HEALTH INSURANCE CARRIERS — COVID-19 RESPONSE


Centers for Disease Control and Prevention Recommendation. The Centers for Disease Control and Prevention (CDC) currently recommends video/virtual visits in place of physical doctor’s office and clinic visits to limit the spread of COVID-19.

Wellmark Response. To limit the spread of COVID-19, Wellmark has instituted the following changes for Wellmark members:

- Access is permitted to virtual health care visits for medical and behavioral health visits without member cost-share (copayment at the time of visit). For Wellmark members without a primary health care provider, Doctor on Demand can be used. Telephonic visits are permitted for Wellmark members in the absence of audio and visual capabilities.
- There is no cost-sharing to members for appropriate testing to establish a COVID-19 diagnosis.
- An early refill of up to 30 days for prescription medications is permitted. Members will not be charged in the event of a nonformulary prescription received as a result of the member’s current medication.
- There is a grace period of 60 days for individual and small business policyholders to make premium payments to maintain coverage.
- Network providers in Iowa and South Dakota will receive telehealth parity by receiving the same reimbursement for virtual visits as in-person visits. This change applies to all appropriate medical and behavioral health virtual visits with any Wellmark in-network provider.

Medica Response. Medica has waived costs related to COVID-19 testing and is currently exploring options to waive cost-sharing for in-person visits associated with a diagnosis for Medica members.

Small Group Plans. Aetna is waiving the cost of COVID-19 testing and medical visits related to diagnosing the virus. Aetna is also waiving the copayment for telemedicine visits until June 4, 2020. In addition to telehealth and virtual care expansion, UnitedHealthcare is offering a special enrollment period until April 6, 2020, for self-funded, level-funded, and fully insured customers and employees who did not opt in during the regular enrollment period. UnitedHealthcare is also suspending prior authorization requirements for post-acute care settings and transfer of a member to a new provider through May 31, 2020.

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