

COVID-19: Testing, Treatment and Vaccination

NCOIL Meeting

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COVID-19: Answering the Call

Overcoming the COVID-19 crisis requires a far-reaching and coordinated response from governments and the free market.

Health insurance providers play a critical role, and from the beginning, we have taken decisive action to help patients and curb the spread of the virus.



*No one should hesitate to see their doctor to get tested and treated for COVID-19 because of costs. **Health insurance providers across the country have taken action to remove cost barriers to care.***

– **Matt Eyles**, AHIP President and CEO, following a meeting with President Trump at the White House on March 11, 2020



Hospitals and Health Insurance Providers Working Together

building capacity

policy flexibility

supporting federal funding for hospitals

waiving patient costs

expanding telehealth

financial relief for safety net hospitals

driving coding guidance

advocating to stabilize primary care

advocating for aid to safety net hospitals



We represent the nation's doctors, hospitals, nurses and other health professionals, specialty and post-acute facilities, clinical laboratories, health insurance providers, biopharmaceutical manufacturers, pharmacy benefit managers, and distributors. ... Today, we stand united."

– Joint Industry Letter to Congress and Administration, March 18, 2020

COVID-19 Testing

COVID-19 Testing: Background

- Unprecedented global and national public health crisis
- Widespread testing that is safe, effective and accurate is necessary
- Essential components:
 - Quickly diagnose the virus
 - Proactively screen to prevent/mitigate the spread
- Testing purpose:
 - Guiding care and treatment
 - Public Health surveillance
 - Occupational Health (examples: return to work, school)
- Access to testing should not be dependent on someone's ability to pay
- As of September 23, over 106 million COVID tests have been reported to the [CDC](#)
- Given the exceptional scale and scope of the testing required, public health testing efforts must be a national priority, federally funded, and locally administered
- Federal agencies have a critical responsibility to ensure quality, to support appropriate use and prioritize affordable solutions

COVID-19 Testing: Cost Estimate Studies

Wakely Report

(June 3, 2020)

- \$6 B - \$25 B for diagnostic testing
- \$5 B - \$19 B for antibody testing
- Annually: .2 - .6 per member per year
- \$40-\$125 per test

Milliman Report

(July 2020)

- \$600 M - \$2.9 B for 3Q & 4Q of 2020 for commercially insured patients in New York
- \$59-\$82 per test
- 60 - 333 tests per 1000 residents monthly

Rockefeller Action Plan

(July 16, 2020)

- \$75 B funding for testing & tracing
- 4.5 M tests should increase to 30 M weekly tests by Oct
- \$5 - \$70 for the public cost per test (price billed to payor will be higher)

LeadingAge Comments

(June 15, 2020)

- \$10 B to augment the \$75 B within Heroes Act to test aging services staff.

Covered California Policy Brief

(March 22, 2020)

- \$34 B - \$251 B for testing, treatment, and care in the commercial market
- 20-60 M tested once annually
- \$50 - \$240 per test

Variations in Cost:

- Cost per test
- Type of test
- Test frequency
- Provider charges
- Market Share
- Pooling assumptions

COVID-19 Testing: AHIP, Others Call on Congress for Dedicated Funding

AHIP and 48 other organizations representing patients, employers, clinical laboratories, and health insurance providers sent a [letter](#) to congressional leadership requesting dedicated federal funding for the critical testing needed to reopen the country.

Highlights from the letter include:

“Testing is one of the most important tools we have to combat this crisis, both for identifying the virus and also for preventing its spread in communities across the country. It’s vital that the federal government designate the resources to support expanded access to testing.”

“Swift action is needed to ensure that every American, especially essential workers, frontline healthcare physicians and other clinicians and those at disproportionate risk for COVID-19 have access to vital COVID-19 testing, whether for diagnostic, occupational, return-to-school, public health or virus monitoring purposes.”



COVID-19 Testing: Recommendations

- Ensure all Americans are able to access COVID-19 testing regardless of coverage status
- Ensure federal funding accounts for:
 - The magnitude of tests required to get the economy back on track
 - Reduces the risk of transmission in different settings
 - The progression of the disease
- Solidify comprehensive strategies that incorporate testing to achieve occupational and public health goals
- Ensure testing doesn't lead to premium spikes in 2021
- Protect against fraud in testing



Purpose of Testing: State Examples

COVID-19 Testing

Idaho [Bulletin 20-13](#):

- Cover all medically necessary and at home test prescribed by provider; does not include return to work or public surveillance. (7.10.20)

Iowa [Bulletin 20-10](#):

- Coverage to treat people with symptoms under a providers' order; does not include broad population or back to work testing. (6.22.20)

Louisiana [SB 426](#):

- Coverage of diagnostic tests, antibody tests and antiviral drugs when ordered by physician for clinical decisions. Not subject to cost sharing until 12.31.21. (Gov signed 5.30.20)

New Mexico [Bulletin 2020-16](#):

- Cover all medically necessary and at home test prescribed by provider; does not include return to work or public surveillance (8.4.20)

Oklahoma [LH Bulletin NO. 2020-03](#):

- Coverage when symptoms are medically necessary and order by a medical professional; return to work programs and public health surveillance testing are not considered medically necessary. (5.22.20).

