

Updates on our Response to COVID-19

As we navigate through the unique and evolving challenges of the COVID-19 situation, we want to ensure that you are up-to-date and remain informed.

Please take a moment to read the Frequently Asked Questions (FAQ's) below.

1. What are the New Business Deadlines?

- **For all Lines of Business:**
 - April 1, 2020 effective date, deadline: April 10, 2020
 - May 1, 2020 effective date, deadline: May 10, 2020
 - June 1, 2020 effective date, deadline: June 10, 2020

2. What is the Deadline for an April 1st Renewal?

- If not already auto-renewed, April 1st Renewal will roll existing 2019 coverage out an additional 30 days; can submit requirements up until April 30.
- Option to move effective date to May 1st with no penalty or additional requirements; will honor April 1st rates originally delivered 90 days prior.

3. Will you be offering a Deferment Program?

- Yes. We are offering a Deferred Premium and Payment Contract to assist you during this unprecedented time. We have authorized the payment of monthly premiums for the coverage months of March, April and May 2020 on an installment basis. This Deferred Premium and Payment Contract is available to all employer groups with active coverage that are in good standing and want to pay the total balance of premiums due for this 3-month deferment period in three payments.
- During April 1st to May 30th :
 - Invoice will continue to generate
 - Due dates will remain the same in all printed invoice document language
- Employer must opt-in & submit contract for approval prior to April 30th, 2020
Email to MHHPAccountMgmt@memorialhermann.org or fax to (713) 338-4115

Payment plans:

- First payment is due May 15th - 40% of the total invoiced balance owed
- Second payment due June 10th - 30% of the remaining balance owed
- Final payment due July 1st - 30% of the remaining and final balance due
- June premiums will remain due on June 1st with a 30 day grace period for payment, according to standard invoice and premium payment practices.

- Failure to make deferred payments in accordance with the scheduled repayment plan may be cause for involuntary termination of the employer group and/or subgroup coverage, and subsequent reversal of claims paid. Upon involuntary termination after the deferment period expires, any debt remaining must be paid prior to any requested reinstatement of coverage can be completed.

4. Will a Special Enrollment Period be offered for additional coverage?

- Yes. A Special Enrollment Period (SEP) will be offered for all Commercial and Hybrid HMO and PPO members. This SEP will allow interested members to elect or change their coverage without a Qualifying Life Event during **April 1 to April 15**.
- During this COVID-19 Special Enrollment Period allows for the following:
 - Enrollees who previously waived coverage will be allowed to enroll during the special enrollment period listed above.
 - Enrollees who elected self only coverage will be able to change their enrollment to include eligible dependents under the same coverage currently enrolled in during the special enrollment period listed above.
 - Active enrollees will be allowed to change their coverage tiers during the special enrollment period listed above.
- If a member wishes to elect or change coverage during this COVID-19 Special Enrollment Period, they must make their elections no later than April 15, 2020. The coverage effective date will be April 1, 2020.
- We must receive complete enrollment details in a business appropriate format and the employer must receive all contributions for coverage during the Special Enrollment Period no later than **April 15, 2020**.
 - **If an employer offers multiple plans, can an employee change plans?**
They can move between any plan that the employer has active in their current plan year and is offered to the respective employee subgroup.
 - **Can an employee change plans to Higher or Lower Deductible plans?**
We are aware of the potential (Adverse Selection) risk. However, it's our intent to make every avenue available that we possibly can, within reason, to assist employer groups and their employees in keeping their coverage intact.

5. Are there any medical-related Benefit Cost Share updates?

- Yes. The following updates will be in effect through June 30th, and we will reevaluate each month accordingly.
 - All cost-shares and co-pays associated with COVID-19 diagnostic testing will be waived regardless if the doctor is IN or OUT of network.
 - Telemedicine will be paid at 100% for all plans.
 - Prior to March 11, fully insured plans and MA were the only plans that were required to cover COVID-19 diagnostic testing at 100% and self-funded or ERISA groups had to opt-in. After that date, there was a federal regulation directing ERISA plans to do this as well, and this was validated by the DOL. We chose to include Hybrid plans in the fully insured group that has the COVID-19 co-pay and cost share waivers in place.

6. Are there any Pharmacy updates?

- Yes. The “Refill Too Soon” edit for all groups has been lifted for the date range of **3/12/20 -6/30/20**.
- These changes require the discretion of the dispensing pharmacist at point of sale. An override code submitted by the pharmacist might be required at the retail level for an early refill to process.
- To meet the clinical needs of our members and to limit the burden on a stressed provider network amid the COVID-19 outbreak, we are extending existing prior authorizations (PAs) that are set to expire on or before May 1, 2020.
- PAs for drugs with significant abuse potential (i.e., opioids) or those that are generally dosed for finite durations or intermittently (i.e., hepatitis agents, fertility agents) will not be extended. These PAs will follow the normal process for renewals.

7. Will you allow employers to continue covering furloughed employees—i.e. relax your ‘actively at work’ requirements—for a period of time?

- We will allow coverage to remain intact for any employees that premiums are paid in full and terminations have not been communicated to MHHP. Any extenuating circumstances or business case for true exceptions must be submitted to our Leadership team for approval.

8. Will you allow employers to waive the standard new hire waiting period for employees who were furloughed or laid off because of COVID-19 when they return to work on a full time basis?

- Our coverage policy documents currently note that waiting periods are waived if employees return to active status within 6 months.

9. Will you commit to not adjusting rates mid-plan year if a group’s enrollment decreases by more than 10%?

- Our leadership team has agreed not to adjust any mid-plan year rates at this time. The rates that employers with active coverage have in place today will continue until the completion of their plan coverage year, assuming there is not a voluntary termination.

We will continue to provide you with updated information and add new FAQs as they arise. Should you have any questions, please submit to MHHPAccountMgmt@memorialhermann.org.