COVID-19 INFORMATION FOR PHC PARTICIPATING GROUPS

<u>Aetna</u>

We have been working with our vendor-partners on ways to best support you and your participants during this period of uncertainty surrounding COVID-19. The situation is changing day-to-day, but the following are the updates as they have been announced:

6/8/2020 – COVID-related plan design options extended or expired

We previously provided information on the COVID-related plan design options through Aetna. Some of those programs have been extended, while others will be expiring, as shown below:

• Waiving cost share for telemedicine – expired June 4; plans can extend to December 31, 2020 if desired.

• Waiving cost share for telemedicine for mental health and behavioral health visits – extended through December 31, 2020

• Waiving inpatient cost share for COVID-related admissions – extended through December 31, 2020

If participating plans have alternative dates for extending cost share waivers, those can be accommodated, in most cases.

4/6/2020 - Option to waive participant cost share for COVID-19 hospitalizations

Aetna is waiving member cost share for COVID-related inpatient admissions at network facilities for their fully insured health plans. Participating groups using the PHC contract can opt in to this program and waive member cost share, as well. Aetna would send the claims to your TPA with the appropriate coding and your TPA would adjudicate the claim with all deductibles, copays and coinsurance waived. The Trust would pay the full amount.

If your health plan would like to waive member cost share for COVID-related inpatient admissions at network facilities, you can do so by notifying Aetna through your consultant or administrator.

3/12/2020 - Applies to all PHC groups who Opt-In to the COVID-19 protocol

If your health plan would like to opt-in to these protocols, please notify your plan consultant.

• Waive participants costs associated with all diagnostic testing related to COVID-19 at any authorized location. At this time, the waiver only applies to the test, but Aetna is re-evaluating whether to apply this more broadly.

Aetna will provide a list of COVID-19 related CPT codes and diagnostic codes to your third-party administrator so they adjudicate the claims without deductible, copay or coinsurance. The initial information from Aetna indicates the cost of the COVID-19 test will be in the \$50 - \$75 range.

• Waive any participant cost-sharing associated with telemedicine visits, including Teladoc and for in-network providers providing virtual care. To the extent possible, plans should encourage the use of telemedicine and virtual care to limit exposure to COVID-19.

Note: The IRS has issued guidance that waiving deductibles for COVID-related testing and treatment will not disqualify a High Deductible Health Plan for the purposes of making Health Savings Account contributions.

In addition to the above:

- Crisis Response Lines and 24x7 access to the Aetna Nurse Medical Line are available to all participants.
- Aetna case managers will proactively reach out to members most at-risk for COVID-19. This may include members who are identified by:
 - Utilization management or Inpatient Management discharge planning clinicians, the member's provider or CVS clinicians including retail pharmacists as being at risk or in need of additional clinical support
 - Predictive algorithms that indicate future health risk or healthcare costs including specific risk of admissions, readmissions or frequent ER utilization
 - Predictive algorithms that indicate end of life resource needs or advanced illness related needs. In addition to these care management identification approaches, all individuals hospitalized with a confirmed or presumptive case of COVID-19 will be outreached by a care manager upon discharge to support their transition of care needs.