

Coronavirus Medicare IDL MAPD/ DSNP -specific FAQ

Last revision date: March 18, 2020

We sell Medicare Advantage products under the names Aetna Medicare, Innovation Health, Allina Health, and Aetna Better Health.

These FAQs do not apply to the Medicare-Medicaid Plans or SilverScript Part D plans or Aetna Medicare Group Plan. Please see additional FAQs developed for these plans.

Key Messages:

- During this time when access to routine health care is being disrupted, we continue to be focused on our goal to provide our Medicare members with affordable, high-quality care in a safe environment.
- CVS Health and Aetna are collaborating closely with the Centers for Medicare and Medicaid Services (CMS) and local health departments related to the coronavirus (COVID-19) and actions we can take to support our Medicare members.
- People with a high fever, cough and shortness of breath should consult with their primary care provider regarding testing and treatment.
- We encourage our Medicare Advantage members to take advantage of their telehealth benefits (as described below) to limit their exposure to COVID-19.

Telehealth

As of March 9, **we're expanding coverage of telehealth and offering all telehealth visits at no cost to members** (copays are waived) until further notice. This will help our Medicare plan members get the care they need while lowering their risk of exposure to the coronavirus, or COVID-19.

Virtual evaluation and monitoring visits were already covered telehealth benefits for our MA members (note, telehealth is the term Medicare uses for telemedicine). These benefits allow members to have a brief virtual check-in (for example, by telephone or video chat) with their doctor or to send pre-recorded video or images to their doctors for interpretation and follow-up within 24 hours as long as they meet the following criteria:

- Be an established patient with the doctor (this means the member must have received prior professional services from the doctor or qualified professional, or a doctor in the same practice);
- Can't be related to an office visit they've had within the past seven days; and
- Can't lead to an office visit within the next 24 hours or the soonest available appointment.

Further, we will now cover additional telehealth services for all Medicare Advantage members.

This means members can continue to receive clinical care from their providers, for example, discuss their diabetes care plan or schedule a sick visit, without having to leave their home and risk exposure to the virus.

How can our Medicare Advantage members access telehealth services?

Members should contact their doctor to see which telehealth services they may be able to offer their patients.

Can our Medicare Advantage members use Teladoc?

Today, no. We are working with Teladoc to be able to provide our MA members with even greater access to fully covered virtual care; however, it is not available yet.

Does CVS MinuteClinic offer virtual visits to Medicare Advantage members?

No. Right now this service is not available.

Prescription Refills

How do I get my medications if I am in social isolation or quarantined?

Currently, the Centers for Disease Control and Prevention (CDC) recommends staying at home to limit your chances of exposure to the virus, especially if you're at high risk. If you take medications regularly (like high blood pressure, asthma or diabetes medications), you can choose to have your 90-day supplies delivered to your home by mail. There's no delivery fee.

Here's how to get started:

- Go to aetnamedicare.com through your desktop device and sign in.
- In order to transfer to mail, you need to send a new prescription to us.
 - Select Prescriptions from the navigation bar. From the drop-down menu, select Request a New Prescription
 - Search for your drug name and strength, add to your cart by selecting Request a New Prescription, and complete your order

To help CVS Pharmacy® customers avoid coming to the pharmacy for refills or new prescriptions, CVS Pharmacy is waiving charges for home delivery of prescription medications during the COVID-19 outbreak. Visit aetnamedicare.com to set up free 1- to 2-day Rx home delivery.

Can I receive an early refill on maintenance medications?

Yes, Aetna Medicare Advantage members may receive an early refill on Part D medications. A valid prescription, with enough refills, from a provider is required so members should check their medication bottles and, if the bottle indicates no refills are left, the member should consult the pharmacist or prescriber for a new prescription. In general, members may receive up to a 90-day supply of medication as follows:

- For drugs on not on the specialty tier (tiers 1-4), members can get an early refill of up to another 90-day fill if there are enough refills left on the prescription.
- For drugs on the specialty tier (tier 5) members can get an early refill of up to another 30-day fill if there are enough refills left on the prescription.

