective of nationality). The BEB and Ministry of Health are confident that the commercial drivers on the industry will ensure a high degree of risk management. However, applying the same vaccination requirements that apply at the air border could provide an additional level of assurance.
47. There are two options for requiring vaccination for non-New Zealand citizens, residents and Australian citizens ordinary resident in New Zealand at the maritime border:
- a) Option 1 – Align the vaccination requirements for passengers arriving at the maritime border with the air border requirements;
 - b) Option 2 – Do not introduce vaccination requirements on passengers arriving at the maritime border.
48. Option 1 would provide consistency between the requirements across the air and maritime borders. While the risk at the maritime border may be low, for example given some of the medical facilities on board cruise ships, there may still be value in ensuring consistent treatment for unvaccinated travellers across both border settings particularly from a communications perspective. In addition, there is still a risk that recreational or cruise ship passengers that become severely ill may still require hospital level care in New Zealand and therefore a vaccination requirement could help to protect the health system.

49. Officials have considered how Option 1 could be implemented, including:
- a) Strengthening the requirements on recreational and cruise ships to ensure that passengers are vaccinated for entry to New Zealand – this would place the burden of compliance on the industry, which may create operational complexities that are not fully understood. It is likely that a high-trust approach to Government monitoring and compliance would need to be taken.
 - b) Creating a requirement for passengers entering New Zealand to meet vaccination requirements – there would be substantial operational complexities with this option, particularly if any compliance checks were required⁵. In order for this option to be operationally feasible, there would need to be a high-trust approach to implementation, which could involve infringement notices and limited (if any) spot checking. This could be somewhat simplified when the NZTD becomes available for maritime passengers, but until that is in place, we will have to rely on some form of information provided by the person in control of the vessel.
50. Under either option, compliance with vaccination requirements will not be able to be performed at the same level as with air border arrivals, due in part to the discrepancy in available digital arrival information between the air and maritime borders. Further consideration will also be given on how this could be applied to recreational vessels.
51. If Ministers choose Option 1, to align the vaccination requirements at the air border with the maritime border, officials consider that this requirement should be placed on cruise ship operators (i.e., the option outlined in paragraph 49 a). Ministry of Health and BEB officials would provide further advice on the most appropriate legal and/or operational mechanisms for implementing this option. For example, further consideration will be given to whether this could be done through auditing and monitoring (such as of cruise ships disease management protocols) or other mechanisms.
52. As outlined in paragraph 24, the Director-General of Health has recommended that the current air border vaccination requirements should remain in place until the end of September, with a review in July. As cruise ships will not return to New Zealand until October⁶, it is possible there may be no requirements in place by the time the cruise season starts if the air and maritime borders are aligned.
53. Option 2 is most consistent with public health advice, given the low risk that these travellers pose to our health system, which is due in part to the existing procedures in place across the industry for managing COVID-19 risk. We note that clear communications would be needed to highlight the different approach to vaccination requirements at the air and maritime border. For cruise ships, vaccination requirements imposed by the industry will actually mean a higher threshold for passengers to come to New Zealand, as citizens and residents will have to be vaccinated to board the ship.

⁵ For example, there would be limited ability to check 4,000-5,000 passengers' requirements on a cruise vessel on arrival, without significantly delaying the vessel or interfering with operations. Processing and assurance checking would not be feasible given the numbers involved and arrival facilities available.

⁶ Ships, including cruise ships, can enter now with a DG exemption. One cruise ship has already been given an exemption.

Pre-departure tests

The rationale for pre-departure testing has shifted

54. Pre-departure tests (PDTs) were introduced under New Zealand's Elimination Strategy to help prevent COVID-19 entering New Zealand's air border. PDTs were not required at the maritime border as travellers are onboard a ship for a significant period of time.
55. PDTs taken between 24 and 48 hours prior to travel are likely to reduce, rather than stop, the flow of cases across the border and, as such, may have a limited impact on slowing the arrival of new variants. Because we do not get data on any genomic sequencing from PDTs, there is little role in variant detection by maintaining them. For example, PDT was not able to prevent cases of Omicron entering New Zealand.
56. Canadian border agencies estimate that the prevalence of incoming vaccinated travellers testing positive for COVID-19 has increased from 1.48 percent to 3.24 percent since the removal of the PDT requirement on 1 April. However, in Canada, the United Kingdom, and Ireland, the removal of PDTs has not coincided with high levels of ICU numbers with the Omicron Variant.

