Massachusetts Health Plan Coverage Policies

As of April 9th

**Aetna**

Aetna will waive co-pays for all diagnostic testing related to COVID-19, per CVS Health. That includes all member costs associated with diagnostic testing for Commercial, Medicare, and Medicaid lines of business. Self-insured plan sponsors will be able to opt-out of the program at their discretion. Aetna is also offering zero co-pay telemedicine visits for any reason, and it is extending its Medicare Advantage virtual evaluation and monitoring visit benefit to all fully insured members. People diagnosed with COVID-19 will receive a care package. CVS Health is also offering several programs to help people address associated anxiety and stress.

**Aetna**, a CVS Health company, will waive member cost-sharing for inpatient admissions at all in-network facilities for treatment of COVID-19 or health complications associated with COVID-19. This policy applies to all Aetna-insured commercial plan sponsors and is effective immediately for any such admission through June 1, 2020.

**Aetna** is also waiving member cost-sharing for inpatient admissions at all in-network and out-of-network facilities for treatment of COVID-19 or health complications associated with COVID-19. This policy applies to all Aetna Individual and Group Medicare Advantage members and is effective March 25, 2020 for any such admission through June 1, 2020.

Aetna is also offering its Resources For Living®, its employee assistance program, to individuals and organizations who have been impacted by COVID-19, whether or not they have RFL included as part of their benefits.

Aetna is working closely with partner hospitals to help transfer and discharge members with issues unrelated to COVID-19 from hospitals to safe and clinically appropriate care settings where they can continue to have their needs addressed. This will help hospitals and emergency rooms make room for more patients, especially those suffering from COVID-19.

**Aetna**, a CVS Health company, is streamlining its provider credentialing process so there can be more health care professionals caring for patients.

Aetna is also paying the amount of the cost-sharing the member would have ordinarily paid related to COVID-19 testing or inpatient treatment so there is no financial impact on the provider.

Additionally, Aetna is reimbursing all providers for telemedicine at the same rate as in-person visits for applicable telehealth codes, including for mental health care services.
**AllWays Health Partners**

AllWays Health Partners is removing cost-sharing (copayments, deductibles, or coinsurance) for testing and copayments for treatment at in-network facilities; ensuring access to out-of-network providers for the initial COVID-19 test or treatment when no in-network providers are available; and removing all cost-sharing for telemedicine services, including virtual visits with primary care providers and specialists, and through Partners HealthCare On Demand, to enable members to seek COVID-19-related care without the need to go to medical offices.

**Blue Cross Blue Shield of Massachusetts**

Blue Cross Blue Shield of Massachusetts will cover the costs of diagnostic testing for COVID-19 for fully insured members. Self-funded groups will can opt-in. The company will also cover the cost of a COVID-19 vaccine when it is available, and will waive co-payments for COVID-19 treatment at doctor’s offices, emergency rooms and urgent care centers. It is removing administrative barriers such as prior authorizations and referrals, waiving copays for its telehealth platform, and allowing early access to refills of prescription medications.

Blue Cross Blue Shield of Massachusetts has also donated $100,000 to the Boston Resiliency Fund and an additional $150,000 to relief efforts across Massachusetts.

Blue Cross Blue Shield of Massachusetts has removed prior authorization requirements and moved to a notification-only requirement for inpatient levels of care including Acute, Long Term Acute (LTAC), Acute and Subacute Rehabilitation (Rehab), and Skilled Nursing Facility (SNF) admissions. Medical necessity reviews will not be performed for these inpatient levels of care through June 23, 2020. Notifications by facilities will allow Blue Cross nurses to assist members during their care transitions, including to the home.

Blue Cross and Blue Shield of Massachusetts is reallocating more than $1.75 million in community investments and strategic sponsorships to expedite unrestricted cash to help nonprofits meet operational challenges, including:

- Committing $550,000 in relief grants to nonprofits providing frontline aid including access to food, basic needs and critical support for first responders, health care and retail workers;
- Lifting funding restrictions on $520,000f committed funds to ensure nonprofits have the flexibility to address critical challenges; and
- Leveraging a $300,000 commitment to Blue Cross’ Healthy Living Collaborative partners, including Codman Square Health Center and East Boston Neighborhood Health Center, to meet pressing community health challenges.

**Cigna**

- Cigna is covering the cost of coronavirus testing, waiving all co-pays or cost-shares for fully insured plans, including employer-provided coverage, Medicare Advantage, Medicaid, and individual market plans available through the Affordable Care Act. Organizations that offer Administrative Services Only (ASO) plans will also have the option to include coronavirus testing as a preventative benefit. Recognizing that health outbreaks can increase feelings of stress, anxiety and sleeplessness and sometimes loss. Cigna is also staffing a second phone line for customers.
- Cigna **also announced** it will waive customers’ out-of-pocket costs for COVID-19 testing-related visits with in-network providers, whether at a doctor’s office, urgent care clinic, emergency room or via telehealth, through May 31, 2020. This includes customers in the United States who are covered under Cigna employer/union sponsored group insurance plans, globally mobile plans, Medicare Advantage, Medicaid and the Individual and Family plans. Employers and other entities that sponsor self-insured plans administered by Cigna will be given the opportunity to adopt a similar coverage policy. The company is making it easier for customers with immunosuppression, chronic conditions or who are experiencing transportation challenges to be treated virtually by in-network physicians with those capabilities, through May 31, 2020. Cigna’s Express Scripts Pharmacy offers free home delivery of up to 90-day supplies of prescription maintenance medications. Cigna has opened a 24-hour toll-free helpline (1-866-912-1687) to connect people directly with qualified clinicians who can provide support and guidance. Additionally, Cigna will offer a webinar to the public raising awareness about tools and techniques for stress management and building resiliency, along with the ability to join telephonic mindfulness sessions.

