

Medicare and COVID (contributed by Marna Schirmer of WSOS from various webinars, including CMS; updated Oct. 8, 2020 by JW)

Ongoing Social Security updates: <https://www.ssa.gov/coronavirus/>

Ongoing Medicare updates: <https://www.medicare.gov/medicare-coronavirus>

Testing:

- Lab tests for COVID-19 done after 2/4/2020 can be billed to Part B
- Since 3/17/20, providers can't ask for prior authorization
- No deductible, coinsurance, or copay for the test or the associated visit

Vaccine: If it becomes available, no deductible, coinsurance or copay

Medicare Advantage Plans (MAPs) in case you're not at home at time of isolation, always check with your plan first for costs and protocols, but MAPDs must:

- Allow out of network visits from practitioners and services associated with them
- Charge in-network cost sharing amounts for these visits
- Waive referral requirement
- Suspend rules for prior authorization in some cases

Part D drug plans must:

- Cover out-of-network pharmacy usage, if you can't be expected to use an in-network pharmacy or if their in-network pharmacy is back-ordered on their medication
- Remove restrictions that stop you from getting an early refill
- Cover maximum supply (90 days) of refill if you request it and have a prescription (but safety checks still in place to prevent unsafe dosage of opioids)
- Waive cost-sharing for drugs used to treat COVID-19
- Allow flexibility in some cases for mail order and home delivery, prior authorization and early refills

In addition:

- Plans are encouraged not to disenroll people who failed to pay their premiums
- Plans don't have to disenroll members who are outside service area for more than 6 months
- Mid-year charges for COVID-related drugs can be more generous, but they must be offered to everyone

Skilled Nursing Facilities

- 3-midnight hospital inpatient before entering a SNF waived for people who need to be transferred to make room at the hospital for COVID-19 patients or due to SNF evacuations, and for those who need SNF care as a result of the current PHE
- Waivers apply nationally, and you can file a quality of care complaint at Livanta if you can't get one (https://livantaqio.com/en/states/new_york; helpline 1-866-815-5440)
- Part A may allow an additional 100 days in SNF due the PHE

Homecare

- Some additional circumstances for allowing certifying homecare: increased susceptibility to COVID-19 (i.e., from a previous medical condition) or you're suspected of/confirmed as having it
- More services can be provided through telehealth, as long as it is stated in the plan of care

Telehealth during PHE (Public Health Emergency):

- Can now be prescribed for office and hospital visits, and mental health counseling, with doctors, advanced practice registered nurses (APRNs), physician's assistants (PAs), clinical psychologists, and licensed certified social workers.
- Regular coinsurance, copays or deductibles will apply, but charges can be waived during PHE
- Telehealth cannot replace in-person services listed on plan of care
- Technology must allow for audio and visual, but limited services can be audio only
- Skype and FaceTime temporarily possible
- Part B covers some services other than face-to-face visits (e.g., phonecalls, virtual check-ins)

Enrollment

- Most offices are closed to the public but many services can be performed online.
- Apply for Medicare A and B online at <https://secure.ssa.gov/iClaim/rib> or call Social Security at 1-800-722-1213 (local office locator <https://secure.ssa.gov/ICON/main.jsp>)
- There's a SEP to make a change to coverage if you're entitled to use another enrollment period during the PHE. Call 1-800-MEDICARE.
- You can use the SEP to enroll in Medicare if you, spouse and sometimes someone in the family lost a job with healthcare coverage.
- If only applying for Part B, must include forms 40B and L564.
- 40B: Application for Medicare Part B; online <https://secure.ssa.gov/mpboa/medicare-part-b-online-application/>
- L564: Request for Employment Information, printable at <https://www.cms.gov/medicare/CMS-Forms/CMS-Forms/Downloads/CMS-L564E.pdf>.
- Employer fills this out, signs it, and gives you a digital copy. If they can't do, you can fill it in yourself and submit along with proof of job-based coverage (e.g., tax return, W-2, pay stub, health ins. card with start date, EOB, statements showing payment)
- Use certified mail, or fax to 1-833-914-2016.
- Strategies for enrollment problems include contacting elected officials and for Part B SEP, your supervisor.

EPIC: You can enroll in a deductible plan online, but leave questions 4–23 blank (for those whose income has dropped below the limits)