Note that appropriate safety edits remain in place for the pharmacist to consider as they dispense the medication.

Should I call my plan to request an early refill?

No- do not call the plan. Members with concerns that need to have extra medication on hand should contact their retail pharmacy and talk to the pharmacy staff. Members should:

- Request a refill, and explain it is early and why needed.
- At the discretion of the pharmacist and taking all safety considerations into account, the pharmacies can enter a standard submission code when filling the prescription. This allows the prescription to process and override the “refill too soon” response.
- Pharmacies have a help desk they can call to have us help them override the prescription if needed.

Medicare empowered retail pharmacists with a code that tells us you need an early refill as a result of the disaster. Members do not need to call us. We do recommend you call pharmacy first to give them time to fill your medicine. That way you are not waiting in the store and it is ready for pick up when you arrive. Remember many pharmacies deliver or have drive-up windows that might be a safer choice than going in a store.

Can members use out of network pharmacies?

Yes, however, the member would have to pay for their prescription at the point of sale and submit a claim form to get reimbursed. We therefore strongly recommend that members continue to use network pharmacies whenever possible for the best member experience and ease of payment process. Members with specific network issues should contact the phone number on the back of their ID card, when possible.

What should I do if local pharmacies start closing?

Public health and safety are important so most pharmacies will remain open. If a member's pharmacy closes unexpectedly, the member should call the prescribing doctor and let them know the prescription needs to be sent to a different pharmacy. Members can also take advantage of our mail order pharmacy by going to www.caremark.com to sign up for mail order prescription fulfillment.

Are there any dangers regarding medications manufactured in China?

The United States Food and Drug Administration also known as the FDA protects public health by promoting supply chain integrity and working to ensure medicines imported to the U.S. meet legal and regulatory requirements. Imported drugs must meet FDA's standards for quality, safety and effectiveness. The FDA has not indicated that there is any safety concern with drugs manufactured in China, they are safe.

I've heard there's a risk of shortages in my medication. How do I know if my medication may be impacted?

We are closely monitoring drug supply and currently do not see any disruptions to the supply chain as a result of COVID-19 that would affect our ability to fill prescriptions. As always, we encourage you to fill your prescriptions in a timely manner.

What if a drug is not covered and an Appeal or Prior Authorization cannot be placed by a doctor due to doctor's office closure?

We expanded coverage of telehealth and are offering all telehealth visits at no cost to Medicare Advantage members (copays are waived) until further notice. Members should contact their doctor to see if the appeal or prior authorization can be handled over the phone or virtually. Members can also call their local hospitals and explain the situation to see if there is a doctor who can do a virtual visit to prescribe refills of maintenance medications. Members should not go to the hospital unless they are sick, calling the hospital on the telephone is the best way to initiate this conversation and follow the directions of the clinicians at the hospital.

COVID-19 Testing

Will Medicare Advantage members have to pay for COVID-19 testing?

If a doctor requests testing related to COVID-19 for a Medicare member, the test will be fully covered.

The Healing Better program

Does the Healing Better program include all Medicare Advantage members?

Yes. All members diagnosed with COVID-19 will get a care package from us. It has info to help answer member questions and remind them of the resources we offer to help them recover. The package may

also include personal and household cleaning supplies to help keep others in the home protected from potential virus exposure.

The Resources For Living® program

How do plan sponsors get a Resources For Living toolkit?

The toolkit is an online resource with helpful info about the coronavirus and tips for staying healthy. It also includes a recorded webinar to help members cope with coronavirus fears. Just visit <http://www.promoinfotools.com/Communications/ecard/Svcs/Wellness/CoronavirusFearsRFL.html> to access the toolkit.

Is there a Medicare version of the Resources For Living toolkit for plan sponsors?

No. There isn't a separate Medicare version.

Other

What's the phone number for the Crisis Response Line [Aetna Resources For Living]?

The phone number is 1-833-327-AETNA (1-833-327-2386) (TTY: 711).

What's the phone number for the Aetna 24-hour Nurse Line?

The phone number is 1-800-556-1555 (TTY: 711).

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