



VEBA Member Update: Coronavirus Coverage

VEBA is committed to the health and safety of our members and we are working with our carriers on their COVID-19 response. The VEBA Board has ensured that diagnostic testing and the accompanying physician visit will be covered for COVID-19, based on medical necessity by your physician. Below is a recap of exact coverage available through each carrier.

Please remember to use an in-network provider and begin the process by **calling** your health care provider or primary care physician, if you suspect you have been exposed to COVID-19. In the unlikely event you are charged for the test or office visit in error, please contact VEBA Advocacy at **888-276-0250**.

As with any public health issue, VEBA will continue to monitor the situation and follow all guidance and protocols issued by the CDC, state and local public health departments. If you are showing symptoms of COVID-19 or have come in contact with a person with COVID-19, we recommend **calling** your health care provider immediately. For the latest news on coronavirus, please visit the [CDC](#).

VEBA members have access to a number of resources for support including Optum's Emotional Support line at **866-342-6892**. Additionally, VEBA Advocacy is here to support any plan or billing questions you may have at **888-276-0250**.

If you are experiencing a medical emergency, please call 911.

UnitedHealthcare HMO plans:

What will be covered for UHC members?

UnitedHealthcare (UHC) has waived all member cost sharing, including copays, coinsurance and deductibles, for COVID-19 diagnostic testing and physician office visit provided at approved locations in accordance with CDC guidelines and medical necessity. Members will be responsible for any treatment or care they receive because of their diagnosis. Testing should be done through a member's primary care provider.

What other options for care do UHC members have?

UHC encourages members to **contact** their primary care provider if they have COVID-19 symptoms or think they may have been exposed. UHC providers will work with the CDC or the local public health department for proper testing protocol. UnitedHealthcare members can find a network provider by visiting csveba.welcometouhc.com.

UHC members also have access to virtual visits for general questions. Go to [UHC's](#) website to learn more.



Can UHC members obtain an early refill of their medications?

Standard refill policies, which allow members to refill or renew a prescription medication when 25%-35% of the current prescription is remaining, should help them stay on track with their medication during this time. Members enrolled with Express Scripts Home Delivery can refill their prescriptions once 25% of the prescription is remaining.

Express Scripts (ESI) is committed to taking appropriate actions to ensure members have the medication on hand to keep them healthy. ESI is monitoring the situation closely and will update their information and policy if or when the situation changes. Should members have any questions or concerns about their individual situation, ESI pharmacists are available at **800-918-8011**.

If members currently fill 30-day supplies of their maintenance medication at a local pharmacy and would like a longer-term supply, they can ask their physician to write a prescription for a 90-day supply and fill it at Express Scripts Home Delivery or Smart go (Rite-Aid or Costco) if included in the plan. ESI pharmacists can help members get started: just call the number on the back of your pharmacy card.

UMR PPO plans:

What will be covered for UMR members?

UMR has waived all member cost sharing, including copays, coinsurance and deductibles, for COVID-19 diagnostic testing and physician office visit provided at approved locations in accordance with CDC guidelines and medical necessity. Waived cost sharing is available at an In-Network provider only. For members enrolled in the Nexus ACO, Tier 1 and Tier 2 providers will be considered In-Network for testing. Cost sharing for treatment will vary based on the tier of the provider and the specific plan benefits. Members can find an In-Network Provider at [UMR.com](https://www.UMR.com).

What other options for care do UMR members have?

UMR encourages members to contact an In-Network provider if they have COVID-19 symptoms or think they may have been exposed. UMR providers will work with the CDC or the local public health department for proper testing protocol. UMR members can find a network provider by visiting [UMR.com](https://www.UMR.com).

Can UMR members obtain an early refill of their medications?

Standard refill policies, which allow members to refill or renew a prescription medication when 25%-35% of the current prescription is remaining, should help them stay on track with their medication during this time. Members enrolled with Express Scripts Home Delivery can refill their prescriptions once 25% of the prescription is remaining.



Express Scripts (ESI) is committed to taking appropriate actions to ensure members have the medication on hand to keep them healthy. ESI is monitoring the situation closely and will update their information and policy if or when the situation changes. Should members have any questions or concerns about their individual situation, ESI pharmacists are available at **800-918-8011**.

If members currently fill 30-day supplies of their medication at a local pharmacy and would like a longer-term supply, they can ask their physician to write a prescription for a 90-day supply and fill it at Express Scripts Home Delivery or Smart go (Rite-Aid or Costco) if included in the plan. ESI pharmacists can help members get started: just call the number on the back of your pharmacy card.

Kaiser HMO plans:

What will be covered for Kaiser members?

For all Kaiser Permanente plans, cost sharing (deductibles, copayments and coinsurance) will be waived for medically necessary screening and testing for COVID-19 including the physician visit.

For patients with symptoms who meet the criteria, we will make appropriate arrangements for testing. If a member is diagnosed with COVID-19, all treatment including but not limited to hospital, transportation and pharmacy services will be covered in accordance with the terms and conditions set forth in the coverage document for the member's health plan.

What other options for care do Kaiser members have?

Kaiser offers telehealth options for members — including phone, email, and video — without an in-person visit. To take advantage of these telehealth options, you should call the advice number on your Kaiser Permanente membership card for instructions.

How are prescription services affected?

It's a good idea to fill your prescriptions through our mail-order service, especially during the COVID-19 outbreak, not only because you can avoid standing in line at the pharmacy but also because with most prescriptions you can get 3 months' supply for the price of 2 months. Sign up on kp.org/rxrefill and receive your medications in about 3 to 5 business days. For urgent prescriptions, you should visit your closest Kaiser Permanente medical center pharmacy.

Cigna HMO plan:

What will be covered for Cigna members?

Cigna will cover COVID-19 testing similar to a preventive benefit for fully-insured plans, waiving co-pays, deductibles and co-insurance for members. For individuals diagnosed with COVID-19, Cigna will ensure all patients receive the treatment they need. Costs for treatments are based on the plan the member has selected.



What other options for care do Cigna members have?

To mitigate exposure risks, customers are reminded that telehealth options are available for seeking on-demand medical attention, as appropriate. To access telehealth options, visit mycigna.com and select the "Connect Now" button on the home page to talk with a doctor or nurse any time day or night.

What additional resources do Cigna members have?

Cigna is standing up a 24/7 customer resource center specifically dedicated to help customers with any administrative barriers related to Coronavirus-related claims.

Recognizing that health outbreaks can increase feelings of stress, anxiety and sleeplessness and in some cases, loss, Cigna is also staffing a second phone line for customers. This 24-hour toll-free telephone help line will connect customers and caregivers directly with qualified clinicians who can provide support and guidance on coping and resiliency.

SIMNSA HMO plan:

What will be covered for SIMNSA members?

SIMNSA is not charging any fees or copayments for services related to COVID-19. There will be no applicable copays for COVID-19 screenings at in network and out of network providers so long as they are determined to be medically necessary by our Medical Director.

The claim may be paid by SIMNSA without any cost share to the member if there was a reasonable belief that a patient had symptoms related to COVID-19.

What isn't covered?

SIMNSA members who seek testing without accompanying symptoms will not be covered.

Applicable copays may be incurred for actual COVID-19 care and treatment.

What other options for care do SIMNSA members have?

If a member is seeking testing for COVID-19, they are advised to go in-network to the SIMNSA clinic for testing.