

## **COVID-19 information from Anthem Blue Cross and Blue Shield (April 8 update)**

Anthem Blue Cross and Blue Shield (Anthem) is closely monitoring COVID-19 developments and how they will impact our customers and our health care provider partners. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary on our part. The information in this communication applies to members enrolled in Hoosier Healthwise, Healthy Indiana Plan and Hoosier Care Connect.

**Due to the economic hardships brought on by the COVID-19 epidemic, all cost sharing for members is waived starting April 1, 2020.**

### **Summary**

#### **COVID-19 testing and visits associated with COVID-19 testing**

Anthem will waive all cost shares for members — including copays, coinsurance and deductibles. This includes COVID-19 tests and visits associated with the COVID-19 test (including visits to determine if testing is needed). Tests samples may be obtained in many settings including a doctor's office, urgent care, ER or even drive-thru testing once available. While a test sample cannot be obtained through a telehealth visit, the telehealth provider can connect patients with a test.

#### **Telehealth (video + audio):**

Effective March 17, 2020, until the end of the emergency period, Anthem will waive member cost shares for telehealth visits, including visits for mental health or substance use disorders. This will also apply to applied behavioral analysis (ABA), chiropractic services, and physical, occupational and speech therapy services for Anthem members.

The waiver of cost sharing applies to telehealth services. Cost sharing will be waived for members receiving telehealth from providers delivering virtual care through internet video and audio services.

#### **Telephonic-only care**

Effective March 19, 2020, until the end of the emergency period, Anthem will cover telephonic-only visits with in-network providers. Out-of-network coverage will be provided where required. This includes covered visits for mental health or substance use disorders and medical services.

Exceptions include chiropractic services and physical, occupational, and speech therapies. These services require face-to-face interaction and therefore are not appropriate for telephone-only consultations. However, these services are reimbursable via audio + video platforms.

#### **[www.anthem.com/inmedicaidoc](http://www.anthem.com/inmedicaidoc)**

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## **Prescription coverage**

Anthem is also providing coverage for members to have an extra 30-day supply of medication on hand. We are encouraging that when member plans allow, they switch from 30-day home delivery to 90-day home delivery.

## **Frequently asked questions**

### **Anthem's actions**

#### **What is Anthem doing to prepare?**

Anthem is committed to help provide increased access to care while eliminating costs to help alleviate the added stress on individuals, families and the nation's health care system. To support our members, all cost sharing is waived. This applies to testing and care for COVID-19, as well as for medical services unrelated to COVID-19.

These actions are intended to support the protective measures taken across the country to help prevent the spread of COVID-19 and are central to our commitment to remove barriers and support communities through this unprecedented time.

Anthem is committed to help our members gain timely access to care and services in a way that places the least burden on the health care system. Our actions should reduce barriers to seeing a doctor, getting tested and maintaining adherence to medications for long-term health issues.

#### **How is Anthem monitoring COVID-19?**

Anthem is monitoring COVID-19 developments and what they mean for our associates and those we serve. We are fielding questions about the outbreak from our customers, members, providers and associates. Additionally, our clinical team is actively monitoring external queries and reports from the CDC to help us determine what action, if any, is necessary on our part to further support our stakeholders.

Anthem has a business continuity plan for serious communicable disease outbreaks, inclusive of pandemics, and will be ready to deploy the plan if necessary.

Our enterprise-wide business continuity program includes recovery strategies for critical processes and supporting resources, automated 24/7 situational awareness monitoring for our footprint and critical support points, and the Virtual Command Center for Emergency Management command, control and communication.

In addition, Anthem has established a team of experts to monitor, assess and help facilitate timely mitigation and response where it has influence as appropriate for the evolving novel coronavirus threat.

#### **In case of mass epidemic, how can you ensure that your contracted providers can still provide services?**

Anthem is committed to working with and supporting its contracted providers. Our benefits already state that if members do not have appropriate access to network doctors that we will authorize coverage for out-of-network doctors as medically necessary.

### **COVID-19 testing**

#### **Will Anthem waive member cost shares For COVID-19 testing and visits associated with COVID-19 testing?**

Anthem will waive all cost shares for our Medicaid plan members — including copays, coinsurance and deductibles. This applies to COVID-19 related testing and care, as well as testing and care not related to

COVID-19. Tests samples may be obtained in many settings including a doctor's office, urgent care, ER or even drive-through testing once available. While a test sample cannot be obtained through a telehealth visit, the telehealth provider can connect members with testing.

**When member cost sharing has been waived by Anthem as outlined in this, how does that impact provider reimbursement?**

Anthem will process the claim as if there is no member cost sharing, as it does, for example, with preventative health services.

**How is Anthem reimbursing participating hospitals that perform COVID-19 diagnostic testing in an emergency room or inpatient setting?**

Reimbursement for COVID-19 testing performed in a participating hospital emergency room or inpatient setting is based on existing contractual rates inclusive of member cost share amounts waived by Anthem.