PDTs come with social and economic trade-offs

57. There are economic and social costs associated with the requirement to have a PDT, which mean that PDT requirements have a dampening effect on travel. The cost of PDTs can be high – up to \$1200 for a family of four. Additional costs also fall on travellers who may have to make alternative accommodation and flight arrangements with as little as 24 hours' notice if a PDT is positive. Where a traveller's positive result is caused by a previous, rather than current, infection they are required to meet the cost of a follow up medical certificate in order to travel to New Zealand, which are not always accessible. In these situations, people (including New Zealand citizens) who are no longer infectious are unable to return to New Zealand.
58. Additionally, many travellers report that PDTs are not readily available, particularly in jurisdictions such as the UK where widespread testing for COVID-19 is no longer a priority.

International shift away from PDTs

59. Internationally, there has been a shift away from PDTs with most OECD countries removing the requirement for fully vaccinated travellers to return a negative PDT since the start of January 2022. New Zealand is now one of only five OECD countries to maintain the requirement, alongside the United States, Israel, Japan, and South Korea.
60. Australia and Canada have offset the risk of removing PDTs by not allowing unvaccinated non-citizens or residents to enter and maintaining some form of post arrival testing. Many European countries continue to use PDTs only for unvaccinated travellers who have not been previously infected.
61. Several countries, including Denmark, Norway, Ireland, the UK, Mexico, and Iceland have eliminated all border restrictions, including PDTs, reverting to pre-pandemic border settings.

Public health advice

62. PDTs may prevent some, but not all, travellers infected with new or existing variants from boarding flights and crossing the border to New Zealand. It is possible that removing the requirements would lead to a small increase in asymptomatic people boarding a flight to New Zealand. However, this is not expected to be materially significant relative to the level of community transmission of COVID-19 in New Zealand.
63. On balance, the Ministry of Health considers that PDT requirements for travellers to New Zealand) are no longer proportionate based on public health grounds and that our broader testing on arrival system aimed at detecting new variants better meets our current objectives.

Turning PDTs back on in the future

64. Border agencies have indicated that while the PDT requirement in the NZTD can be turned on again very easily, the challenge would be resourcing the NZTD Verification Service to complete any manual checks of PDT documents submitted. Once PDTs are turned off, much of the NZTD Verification Service resource will be reallocated and it would take at least a few weeks lead in time to reinstate. However, Customs could begin random manual checks within the first week. This would be dependent on the availability of PDT services in other countries.
65. The Ministry of Health has indicated that PDTs will remain in our toolkit should a more transmissible and/or virulent variant emerge. The circumstances that might trigger a reintroduction of PDTs will be included in the final variant plan.
66. Our ability to reintroduce PDTs currently relies on COVID-19 Orders being active. If emergency powers under the COVID Act were no longer available, a reintroduction of PDTs would require new primary legislation.

Recommendation: remove PDT requirements for all travellers

67. While there are options about removing PDTs for some travellers (e.g., expanding PDT exemptions for people travelling from Australia and additional Pacific Islands countries DPMC and the Ministry of Health recommend removing the requirement for PDT for all travellers. This would align New Zealand's position with international norms that remove PDTs for vaccinated travellers.
68. Non-citizen arrival numbers will continue to increase, and the removal of PDT requirements would increase the proportion of arrivals that are infectious. However, we do not expect this to have a significant impact on hospitalisations. In addition, reduced case numbers internationally should moderate this effect. Maintaining the vaccination requirement helps to offset any increase in risk from removing PDTs.
69. The removal of PDTs will require an amendment to the Air Border Order. Agencies advise that changes will be required to the NZTD system, communications material, guidance for airlines and contact centre processes. The exact timing PDTs are removed will depend on finalisation of the variant plan and its explanation of the circumstances that PDTs may be required in future, but no later than 31 July.

