Coronavirus 2019 (COVID-19) is a respiratory illness caused by a novel coronavirus designated SARS-CoV-2. The outbreak of COVID-19 originated in December 2019 in Wuhan City, Hubei Province, China. Since then, thousands of confirmed cases have been reported in a rapidly growing number of countries worldwide. As of March 9, 2020, the West Virginia Department of Health and Human Resource’s Bureau for Public Health has reported that there are no confirmed cases of COVID-19 in West Virginia. However, as the number of national cases grow, the risk of a confirmed case and community spread in West Virginia appears more likely.

Accordingly, this matter is of urgent importance to public health and, in order to protect the public health, the Commissioner is asking insurers to take all practical steps to identify and remove barriers to testing and treatment for COVID-19. Specifically, the Commissioner is asking insurers providing coverage through health benefit plans to West Virginia residents to take the following immediate measures related to the potential impact of COVID-19.

1. **Preparedness.** Insurers should review their internal processes and operations to ensure that they are prepared to address COVID-19 cases, including by providing insureds with information and timely access to all medically necessary covered health care services. As the situation continues to evolve, insurers should continually assess their readiness and make any necessary adjustments.
2. **Information Access.** Access to accurate information and avoiding misinformation are critical. Insurers are asked to inform insureds of available benefits, quickly respond to insured inquiries, and consider revisions needed to streamline responses and benefits for insureds. Insurers should make all necessary and useful information available on their websites and staff their nurse-help lines accordingly.

3. **Testing for COVID-19.** The Commissioner asks insurers to waive cost-sharing for COVID-19 laboratory tests to reduce or eliminate barriers to access testing. In addition, insurers are also asked to waive cost-sharing for an in-network provider office visit, in-network urgent care center visit and emergency room visit when testing for COVID-19.

4. **Telehealth Delivery of Services.** Given that COVID-19 is a communicable disease, some insureds may be using telehealth services instead of in-person health care services. Insurers are asked to review and ensure their telehealth programs with participating providers are robust and will be able to meet any increased demand.

5. **Network Adequacy and Access to Out-of-Network Services.** Insurers are asked to verify their provider networks are adequate to handle a potential increase in the need for health care services in the event COVID-19 cases are diagnosed in West Virginia. If an insurer does not have a health care provider in its network with the appropriate training and experience to meet the particular health care needs of an insured, health insurers are asked to provide access to an out-of-network provider at the in-network cost-sharing.

6. **Utilization Review.** Timely decision making is essential to responding appropriately to COVID-19, and it is particularly important with respect to utilization review. Health insurers are reminded that utilization review decisions must be made in the timeframes required by law. Health insurers should not use preauthorization requirements as a barrier to access necessary treatment for COVID-19, and health insurers should be prepared to expedite utilization review and appeal processes for services related to COVID-19 when medically appropriate.

7. **Immunizations.** A vaccine is not currently available for COVID-19, but it has been reported to be in development. In the event an immunization becomes available, the Commissioner requests that health insurers cover the immunization at no cost-sharing for all covered members.

8. **Access to Prescription Drugs.** Insurers are asked, where appropriate, to make expedited formulary exceptions if the insured is suffering from a health condition that may seriously jeopardize the insured’s health, life, or ability to regain maximum function or if the insured is undergoing a current course of treatment using a non-formulary prescription drug.

9. **Information Sharing.** To ensure that public health officials and the public are adequately informed about what the health insurance industry is doing in response to COVID-19, the Commissioner asks that health carriers provide information on the steps they are taking in response to this Bulletin. Health carriers may send that information to Erin Hunter, Deputy Commissioner and General Counsel at Erin.K.Hunter@wv.gov.
Health insurers must be prepared to address COVID-19 cases in West Virginia and the Offices of the Insurance Commissioner extends its gratitude to health insurers working with the state to address this significant public health challenge. Insurers should continually assess their readiness and be prepared to make any necessary adjustments.

Insurers may contact Ellen Potter, Director of Health Policy, at (304) 414-8480 with questions regarding this Bulletin.

Additionally, the West Virginia Department of Health and Human Resources has established a tollfree information hotline to address public and medical provider questions concerning COVID-19. The number for the hotline is 1-800-887-4304.

For the most current information, please visit coronavirus.wv.gov or cdc.gov/COVID19.

James A. Dodrill
Insurance Commissioner