Health Plan Updates

As of 05/04/2020

Aetna: Cost Sharing Waivers

- Commercial member’s telemedicine visits are covered with no cost-sharing to the member, until June 4, 2020.
- Medicare and Medicare Advantage member’s telemedicine visits are covered with no cost-sharing to the member, until further notice.
- Self-insured plan sponsors offer this waiver at their discretion.
- Cost sharing will be waived regardless of the diagnosis.
- Cost sharing will be waived for covered real-time virtual visits offered by in-network providers (live videoconferencing and telephone-only telemedicine services).
- Aetna Medicaid members with questions about their benefits are encouraged to call the member services phone number on the back of their ID cards.

To learn more, click here

Allways Health Partner: Telemedicine During the State of Emergency

AllWays Health Partners, in alignment with the DOI and other regulatory guidance, is expanding the scope of allowed telemedicine services, and of provider specialties that can render care virtually, when clinically appropriate and medically necessary. Individual providers may provide telehealth to members under age two at their discretion during the COVID-19 state of emergency.

To learn more, click here

Blue Cross Blue Shield of Massachusetts: New Temporary Payment Policy

Blue Cross Blue Shield of Massachusetts has developed a temporary COVID-19 payment policy to meet the needs of providers and members during the COVID-19 Massachusetts public health state of emergency.

This temporary policy outlines information including ambulance services, autism services, field hospital billing, Informational modifiers for reporting, new HCPCS codes for COVID-19 testing, place of service billing, specimen collection coding, temporary documentation requirements for telehealth or telephone E/M visits,

To learn more, click here
**Commonwealth Care Alliance: Temporary Rate Change**

To mitigate the impact of the coronavirus outbreak on funding to healthcare providers, MassHealth released three bulletins in April to temporarily increase compensation rates for certain providers for costs associated with COVID-19 ([http://www.mass.gov/masshealth-provider-bulletins](http://www.mass.gov/masshealth-provider-bulletins)).

- Managed Care Entity Bulletin 23 - Medicaid Covered Service Temporary Rate Increase for Home Health Services and Personal Care Attendant (PCA) Services / Personal Care Services / Personal Assistance Services.
- Managed Care Entity Bulletin 24 - Temporarily increased fee-for-service rates for impacted providers as part of the stabilization efforts.
- Administrative Bulletin 20-33 101 CMR 310.00: Adult Day Health Services - Additional Rate Provisions Applicable to Certain Adult Day Health Providers to Compensate for Costs Associated with Coronavirus Disease 2019 (COVID-19).

To learn more, [click here](#).

**Harvard Pilgrim HealthCare: New Provider Information Sheet**

Harvard Pilgrim Health Care released new information for providers including, business operations, testing for COVID 19, treatment for COVID-19, telemedicine/telehealth, prior authorization, pharmacy Information, credentialing claims member, education and support and additional questions and answers.

To learn more, [click here](#).

**MassHealth: Billing for COVID-19 Testing and Treatment Services for the Uninsured**

In response to the state of emergency due to the 2019 novel Coronavirus (COVID-19) outbreak, the federal government, through its Health Resources & Services Administration (HRSA), has developed a program to reimburse provider claims for COVID-19 testing and treatment services for the uninsured through a claims submission portal ([https://www.hrsa.gov/coviduninsuredclaim](https://www.hrsa.gov/coviduninsuredclaim)). MassHealth is issuing this guidance regarding billing for COVID-19 testing and treatment services for uninsured patients considering this federal program, and for MassHealth Limited members.

To learn more, [click here](#).
NGS Medicare: Telehealth BILLING FAQS FOR COVID-19

NGS provided a telehealth billing FAQs related to recent changes, communications with patients, critical care, providers type, site and place of service, and consultation services.
To learn more, click here

Tufts Health Plan: Telehealth Update

All Tufts Health Plan contracting providers, including specialists and urgent care facilities, may provide telemedicine services to members for all medical (well visits/preventive and sick visits), behavioral health, ancillary health and home health care visits (i.e. skilled nursing, PT, OT and ST) for both new and existing patients. Prior authorization is not required.
• Tufts Health Plan will waive member cost share for both in-network and OON telehealth services. This includes both facility and professional services. Providers should not collect a copay from members.
• Telehealth also includes telephone consultation. Note: For Medicare products, under CMS rules, special codes already exist for certain telephonic services and those codes will be paid at the CMS fee schedule.
To learn more, click here

United HealthCare: Cost Share Covered for COVID-19 Antibody Testing

During the national public health emergency period, UnitedHealthcare will cover FDA-authorized COVID-19 antibody tests ordered by a physician or appropriately licensed health care professional without cost sharing (copayment, co-insurance or deductible). This coverage applies to members enrolled in Medicare Advantage, Medicaid, and Individual and Group Market health plans. Benefits will be otherwise adjudicated in accordance with the member’s health plan.
To learn more click here