Post arrival testing

The rationale for post arrival testing has shifted

70. Testing requirements for international arrivals entering New Zealand help identify cases and ensure they can be appropriately managed. Currently, international arrivals are required to undertake day 0/1 and day 5/6 RATs. If they test positive, they are required to have a PCR, of which a sub-set of positives are taken for WGS, and others will be stored⁷.
71. The original purpose of post arrival testing during our Elimination Strategy was a 'belts and braces' approach when arrivals were required to enter a MIQF for 14 days to identify and quarantine potential COVID-19 cases. Asymptomatic PCR testing of all arrivals was an added measure to ensure that all cases were identified so that they could be moved to a quarantine facility, and isolated to prevent spread. Travellers were tested again before entering the community.
72. However, the purpose of post-arrival testing has now shifted. Given the current epidemiological context and our response to the Omicron outbreak (including that arrivals are no longer required to isolate), the importance of testing all arrivals (whether symptomatic or not) becomes less about detecting all Omicron cases and more about:
 - a) identifying new variants/lineages arriving at our border to understand any trends in epidemiology⁸
 - b) using this information to complement other epidemiological data to support public health decision making in response to more transmissible and virulent variants.
73. Further public health rationale for post arrival testing is that it enables identification of cases, which triggers isolation requirements to reduce transmission and supports access to treatment.
74. Attachment B contains compliance rates for post-arrival testing⁹ during the first nine weeks of the 'testing post arrival' pathway. Since the system began the rate of traveller compliance with RAT testing has ranged from 73 percent to 86 percent with an average of 77 percent compliance. The case positivity rate remains at 1.7 percent of arrivals.
75. Internationally, countries have taken different approaches to on-arrival testing. England no longer has any post arrival testing requirements, while the requirements differ between states in Australia (e.g., Victoria requires a test if travellers become symptomatic, while New South Wales requires a test be done within 24 hours of arriving). Canada requires random testing for fully vaccinated travellers (and accompanying unvaccinated children under 12 years) as part of its surveillance programme. Those selected for on-arrival testing

⁷ However, from 3 May 2022, individuals who arrive in New Zealand by ship and test positive for COVID-19 using a RAT are not being asked to undertake a follow-up PCR test if they elect to self-isolate onboard their ship.

⁸ While it is most likely that we will be notified of the existence of a new variant through our overseas intelligence networks, the Ministry of Health considers that detection of a new variant within New Zealand is needed sooner, rather than later, so that appropriate action can be taken as required.

⁹ Currently the total number of testing post arrival travellers is underreported as there is a proportion (six to eight percent) of arrivals who have not correctly completed the online NZTD prior to departure and instead used a paper declaration. This means that the Ministry of Health is unable to link these travellers' test results to the National Border System. Work is underway with New Zealand Customs to resolve this issue.

are directed to complete the COVID-19 molecular test either with an on-site provider (located landside after Customs), a specific testing station, or a via self-swab kit.

76. It is timely to consider whether testing requirements for international arrivals remain proportionate, operationally feasible, and if provision of this testing is consistent with the principle that testing ought to be prioritised for government funding where there is a clear public health benefit, alongside social and economic benefit in doing so. Also relevant is that Ministers have indicated a preference for a system that can adapt to risk, where fewer routine tests are undertaken in an environment of low variant risk but can be scaled up in response to concerns about a new variant.

