

# Prior authorization (PA) policy changes related to COVID-19



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Updated 1/11/21

## Major medical insurance plans/medical benefit managers

Plan	Effective Date(s)	Policies
<p><b>Aetna*</b>                      *See Aetna's <a href="#">COVID-19 Communications Updates</a> for state-specific information and detailed requirements</p>	<p><a href="#">3/25/20</a> – 2/15/21</p>	<ul style="list-style-type: none"> <li>• <i>COVID-19 screening/testing/treatment:</i> Aetna has waived member cost-sharing for COVID-19 diagnostic testing and treatment, but has not issued a statement on PA requirements</li> <li>• <i>Admissions:</i> Effective 12/14/20 thru 2/15/21, PA is waived for admissions to Skilled Nursing Facilities (SNF) from post-acute care hospitals                             <ul style="list-style-type: none"> <li>○ SNFs are required to notify Aetna of admissions within 48 hours and send medical records for concurrent review within 3 days</li> <li>○ PA waiver does NOT apply to transfers between facilities or level of care changes within a SNF</li> <li>○ Long-Term Care Hospitals (LTACH) and Inpatient Acute Rehabilitation (IRF) admissions still require PA, unless prohibited by state regulation</li> </ul> </li> <li>• <i>Elective procedures:</i> Aetna continues to require PA and to review PA requests for elective procedures; providers are responsible for complying with applicable state directives that restrict elective procedures                             <ul style="list-style-type: none"> <li>○ As of 12/15/20, PA requests are being approved until the end of the plan year</li> <li>○ Authorization may be extended for 6 months beyond the plan year if continued eligibility can be confirmed</li> </ul> </li> <li>• <i>Lines of business:</i> Commercial and Medicare Advantage Part C plans</li> </ul>

## Summary of medical and prescription drug plan

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<b><a href="#">BlueCross BlueShield Association*</a></b> *Check with <a href="#">individual BCBS plans</a> for additional information	3/6/20	<b><a href="#">All 36 BCBS plans</a></b> <ul style="list-style-type: none"> <li>• <i>COVID-19 screening/testing</i>: PA waived for COVID-19 diagnostic tests</li> <li>• <i>COVID-19 treatment</i>: PA waived for “covered services that are medically necessary and consistent with CDC guidance for members if diagnosed with COVID-19”               <ul style="list-style-type: none"> <li>○ Not clear what constitutes “medically necessary covered services”</li> </ul> </li> <li>• <i>Lines of business</i>: Fully insured, individual, and Medicare members</li> </ul>
		<b><a href="#">Anthem (CA, CO, CT, GA, IN, KT, ME, MO, NH, NV, NY, OH, VA, WI)</a> - additional policy updates</b> Effective <a href="#">3/27/20</a> : <ul style="list-style-type: none"> <li>• <i>Transfers</i>: PA requirements suspended for patient transfers               <ul style="list-style-type: none"> <li>○ <b>As of 5/30/20, Anthem plans in certain states reinstated PA requirements for patient transfers*</b></li> </ul> </li> <li>• <i>DME</i>: PA requirements suspended on durable medical equipment critical for treating COVID-19</li> </ul> Effective <a href="#">6/4/20</a> : <ul style="list-style-type: none"> <li>• <i>Extension of existing PAs</i>: Anthem affiliates are temporarily extending PAs on elective inpatient and outpatient procedures issued before 5/30/20               <ul style="list-style-type: none"> <li>○ Duration of extension not specified and will vary by plan</li> </ul> </li> </ul> *Contact Anthem for more information about the applicability of PA waivers in your state. Anthem plans typically communicate details about PA waivers on state-specific provider news pages, accessible at <a href="https://providernews.anthem.com/state">https://providernews.anthem.com/state</a> (e.g., <a href="https://providernews.anthem.com/georgia">https://providernews.anthem.com/georgia</a> )
		<b><a href="#">Health Care Services Corporation (IL, MT, NM, OK, TX)</a> - additional policy updates</b> Effective <a href="#">4/2/20</a> : <ul style="list-style-type: none"> <li>• <i>Transfers</i>: PA waived for transfers to in-network, alternative post-acute facilities</li> </ul> Effective <a href="#">4/20/20</a> : <ul style="list-style-type: none"> <li>• <i>Radiology</i>: HCSC is “reducing” PA requirements for chest CT scans for COVID-19 patients</li> <li>• <i>Extension of existing PAs</i>: Previously approved PAs for certain elective procedures, therapies, and home visit services extended until 12/31/20</li> </ul>
<b><a href="#">Centene</a></b>	3/12/20 ( <a href="#">screening, testing</a> ); 4/1/20 ( <a href="#">treatment</a> )	<ul style="list-style-type: none"> <li>• <i>COVID-19 screening/testing/treatment</i>: PA not required for medically necessary COVID-19 screening, testing, or treatment services</li> <li>• <i>Lines of business</i>: Medicaid, Medicare, and Marketplace members</li> </ul>

