Overview

The Michigan Blues joined other Blue Cross and Blue Shield companies around the nation in announcing several initiatives designed to help members get the care they need during the coronavirus (COVID-19) outbreak. Blue Cross and Blue Care Network are making these changes to ensure our members can access the right care during the outbreak.

The March 6, 2020 company announcement is at:


Below are some frequently asked questions about these initiatives.

1. Are you covering coronavirus testing?
   We know that testing is a critical part of helping providers manage care for this new virus. That’s why on March 6 we joined other Blue Cross plans in announcing we were covering testing (including cost share) when prescribed by a provider following CDC guidelines. That means that copays and deductibles are waived for the cost of the testing.

   We are doing this immediately for our fully insured customers and are planning to do this for our self-funded customers. Because we recognize that self-funded customers can opt out of benefit changes, we are sending a notification that we plan to proceed unless we hear otherwise.

   The coverage for testing applies to our commercial business. It also applies to our Medicare Advantage business which is following CMS and CDC guidelines. Medicare has announced that Part B benefits will cover testing.

   Blue Cross continues to monitor potential changes in the law regarding coverage of diagnostic testing.

2. What about members in a high-deductible health plan – is testing covered for them as well?
   Like many of our customers and members, we had questions about the high deductible plan. The IRS has provided clarification on how these changes apply to those plans. That guidance means members in our qualified HDHPs also can take advantage of the testing coverage that individuals in other plans will receive. The COVID-19 test will be covered at no cost for HDHP commercial members.

3. Will my employees need a prior authorization before they get a test for COVID-19 testing?
   No. We want to help make the testing process as easy as possible. There is no prior authorization requirement as long the physician is providing medically necessary COVID-19 tests that follow guidelines from the Centers for Disease Control.
   It’s important to note, that if your employee is admitted to the hospital as part of their illness, normal prior authorizations for hospitalization will apply.

4. How much does the COVID-19 test cost?
We do not have a final price as we are waiting for further guidance from the government and from labs. We initially are looking at $70 for the cost of the test but that could change. Providers will use the Health Care Procedure Coding System (HCPCS) codes identified by CMS for testing – U0001 and U0002.

5. **How does the testing process for COVID-19 work?**
   Because this process is new, we have been in contact with health officials and providers. Here is our understanding of how the process will work: The provider decides if the test is appropriate for that patient based on symptoms and history. The provider should call the health department to discuss testing the patient. Patients will be tracked as the provider fills out a Michigan Department of Health and Human Services form to list symptoms. After the provider and health department agree to give the test, the provider tells the patient how to receive it.

6. **What are you doing about prescription drug coverage during the outbreak?**
   We have also looked at the impact an outbreak could have on the availability of medications. To help ensure your employees with Blue Cross drug coverage have access to prescriptions that they need, we have:
   - Temporarily waived early medication refill limits on 30-day prescription maintenance medications (consistent with their benefit plan).
   - Made sure that your employees can fill their prescriptions earlier than normal if needed (does not apply to opioid prescription limits)

   We are also encouraging everyone with Blue Cross drug coverage to use the 90-day mail order option that comes with that coverage. This is especially useful if people are concerned about visiting a pharmacy during the outbreak.

7. **What if there is a shortage of drugs during an outbreak?**
   During a state of emergency when drugs are in short supply, we will do everything possible to make sure that people have the medications they need for their situation. That includes being flexible about filling a medication that may not be on Blue Cross’ preferred drug list.

   In addition, employees will not have to pay extra if there are additional charges for a medication that is on our non-preferred list and is needed for the treatment of COVID-19. We realize that this could mean increased costs for our self-funded groups in this situation, but we would only exercise this option to help people during extreme times.

8. **If my employees are sick what steps should they follow during this outbreak?**
   If your employees feel they have symptoms of COVID-19, they should first call their health care provider. Their primary care physician will provide guidance. It’s not recommended to show up at a health care provider unannounced in this situation. Some other things to note:

   - If their doctor belongs to a large health system, that health system may have information online about COVID-19.
   - If their symptoms are severe – high fever or rapid and difficult breathing – call 911. Alert 911 that you are calling for help related to COVID-19.
If they are experiencing mild symptoms, public health authorities are asking people to isolate themselves at home and avoid going out in public. They can also use Blue Cross’ alternative options (see below) in these situations.

9. What other options are there for treatment if an employee can’t get to a doctor or doesn’t want to visit a doctor’s office?
   Overall, we encourage people who are sick, and when it’s a non-emergency situation, to call their doctor’s office prior to visiting so they can get direction from their primary care physician. However, Blue Cross does have choices for care if an employee doesn’t want to go to a doctor’s office.

   Our 24-hour nurse line is a benefit for all Blue Cross members and provides them with a registered nurse who can help assess symptoms and provide guidance for next steps.

   Our commercial and Medicare Advantage PPO members can call 1-800-775-2583 and our commercial and Medicare Advantage HMO members can call 1-855-624-5214. Also available for customers who have purchased the option is the Blue Cross Online Visits™. With this option, your employees can use a smartphone, tablet or computer to visit online with a board-certified doctor.
   Calling or getting care online could help reduce potential infections that may occur at a doctor’s office.
   For more information about our online option, go to bcbsm.com/engage and select getting care online. If you want to find out how to add online visits to your current plan, contact your sales representative.

10. Where can members get further information about COVID-19?
    We encourage members to check the Centers for Disease Control website for information at https://www.cdc.gov/coronavirus/2019-ncov/index.html
    Our company is posting information on its blog – www.MIBluesPerspectives.com – to inform customers and members of the latest on the national impact of coronavirus and provide counsel on what to do and where to seek care if members come down with symptoms.

11. When are these changes effective?
    The changes are effective immediately. We will pay claims for testing retroactive to February 4.

12. I’d like to receive some information about financial impact to health care benefit costs related to COVID-19.
    We recognize the need for financial information as to how this could impact your health care costs. Our actuaries are working diligently to develop estimates of this impact. As you can imagine we want to provide you with the best possible estimate, but there continues to be a large number of unknowns with the spread of the virus both nationally and in the state of Michigan. We are working to gather more details and hope to provide you with some insight by next week as we work to produce a deeper view.

    Separately from the overall financial impact to health care benefit costs we have also been asked about the estimated financial impact of waiving member cost sharing for COVID-19 testing. Across our book of business, we expect this specific cost to be very small (less than 0.1% of total claims) in
comparison to the total potential impact. We also will provide any relevant updates on this item in tandem with our deeper view.