Air border testing post arrival

77. A number of options have been considered for post arrival testing in New Zealand including status quo requirements, testing of symptomatic arrivals only, and randomised testing.
78. DPMC and the Ministry of Health recommend maintaining the current testing regime for international arrivals. Compared to the other options considered, the status quo is operationally most simple to implement, is clear for individuals to understand (as it is the same requirement for every individual), and is most likely to ensure that a sample of 300 positive border cases per week is obtained (i.e., the number required to reliably detect any variants which are above a threshold of one percent of all border cases).
79. Once this system is more mature and passenger volumes are higher (to help ensure that the random sample was sufficiently large for its intended surveillance purposes), consideration could be given to moving to a more randomised model that is scaled up to the level required to meet a sample of 300 positive border cases per week. We propose that a review of post arrival testing is undertaken in June, or earlier if case numbers allow, ahead of larger traveller volumes expected from 31 July. With larger traveller volumes, daily cases at the border are expected to substantially increase, potentially doubling by July.
80. Requiring symptomatic arrivals only to test is not recommended. This would rely on a very high trust model, which may undermine the performance of the surveillance system if the sample size were not high enough and may still require the same number of RATs to be distributed to ensure those that are symptomatic, or develop symptoms soon after arrival, have easy access to tests.
81. Consideration has also been given to whether arrivals should be required to meet the cost of testing, or whether they should be required to purchase their own RATs from a private retailer upon arrival. While this would save some operational costs, it is likely that a 'user pays' system would lead to lower compliance of travellers with the RAT testing regime and subsequent reduced effectiveness of New Zealand's testing and surveillance system. DPMC does not recommend changes to the funding model at this time.

Maritime border post arrival testing

82. Maritime testing requirements were updated on 2 May to require maritime arrivals to test post arrival in alignment with the air border requirements while they remain onshore (i.e., if a crew member departs prior to the day 5/6 test it would not be undertaken). Travellers who return positive tests are required to have a PCR.

83. Currently, as it is largely only cargo and vessel crew that are subject to these testing requirements¹⁰, these testing requirements are easily implemented by agencies which are ensuring availability of the RATs for arriving vessels. However, from 31 July (as proposed) there will be significantly more visitors across the maritime border, particularly from October when cruise ship season begins in earnest. In the 2019-2020 season, New Zealand had 41 cruise ships arrive (most doing multiple journeys), sometimes carrying 4000+ passengers. More travellers may also start arriving on yachts and other recreational vessels¹¹.
84. Operationally, border agencies have indicated that it would be impossible to test the large cohorts of cruise ship passengers disembarking at once. Given the limited utility gained of testing, there is not a proportionate rationale to require testing of these cohorts.
85. DPMC and the Ministry of Health consider there is limited utility in testing all maritime arrivals. Most arrivals are onshore for short periods of time and tests may not be followed up with PCRs if positive. The information collected would have little value to support public health decision making in response, particularly as cruise arrivals are less likely to require care from the New Zealand health system given the extensive onboard health facilities. Moreover, from a surveillance perspective, officials are confident that testing at the air border will provide sufficient data.
86. However, DPMC is of the view that post arrival testing for cargo and vessel crew should remain given that there is no vaccination requirement for these cohorts and this layer of protection is already implemented at the maritime border. While public health risk posed by this groups is very small, DPMC considers it should remain in place for this cohort until vaccination requirements are removed for all travellers, so that there is some level of protection retained for these travellers.
87. DPMC recommends that most travellers arriving at the maritime border (the bulk of whom from October will be cruise ship passengers) should not be required to undergo post arrival testing. However, testing should be retained in its current form for cargo and vessel crew. If agreed to, the testing at the maritime border Gazette notice will be amended.

Travel insurance

88. Officials have started to explore how requiring travel insurance could reduce the potential burden of hospitalised visitors either by ensuring their costs are covered, or by enabling them to be cared for outside of the public health system.

International travellers are generally liable to pay for health care received in New Zealand

89. International travellers to New Zealand are generally required to fund healthcare treatment. Exceptions to this include travellers covered by the Health and Disability Services Eligibility Direction 2011 (2011 Direction), which specifies who is eligible to receive funded services under the Public Health and Disability Act 2000. Australia and the United Kingdom have reciprocal agreements with New Zealand in relation to publicly funded health services for acute care in hospitals.

¹⁰ New Zealand citizens and travellers with DG exemptions can also currently arrive.

¹¹ Usually, recreational vessels will carry under ten passengers, but super yachts may carry double that.

90. Travellers from other countries residing in New Zealand on work visas with a duration of two years or more are also eligible for publicly funded health and disability services including COVID-19 testing and treatment¹². Those in New Zealand on other visa types (including work visas of less than two years duration) are generally not eligible for publicly funded health services including primary care but may receive funded services relating to infectious or quarantinable diseases in certain circumstances to address risks to other people.
91. Since February 2020, the Ministry of Health has taken the approach that COVID-19 treatment (including access to testing, access to ICU facilities, ventilators, hospital services etc.) was generally available to people (who would otherwise be non-eligible) under clause B23 of the 2011 Direction because of the public health risk of not providing these services posed to the community, and the need to encourage people to access testing and treatment for COVID-19, to align with the elimination strategy being followed at the time.

