



An Independent Licensee of the Blue Cross Blue Shield Association

## Update on COVID-19 waivers and adjustments

In response to the ongoing COVID-19 crisis, Blue Cross® Blue Shield® of Arizona (BCBSAZ) is continuing several waivers and adjustments to support providers as they care for members in urgent and non-urgent settings. Here is an update on the status of those strategies:

TYPE OF WAIVER/ADJUSTMENT	LINE OF BUSINESS	CURRENT TIME FRAME
Member cost-share waiver for in-network tele-everything services for all diagnosis codes	BCBSAZ fully insured plans and BCBSAZ-administered Medicare Advantage plans	<b>Through July 31</b> (recently updated)
Member cost-share waiver for in-network tele-everything services for COVID-19 diagnosis codes only	Federal Employee Program® (FEP®) plans	March 6 throughout COVID-19 public health emergency
Member cost-share waiver for COVID-19 testing (consistent with CDC guidelines)	ALL plans— see note below about self-funded plans and those from other Blue Plans	Duration of COVID-19 public health emergency
Member cost-share waiver for COVID-19 treatment (consistent with CDC guidelines)		
Preservice review waiver for COVID-19 testing and treatment (consistent with CDC guidelines)		
<b>Reinstated June 8:</b> Preservice review waiver for transitions from acute-care to post-acute-care facilities (SNF/EAR/LTAC) <b>You must notify BCBSAZ within 24 hours and send medical records within three days.</b>	BCBSAZ fully insured plans and BCBSAZ-administered Medicare Advantage plans	<b>Until further notice</b> (reinstated effective 06/08/2020)
Preservice review waiver for high-tech radiology services	BCBSAZ-administered Medicare Advantage plans	<b>Expired June 12</b> <i>For dates of service starting June 13, request prior auth from eviCore.</i>
Preservice review time frame limit adjustment (these were expanded to be valid for 90 days past the approval date); excludes pharmacy authorizations	BCBSAZ fully insured plans and BCBSAZ-administered Medicare Advantage plans	<b>Expired June 12</b>
Waiver of three-day prior hospitalization requirement for SNF stays	Medicaid and traditional Medicare	Duration of COVID-19 public health emergency
PCP referral waiver for in-network services related to COVID-19 diagnoses (consistent with CDC guidelines for COVID-19 treatment)	PCP Coordinated Care HMO plans	<b>Through July 31</b> (recently extended)
PCP referral waiver for all services	BCBSAZ-administered Medicare Advantage plans	<b>Through July 31</b> (recently extended)
Waiver of early refill limits on 30-day prescriptions for maintenance medications	BCBSAZ fully insured plans	<b>Expired June 10</b>
	BCBSAZ-administered Medicare Advantage plans	<b>Through July 10</b> (recently extended)
<b>Note:</b> Self-funded employer groups and other Blue Plans determine their own member benefit coverage, and cost-share and preservice-review waivers.		

For more information about our COVID-19 response strategies, please visit our provider updates page at [azblue.com/coronavirus-providers](https://azblue.com/coronavirus-providers) and download our current webinar slides.

eviCore healthcare® is an independent company that provides utilization management services to BCBSAZ providers and members. eviCore healthcare is a registered service mark of CareCore National, LLC.

Blue Cross, Blue Shield, the Cross and Shield Symbols, Federal Employee Program, and FEP are registered service marks of the Blue Cross Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.