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BULLETIN NO. 20-03

TO: ALL HEALTH INSURANCE COMPANIES, HEALTH MAINTENANCE ORGANIZATIONS, HEALTH SERVICE CORPORATIONS AND ANY OTHER ENTITY ISSUING HEALTH BENEFITS PLANS IN THIS STATE

FROM: MARLENE CARIDE, COMMISSIONER

RE: RESPONSE TO COVID-19

The purpose of this Bulletin is to provide guidance to all health insurance companies, health maintenance organizations, health service corporations and other entities issuing health benefits plans in this State (collectively "carriers") as the State responds to the global Coronavirus ("COVID-19") outbreak. COVID-19 is a respiratory infection caused by a novel virus that arose in December 2019. Once a person is infected, the virus causes respiratory illness. Outbreaks of novel virus infections among people are always of public health concern. The risk from these outbreaks depends on the characteristics of the virus, including how well it spreads between people, the severity of the resulting illness, and the medical or other measures available to control the impact of the virus (for example, medications or vaccines).

In order to ensure that cost-sharing is not a barrier to consumers receiving medically necessary screening and testing for COVID-19, the Department of Banking and Insurance ("Department") is advising all carriers to refrain from imposing cost-sharing for any emergency room visit at an in-network or out-of-network hospital, any in-network office visit, or any in-network urgent care center visit, when the purpose of the visit is to be tested for COVID-19. Moreover, carriers are advised to waive any cost-sharing for medically necessary COVID-19 laboratory tests provided by in-network or out-of-network laboratories. Carriers are advised to notify, as expeditiously as possible, the carrier's contracted providers that the carrier is waiving cost-sharing as described above.

In addition, the Department advises carriers to take the following actions in relation to the potential impact of COVID-19 on New Jersey:

- **Keep Consumers Informed:** The Department is requiring carriers to devote resources to inform consumers of available benefits, quickly respond to consumer inquiries, and

consider revisions needed to streamline responses and benefits for consumers. As part of informing consumers, carriers should prominently display on the carrier's public website a statement that the carrier is waiving cost-sharing for medically necessary screening and testing for COVID-19, as well as guidance to consumers on how to access care as described above.

- **Network Adequacy and Access to Out-of-Network Services:** Carriers should ensure that their provider networks are adequately prepared to handle a potential increase in the need for health care services pursuant to N.J.S.A. 26:2S-18, N.J.S.A. 26:2J-4 and N.J.A.C. 11:24A-4.10. Pursuant to N.J.S.A. 26:2SS-1 to -12 and N.J.S.A. 26:2S-36, carriers must provide access to out-of-network services where appropriate and required at the in-network cost-sharing.
- **Utilization Management:** Timely determinations are essential to responding appropriately to COVID-19. All utilization management determinations are to be made on a timely basis, as required by the exigencies as required by N.J.A.C. 11:24-8.3(c) and N.J.A.C. 11:24A-3.5(j)1 and (k)(3). Carriers should not use preauthorization requirements as a barrier to access necessary treatment for COVID-19 and should be prepared to expedite the utilization management and appeal processes for services related to COVID-19 when medically appropriate pursuant to N.J.A.C. 11:24-8 and N.J.A.C. 11:24A-4.11.
- **Provide Telehealth Medical Advice and Treatment:** The Department is requiring carriers to develop robust telehealth programs with their participating providers where appropriate, particularly for individuals who may have difficulty making an office visit and where a phone call with a medical professional can alleviate the need for a hospital visit.
- **Cover Costs if Immunization Becomes Available:** Although a vaccine is not currently available for COVID-19, it has been reported to be in development. In the event such a vaccine becomes available, carriers are encouraged to cover the cost of immunization at no cost-sharing.
- **Expanding Access to Prescription Drugs:** With reports of prescription drug shortages due to supply chain issues, the Department is encouraging all carriers that provide prescription drug coverage to provide coverage for prescription drugs to treat COVID-19 at a preferred level of cost-sharing to ensure that all available medically necessary drugs are available to patients.
- **Ensuring Emergency Care:** The Department is reminding all carriers that coverage for emergency services in hospital facilities is required at the in-network cost-sharing even if the hospital is out-of-network or overseas, and that no insurer may require a patient to seek preauthorization prior to seeking emergency care, including for ambulance service.
- **Medical Bills for Inadvertent Out-of-Network Services:** Providers are reminded that they cannot balance bill covered persons for emergency or inadvertent out-of-network services related to the diagnosis, testing and treatment of COVID-19, pursuant to N.J.S.A. 26:2SS-7 and 8. N.J.S.A. 26:2SS-3 defines "inadvertent out-of-network services" as health care services that are: covered under a managed care health benefits plan that provides a

network; and provided by an out-of-network health care provider in the event that a covered person utilizes an in-network health care facility for covered health care services and, for any reason, in-network health care services are unavailable in that facility. “Inadvertent out-of-network services” shall include laboratory testing ordered by an in-network health care provider and performed by an out-of-network laboratory.

If you have any questions, please contact the Department’s Office of Life and Health at lifehealth@dohi.nj.gov.

3/10/20
Date

Marlene Caride
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Commissioner

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