Public health advice does not support all international travellers being eligible for publicly funded COVID-19 related healthcare

92. The Ministry of Health recently reconsidered this position. Given the prevalence of Omicron in the community and a move away from the elimination strategy, the Ministry of Health now considers that there are no longer strong public health imperatives to generally¹³ provide funded COVID-19 treatment to those who are ineligible for publicly funded services under the 2011 Direction – except for PCR testing following a positive RAT, which forms an important part of New Zealand's ongoing surveillance for new variants and supports people to follow testing and isolation requirements that are expected of them post arrival. With COVID-19 now widespread in the community and the moderately high level of booster dose coverage, the Ministry considers that visitors no longer pose a high risk to the community, and that the testing and notification requirements in the COVID-19 Health Order provide sufficient safeguards to record and monitor public health risks.
93. Should a new variant emerge, and the public health risk change accordingly, the Ministry will reconsider whether a more general application of clause B23 should be recommended.
94. New Zealand does not require most international arrivals to have travel insurance (international students, working holiday visa holders and RSE workers do have obligations), although it is generally expected that travellers will have appropriate coverage to meet medical and other related costs as necessary – which is reinforced through messaging on government and industry websites.

Some international travellers may enter New Zealand with no ability to pay for COVID-19 (or other) related health care

95. This change in eligibility for publicly funded COVID-19 related healthcare means that some international travellers may enter New Zealand without appropriate travel insurance policies

¹² For people being issued two-year work visas offshore, Immigration New Zealand put a start date on these visas on the date the visa was issued. Therefore, by the time the traveller arrives in NZ there is less than two years on their visa, therefore they are not eligible for publicly funded healthcare.

¹³ Note, however, that the Ministry of Health considers that decisions as to the application of the clause B23 exception to a particular individual should be made at an operational level based on their particular circumstances. To facilitate consistency across New Zealand, the Ministry of Health is undertaking work to further clarify under which specific (individual) circumstances exceptions may apply.

(i.e., that include coverage for COVID-19 health care). This is of concern as, if tourists do not honour COVID-19 related medical debts (which are likely to be higher for those not fully vaccinated), this may lead to an increased financial burden on our healthcare system.

96. A lack of data on the proportion of international arrivals who have historically entered New Zealand with medical insurance coverage means that it is not possible to quantify the potential scale of this issue. Available data indicates, however, that in the five years to 2020 around a third of foreigners did not pay their health care costs, to the combined value of around \$68.5 million¹⁴. Officials anticipate however that the number of tourists without travel insurance and/or other means of meeting medical debts (to at least some degree) would be small. Australian tourists may be less likely to hold travel insurance but they are eligible for publicly-funded treatment if acutely unwell.

Some jurisdictions have introduced a travel insurance requirement

97. Some jurisdictions have implemented mandatory travel insurance as a way of mitigating the potential financial burden on the health system from international travellers. This includes Chile, Egypt and Thailand. For entry to Singapore, COVID-19 travel insurance is required for unvaccinated short-term visitors. Countries that do not require travel insurance include Australia, Canada, the United Kingdom, and the United States.
98. Based on direction from Ministers, officials have preliminarily considered whether travel insurance for COVID-19 related medical cover should be made mandatory to mitigate the risk of travellers not paying for COVID-19 related health care costs incurred in New Zealand. This option has been assessed against enhancing communications to encourage travel insurance, or the status quo (not requiring travel insurance). Attachment C outlines these options in greater detail.
99. On balance, DPMC recommends that travel insurance for COVID-19 related medical care is not made mandatory at this time, and that the option of 'enhancing communications' be progressed. This option will help to mitigate some of the identified financial risk, is operationally feasible to implement, and compared to making insurance mandatory is less likely to have a dampening effect on travel. Given that the scale of the problem is not known at this time, it is also a potentially more proportionate response to the issue.
100. Should Ministers wish, provided that operational constraints could be overcome, this advice could be reconsidered in future. For example, if vaccination requirements for international travellers were relaxed, insurance requirements for all or a sub-set (e.g., based on age or vaccination status) could be reconsidered as unvaccinated travellers are more likely to require hospital level care than fully vaccinated travellers (and thus the scale of the potential problem would likely be greater). It could also be reconsidered if the identified financial risks materialise to an unmanageable degree although this is considered unlikely.
101. [Legally privileged] ^{s9(2)(h)}

