

PRIVATE PAYER COVERAGE DURING COVID-19				
COVID-19 Testing	COVID-19 Treatment	Telehealth/Telephone	Vaccine Coverage	Other Policy Announcements
Waiving member cost-sharing including self-insured plans Waiving member diagnostic and antigen tests Waiving cost-sharing antibody tests ordered by a "provider" or authorized health care professional Aetna's private, employer-sponsored and student health commercial insurance plans will cover up to eight over the counter (OTC) athome COVID-19 tests per 30-day period until the end of the public health emergency (PHE). You can submit for	Waiving treatment for MA and Medicaid members; contact member services for specific benefits In-patient admissions at innetwork facilities for treatment or health complications due to COVID-19 ended on February 28, 2021, for all Aetna-insured Commercial plans Self-insured plan sponsors offer this waiver at their discretion	 All member cost-sharing for covered in-network telehealth visits for outpatient, mental health counseling services, and specialist visits ended on January 31, 2021 Waiving Individual Medicare Advantage (MA) plan members cost-sharing for all in-network primary care visits viatelehealth until the end of the PHE. Minor acute E/M services care services via audio only are covered General health visits and behavioral health visits, audio-visual connection is required "Providers" can use Teledoc or non-public facing synchronous video chat platforms like Skype and Facetime 	 Waiving member cost-sharing for the COVID-19 vaccine and booster for Commercial and Medicaid members CMS has indicated that it will cover the cost of the vaccine for Medicare beneficiaries, including those in the Medicare Advantage plan Aetna will cover COVID-19 administrative fees w/out cost sharing for inand out-of-network "providers" Vaccines will be available at pharmacies, doctors' offices Click here to see the list of participating pharmacies "Providers" will be reimbursed for the administration of the vaccine at the established CMS rates. 	 Offering 90-day maintenance medication prescriptions for insured and Medicare members Waiving charges for home delivery of prescription medication Relaxed PCP referral requirements for MA plans Prior authorization for admission from acute care hospitals to Skilled Nursing Facilities (SNF) are waived SNFs must notify Aetna within 48 hours of admission Post-Acute care facility is required to send medical records for concurrent review within three days of initial admission. Long-Term Care Hospital Admissions (LTACH) and Inpatient Acute Rehabilitation still require prior authorization for admission Visit the Aetna website for up-to-date prior authorization information



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	 reimbursement through your Aetna member website. For an in-person COVID-19 test, patients must register in advance at CVS.com to schedule an appointment 				in your state including information on elective procedures
Anthem	 Waiving member cost-sharing Use this tool to find a testing center near you A "provider" must order a COVID-19 test for you for inperson testing Anthem will cover up to eight over the counter (OTC) at-home COVID-19 tests per 30-day period until the end of the public health emergency (PHE). You can 	Cost-sharing ended on January 31, 2021 People diagnosed with COVID-19 may have long term symptoms. Anthem case management nurses are ready to help coordinate care for those symptoms.	"Providers" will be reimbursed for telehealth at the same rate as a face-to-face office visit. Audio-only telephone codes do not equate to an in-person visit and therefore will not be reimbursed at an in-office visit rate Self-insured plans will be able to opt out Visit your states page for coverage Cost-sharing for COVID-19 related visits for audio-visual and audio only services with innetwork "providers" until further notice (coverage may vary per state)	 Anthem will cover COVID-19 vaccine administration fees w/out cost-sharing for in- and out-of-network "providers" for all members Anthem will reimburse for the administration of COVID-19 FDA-approved vaccines at the established CMS rates. Read CMS' issued guidance for MA plans 	 Relaxing early Rx refill limits for patients who want a 90-day supply of maintenance medications Waiving prior authorizations for testing and treatment for patients diagnosed with COVID-19 Visit your states page for additional prior authorization coverage



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	submit for reimbursement through the Claims & Payment page on Anthem.com	Visit your <u>states</u> <u>page</u> for telehealth coverage	Self-insured plans will be able to opt out of this program		 Anthem has joined with <u>Psych Hub</u> to develop a free web-based resource to support members' mental health
BCBSA *includes all independent locally operated BCBS companies and BCBS Federal Employee Program (FEP)	Waiving cost- sharing Use this online tool to find a testing site near you	Waiving cost- sharing for members of all fully insured group, individual, Medicare (excluding Part D), Medicare Supplement, and Medicaid plans Check with your health plan for additional coverage	 Expanding in-network telehealth and audio-only coverage Check with your <u>health</u> <u>plan</u> for additional coverage 	 Waiving member cost- sharing for the COVID-19 vaccine Check with your <u>health</u> <u>plan</u> for complete coverage information 	 Relaxing early Rx refill limits and offering 90-day fills (check your plan benefits) Prior authorizations waived for diagnostic tests and medically necessary covered services if diagnosed with COVID-19 Prior authorization waived for 180 days for inpatient and outpatient procedures Visit the BCBS website for more policy announcements
<u>Cigna</u>	 Waiving cost-sharing until April 15, 2022 Use this online tool to determine how to get tested A "provider" must order a COVID-19 test for you for inperson testing 	Starting February 16, 2021, cost- sharing applies for any COVID-19 related visits	Waiving cost-sharing for COVID-19 related visits for audio-visual and audio only services with innetwork "providers" until April 15, 2022, through a virtual vendor such as Amwell or MDLive Standard customer cost-share applies to visits not related to COVID-19 A Virtual Care Reimbursement Policy	 Waiving cost-sharing for the COVID-19 vaccine for commercial and Medicare members "Providers" will be reimbursed for the administration of the vaccine at the established CMS rates. 	 Free home delivery of 90-day supply of maintenance medication Prior authorizations waived for COVID-19 evaluations, testing, or treatment Pre-admission and presurgical testing costs are waived until April 15, 2022 Allow direct emergent or urgent transfers to SNF, AR, and LTACH w/out prior



