



COVID-19 (Coronavirus) Response by Carrier

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Colorado

Anthem BCBS

Carrier Responses

Resources

Coverage

Anthem's commitment to improving lives and supporting our local communities is more important than ever as the nation joins together to address the COVID-19 crisis. As part of Anthem's ongoing actions to meet the needs of those directly impacted by the disease, the company announced it will expand coverage, effective April 1, for members in its affiliated health plans undergoing treatment related to a COVID-19 diagnosis.

The expansion covers the waiver of cost share for COVID-19 treatment received through May 31, 2020. Anthem will reimburse health care providers at in-network rates or Medicare rates, as applicable, for Anthem's affiliated health plan fully insured, Individual, Medicaid and Medicare Advantage members. Anthem is strongly encouraging participation by our self-funded employers and will work with them to ensure their employees' needs are met. These employers will, however, still have the option to opt out of participation.

Anthem will also provide post-discharge support to Medicare members with complex care needs who may need additional assistance as they transition back to home following hospitalization. Anthem's care managers can help provide coordination of medications and home health needs, scheduling follow up appointments and transportation, and arranging for post-discharge meal delivery.

This action expands upon the proactive steps Anthem has already taken to support care providers and protect our members, associates and communities against COVID-19, which include:

- Waiving copays, coinsurance and deductibles for the diagnostic test related to COVID-19, as well as for visits associated with COVID-19 testing, whether the care is received in a physician's office, an urgent care center or an emergency department.
- Relaxing early prescription refill limits for members who wish to receive a 30-day supply of most maintenance medications, where permissible.
- Suspending select prior authorization requirements to allow care providers to focus on caring for patients diagnosed with COVID-19. This includes suspension of prior authorization requirements for patient transfers, prior authorization requirements for skilled nursing facilities, along with the suspension of prior authorization requirements for the use of medical equipment critical to COVID-19 treatment.
- Temporarily adjusting the approach to monitoring claims and audits.
- Launching the Medical Associate Volunteer Program, which allows Anthem associates who are licensed and credentialed medical professionals the opportunity to take paid leave from their regular Anthem role and use their medical expertise and training to support care providers and deliver relief.
- Expanding Anthem associate benefits to include up to 80 hours of paid emergency leave for qualifying needs – which aids with time for those experiencing symptoms of COVID-19 and to address caregiving needs for children or others due to issues related to COVID-19.

[What you need to know about COVID-19](#)

[Anthem Frequently Asked Questions](#)

[LiveHealth Online](#)

- In coordination with the Anthem Foundation, and as part of our legacy of aid to those in need, we are providing extensive support to meet the needs of communities across the country. Engagement with long-term partners such as the Red Cross, Direct Relief, AmeriCares and Feeding America, along with countless other local nonprofit partners, is ensuring aid is directed to meet the distinct needs brought by COVID-19. Anthem associates are also active in community support in a variety of ways, backed by a 100% match from the organization.

Anthem continues to closely monitor the COVID-19 developments and listen to the needs of our communities, Anthem associates and all of the members and care providers we serve.

Telemedicine

This action expands upon the proactive steps Anthem has already taken to support care providers and protect our members, associates and communities against COVID-19, which include:

- Waiving any member cost share until June 14, 2020 for telehealth visits, including visits for mental health and select Physical, Occupational and Speech therapies, for our fully insured employer plans, Individual plans, Medicare plans and Medicaid plans, where permissible.
- Launching a COVID-19 symptom assessment tool available [online](#) and via the Sydney Care mobile app.

COVID-19 vaccine

Anthem wants to keep our partners informed on the progress of COVID-19 vaccines that can help slow the spread of the disease.

The Centers for Disease Control and Prevention (CDC) recommends that healthcare workers and residents of nursing homes and long-term care facilities be the first to receive a COVID-19 vaccine. Each state will make decisions about vaccine distribution based on their own circumstances.

Anthem members will have no cost share for a COVID-19 vaccine

When the COVID-19 vaccine is FDA-authorized and publicly available, all Anthem members will be able to receive the vaccine at no cost from in-network or out-of-network healthcare professionals. ***The Centers for Medicare & Medicaid (CMS) requires that fully insured and administrative services only (self-funded) groups cover the vaccine with no cost sharing.***

- **Individual and group health plans:** Members will have no cost share when they receive a vaccine from in- and out-of-network healthcare professionals through the national public health emergency period.
- **Medicare health plans:** Members will have no cost share for vaccines at both in- and out-of-network providers through December 31, 2021.

COVID-19 vaccines may not be widely available until mid-2021. To find the latest COVID-19 information, visit the [CDC website](#).

We're committed to supporting you with up-to-date information. For more information on COVID-19, including [The Latest on COVID-19 Testing](#), visit [anthem.com/ca/coronavirus](https://www.anthem.com/ca/coronavirus).