Wyoming [Informational Bulletin](#):

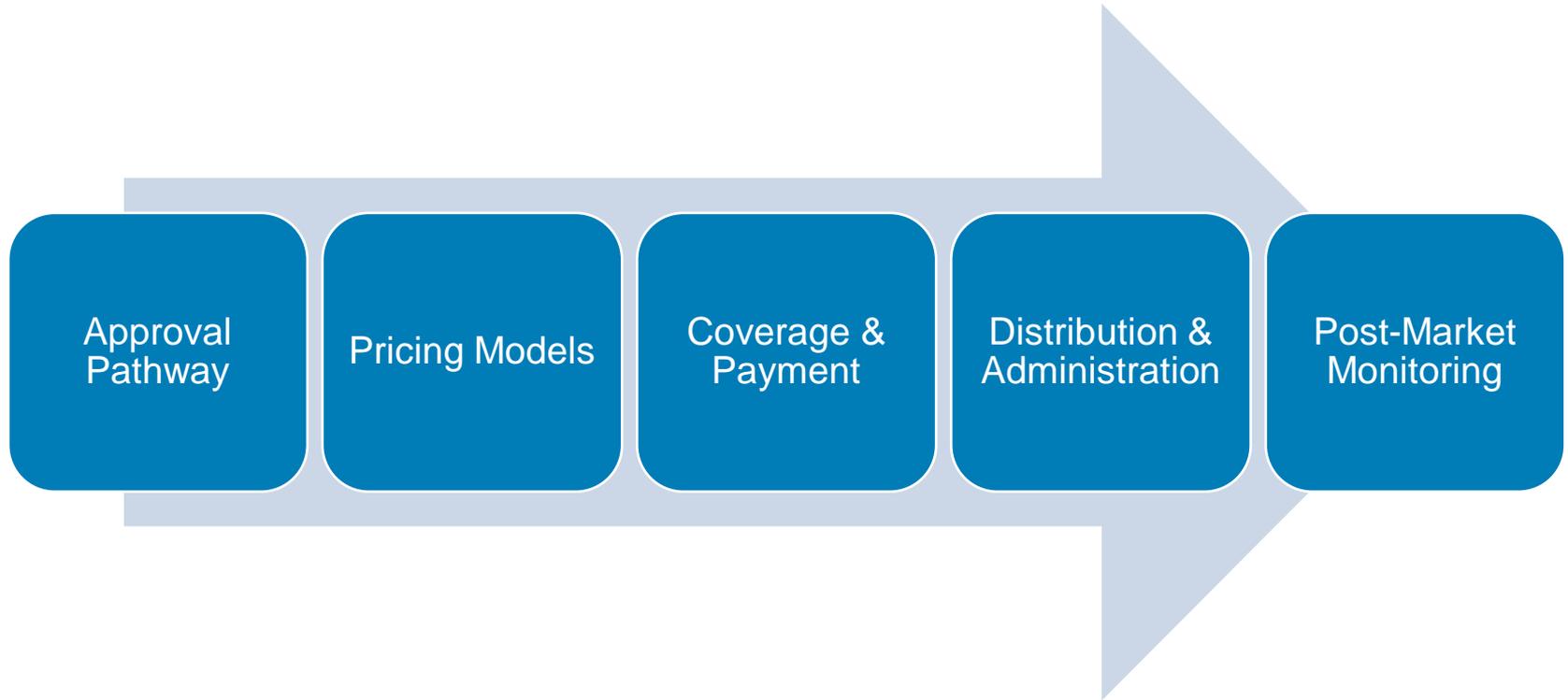
- Cover all medically necessary testing as prescribed by provider; public surveillance or employee screening are not considered medically necessary. (6.10.20)

COVID-19 Vaccines

Background

- Federal government stakeholders have provided significant financial support (over \$10B) to accelerate development of COVID-19 vaccines and pre-purchase hundreds of millions of doses.
- In U.S., 4 vaccines in Phase III trials
- The CARES Act mandated that health insurance providers cover a COVID-19 vaccine as a preventive service within 15 business days of ACIP recommendation.
- CDC planning pilots in North Dakota, Florida, California, Minnesota, Philadelphia complete; informed development of Playbook.
- Strategy for Distribution and Jurisdictional Playbook released on September 16. Plans due to CDC on October 16.

COVID-19 Vaccine Issues



Vaccines – Health Insurance Provider Role

- Encourage people receive the vaccines that are recommended for them
- Conduct outreach to members to inform them of the vaccines that are recommended for them and how they can get them
- This may include reminders to ensure they receive multiple doses when needed
- Work with provider networks and coordinate across partners such as public health officials
 - For data sharing regarding the status of their members' vaccine status
 - Encourage data to be shared with state or regional databases
- Educate members on the safety and effectiveness of vaccines, playing an important role to address vaccine hesitancy
- Some collaborate to support post-market surveillance by contributing real-world data on safety and efficacy to FDA, CDC, and other authorities
- Leverage data to help identify which people may meet the criteria to be eligible for COVID vaccine

Flu Vaccine Toolkit

As we head into the fall, Americans are bracing for the start of seasonal flu season. And this year more than ever, a flu vaccine shot is a necessity. The health care system has already been strained due to COVID-19, and the flu vaccine can reduce that burden and help save lives.

AHIP has put together a flu vaccine toolkit full of resources to help you with your planning and outreach, including:

- [Flu Vaccine Infographic](#)
- [Blog Post on Vaccination Rate](#)
- [Motion Graphic on the Flu Vaccine](#)
- [One-Pager on Flu Vaccine Campaigns](#)

Vaccines save lives. This year, as more people work from home and go to the pharmacy or doctor's office less frequently, health insurance providers are stepping up their outreach to encourage everyone to get their flu vaccines. Together, we can keep Americans in all our communities healthy.

Questions?