¹⁴ Foreigners responsible for \$68.5m of debt written off by New Zealand District Health Boards - NZ Herald

Treaty of Waitangi analysis

102. The Crown's obligations to Māori under the Treaty of Waitangi requires active protection of tāonga, and a commitment to partnership that includes good faith engagement with, and appropriate knowledge of the views of iwi and Māori communities. In this context, it involves considering what will support a response that is co-ordinated, orderly, and proportionate, considering the Crown's obligation to actively protect Māori health, interests and rangatiratanga.
103. Due to time constraints, we have not consulted with iwi Māori on the proposals in this paper, however, we note that in the past the National Iwi Chairs Forum (Pandemic Response Group (PRG)) has indicated a preference to maintain a conservative approach when reviewing restrictions to ensure disproportionate impacts on Māori are not exacerbated.
104. PRG has previously reported that when removing restrictions, consideration of the current protections available to Māori is needed, including confidence in vaccination and booster rates (particularly for tamariki) and that there is sufficient access to supports such as RATs and face masks, resourcing and assistance for rural areas, and that the pressure on the overall health system is sustainable. If restrictions are removed, it is suggested that the government retain the ability to reintroduce those requirements should it be required.
105. Officials are preparing further advice on when and how border measures could be reinstated in response to future risk and consider the impacts on the health system as a result of the proposals in this paper to be manageable. Removing some restrictions at the border is also considered proportionate given the risk of transmission domestically.
106. Māori are more likely to support options that provide the greatest form of protection against any risk that increasing the number of incoming travellers may bring. It is important that the risks introduced by international travellers are reduced as much as possible while also providing a balance between allowing visitors to enter New Zealand with minimal restrictions, relieving pressure on the health system and protecting Māori. Should restrictions be reduced, continued support for Māori domestically will help mitigate any concerns.
107. Te Arawhiti is supportive of ongoing vaccination requirements, particularly for cruise ship passengers who are more likely to visit rural towns with high Māori populations that have limited health services, and tend to skew older, potentially requiring healthcare. It also supports ongoing post arrival testing in order to detect new variants and protect (large) Māori households.

Regulatory implications

108. Requirements for arrivals such as vaccination, pre-departure testing and post arrival testing are currently imposed through orders made under the COVID-19 Public Health Response Act 2020 (the Act). Presently, an epidemic notice made by the Prime Minister authorises the use of such orders. The epidemic notice is next due to be considered for renewal in June 2022.
109. It is appropriate for requirements that are intended to endure beyond the period of high volumes of COVID-19 cases to transition away from the use of emergency legislation such

as the Act. If a requirement such as on-arrival testing were to endure into the future, new primary legislation would be required in order to impose this requirement. This would likely be required by September 2022.

110. Depending on the decisions made on the recommendations in this paper, officials will report back with further advice on new primary legislation for this purpose.

Crown Law advice [legally privileged]

s9(2)(h)



Next steps

117. On Wednesday 11 May, the Prime Minister is scheduled to announce the maritime border opening to foreign vessels and indicate the border settings that will be in place from 31 July.
118. Officials will prepare the necessary amendments to COVID-19 Orders to give effect to the decisions taken in this paper for the Minister for COVID-19 Response's approval.

| | |
|----------------------|---|
| Attachments: | |
| Attachment A: | Current border settings matrix |
| Attachment B: | Post-arrivals RAT results from 28 February – 1 May 2022 |
| Attachment C: | Travel insurance options |