- Cigna will **waive prior authorizations** for the transfer of its non-COVID-19 customers from acute inpatient hospitals to in-network long term acute care hospitals to help manage the demands of increasingly high volumes of COVID-19 patients.

- Cigna is **waiving customer cost-sharing and co-payments** for COVID-19 treatment through May 31. The policy applies to customers in the U.S. who are covered under Cigna’s employer/union sponsored insured group health plans, insured plans for U.S. based globally mobile individuals, Medicare Advantage, and Individual and Family Plans. Cigna will also administer the waiver to self-insured group health plans.

Cigna and Express Scripts are working with Buoy Health to provide an early intervention screening tool to help customers and members understand their personal risks for COVID-19. The digital tool immediately triages symptoms and recommends next steps for care, while also reliving demand on an over-burdened health care system.

**Fallon Health**

Fallon Health is relaxing administrative procedures, such as prior authorizations and out-of-network requirements, for medically necessary care, waiving copayments for medically appropriate coronavirus treatment, and waiving early refill limits on non-scheduled control drug prescriptions for all Fallon members who fill their maintenance medications at any in-network pharmacy.

**Harvard Pilgrim Health Care**

Harvard Pilgrim Health Care will cover the costs of diagnostic testing for COVID-19, waive cost sharing for all telemedicine visits and allow early refills for prescription medications. Self-insured groups will can opt-in at their discretion.

Harvard Pilgrim **has also donated** over $3 million to COVID-19 relief efforts by supporting community organizations in Connecticut, Maine, Massachusetts, and New Hampshire. The money will help select restaurants throughout the region to provide and deliver take-out meals to families in need and help to put people back to work. Additionally, these resources will assist communities in facilitating access to COVID-19 testing.

**Harvard Pilgrim Health Care** is waiving member cost-sharing related to treatment for COVID-19. The
waiver applies to medical costs associated with COVID-19 treatment at in-network facilities and out-of-network emergencies.

**Harvard Pilgrim Health Care** Foundation and Convenient MD have partnered to open a drive-thru COVID-19 testing site at Harvard Pilgrim Health Care’s Quincy headquarters’ parking lot, located at 1600 Colony Drive.

**The Blue Cross and Blue Shield Federal Employee Program**

The Blue Cross and Blue Shield Federal Employee Program will waive any copays or deductibles for medically necessary diagnostic tests or treatment if a member is diagnosed with COVID-19. It will waive prior authorization requirements for tests and treatment. It will eliminate cost sharing for prescriptions for up to a 14-day supply, and waive copays for telehealth services related to COVID-19.

**Tufts Health Plan Foundation**

Tufts Health Plan Foundation is donating $1 million to efforts driven by community and nonprofit organizations supporting older people affected by the coronavirus outbreak in Massachusetts, Rhode Island, New Hampshire and Connecticut.

**Tufts Health Plan** is waiving treatment costs for its members suffering from the coronavirus, including copays, deductibles and coinsurance. This coverage applies at in-network providers, urgent care centers, emergency rooms and other facilities, and at out-of-network providers in the event a member cannot easily find an in-network provider to provide timely services.

Tufts has also eliminated out-of-pocket costs for telehealth visits and removed prior authorization requirements for providers as it relates to treatment and care of coronavirus.

**United Healthcare**

United Healthcare is waiving costs for COVID-19 testing provided at approved locations in accordance with the CDC guidelines, as well as waiving copays, coinsurance and deductibles for visits associated with COVID-19 testing, whether the care is received in a physician’s office, an urgent care center or an emergency department. This coverage applies to Medicare Advantage and Medicaid members as well as commercial members. United is also expanding provider telehealth access and waiving member cost sharing for COVID-19 testing-related visits.

United Healthcare is also opening a special enrollment period for some of its existing commercial customers beginning March 23 through April 6 due to the COVID-19 pandemic. United Healthcare is also suspending prior authorization requirements to a post-acute care setting through May 31, and suspending them when a member transfers to a new provider through May 31.

United Healthcare is waiving member cost sharing for the treatment of COVID-19 through May 31, 2020 for its fully insured commercial, Medicare Advantage, and Medicaid plans.

Starting March 31, 2020 until June 18, 2020, UnitedHealth will also waive cost sharing for in-network, non-COVID-19 telehealth visits for its Medicare Advantage, Medicaid, and fully insured individual and group market health plans.
UnitedHealth Group, through United Healthcare and Optum, is taking steps immediately to accelerate nearly $2 billion in payments and other financial support to health care providers in the U.S. to help address the short-term financial pressure caused by the COVID-19 emergency.

UnitedHealth Group’s move to accelerate claim payments to medical and behavioral care providers applies to United Healthcare’s fully insured commercial, Medicare Advantage and Medicaid businesses. Other financial support currently includes the provision for up to $125 million in small business loans to clinical operators with whom OptumHealth is partnered.

Reference:

https://www.ahip.org/health-insurance-providers-respond-to-coronavirus-covid-19/