



**Mary Washington**  
Medicare Advantage

# COVID Impact and Information

# COVID Impact on Coverage

## Costs for Covid testing and Treatment:

- Covid-19 anti-body testing: no authorizations required
- No co-pay for COVID 19 testing and treatment, including office visits and inpatient days

## Other changes resulting from Covid:

- Referral requirements have been waived during Covid-19 State of Emergency. National State of Emergency has been renewed until January 27<sup>th</sup>, 2020.
- Medicare-covered services received from an out-of-network provider will apply the same cost-sharing as an in-network providers.



# COVID Impact of Coverage Cont'd

Lifted Part D refill-too-soon to allow refills.

- Allow the maximum extended day supply of prescription medication, if requested and available at time of refill.
- Reimburse members for prescriptions obtained from out-of-network pharmacies.
- When a member indicates a pharmacy will not refill their prescription, CS will call the pharmacy with the member on the line and assist with the override.

# COVID and Telemedicine

Telemedicine is a way for healthcare providers to perform visits remotely

- CMS removed geographic and originating site requirements for Medicare-covered telehealth services.
  - Typically, Medicare only covers telehealth services in rural areas and only in certain settings, which do not include the patient's home.
  - Under this COVID-19 section 1135 waiver, beneficiaries in all areas of the country will be able to utilize telehealth services from their homes.
- Medicare can pay for office, hospital, and other visits furnished via telehealth, including in patient's places of residence. A range of providers, such as doctors, nurse practitioners, clinical psychologists, and licensed clinical social workers, can offer telehealth to their patients.

# CDC: COVID-19 Risk Factors

- Age continues to be a major risk factor for severe illness and death from COVID-19 ([CDC](#))
  - The risk of hospitalization is 4x higher in patients 65-74 years of age compared to people in their 30s
  - 80% of COVID-19 deaths have occurred in patients  $\geq$  65 years of age
- In people who are older *and/or* have chronic medical conditions (e.g., obesity, diabetes, cancer, heart disease, kidney disease, lung disease), preventive measures take on greater importance:
  - Avoiding others (particularly large group gatherings)
  - Face coverings
  - Hygiene

# CDC: Looking Ahead to the Fall and Winter

- The biggest fear is simultaneously high influenza and coronavirus activity, resulting in a large surge of serious illness and death (some people are using the term “*twindemic*”)
- The fall/winter will depend on several unknown factors:
  - Level of coronavirus activity/severity and duration of this and subsequent surges
  - Our ability to manage COVID-19 illness/development of additional preventive and therapeutic interventions
  - Effectiveness of the influenza vaccine
  - Severity of the influenza season (initial projections have not been released [])

# CDC: Influenza Forecast

## WE CANNOT PRESUME THAT OUR FLU SEASON WILL BE MILD

- The CDC has not issued a forecast for the 2020-2021 flu season
- The WHO says that the flu season “has not commenced” in the southern hemisphere
- In Australia, influenza activity is much lower than any time in the previous 5 years; however, this may not reflect an accurate assessment
  - Measures taken to mitigate the spread of COVID will work against influenza
  - Disruptions in office-based practices/ability to receive care
  - Disruptions in the surveillance/reporting of influenza
  - Reduced testing



# CDC: Influenza Vaccination Recommendations

- Vaccination should be early enough to precede virus circulation, but not so early that immunity wanes
- Everyone  $\geq 6$  months of age without contraindications should be vaccinated by the end of October
  - People who previously had a severe allergic reaction should not receive vaccination
  - People with egg allergies can receive the vaccine (may be given in a medical facility under supervision)
  - ANY licensed and recommended vaccines are appropriate
- Vaccination is particularly important in high-risk persons and people who live with/care for them
  - Children  $< 5$  years of age, adults  $\geq 50$  years of age
  - Chronic medical illness or abnormal immune system
  - Pregnancy (current or planned)
  - BMI  $\geq 40$
  - NH/LTC residents
  - Native Americans
  - Children taking salicylates
- People with COVID should receive influenza vaccine once they've recovered



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