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CENTER ON HEALTH INSURANCE REFORMS

California State Senate Health Committee COVID Care: Role of Private Health Insurance

November 23, 2020 Sabrina Corlette, J.D.

About Georgetown's Center on Health Insurance Reforms (CHIR)

- A team of experts on private health insurance
- Conduct research and policy analysis, provide technical assistance to federal and state officials and consumer advocates
- Based at Georgetown University's McCourt School of Public Policy
- Learn more at https://chir.georgetown.edu/
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Testing for COVID-19: Federal Requirements under FFCRA, as amended by CARES

- Plans* must cover and waive cost-sharing for:
 - FDA-approved diagnostic testing for COVID-19
 - Items and services delivered during provider office, urgent care, and ER visits "that result in an order for or administration of" a COVID-19 test; may be in-person or via telehealth
- Prohibits use of prior authorization
- Requires plans to reimburse testing providers either the negotiated rate or the full cash price listed by the provider on a public website
- Applies through the public health

emergency



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Tri-agency* Guidance: Clarifies Scope of FFCRA Mandate

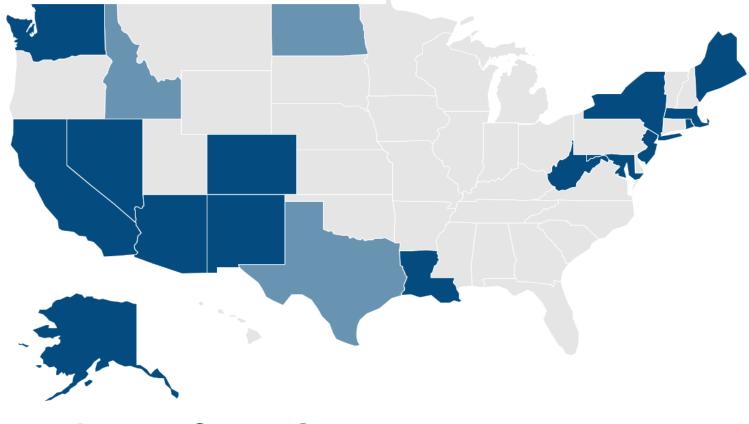
- Plans only required to cover "medically appropriate" tests, as determined by a licensed health care professional
 - Plans and insurers *not* required to cover workplace testing, or testing for public health purposes
- Test must be "ordered or administered" during visit
- Clarifies that at-home tests are included, but must be ordered by an attending provider

*Tri-agencies = U.S. Departments of HHS, Treasury, and Labor



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State Action Stronger than Federal Standard



🕘 No action taken 🔵 Requirement 🔵 No requirement, may be a recommendation or encouragement



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*Source: Center on Health Insurance Reforms, for the Commonwealth Fund.

https://www.commonwealthfund.org/publications/mapsand-interactives/state-action-related-covid-19-coveragecritical-services-private

Coverage of a COVID-19 Vaccine Federal Requirements

- ACA: Plans must cover & waive cost-sharing for:
 - Vaccines recommended by ACIP* for "routine use"
 - Plans/insurers have up to 2 years to implement
- CARES: Plans/insurers have 15 days to implement
- Federal rules (Oct. 29, 2020) require:
 - OON coverage for vaccine and administration
 - Providers must receive reasonable payment; cannot balance bill
 - Designation as for "routine use" not required



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*ACIP = CDC's Advisory Committee on Immunization Practices

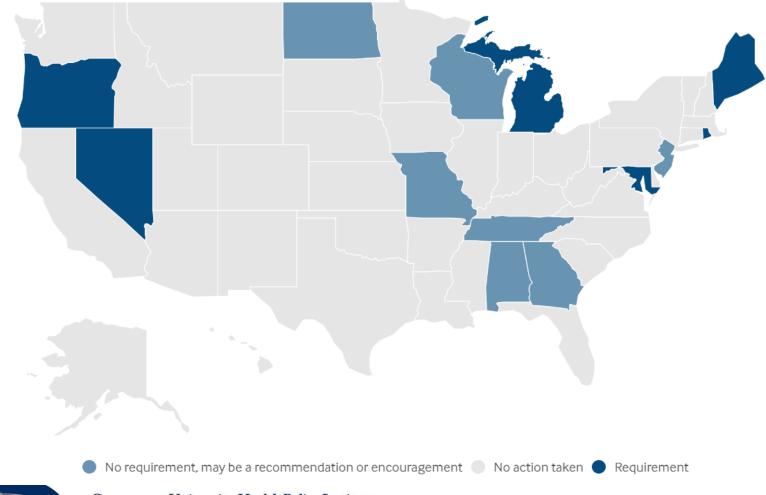
Vaccine Coverage: Potential Gaps for Consumers

- ACIP recommendation required
- Non-ACA compliant health plans exempt
 - Health care sharing ministries, grandfathered plans, fixed indemnity products
- Which vaccines?
- OON protections apply only through public health emergency
- Void if ACA is overturned in California v. Texas



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Limited State Action to Date





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Thank you!

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