

# SPECIAL eBULLETIN

FOR PROFESSIONAL AND FACILITY PROVIDERS

MAY 20, 2020

## COVID-19 EXTENSIONS THROUGH SEPTEMBER 30, 2020

### HIGHMARK EXTENDS COVERAGE OF COVID-19 TREATMENT AND TELEMEDICINE

To help members continue to access needed care as the pandemic continues to affect the regions we serve, Highmark has extended member cost share waivers for in-network, inpatient hospital care, as well as extending telehealth coverage, member cost share and codes through **September 30, 2020**.

#### IN-PATIENT HOSPITAL CARE

- Waiver applies to in-network, inpatient claims with a confirmed diagnosis (after positive COVID-19 test).
- Standard prior authorizations still apply.
- Waiver applies to covered services from in-network providers.
- Upon discharge, routine medical benefit coverage will apply.

#### TELEHEALTH SERVICES

- Member cost share waiver applies to Commercial in-network and MA in- and out-of-network:
  - *Virtual Visits* (performed by a member's primary care provider or specialist within the scope of their license)
  - *Telemedicine* (performed by Highmark approved telemedicine vendors – American Well™, Doctor On Demand™, Teladoc™)
  - *Teleaddiction Services* through [Bright Heart Health](#)
- Procedure must be included on Highmark's extended commercial [Telehealth Code Set](#) (Medicare Advantage follows telehealth codes allowed by CMS).
- Benefit limits/maximums still apply.



The following is a summary of member plans to which these waivers apply. Members should contact Member Services (using the number on the back of their card) if they are unsure if it applies to their plan and to confirm which telemedicine vendor(s) are aligned to their plan:

Service	ACA/Commercial Plans	Medicare Advantage Plans
<b>In-Patient Hospital Care</b>	INN Providers	INN and OON Providers
<b>Telemedicine and Virtual Visits</b>	INN Providers	INN and OON Providers
<b>Home Health Virtual Visits</b>	INN Providers	INN Providers
<b>Bright Heart Health Teleaddiction Services</b>	INN Providers	INN Providers
<i>The extension does not apply to FEP or any self-insured employer group that has opted out of the cost share waiver. Members should contact Member Services (using the number on the back of their card) to see if this applies to their plan.</i>		

## OUTPATIENT VISITS, ASSOCIATED SERVICES, AND TESTING

In accordance with the Coronavirus Aid, Relief, and Economic Security (CARES) Act, Highmark will continue to cover member cost share for **COVID-19 related outpatient visits, associated services, and testing** through the end of the public health emergency (PHE).

## COVID-19 INFORMATION

Visit the dedicated COVID-19 section on the **Provider Resource Center** to stay informed of the most up-to-date Highmark information relating to the public health emergency.