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	Cigna will cover up to eight over the counter (OTC) at-home COVID-19 tests per 30-day period until the end of the public health emergency (PHE). You can submit for reimbursement using the COVID-19 OTC Test Kit Claim Form		was implemented on January 1, 2021		authorizations until March 31, 2022 • Prior authorization required for routine and non-emergent transfers
Humana	 Waiving out-of-pocket costs Visit Humana's Risk Assessment Tool to determine if you are eligible for an at home test or a visit to a testing facility Humana will cover up to eight over the counter (OTC) at-home COVID-19 tests per 30-day period until the 	 Waiving out-of-pockets costs through the 2022 plan year for MA plan members Medicaid plans will follow state requirements Cost-sharing will apply for employer group members starting January 1, 2021 Members should check with their plan about 2022 coverage 	 Waiving cost-sharing for MA members for audiovisual and audio only telehealth services by participating/in-network "providers" through 2022 for primary and urgent care and behavioral health Humana is reimbursing an office visit furnished via telehealth by an innetwork practitioner at the same rate as an inperson office visit for audio-visual and audioonly services 	All FDA-authorized COVID-19 vaccines will be covered at no additional cost for members at both in- network and out-of- network "providers" through the national PHE period	Call the Humana benefits team for your coverage Prior authorization not required for those who test positive for COVID-19



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	end of the public health emergency (PHE). You can submit for reimbursement using the Athome Over-the-Counter (OTC) COVID Test Reimbursement Form				
United Health	Waiving cost- sharing for MA members and Individual and Group Market health plans until April 15, 2022, when medically appropriate as ordered or reviewed by a "provider" or appropriately licensed health care professional Medicaid members should refer to their state's website for coverage	 Cost-sharing will be according to your benefit plan for Exchange, Individual, and Fully Insured Employer-sponsored plans Medicaid cost-share waiving is subject to state regulations 	 Waiving cost-sharing for COVID-19 testing-related visits until April 15, 2022, for MA members and Individual and Group Market health plans Medicaid members should refer to their state's page for coverage Cost-sharing for non-COVID-19 related visits is determined by your benefit plan for individual and fully insured employer health plans Audio-visual technology must be used for PT/OT/ST, chiropractic therapy, home health, and hospice 	Waiving cost-sharing for member, individual, and Medicaid member health plans at in- and out-of-network "providers" through the national PHE period Visit United Health's COVID-19 Vaccine Guidance page for reimbursement updates Medicaid members, please review the UnitedHealthcare Community Plan website and your state's site for the latest information UnitedHealthcare will reimburse administration of the COVID-19 vaccine in accordance with	 Allowing early refills Visit the UHC website for more prescription coverage Prior authorization is not required for diagnostic radiology for COVID-19 testing and testing-related services Normal prior authorization requirements are in effect for durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS), medical, behavioral, and dental services, and post-acute care admission Prior authorization for inpatient procedures will extend 90 days from the expected admission date



 Cost-sharing waived for FDA- authorized antibody tests through 2021 Audio-visual technologies include FaceTime, Skype, Zoom, or telehealth applications Services provided through 	tate laws and risions
for MA and Individual and Group Market health plans when medically appropriate as ordered or reviewed by a "provider" or appropriately licensed health care • Use this online tool to find a testing site near you • Humana will cover up to eight over the counter (OTC) at-home COVID-19 tests per 30-day period until the end of the public health emergency (PHE). Sign into your myuhc.com	



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<u>Kaiser</u> <u>Permanente</u>	 Waiving cost- sharing for COVID-19 testing 	Waiving cost- sharing for COVID-19 treatment	Visit your state's page for coverage	Waiving member cost- sharing for the COVID-19 vaccine	

Updated 2/03/2022

AHIP's Health Insurance Providers Respond to Coronavirus (COVID-19) includes current information on many private payers; not all are listed.