COVID-19 Update as of March 17, 2020

In response to the novel coronavirus disease and COVID-19, the following process updates are now in place for our commercial, Affordable Care Act (ACA), Medicare Advantage and Federal Employee Program® (FEP) lines of business. These remain in effect until further notice. We'll keep you informed as information changes.

NOTE: Click here to find the latest provider coronavirus and COVID-19 information on floridablue.com.

Medicare Advantage Members

- We’re relaxing referral requirements for all service types during this time. Please attempt to obtain a referral through your existing process. If you are unable to obtain a referral, please proceed with providing treatment. Claims will not be denied solely for failure to obtain a referral, but will be reviewed for medical necessity and processed according to the member’s contract benefits.
- If a medically necessary service is not available from an in-network provider, members may seek care from an out-of-network provider and claims will process at the in-network benefit.
- Primary care providers, behavioral health providers and specialists can bill for virtual visits if they have telemedicine capabilities and want to consult with their patients virtually. The virtual visit will be in effect for the next 90 days and reimbursement will be based on your current fee schedule. Florida Blue will assess any potential extension to this timeframe and update you as needed:
  - The member will be responsible for their normal office visit cost share for this virtual visit.
  - For general medical care, you should submit a claim to Florida Blue using the regular Evaluation and Management (E/M) codes (99201-99215). The place of service should be 02 and the modifier should be 95 or GT.
  - For behavioral health providers, you should submit a claim to Florida Blue using one of the regular codes included in your fee schedule with a place of service 02 and the modifier should be 95 or GT.
- We’re waiving all cost shares for the medical test for COVID-19 for members. The codes are U0001, U0002 and 87635.
- If it is determined that COVID-19 testing is needed, we support the work of our providers, the Florida Department of Health and the Centers for Disease Control and Prevention (CDC) to ensure any COVID-19 testing is available to members. The tests are currently provided at no cost by state and federal health authorities. If testing (U0001, U0002 and 87635) is done in independent labs or physician offices, the members’ cost shares for these tests only will be waived.

Prescription Drugs

- We’re providing early access to 30-day prescription refills of medications (consistent with the member’s benefit plan).
- Members are encouraged to use the 90-day mail order benefit.

Additional Services

- In partnership with New Directions Behavioral Health, members experiencing stress related to COVID-19 can talk to specially trained behavioral health counselors at no cost via a 24/7
toll-free help line at 833-848-1762. Further referrals from these hotline calls will be covered per the member’s normal benefits/cost shares.

- Members are encouraged to take advantage of virtual care options in their plans for less serious medical issues to limit the spreading of COVID-19. Those with conditions such as common colds or other mild illnesses can visit floridablue.com to learn more about virtual care options.

**Commercial / Affordable Care Act (ACA) Members**

- We’re waiving all cost shares for the medical test for COVID-19 for members who are part of our commercial insurance plans including Affordable Care Act (ACA) plans. The codes are U0001, U0002 and 87635.
- If it is determined that COVID-19 testing is needed, we support the work of our providers, the Florida Department of Health and the Centers for Disease Control and Prevention (CDC) to ensure any COVID-19 testing is available to members. The tests are currently provided at no cost by state and federal health authorities. If testing (U0001, U0002 and 87635) is done in independent labs or physician offices, the members’ cost shares for these tests only will be waived.
- Primary care providers, behavioral health providers and specialists can bill for virtual visits if they have telemedicine capabilities and want to consult with their patients virtually. The virtual visit will be in effect for the next 90 days and reimbursement will be based on your current fee schedule. Florida Blue will assess any potential extension to this timeframe and update you as needed:
  - The member will be responsible for their normal office visit cost share for this virtual visit.
  - For general medical care, you should submit a claim to Florida Blue using the regular Evaluation and Management (E/M) codes (99201-99215). The place of service should be 02 and the modifier should be 95 or GT.
  - For behavioral health providers, you should submit a claim to Florida Blue using one of the regular codes included in your fee schedule with a place of service 02 and the modifier should be 95 or GT.
- Many members also have access to Teladoc® virtual visits.
  - While the coronavirus is a health concern, many members have access to Teladoc services at no cost to them through Florida Blue health benefits.
  - Members with this coverage will receive information on Teladoc and how they can sign up for this service.
  - **Note:** For self-insured employer groups, it is at their discretion whether they offer this coverage and what the member’s cost share will be.

**Prescription Drugs**

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**Additional Services**

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- Members are encouraged to take advantage of virtual care options in their plans for less serious medical issues to limit the spreading of COVID-19. Those with conditions such as common colds or other mild illnesses can visit floridablue.com to learn more about virtual care options.
Federal Employee Program (FEP) Members

- We’re waiving prior authorizations for diagnostic tests and for covered services that are medically necessary and consistent with CDC guidance if diagnosed with COVID-19.
- We’re waiving any copays or deductibles for diagnostic tests or treatment that are medically necessary and consistent with CDC guidance if diagnosed with COVID-19.
- We’re waiving copays for all telehealth services provided by Teladoc. If the member chooses to see a provider who is not in the Teladoc network, they will be responsible for their normal office visit cost share for the virtual visit.
- FEP members should consult their pharmacy benefit manager for questions related to their prescription medications.
- For more information, please visit fepblue.org.