**How is Anthem reimbursing participating hospitals which are performing COVID-19 diagnostic testing in a drive-thru testing setting?**

Based on standard AMA and HCPCS coding guidelines, for participating hospitals with a lab fee schedule, Anthem will recognize the codes 87635, G2023, G2024 and U0002, and will reimburse drive thru COVID-19 tests according to the lab fee schedule inclusive of member cost-share amounts waived by Anthem. Participating hospitals without lab fee schedules will follow the same lab testing reimbursement as defined in their facility agreement with Anthem inclusive of member cost share amounts waived by Anthem.

**Does Anthem require a prior authorization on the focused test used to diagnose COVID-19?**

No, prior authorization is not required for diagnostic services related to COVID-19 testing.

**Does Anthem require use of a contracted provider for the COVID-19 lab test in order for waiver of the member's cost share to apply?**

Anthem will waive member cost shares for COVID-19 lab tests performed by participating and non-participating providers. This is applicable for our Medicaid plan members.

**Virtual, telehealth and telephonic care**

**What services are appropriate to provide via telehealth?**

- Anthem covers telehealth (in other words, video + audio) services for providers who have access to those platforms/capabilities today.
- Effective March 17, 2020, Anthem will waive member cost share for telehealth (video + audio) visits, including visits for mental health or substance abuse disorders, for our Medicaid plans until the end of the emergency period. Cost sharing will be waived for members receiving care from providers delivering virtual care through internet video + audio services.

**Will Anthem cover telephone-only services in addition to telehealth via video + audio?**

Anthem now covers telephone-only care effective March 19, 2020, to reflect the concerns we have heard from providers about the need to support continuity of care for members during extended periods of social distancing. Anthem will cover telephone-only medical and behavioral health services from in-network providers and out-of-network providers when required by state law. Exceptions include chiropractic services, physical, occupational, and speech therapies. These services require face-to-face interaction and therefore are not appropriate for telephone-only consultations. However, these services are reimbursable via audio + video platforms. Self-insured plan sponsors may opt out of this program.

## **What member cost-shares will be waived by Anthem affiliated health plans for virtual care through internet video + audio or telephonic-only care?**

Beginning April 1, 2020, all cost sharing is waived. This includes virtual care.

Effective March 19, 2020, Anthem will cover telephone-only medical and behavioral health services from in-network providers and out-of-network providers when required by state law. Exceptions include chiropractic services, physical, occupational, and speech therapies. However, these services are reimbursable via audio + video platforms. These services require face-to-face interaction and therefore are not appropriate for telephone-only consultations. Self-insured plan sponsors may opt out of this program.

## **What codes would be appropriate to consider for a telehealth visit with a patient who wants to receive health guidance related to COVID-19?**

Based on standard coding guidelines from the AMA and HCPCS, Anthem would recognize telehealth modifiers 95 or GT that are appended with office visit codes 99201-99215, for reimbursement as a telehealth service. Anthem also recognizes, but does not require, Place of Service (POS) code “02” for reporting telehealth services.

## **What codes would be appropriate to consider for telehealth (audio and video) for physical, occupational, and speech therapies?**

Effective March 17, 2020, until the end of the emergency period Anthem will waive member cost shares for telehealth visits for the following physical, occupational and speech therapies for visits coded with Place of Service (POS) “02” and modifier 95 or GT:

- Physical therapy (PT) evaluation codes 97161, 97162, 97163, and 97164
- Occupational (OT) therapy evaluation codes 97165, 97166, 97167, and 97168
- PT/OT treatment codes 97110, 97112, 97530, and 97535
- Speech therapy (ST) evaluation codes 92521, 92522, 92523, and 92524
- ST treatment codes 92507, 92526, 92606, and 92609

PT/OT codes that require equipment and/or direct physical hands-on interaction and therefore are not appropriate via telehealth include: 97010-97028, 97032-97039, 97113-97124, 97139 - 97150, 97533, and 97537-97546.

## **What is the best way that providers can get information to Anthem’s members on Anthem’s alternative virtual care offerings?**

The website <https://www.anthem.com> and the member-facing blog (<https://www.anthem.com/blog/member-news/how-to-protect>) are great resources for members with questions and are being updated regularly.

Anthem members also can call the Anthem 24/7 NurseLine at the number listed on their Anthem ID card to speak with a registered nurse about health questions.

## **Coding, billing and claims**

### **Does Anthem have recommendations for reporting, testing and specimen collection?**

The CDC updates these recommendations frequently as the situation and testing capabilities evolve. See the latest information from the CDC: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>.

### **What diagnosis codes would be appropriate to consider for a patient with known or suspected COVID-19?**

The CDC has provided coding guidelines related to COVID-19: <https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Guidance-Interim-Advice-coronavirus-feb-20-2020.pdf>.

**Is Anthem waiving member cost-shares when a member needs treatment from a doctor or a hospital related to COVID-19?**

Yes. Anthem is waiving all cost sharing during this time.

Additionally, keep in mind telehealth visits for any covered treatment do not require member cost sharing until the end of the emergency period. See other FAQs for details.

**Does Anthem expect any slowdown with claim adjudication because of COVID-19?**

We are not seeing any impacts to claims payment processing at this time.

**Other**

**Are you aware of any limitations in coverage for treatment of an illness/virus/disease that is part of an epidemic?**

Our standard health plan contracts do not have exclusions or limitations on coverage for services for the treatment of illnesses that result from an epidemic.