



# NEWS RELEASE

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## **NEW YORK HEALTH PLANS RESPOND TO CORONAVIRUS CRISIS**

The health and well-being of millions of New Yorkers remains our highest priority, as New York continues to be the epicenter of the coronavirus pandemic here in the United States. The New York Health Plan Association (HPA) today reiterated that health insurance providers are committed to helping prevent the spread of the coronavirus strain COVID-19.

“Since the outset of this unprecedented national crisis, HPA’s member health plans have been doing their part, working closely with the state and partners in the provider community to combat coronavirus, ensure patients have access to needed care, and protect the health of all New Yorkers,” said Eric Linzer, HPA president and CEO.

HPA noted that plans have already worked with the state to implement the following steps:

- Waiving cost-sharing for COVID-19 testing, with many plans applying this to their commercial, Medicaid and Medicare Advantage members, and several waiving cost-sharing for treatment related to coronavirus;
- Eliminating cost-sharing for telehealth services, which has helped to facilitate care for the many New Yorkers who are at home and still need care, enabling hospitals to focus their care on the individuals who need to be hospitalized while limiting the exposure of hospital personnel and patients to the disease;
- Working with the state to establish a Coronavirus Special Enrollment Period to further protect the public health of New Yorkers and ensure that coverage is available to everyone who needs it;
- Suspending preauthorization and notification requirements for inpatient hospital services for coronavirus-related hospitalizations; and
- Establishing multi-month premium deferrals for employers and consumers to provide flexibility to businesses and advising individuals of available options to help them maintain coverage.

In addition, HPA’s plans have responded to the state’s call for nurses, medical directors and other clinical staff to assist with the significant demand for health care needs due to COVID-19. To date, more than 350 health plan medical staff have offered to volunteer their time. Plans are also providing tens of millions of dollars in funding to nonprofits and human service organizations to support a range of community needs.

HPA highlighted some of the other ways health insurance providers are taking action:

- **Aetna** will waive co-pays for all diagnostic testing related to COVID-19, according to **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. Additionally, 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.

- **Blue Cross Blue Shield of Western New York and Blue Shield of Northeastern New York (HealthNow)** are waiving prior authorizations for diagnostic tests and covered services for COVID-19, covering those tests at no cost share to members. The plan is also waiving prescription refill limits on maintenance medications and expanding access to telehealth and nurse/provider hotlines. This applies to fully insured, individual, and Medicare Advantage plan members.
- **Capital District Physicians' Health Plan (CDPHP)** is waiving cost-sharing (copays, coinsurance, and deductibles) for all coronavirus (COVID-19) related treatment. This policy is retroactive for all COVID-19 treatment including hospitalization costs.

Additionally, **CDPHP** is teaming up with **MVP Health Care** to offer their entire memberships access to virtual emergency medicine services that allows patients to connect with a physician 24/7 from the comfort of their home. The emergency medicine trained providers – powered by United Concierge Medicine – can assess a patient's need for COVID-19 testing and prescribe appropriate treatment.

- **EmblemHealth** is waiving cost-sharing for all COVID-19 diagnostic tests and associated office, urgent, or emergent visits, and waiving prior authorization and concurrent review for all inpatient admissions. In light of the challenges our hospital partners are facing, the health plan has also waived prior authorization and concurrent review for all inpatient admissions and has extended this to Medicare, covering all hospital admissions. In addition, they have taken new internal steps to expedite payments to ensure that revenue is moving to hospitals on the frontline as quickly as possible. It is also waiving prescription refill limits on maintenance medicines, helping members convert to 90-day mail order prescriptions, and entered into a new partnership to provide same day home-delivery of prescriptions and access to pharmacists seven days a week. EmblemHealth is also waiving all cost sharing for telehealth services and expanding services available via telehealth, and launched a dedicated COVID-19 microsite and created a how to be Healthy at Home Initiative.

EmblemHealth has provided special training to associates to ensure that consumers are aware of the Special Enrollment Period and informed about how to obtain coverage during this uncertain time. In addition to extending the grace period for premium payments, EmblemHealth Neighborhood Care has been connecting members to social supports like food pantries, unemployment benefits and housing assistance. The plan has launched a comprehensive effort to support small business owners to assist any displaced employees as well as an outreach campaign to its most vulnerable members, offering a human connection to those who may be suffering from extended periods alone and anxious for and to offer assistance with accessing care. The plan has also amended its paid time off policy for clinically trained qualified employees to answer the state's call to serve and is supporting its local food banks.

- **Empire Blue Cross Blue Shield HealthPlus** is covering the cost of coronavirus testing and treatment. To ease administrative demands and allow healthcare providers to focus on caring for patients diagnosed with COVID-19 Empire is waiving prior authorization for diagnostic services related to COVID-19 testing, for patient transfers and for the use of medical equipment critical to COVID-19 treatment. To improve access to testing Empire is collaborating with the Chinese American Independent Practice Association (CAIPA), providing them with free access to mobile units to conduct COVID-19 testing. These vans will travel to all five New York City boroughs,

enhancing CAIPA's testing efforts and providing the New York community with convenient and safe access to this critical testing.