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<p><a href="#">Cigna</a></p>	<p>3/17/20 (<a href="#">screening, testing, and treatment</a>); 3/23/20 – 3/31/21 (transfers; elective outpatient services)</p>	<ul style="list-style-type: none"> <li>• <i>COVID-19 screening/testing</i>: PA not required for COVID-19 evaluation/testing</li> <li>• <i>COVID-19 treatment</i>: PA not required for “medically necessary treatment” for COVID-19               <ul style="list-style-type: none"> <li>○ PA for COVID-19 treatment follows the same protocols as any other illness based on place of service and plan coverage; PA generally not required for routine office, urgent care, and emergency visits</li> </ul> </li> <li>• <i>Transfers</i>: PA waived until 3/31/21 for the transfer of non-COVID-19 patients from acute inpatient hospitals to in-network long-term acute care hospitals and other subacute facilities, including skilled nursing facilities and acute rehab centers               <ul style="list-style-type: none"> <li>○ Notification required on the next business day following the transfer</li> <li>○ Coverage reviews for appropriate levels of care and medical necessity still apply to these admissions</li> </ul> </li> <li>• <i>Extension of elective outpatient PAs</i>: Duration of PAs for all elective inpatient and outpatient services is temporarily increased from 3 months to 6 months               <ul style="list-style-type: none"> <li>○ Effective <b>3/25/20 – 3/31/21</b></li> <li>○ PA decisions made between 1/1/20 and 3/24/20 will be assessed when the claim is received, and will be payable if it is within 6 months of the original authorization</li> </ul> </li> <li>• <i>Extension of medication PAs</i>: Automatic 90-day extension of existing medication PAs set to expire between <b>4/1/20</b> and <b>6/1/20</b></li> <li>• <i>Elective surgeries and admissions</i>: PA requirements remain in place; Cigna continues to review PA requests</li> <li>• <i>Non-COVID-19 services</i>: <b>As of 11/1/20, administrative claims denials for failure to secure required authorization (FTSA) are reinstated.</b> On appeal, a provider’s inability to request PA due to COVID-19 will be treated as extenuating circumstances in the same way as during a natural catastrophe (e.g. hurricane, tornado, fires, etc.); FTSA denials will not be enforced on appeal if such extenuating circumstances apply</li> <li>• <i>Pre-admission testing</i>: Cigna will cover pre-admission or pre-surgical COVID-19 testing done in an outpatient setting until 1/21/21               <ul style="list-style-type: none"> <li>○ Pre-admission or pre-surgical COVID-19 testing should be billed separately using ICD-10 code Z01.812 in the primary position</li> </ul> </li> <li>• <i>Lines of business</i>: Commercial and Medicare Advantage plans</li> </ul>

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<a href="#">eviCore</a>	3/26/20 ( <a href="#">communicated 5/12/20</a> )	<ul style="list-style-type: none"> <li>• <i>COVID-19 diagnosis/treatment</i>: When COVID-19 is known or suspected in a patient, the following CPT® codes for chest CTs “can be authorized when requested”: CPT® codes 71250, 71260, 71270</li> <li>• <i>Transfers/Post-Acute Care</i>: to help preserve hospital space for COVID-19 patients, eviCore has made the following adjustments to the Post-Acute Care program:                         <ul style="list-style-type: none"> <li>○ Patients requiring skilled nursing facilities or other levels of care after an acute hospital stay “will receive automatic prior approval”                                 <ul style="list-style-type: none"> <li>▪ Skilled nursing can also accept eviCore members directly from home or emergency dep’t</li> </ul> </li> <li>○ Ventilator patients requiring LTAC-level of care “will receive automatic prior approval”</li> <li>○ “All other service types will be approved through a streamlined process”</li> </ul> </li> <li>• <i>Extension of PAs for certain elective services</i>: Effective 3/26/20, the duration of PAs for the “majority of cases” is temporarily extended to 180 days                         <ul style="list-style-type: none"> <li>○ <b>Does NOT apply to these programs</b>: medical oncology, specialty drug, home health, post-acute care services, and select DME services</li> <li>○ No PA extension on programs for which PA is already valid for 180+ days (e.g., medical oncology)</li> <li>○ eviCore is working with clients on an ad hoc basis to extend end dates as needed for existing authorizations that were approved prior to 3/26/20</li> </ul> </li> </ul>
<a href="#">Humana</a>	3/23/20 – 10/24/20	<ul style="list-style-type: none"> <li>• Effective <a href="#">10/24/20</a>, Humana reinstated standard PA requirements and referral protocols for Medicare Advantage and commercial lines</li> <li>• <b>Humana is now issuing temporary suspension of certain authorization requirements on a state-by-state basis.</b> See Humana’s <a href="#">state-specific COVID-19 information page</a> for details</li> <li>• <i>Lines of business</i>: Commercial employer-sponsored (fully insured and select self-funded plans), Medicare Advantage, and Medicaid plans</li> </ul>

