
FAQs for Providers on Oscar's Policies for COVID-19

Are there any coding guidelines your organization is proposing provider use for COVID-19 (testing, diagnosis, etc)? If so, can you share your guidelines and advise if the guidelines are interim only?

Providers should be using HCPCs [U0001 and/or U0002](#) when billing for testing services. Our team will be waiving cost-share and tracking all claims that are flagged with these codes.

- We will reimburse COVID-19 testing under HCPC U0001 and U0002.
- U0001 refers to: 2019 Novel Coronavirus (2019-nCoV) Real-Time RT-PCR Diagnostic Panel should be used when specimens are sent to the CDC and CDC-approved local/state health department laboratories.
- U0002 refers to: 2019-nCoV Coronavirus, SARS-CoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targets), non-CDC should be used when specimens are sent to commercial laboratories, e.g. Quest or LabCorp, and not to the CDC or CDC-approved local/state health department laboratories.
- We do not yet have guidance on what we're covering under *diagnosis*, so no updates to our claims logic has been made there yet.

Will you be covering diagnostic testing, or will patients be billed a co-pay?

Oscar does not want cost to be a barrier to our members seeking care. We are waiving cost share for COVID-19 lab tests at in-network and out-of-network facilities.

In Colorado, California, and New York we are also waiving cost-share related to physician office, urgent care and ER visits related to the testing.

In New York, can I collect copayments for services related to COVID-19 testing?

Per New York state regulations, providers cannot collect copayments for services related to COVID-19 testing.

Will you be covering telemedicine visits provided by provider partner physicians?

Yes, Oscar covers telemedicine through the Oscar app for \$0 copay on most plans.

In addition, Oscar is waiving cost-sharing for all in-network telemedicine, for the next 60 days. This will include telemedicine visits performed by in-network specialists, urgent care providers, primary care physicians and behavioral health providers. It is not limited to telemedicine visits specifically related to a COVID-19 diagnosis or treatment. This applies to visits that would have otherwise been covered under the insurance policy if provided in the provider's office. This does not apply to home monitoring services.

Are you anticipating any shortages or delays in medication access with your prescription benefit plan supplier?

The FDA has been in touch with over 180 manufacturers, reminding these manufacturers to evaluate their entire supply chain and to notify the FDA if there are any issues with potential drug shortages. None of these reported any shortages to date.

We are encouraging members to keep a 30-day supply of all their medications at home and, as of March 10, are waiving early refill restrictions in Colorado and Florida. We are continually evaluating the list of states where we are waiving this restriction.

We are closely monitoring the situation and will provide updates if anything changes.

If a patient is diagnosed, do you have a plan to notify us for coordinated care?

Typically, the lab notifies the ordering provider of the results. The lab is also responsible for reporting the results to the state department of health.

Will your organization be sending out any direct communication to providers and/or patients?

We will be sending proactive communications to providers, letting them know about our cost-share waiving policies.

Has your organization prepared any provider and/or patient facing material that you can share?

Oscar has created a resource page at www.hioscar.com/covid19 that we are regularly updating to help keep our members informed on the latest developments related to the virus.

We will also be sharing communications directly with our provider partners about our coverage details.

What is your cost share plan for things beyond tests?

At this time, Oscar is waiving cost-share for only the COVID-19 diagnostics.

In Colorado, California, and New York we will also be waiving cost-share for the office, urgent care or ER visit associated with the COVID-19 testing.

We've come across some announcements regarding health plan intention to allow for virtual visits without restriction or co-pay amid concern over a potential coronavirus spread. Please help us with validating this plan so we may appropriately update our internal systems to allow for such visits.

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Is there a plan in place to ensure that Oscar is responding to authorization requests timely (due to mass closures and/or limited workforces)?

Oscar's primary concern is that our members are able to access the care that they need when they need it.

We have the ability to work as a distributed team and can support our operations 100% remotely, if required, and have plans in place that we can execute on, as needed.

If capacity becomes constrained, Oscar will ensure providers are not negatively impacted and that the delivery of care will not be impeded through the augmentation or removal of administrative requirements.

How is Oscar's call center impacted by COVID-19?

We're experiencing higher than normal call volumes. Oscar is prioritizing provider calls for urgent and care impeding concerns. Claim inquiries and other administrative questions are temporarily being suspended.

Please use Oscar's self-service tool, the provider portal, for less urgent matters including questions related to eligibility, benefits, authorizations, and claims. You can access the portal by visiting provider.hioscar.com.

If you do need to reach our Provider Services team for urgent matters regarding member care, they are available Monday through Friday from 9:30 AM – 6:00 PM EST at 1-855-672-2755.