

TEMPORARY MEDICARE PLAN WAIVERS EXPIRING FOR APPLICABLE COVID-19 TREATMENT AND TELEHEALTH SERVICES ON JULY 1, 2021

As we continue to address the COVID-19 pandemic, we want to update you on important changes for our Medicare plans. Last year, we instituted temporary member cost share liability and prior authorization waivers for select services to ensure critical care could be quickly delivered to our members during a time of heightened need. On July 1, 2021, these temporary waivers will expire and our members' Medicare plan benefits will be reinstated for the following services:

COVID-19 Treatment Related Services

- COVID-19 treatment related services (those billed with a confirmed ICD-10 diagnosis code) will
 continue to be eligible for coverage at this time, in accordance with the member's plan
 benefits.
- Beginning July 1, 2021, prior authorization will be required for COVID-19 treatment related services in accordance with CMS guidance and plan benefits.
- Providers should also resume collecting Medicare member liability at the point of service for applicable treatment related services on July 1, 2021 onward.

Telehealth Services

- Any services that can be delivered virtually will continue to be eligible for telehealth coverage at this time.
- Beginning July 1, 2021, prior authorization requirements will be reinstated for applicable services delivered via telehealth.
- Providers should also resume collecting Medicare member liability at the point of service for all telehealth services on July 1, 2021 onward, in accordance with the member's plan benefits.
- Providers should reflect telehealth care on their claim form by following standard telehealth billing protocols in their state.
- For further coding guidance for telehealth services, we recommend following what is being published by:
 - o <u>Department of Health and Human Services (HHS)</u>
 - o American Medical Association (AMA)
 - o Centers for Commercial/Marketplace and Medicaid (CMS)

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Prior authorization requirements and member cost share liability (copayments, coinsurance and/or deductible cost share amounts) will continue to be waived for COVID-19 testing, screening services and vaccinations.

We are working in close partnership with state, local and federal authorities to serve and protect our members and communities during the COVID-19 pandemic, including ensuring that our providers have relevant and up-to-date information. We value your partnership during these unprecedented times.

This guidance is in response to the current COVID-19 pandemic and may be retired at a future date.

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