Cost-Sharing Waiver

Please be advised that the New York State Department of Financial Services (DFS), the New York State Department of Health, and the federal government have directed health plans, including Healthfirst, to waive patient copayments, coinsurance, and deductibles for certain testing and treatment due to the coronavirus (COVID-19) emergency.

1. Commercial Health Insurance, Medicaid Managed Care, Child Health Plus, and the Essential Plan

The New York State Department of Financial Services (DFS) and the New York State Department of Health (DOH) have directed Healthfirst to waive patient copayments, coinsurance, and deductibles for in-network laboratory tests, in-network provider visits, and visits to the emergency department of a hospital to diagnose the coronavirus (COVID-19) effective March 13, 2020 and extending for the duration of the state of emergency related to the COVID-19 pandemic. Healthfirst has also been directed to waive patient copayments, coinsurance, and deductibles for all covered telehealth services effective March 16, 2020 and extending for the duration of the state of emergency related to the COVID-19 pandemic. The waivers apply to commercial health insurance coverage, Medicaid Managed Care, Child Health Plus, and Essential Plan. Providers should not collect the copayment, coinsurance, or deductible from the patient. Instead, Healthfirst will reimburse the provider directly. To the extent possible, providers should notify Healthfirst that they have waived cost sharing. For more information, see the following resources.

- DFS Circular Letter on telehealth coverage.
- DFS Q&A on telehealth coverage.
- DOH Comprehensive Telehealth guidance for Medicaid providers.
- New York State Office of Mental Health guidance.
- New York State Office of Addiction Services and Supports:
  - Letter to providers March 9, 2020 – waives and modifies certain telepractice regulations.
  - Letter to providers March 17, 2020 – regarding provider attestation.
  - Teleconference waiver update II (issued March 18, 2020).
2. Medicare

The federal government has passed legislation providing that during the emergency period, Medicare Advantage plans will pay the entire cost, and no deductible will be applied, for any medical visit that results in an order for, or the administration of, a test for the coronavirus (COVID-19) or that relates to an evaluation to determine whether such test is needed. Copayments, coinsurance, and deductibles for all covered telehealth services are waived effective March 16, 2020, through the duration of the state of emergency.

Should you have any questions, call Provider Services at 1-888-801-1660, Monday to Friday, 8:30am–5:30pm.