Proactively Released

Attachment A: Current border settings matrix



BORDER EXECUTIVE BOARD

CURRENT BORDER SETTINGS
AS AT 04.05.2022

| Border Pathways | Traveller Groups* | | Covid-19 Health requirements for arrivals | | | | Dates people arrive (visa vs non visa waiver) | | |
|--|-------------------------------|---------------------------|---|-----|----------------------|---------------|---|-------------|--------------|
| | | | Vaccination | PDT | Testing on arrival** | Isolation/MIQ | 12-Apr | 1-May | 31-Jul |
| Air | Passengers | NZ citizen | No | Yes | Yes | No | n/a - can arrive now | | |
| | | Non NZ citizen | Yes | Yes | Yes | No | Australians | Visa waiver | Visitor visa |
| | Air crew | NZ citizen | No | Yes | Yes | No | n/a - can arrive now | | |
| | | Non NZ citizen | Yes | Yes | Yes | No | n/a - can arrive now | | |
| | Maritime crew arriving by air | NZ citizen | No | Yes | Yes | No | n/a - can arrive now | | |
| | | Non NZ citizen | Yes | Yes | Yes | No | n/a - can arrive now | | |
| Cargo (foreign and NZ flagged) | Passengers/crew | NZ citizen/Non NZ citizen | No | No | Yes | No | n/a - can arrive now | | |
| Fishing (foreign and NZ flagged) | Passengers | NZ citizen/Non NZ citizen | n/a - no passengers | | | | n/a - no passengers | | |
| | Crew | NZ citizen/Non NZ citizen | No | No | Yes | No | n/a - can arrive now | | |
| Cruise (foreign flagged) | Passengers/crew | NZ citizen/Non NZ citizen | n/a - ban on foreign ships | | | | n/a - can't arrive due to ban on foreign ships | | |
| Recreational vessels (foreign flagged) | Passengers/crew | NZ citizen/Non NZ citizen | n/a - ban on foreign ships or No - If exempted from ban on foreign ships | | | | n/a - ban on foreign ships or can arrive if exempted from ban on foreign ships | | |
| Specialist vessels (foreign flagged) | Passengers/crew | NZ citizen/Non NZ citizen | n/a - ban on foreign ships or No - If exempted from ban on foreign ships | | | | n/a - ban on foreign ships or can arrive if exempted from ban on foreign ships | | |
| Cruise vessels (NZ flagged & all on board are NZ citizens) | Passengers/crew | NZ citizen/Non NZ citizen | No | No | Yes | No | n/a - can arrive now | | |
| Recreational vessels (NZ flagged & all on board are NZ citizens) | Passengers/crew | NZ citizen/Non NZ citizen | No | No | Yes | No | n/a - can arrive now | | |
| Specialist vessels (NZ flagged & all on board are NZ citizens) | Passengers/crew | NZ citizen/Non NZ citizen | No | No | Yes | No | n/a - can arrive now | | |

***This table is not an exhaustive list of all requirements at both air and maritime borders.

Please note:

- There is no distinction between type of aircraft as vessels in maritime. Passengers can arrive on scheduled international air services and non-scheduled (charter and private flights).
- Aircrew are not subject to PDT like passengers. The specified period for a PDT is 168 hours (7days). For NZ based aircrew this falls under 7 day surveillance testing regime. Similar for testing after arrival. Aircrew only avoid MIQ if all other conditions are met.
- Passenger PDT – exemptions exist for travel from some Pacific countries, travellers from Ukraine, Afghanistan, Antarctica, children under 2 years; and unable to due to medical reasons.
- The air border will be fully open to people on 1 May, if they hold an existing valid visa, are visa-waiver or are deemed visas (i.e. meet immigration requirements). The 31st of July is when applications open for new visitor visas.
- Vessels of any class can currently be exempted as long as they meet the criteria in the M&O, e.g. delivery to a business. This includes cruise ships.
- *Assumes visa requirements are met
- **Testing on arrival includes; testing on Day 0/1 and 5/6 and for Maritime is required on disembarkation.
- From 11.59pm 5 May 2022, New Zealand residence class visa holders and Australian citizens ordinarily resident in New Zealand who are not vaccinated against COVID-19 will be able to enter New Zealand, and self-test on arrival

