

Self-funded Employer e-mail message 3-21-2020 FINAL

Independent Health is deeply committed to meeting the needs of our members, employers and providers during the COVID-19 Coronavirus outbreak. As such we want to make you are aware of changes to, or options regarding, coverage for COVID-19 related care and other services, including the expansion for telemedicine and telehealth benefits that members have.

- **Laboratory testing and diagnostic services:** Under the Families First Coronavirus Response Act, all laboratory testing and diagnostic services related to COVID-19 will have no member cost share, including visits to your doctor (in-person visits and telehealth visits), urgent care center or emergency room. This applies to all plans, including HSA-qualified high deductible health plans (HDHPs). The US Department of Treasury issued guidance in IRS Notice 2020-15 that allows an HDHP to provide medical care services and items purchased related to testing for and treatment of COVID-19 prior to the satisfaction of the plan's minimum deductible. As a result, members covered under an HSA-qualified HDHP who receive such services prior to satisfying the plan's deductible will remain eligible to make and receive contributions to their HSA.
- **Telehealth and telemedicine:** In response to the COVID-19 crisis, the New York State Department of Financial Services (NYS DFS) issued an emergency regulation prohibiting member cost share for any in-network telehealth services, whether or not Covid-19 related. While NYS DFS does not regulate self-funded plans, we would urge you to consider covering telehealth and telemedicine services under your plan (if you don't already do so) and removing the member cost share for any telehealth services. Such action should help to encourage your employees and their families to refrain from visiting the doctor's office and help reduce the risk of spreading this virus, especially to vulnerable individuals.

Please note, though, that as of the date of this communication, we are awaiting further guidance regarding how the waiver of member cost share would impact HSA-qualified HDHP coverage. As of now, members in an HSA-qualified HDHP will still be required to satisfy their deductible before the \$0 copay for non-COVID-19 related telehealth visits would apply. Please consult with your legal counsel if you are considering a plan design change to waive the deductible in your HSA-qualified plan for non-COVID-19 related telehealth visits.

The cost sharing and coverage described above is based on the most current guidance from the NYS DFS and federal regulation. To date, telemedicine has not been specifically addressed in state or federal regulations. We will keep you updated if other forthcoming guidance results in any changes.

- **Early refills for medications:** If your plan utilizes Independent Health's Pharmacy Benefit Dimensions (PBD), your PBD account manager has contacted you to discuss your options for pharmacy benefits.

Additional services available to our members

We continue to encourage our members to consult their primary care physician if they have any health concerns. And now, more than ever, we remind our employers and members of the important services and resources that we offer to help our members get the care and support they need:

- **Mail order for maintenance medications**

As public health officials encourage social distancing and employers implement work-from-home policies, we encourage our members who have Pharmacy Benefit Dimensions to consider having their maintenance medications delivered to their homes through one of the mail-order vendors we've partnered with: Wegmans and Proact.

- **Teladoc**

We understand some members don't have a primary care physician or may have difficulty reaching their primary care physician due to increased volume, and so we offer Teladoc®. Teladoc® allows members to talk with a doctor anytime, anywhere by phone, mobile app or online 24 hours a day, seven days a week.

If your plan offers Teladoc, we will be glad to provide you with Teladoc materials to remind your members of this important service.

- **Brook Health Companion**

The constant news and temporary shift to work and school-from-home are anxious times. That's when the Brook Personal Health Companion app can help members understand their personal health situations and risks, make healthy choices at home and act as a bridge between healthy behaviors and guiding people to the right medical assistance when required. During this time of enhanced need for real-time reliable information and support, we're extending FREE access to the Brook Personal Health Companion app to self-funded clients through the end of 2020.

The Brook Personal Health Companion provides access to a team of health coaches seven days a week, right from their smartphone. Because Brook is not a replacement for primary care, members will be referred to their doctor's office as appropriate to address medical issues.

We will send you additional details about Brook, including how members can register for free, in follow-up communications.

- **24-Hour Medical Help Line**

This member benefit allows members to speak with an experienced registered nurse to get answers to questions. The nurses can help members learn more about the treatment and procedure options available for different health problems and diseases.

As this fluid situation changes, we will continue to keep our employers and members up-to-date and informed on how we will continue to meet your needs. As you are considering changes to your group health plan during this time of crisis, we urge you to consult with your own counsel to ensure that you continue to comply with all State and Federal laws and regulations.

If you would like to discuss any other changes to your plan or have any questions, please contact your account manager.