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<a href="#">UnitedHealthcare</a>	3/24/20 – 1/31/21	<ul style="list-style-type: none"> <li>• <i>COVID-19 screening/testing:</i> As of 6/1/20, UHC's online guidance no longer includes information on PA requirements for COVID-19 testing or treatment</li> <li>• <i>Admissions/transfers:</i> Effective 12/18/20 thru 1/31/21, select PA requirements are waived for in-network hospitals and SNFs:                         <ul style="list-style-type: none"> <li>○ PA requirements suspended for in-network SNF admissions</li> <li>○ PA requirements suspended for transfers to a new provider/similar sites of care</li> <li>○ <b>Note:</b> Admission notification is still required, and services rendered during this time may be subject to retrospective review after 1/31/21</li> </ul> </li> <li>• <i>DMEPOS:</i> For orders involving COVID-19-related oxygen requests, oxygen can be delivered without PA and does not need to meet clinical criteria</li> <li>• <i>Extension of PAs for inpatient and outpatient medical services:</i> 90-day extension, based on the original authorization date, of existing PAs with an end date or date of service between 3/24/20 and 5/31/20                         <ul style="list-style-type: none"> <li>○ <u>Does not apply to PAs issued on or after 4/10/20</u></li> <li>○ Applies to existing PAs for in-network and out-of-network medical, behavioral health, and dental services (including many provider-administered drugs)</li> <li>○ PAs for inpatient procedures will extend 90 days from the expected admission date</li> <li>○ PA still required for any additional visits or services beyond those approved in the initial PA</li> <li>○ Member eligibility should be re-confirmed before providing services</li> <li>○ When UHC provisions exceed an applicable state mandate, UHC provisions apply</li> </ul> </li> <li>• <i>Extension of completed PAs for durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS):</i> Approved PAs for <u>services completed on or after 10/1/19</u> are extended through 9/30/20                         <ul style="list-style-type: none"> <li>○ Services completed before 10/1/19 require a new PA</li> <li>○ As of 6/1/20, standard PA protocols for new DMEPOS orders are resumed</li> </ul> </li> <li>• <i>Diagnostic radiology:</i> PA not required for diagnostic radiology (diagnostic imaging) of the chest for COVID-19 patients for the duration of the public health emergency                         <ul style="list-style-type: none"> <li>○ Notification requested for CPT® codes 71250, 71260, 71270 for Medicaid or commercial members with known/suspected COVID-19 diagnosis</li> <li>○ PA continues to be required for <b>all other chest CTs</b></li> </ul> </li> <li>• <i>Genetic/molecular testing:</i> Effective 10/1/20, PA and notification requirements are suspended for the following outpatient genetic and molecular tests for infectious agent detection: CPT® codes 87480, 87660, 87661</li> <li>• <i>Lines of business:</i> Individual and Group Market, Medicare Advantage, and Medicaid plans</li> </ul>

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## Prescription drug plans/pharmacy benefit managers

Plan	Effective Date(s)	Policies
<a href="#">CVS</a>	3/25/20	<ul style="list-style-type: none"> <li>• <i>Extension of medication PAs:</i> Extension of existing PAs set to expire before <b>6/30/20</b> for “most” medications                             <ul style="list-style-type: none"> <li>○ Presumed 90-day extension (“if a current [PA] is set to expire on May 15, the expiration date will be extended to August 15”)</li> </ul> </li> </ul>
<a href="#">Express Scripts</a>		<ul style="list-style-type: none"> <li>• Standard PA policies remain in place; Express Scripts is monitoring the COVID-19 situation and will update policies if or when the situation changes</li> </ul>
<a href="#">OptumRx</a>	3/19/20; 5/2/20 ( <a href="#">PA extension discontinued</a> )	<ul style="list-style-type: none"> <li>• <i>Extension of medication PAs:</i> One-time, 90-day extension of existing PAs set to expire on or before <b>5/1/20</b> for <u>medications taken on a chronic basis</u></li> <li>• <i>Existing PA and renewal requirements remain in place for:</i> <ul style="list-style-type: none"> <li>○ Drugs with significant abuse potential</li> <li>○ Drugs dosed for finite durations or intermittently (e.g., hepatitis or fertility agents)</li> <li>○ Newly prescribed medications</li> </ul> </li> <li>• <b>Important: OptumRx selected <u>not</u> to extend the one-time, 90-day extension of existing PAs; standard PA protocols are resumed for all medications requiring renewal after 5/2/20</b></li> </ul>