Requirements for border workers:

| Pathway | PPE | Testing | Vaccination |
|----------|-----|-------------------|-------------|
| Air | Yes | Yes | Yes |
| Maritime | Yes | Yes (until 3 May) | Yes |

Please notes;
Based on HR20220734, Implications of the 3 May changes to PPE requirements are currently being worked through

~~(IN CONFIDENCE)~~

Attachment B: Post-arrivals RAT results from 28 February – 1 May 2022

| RNZ Week | Number of travellers arrived by arrival week | Latest RATs completed | % RATs compliance by arrival week | Positive RAT results | Positivity rate by arrival week |
|-------------------|---|------------------------------|--|-----------------------------|--|
| Wk1 (28/2 - 6/3) | 8,507 | 6,586 | 77% | 76 | 1.2% |
| Wk2 (7/3 - 13/3) | 8,369 | 6,720 | 80% | 92 | 1.4% |
| Wk3 (14/3 - 20/3) | 12,890 | 11,062 | 86% | 183 | 1.7% |
| Wk4 (21/3 - 27/3) | 12,807 | 10,631 | 83% | 130 | 1.2% |
| Wk5 (28/3 - 3/4) | 16,029 | 12,871 | 80% | 196 | 1.5% |
| Wk6 (4/4 - 10/4) | 21,021 | 15,946 | 76% | 350 | 2.2% |
| Wk7 (11/4 - 17/4) | 26,422 | 19,191 | 73% | 411 | 2.1% |
| Wk8 (18/4 - 24/4) | 28,387 | 21,204 | 75% | 374 | 1.8% |
| Wk9 (25/4 - 1/5) | 33,472 | 25,740 | 77% | 408 | 1.6% |
| Total | 167,904 | 129,951 | 77% | 2,220 | 1.7% |

Attachment C: Travel insurance options

| <i>Option: Status quo</i> | |
|---|---|
| <i>Pros</i> | <i>Cons</i> |
| <p>No additional financial or process cost on travellers (which is particularly relevant if travellers already need to pay for other entry costs such as PDT)</p> <p>No verification requirements on border agencies (either at visa or New Zealand Electronic Travel Authority (ETA) application stage, or at the point of travel or arrival)</p> | <p>Risk that international arrivals may not understand clearly that they are unlikely to be eligible for free COVID-19 related medical care</p> |
| <i>Option: Enhanced communication</i> (communications push on Unite Against COVID-19 and other channels) | |
| <i>Pros</i> | <i>Cons</i> |
| <p>Set clear expectations that international arrivals should have appropriate travel insurance in place, as free care is unlikely to be available</p> <p>Enables self-management of risk</p> <p>Reduces potential financial liability of international arrivals on New Zealand's health system</p> <p>Operationally feasible to implement (including via Immigration New Zealand through ETA and visa channels, and via carriers)</p> | <p>Does not ensure that all travellers are financially independent when it comes to healthcare</p> |
| <i>Mandatory COVID-19 related travel insurance</i> | |
| <i>Pros</i> | <i>Cons</i> |
| <p>Reduces potential financial liability of international arrivals on New Zealand's health system (to greatest degree)</p> <p>May act to incentivise vaccination (premiums for unvaccinated individuals likely to be higher)</p> | <p>Operationally difficult to implement: could be made a requirement at the point of visa or ETA application, but anything beyond a declaration would add significant costs to the process (e.g., to verify policies in other languages), possibly for little gain (as policies can be cancelled, for example). If proof were required, this would only be feasible for visa applications – ETA requests are not visa applications and deliberately do not have any documentation requirements except for passports. Would not be feasible to verify proof at point of travel or arrival.</p> <p>If made a requirement for entry permission, any checking beyond that a declaration had been made would slow boarding or arrival processes.</p> <p>May have a dampening effect on some international travel with negative economic impacts.</p> <p>May appear inconsistent relative to other illnesses (including flu and measles), for which there are no mandatory travel insurance requirements.</p> <p>May introduce a cost barrier for travellers, including those from the Pacific.</p> <p>May become a barrier for some accredited diplomats.</p> <p>Not aligned to international norms.</p> |