

Expanded access to care, support and resources

We are expanding your access to care, support and resources to help you navigate through this unprecedented time. We are committed to making every effort to protect your health by keeping you safe in your home while still enabling you to get the right care.

Costs are covered for COVID-19 tests and related visits

We are waiving costs for COVID-19 testing provided at approved locations in accordance with the U.S. Centers for Disease Control and Prevention (CDC) guidelines. And also waiving copays, coinsurance and deductibles for visits associated with COVID-19 testing, whether the care is received in a health care provider's office, an urgent care center or an emergency department. This coverage applies to Medicare Advantage members.

Early prescription refill

Eligible members who need an early prescription refill to ensure they have sufficient medication on hand may request one through their current pharmacy. Consider your current supply, as well as near-term medication needs to determine if you should refill early.

Free access to telehealth

We expanded access to telehealth to make it easier for you to connect with health care providers from the comfort and safety of your home. There are two ways to access telehealth services:

- **Schedule a free telehealth visit:** Sign in to your health plan account to access your existing telehealth benefit. We are waiving member deductibles, copays and coinsurance for telehealth visits through our designated telehealth partners.
- **Talk to your health care provider about telehealth:** Telehealth access is expanded in response to COVID-19 to allow faster support and to reduce exposure to the virus. Your local medical provider may be able to provide a telehealth visit through live video-conferencing. We are waiving member deductibles, copays and coinsurance for COVID-19 related visits through June 16.

Additional resources for our members

- **Access your health plan account:** Sign in to your health plan account to find network health care providers, understand benefits coverage, manage prescriptions and more.
- **Call a health care plan advocate:** If you have health benefits questions, need help finding a health care provider or would like to talk to a nurse, call the phone number on your member ID card.

The CDC remains your best resource for COVID-19

The COVID-19 situation continues to quickly evolve. Go to the CDC for the latest information on COVID-19, including how to protect yourself and what to do if you are sick.

If you think you might have been exposed to COVID-19, call your health care provider right away. Members can find a network health care provider by signing in to your health plan account or by calling us using the phone number on your member ID card.

Frequently asked questions

I may have been exposed to COVID-19. What should I do?

Call your primary care provider right away if you believe you might have been exposed to COVID-19 or have symptoms such as fever, cough or difficulty breathing. Members can find a network health care provider by signing in to your health plan account.

Where do I get the COVID-19 test?

Call your primary care provider right away if you believe you might have been exposed to COVID-19 or have symptoms such as fever, cough or difficulty breathing.

If your health care provider determines you should be tested for COVID-19 and orders the test, they should work with local and state health departments to coordinate testing. The most common place for testing is the health care provider's office or clinic.

For the test, a health care provider will need to collect a specimen, which is a nasal or throat swab. Your test may be sent to a location approved in accordance with CDC guidelines. This may include a commercial laboratory, a local public health laboratory or the CDC.

Will we cover the cost of COVID-19 care?

We are waiving costs for COVID-19 testing provided at approved locations in accordance with the CDC guidelines. And we are waiving copays, coinsurance and deductibles for visits associated with COVID-19 testing, whether the care is received in a health care provider's office, an urgent care center or an emergency department. This coverage applies to Medicare Advantage members.

Care or treatment for COVID-19 will be covered in accordance with your health benefits plan. Your deductibles, copays and coinsurance will apply.

Will drive-up testing be an option?

Local, state and federal government agencies, as well as health care providers, are working to increase access to testing, while limiting exposure among the population. This includes mobile and drive-up specimen collection locations. You will still require a physician order for the test, unless otherwise directed by your respective government agency.

We are waiving costs for COVID-19 testing provided at approved locations in accordance with the CDC guidelines.

When should I consider telehealth?

Telehealth provides access to health care providers from the comfort of your home, allowing faster support and reduced exposure to the virus.

If you believe you might have been exposed to COVID-19 or have symptoms, call your primary care provider right away. Your provider may offer a telehealth option and determine if additional testing is needed. This COVID-19 related telehealth video-conferencing visit will be free of charge through June 16.

Your primary care provider may also offer telehealth options for other medical care, in which case your deductibles, copays and coinsurance will apply.

In addition, designated telehealth partners can provide COVID-19 and non-COVID-19 virtual urgent care. We are making this available at no cost to you. Sign in to your health plan account to access your existing telehealth benefit.

If I have questions, can I call my Plan?

Yes. Our healthcare advocates are here to answer your COVID-19 health benefits questions, help you find a health care provider or connect you with a nurse. Just call the phone number on your member ID card.