- COVID test
- Diagnostic test panels for influenza A & B, norovirus and other coronaviruses, and respiratory syncytial virus (RSV), when any of this testing is determined medically necessary by the enrollee's health care provider, and when billed in conjunction with a COVID-19 related diagnosis code

• Testing related visit in the outpatient or Emergency Department setting as long as is billed with DX code U07.1

Follow Consensus Direction?		Health plans provide 100% coverage, as outlined in the OIC Emergency Order above, except where self-funded groups opt out of that coverage.		
Aetna	Yes 03/30/20	Aetna COVID page	Aetna is waiving member cost-sharing for diagnostic testing related to COVID-19. This policy covers the cost of a physician-ordered test and the office, clinic or emergency room visit that results in the administration of or order of a COVID-19 test. The test can be done by any approved laboratory. This member cost-sharing waiver applies to all Commercial, Medicare and Medicaid lines of business. The policy aligns with new Families First legislation requiring all health plans to provider COVID-19 testing without cost share. The requirement also applies to self-insured plans.	
Amerigroup	Yes 03/27/20	Provider COVID FAQ	Health plan has no Self-insured plan sponsors. Amerigroup will waive any normally required cost shares— including copays, coinsurance and deductibles— for the COVID-19 test and associated visits. Test samples may be obtained in many settings including a doctor's office, urgent care, ER or even drive-through testing once available.	
CHPW	Yes 03/27/20	Provider COVID FAQ	Health plan has no Self-insured plan sponsors.	
Cigna	Most 04/01/20	COVID Provider page Scroll down to "Provider Frequently Asked Questions" and Select "COVID-19 Medical Treatment"	Cigna will waive customers' out-of-pocket costs for COVID-19 testing-related visits with in-network providers, whether at a doctor's office, urgent care clinic, emergency room or via telehealth, through May 31, 2020. Cigna also eliminated patient out-of-pocket costs for the diagnostic testing, when it's recommended by a physician. This expanded coverage includes customers in the United States who are enrolled in Cigna's employer/union sponsored group insurance plans, globally-mobile plans, Medicare Advantage, Medicaid and the Individual & Family plans. Employers and other entities that sponsor self-	

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Follow Consensus Direction?		Health plans provide 100% coverage, as outlined in the OIC Emergency Order above, except where self-funded groups opt out of that coverage.		
			insured plans administered by Cigna will be given the opportunity to adopt a similar coverage policy.	
Coordinated Care	Yes 03/27/20	COVID Provider page	When medically necessary diagnostic testing or medical screening services are ordered and/or referred by a licensed health care provider, we will cover the cost of medically necessary COVID-19 tests and the associated physician visit. Copayment, coinsurance and/or deductible cost-sharing requirements will be waived for medically necessary COVID-19 diagnostic testing and/or medical screening services.	
First Choice (TPA and PPO)	Varies by our Payers' Plans 03/27/20	COVID Provider page	First Choice Health is a PPO network that does not define the benefits. Please reach out to the individual Payers to confirm benefits. As an administrator for our self-funded health Plans, we are complying with the Families First Coronavirus Act, specifically the "Health Provisions". FCH is encouraging all FCH payors to waive patient responsibility for COVID-19 diagnostics, including testing services, performed in accordance with the Families First Coronavirus Response Act.	
HCA – Apple Health				
KP-NW	Yes 04/03/20		Most of our health plans require use of in-network providers for non-emergency services, and the COVID-19 testing and visit would be covered without deductible or cost-sharing. If a health plan covers services from out-of-network providers, then the COVID-19 testing and visit would be covered from those providers without deductible or cost-sharing.	

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Follow Consensus		Health plans provide 100% coverage, as outlined in the OIC Emergency Order above, except where self-funded			
Direction?		groups opt out of that coverage.			
			We monitor access to in-network providers, and if members cannot access care from an in-network provider, we will assist members in accessing care from out-of-network providers, and in such circumstances the COVID-19 testing and visit will be covered without deductible or cost-sharing.		
KP-WA	Most 03/27/20		Most of our health plans require use of in-network providers for non- emergency services, and the COVID-19 testing and visit would be covered without deductible or cost-sharing.		
			If a health plan covers services from out-of-network providers, then the COVID-19 testing and visit would be covered from those providers without deductible or cost-sharing.		
			We monitor access to in-network providers, and if members cannot access care from an in-network provider, we will assist members in accessing care from out-of-network providers, and in such circumstances the COVID-19 testing and visit will be covered without deductible or cost-sharing.		
			Self-insured plan sponsors will be able to opt-out of this program at their discretion		
Labor &					
Industries					
Medicaid	Yes	COVID resource page	Covers any medically necessary lab tests. Medicaid does not have copays or		
FFS	03/27/20		deductible. Covered at 100%.		
Molina	Yes	Molina COVID Resource Page	Health plan has no Self-insured plan sponsors.		

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• Testing related visit in the outpatient or Emergency Department setting as long as is billed with DX code U07.1

Follow Consensus Direction?		Health plans provide 100% coverage, as outlined in the OIC Emergency Order above, except where self-funded groups opt out of that coverage.		
	04/01/20			
Pacific Source	Most 03/27/20	Provider page (link available on page to download COVID FAQ).	PacificSource is also covering all outpatient, urgent care and emergency room visits, testing and radiology (applicable chest x-rays) at 100%, if billed with a COVID-19 DX (B342, B9729, U071, Z03818, Z20828). If the patient is admitted to the hospital, regular member benefits apply.	
			Self-insured plan sponsors will be able to opt-in to this program at their discretion.	
Premera	Most 03/27/20	COVID Provider page	Premera will cover 100% of the cost of the COVID-19 lab and other diagnostic test panels and the associated visit resulting in no cost share for the fully insured members.	
			Premera and LifeWise Health Plan of Washington customers will pay nothing out of pocket for treatment of COVID-19 or health complications associated with COVID-19, including in-patient and out-patient hospital admissions, urgent care and emergency room visits, medical transport when needed, and FDA-approved in-patient medications for both in and out of network providers. The company previously announced that it would waive cost shares for COVID-19 testing.	
			Self-funded employer groups will apply this approach but may opt out of this arrangement.	

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	Health plans provide 100% coverage, as outlined in the OIC Emergency Order above, except where self-funded groups opt out of that coverage.		
Most 04/01/20		Most - We are supporting self-insured plan sponsors who choose to implement the same or similar coverage, however, self-insured plan sponsors are able to opt-out of this coverage at their discretion.	
Most 03/27/20	COVID resource page Scroll down to COVID Testing		
Most 03/27/20		UnitedHealthcare is waiving member costs for COVID-19 testing provided at approved locations in accordance with the U.S. Centers for Disease Control and Prevention (CDC) guidelines. This coverage applies to Medicare and Medicaid members as well as our commercial insured members. We are also supporting self-insured employer customers who chose to implement similar actions.	
	04/01/20 Most 03/27/20 Most	Most 04/01/20 Most 03/27/20 Most 03/27/20 Most COVID resource page Scroll down to COVID Testing	