

On May 11, 2023, some of the COVID-related flexibilities of your Medicare Advantage plan will end, change, or extend due to the government ending the COVID-19 public health emergency (PHE). At the onset of the pandemic, the government declared a PHE which allowed for Medicare Advantage flexibilities regarding network rules, cost sharing, COVID test kit reimbursement, and others. On January 30, 2023, the government announced that it is ending the PHE declaration, which also ends some Medicare Advantage flexibilities. Below are flexibilities on your Aspire Health Plan that are ending, changing, or extending.

## Reimbursement of COVID home test kits (up to 8 per month)

### How it helped during the public health emergency

Aspire Health Plan reimbursed members for COVID home test kits during the PHE.

### What happens after May 11, 2023?

Members desiring to purchase the home test kits will need to pay for them, out of pocket. The federal government's free at-home test program may also end on May 11, 2023, or when current supplies are depleted.

## Waived cost share for COVID testing or evaluation for testing

### How it helped during the public health emergency

Members who were tested or evaluated for the need for a COVID test were not charged the applicable co-pay for this service.

### What happens after May 11, 2023?

Members requiring COVID testing, or evaluation for the need for testing, will be responsible for the applicable co-pay.

## Waived cost share for COVID serological (antibodies) testing

### How it helped during the public health emergency

Members receiving COVID antibody testing were not charged the applicable co-pay for this testing.

### What happens after May 11, 2023?

Members receiving COVID antibody testing will be responsible for paying the applicable co-pay for this testing.

## Expansion of covered telehealth codes

### How it helped during the public health emergency

Members had access to telehealth visits with their primary care physicians and specialists at \$0 co-pay. This included:

- Access to telehealth services in any geographic region
- Access to telehealth visits from any location
- Certain telehealth visits can be delivered using audio only

### What happens after May 11, 2023?

The Consolidated Appropriations Act of 2023 has extended telehealth flexibilities through December 31, 2024. You will continue to receive this benefit flexibility.

## Waived cost share for monoclonal antibody drugs

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### How it helped during the public health emergency

Members receiving monoclonal antibody drugs had a \$0 co-pay/cost share.

### What happens after May 11, 2023?

Members receiving monoclonal antibody drugs will be responsible for paying the applicable co-pay/cost share for these drugs.

## Suppression of network rules

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### How it helped during the public health emergency

Members seeking care outside of the Aspire Health Plan network were charged in-network co-pays/cost shares.

### What happens after May 11, 2023?

In-network rules will apply after May 11, 2023. Requests for review and approval of out-of-network services may be submitted for consideration.

## Waived cost share for claims with a COVID diagnosis

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### How it helped during the public health emergency

Members receiving services related to a COVID diagnosis had a \$0 co-pay for those services.

### What happens after May 11, 2023?

Members receiving services related to a COVID diagnosis will be responsible for the related co-pay for those services.

## Payment of marriage and family therapist (MFT) and licensed professional clinical counselor (LPCC) behavioral health claims

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### How it helped during the public health emergency

Although Medicare does not pay for services provided by MFTs and LPCC's, Aspire Health Plan has paid claims for these providers. Members pay just the outpatient mental health co-pay.

### What happens after May 11, 2023?

As of January 1, 2024 LPCCs and MFTs will be able to bill Medicare if they choose to do so. Until that time, Aspire will extend the current waiver. Members will continue to be able to see LPCCs and MFTs with the applicable co-pay.

## Waiver of prescription refill-too-soon edits

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### How it helped during the public health emergency

Members were able to refill their prescription early with an override by the pharmacist.

### What happens after May 11, 2023?

The refill-too-soon rules will go back into effect after May 11, 2023. Members may call MedImpact, their pharmacy benefit manager, to request consideration for an override.

## For questions, please contact Member Services (855) 570-1600 (TTY users call 711).

We are open 8 a.m.–8 p.m. PT Monday through Friday from April 1 through September 30 and 8 a.m.–8 p.m. seven days a week from October 1 through March 31 (except certain holidays).