

Insurance Company	COVID-19	Telehealth	Prior Authorization	Miscellaneous
Blue Cross Blue Shield of Michigan/Blue Care Network	Paying for testing. No cost sharing for testing. No cost sharing for treatment. No prior authorization for COVID-19 related testing or treatment.	Paying for telemedicine codes, equivalent to in-office fees.		PGIP incentives for testing and telemedicine.
Health Alliance Plan (Commercial)	Paying for testing. No cost sharing for testing. No cost sharing for treatment.	Cost share waived for virtual visits and telehealth from March 15 through April 30. Plan paying at the contracted rates. Removing PA for certain services for telehealth. Paying for telemedicine codes, equivalent to in-office fees.		
McLaren Health Plan (Commercial)	Paying for testing. No cost sharing for testing. No cost sharing for treatment.	Encouraging the use of telemedicine for routine visits where applicable until further notice. No preauthorization requirements for in-network providers who provide telemedicine services for MHP members. Applicable copays will still apply. Plan paying contracted rates. Telehealth services are being covered for any diagnosis thru 4/30 by the following provider types: primary care, specialists, urgent care, PT/OT/ST, mental health. If the diagnosis is related to COVID-19, member will receive in network benefit level with no cost share applied whether service is by an in network or out of network provider. All other diagnoses will be covered with the members cost share applied.		
Medicaid (Fee for Service and Health Plans)	Paying for testing. No cost sharing for testing. No cost sharing for treatment.	Paying for telemedicine codes, equivalent to in-office fees. Expanded benefits, including telephone calls.	Medicaid is expediting all prior authorizations. Suspend prior authorization requirements for fee-for-service.	Medicaid federal waiver was approved to alleviate some administrative hassles. Allow provisional enrollment of providers. Waive notice requirements. Provision of services in alternate settings.
Medicare	Paying for testing. No cost sharing for testing. No cost sharing for treatment.	Paying for telemedicine codes, equivalent to in-office fees. Telephone rules pending.		Extension for quality reporting. Allow provisional enrollment of providers. Provision of services in alternate settings.
Meridian Health Plan (Commercial)	Paying for testing. No cost sharing for testing. No cost sharing for treatment. No prior authorization for COVID-19 related testing or treatment.	No cost sharing. No prior authorization. Plan paying at the contracted rates.		
Molina (Commercial)	Paying for testing. No cost sharing for testing. No cost sharing for treatment.	Telemedicine is available if it is an existing covered benefit.		
Physicians Health Plan (Commercial)	Paying for testing. No cost sharing for testing. No cost sharing for treatment. No prior authorization for COVID-19 related testing or treatment.	PHP is covering telemedicine visits with providers rendered telephonically, including E/M codes through June 30, 2020. Telemedicine services will be a covered benefit for all PHP members through June 30, 2020 when the service is rendered by an in-network PHP Provider. Prior authorization rules and guidelines will still apply if applicable. PHP is covering virtual check-in services for established patients and the encounter is not related to a previous visit within the past 7 days and or an appointment within the following 24 hours. Member cost share for telehealth services is waived.		PHP will waive early prescription refill lockouts to ensure an adequate supply for their individual, fully insured group, and Medicare Advantage Members.
Priority Health (Commercial)	Paying for testing. No cost sharing for testing. No cost sharing for treatment. No prior authorization for COVID-19 related testing or treatment. The effective date of coverage will be retroactive to February 4, 2020.	Priority expanded billable telehealth codes and payments. Effective March 26 through May 31, 2020, they will temporarily allow credentialed providers to bill routine practice codes with a Place of Service 02 and be paid the standard facility-based rate.		Priority has extended some deadlines in the PCP Incentive Program (PIP) and risk adjustment program to give more flexibility.
United Healthcare (Commercial)	Paying for testing. No cost sharing for testing. No cost sharing for treatment.	United is waiving copay/deductible and removing PA for certain services for telemedicine. Expanded provider telehealth access: Through June 18, 2020, eligible medical care providers who have the ability and want to connect with their patient through synchronous virtual care (live video-conferencing) can do so. Benefits will be processed in accordance with the member's plan.		