Empire has also encouraged the use of telehealth when possible to help prevent the spread of a virus. The plan is encouraging members to talk to their doctor about whether it is appropriate for them to change from a 30-day supply of their regular prescriptions to a 90-day supply to ensure they have access to the medications they need and Empire is relaxing early prescription refill limits for members who wish to receive a 30-day supply of most maintenance medications, where permissible. In addition, Empire is providing up to 80 hours of paid leave for its employees – above and beyond the plan's current volunteer program – which will allow them to volunteer for COVID-related response efforts. Empire is also providing employees an additional 80 hours of personal time off to take care of family members who may be effected by COVID.

- **Fidelis Care New York**, to meet the needs of members and in partnership with our providers, has taken several proactive steps to respond to the COVID-19 outbreak. We have waived all COVID-19 related member cost sharing (including copayments, coinsurance, and deductibles) for screening, testing, and treatment, and eliminated prior authorization requirements for scheduled surgeries and hospital admissions for at least 90 days. We have also expanded access to telehealth services, covering virtual visits with providers from the safety, comfort, and convenience of a member's home, for a \$0 copay. As part of the Centene family of health plans, Fidelis Care offers a Medical Reserve Leave policy to support clinical staff who want to join a medical reserve force and serve their communities, during the COVID-19 pandemic. The policy will support clinical staff by providing paid leave and benefits for up to three months of volunteer service.
- **Healthfirst, Inc.** is waiving co-pays for all diagnostic testing and evaluations related to coronavirus. This means that if a primary care physician or in-network provider orders a coronavirus test, the person's Healthfirst health plan will cover the cost for the test and the in-network provider visit related to the coronavirus evaluation. Members will not be subject to any cost sharing for the test or the in-network provider visit.
- **Independent Health** is waiving cost-sharing for COVID-19 medical testing, diagnosis and treatment for its fully insured employer groups, Medicare Advantage, Medicaid and individual plan members through May 31, 2020. It also expanded the types of services available via telehealth and removed barriers to prescriptions by allowing prescriptions to be filled at out-of-network pharmacies, early refills, and extended days supplies. For its members who do not have a primary care physician, Independent Health has partnered with several primary care practices to connect these members with a doctor right away. For its most vulnerable members, Independent Health is reaching out to check in and provide support.

Independent Health also expanded its partnership with Brook to offer the entire Western New York region with free access to the [Brook Health Companion](#). Brook will help people adjust to new social distancing routines and provide individuals with a better understanding of their personal health situation, how to make healthy choices from home, and guide them to the right medical professionals when appropriate.

- **MetroPlus** is waiving all member costs for COVID-19 testing and related treatment and has paused prior authorization requirements for all services, except for DME and Pharmacy. MetroPlus has also launched a telemedicine site and app for members to access a network of telehealth providers 24/7, ensuring they aren't limited to regular office hours or to their regular provider's availability, along with an enhanced member and provider portal. In addition, MetroPlus has deployed staff to assist with administrative needs at the NYC Health + Hospitals system, including having qualified clinical professionals staff special COVID-19 hotlines established by the NYC Health + Hospitals system and filling various administrative roles at H+H and the newly created hospital extensions. MetroPlus staff is also engaged in outreach to elderly and vulnerable/high risk populations to check in on them

and ensure they have up-to-date information on how to take care of themselves and reduce their risk during the crisis, as well as connect them to community resources available to address concerns like food vulnerability.

- **Molina Healthcare** will waive all member costs associated with testing for COVID-19. Any related visit to a primary care doctor, urgent care or emergency care does not require prior authorization.

Molina Healthcare has launched a Coronavirus Chatbot, an enhanced digital tool for members seeking information about COVID-19 risk factors and their own personal risk profile. This new self-appraisal feature is available for members looking for current insight, risk factors, live help, and appropriate action to take if symptoms are present.

- **MVP Health Care** is making COVID-19 screening and testing free for all MVP members. Patients are not responsible for any co-payments, other cost-share, or fees associated with an emergency room visit or visit to an in-network health care provider for the purpose of getting tested for COVID-19; drive-thru specimen collection sites; and telemedicine services, including virtual emergency room and online doctor visits.

MVP has also suspended prior authorization, for all lines of business, for inpatient surgery and hospital admissions; post-acute care after discharge; all radiation therapy and high-tech radiology; and launched a special COVID-19 web page to help members and providers access a whole range of information about COVID-19.

- **Oscar Health Insurance** is waiving cost-sharing for diagnostic testing for COVID-19, including the cost of the test and administration of the test, at both in-network and out-of-network facilities when recommended by a health care provider.

Oscar is offering telemedicine services at no cost to most members through its Doctor on Call service. It has also launched the first testing center locator for COVID-19 in the United States. It is free and accessible to the general public, and it is being updated daily to reflect both in-network and out-of-network facilities.

- **UnitedHealthcare** 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. UnitedHealthcare is also expanding provider telehealth access and waiving member cost sharing for COVID-19 testing-related visits.

UnitedHealthcare 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, UnitedHealthcare 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.

“HPA’s health plans have been quick to respond to the public health crisis resulting from the coronavirus. We remain committed to working with the Administration and our partners in the health care system to channel all the resources that are needed to combatting the virus and the health risk associated with it,” Linzer said.

For more information, please visit our [Fact Sheet](#).