

COVID-19 UPDATE #3: Eliminating Cost-Sharing for Qualified In-Network Telemedicine Services

(Newark, NJ, March 13, 2020) – Horizon Blue Cross Blue Shield of New Jersey (Horizon BCBSNJ) is waiving all member cost-sharing obligations for covered telemedicine services delivered by an in-network doctor or through Horizon BCBSNJ’s telemedicine platforms. The waiver applies to qualified telemedicine visits for any covered purpose including diagnosis or treatment of COVID-19, routine care, or mental health care. These changes do not alter the benefits included in any member’s plan, only eliminate cost as a potential barrier to using those services by waiving that member’s cost-sharing obligations. The waiver is in effect for an initial period of 90 days.

“We’re taking this step to ensure that our members have access to the doctors they rely on and to support the effort to promote social distancing,” said **Kevin P. Conlin, Chairman, President and CEO of Horizon BCBSNJ**. “Promoting telemedicine visits with a doctor whether for routine care, an assessment related to possible COVID-19 infection or for mental health counselling does more than ensure our members get the care they need. It is also an important step to protect our critical healthcare partners by reducing their risk of exposure and it supports the public health effort to slow community transmission.”

As with the previously announced cost-sharing changes, these changes take effect immediately for Horizon BCBSNJ’s fully insured members, including those covered through Medicaid, Medicare, Individual and Small Group policies. The State Health Benefits (SHBP) and School Employees Health Benefits (SEHBP) Programs have also agreed to waive cost-sharing for their members for these services. The Company will continue to work with other self-insured customers that provide coverage for their employees on their specific plan designs.

Effective Immediately, Horizon BCBSNJ is:

- **Waiving member cost-sharing for covered services provided by an in-network doctor or in-network mental health professional during a qualified telemedicine visit.**
 - Waiving member cost-sharing obligations for covered services associated with a visit to an in-network physician or in-network mental health professional including primary care doctors, specialists, therapists, LCSWs, or urgent care doctors when conducted according to standards established by N.J.S.A. 45:1-61 et al.
 - Waiving member cost-sharing obligations for covered services provided through Horizon BCBSNJ’s online and app-based telemedicine service (*HorizonCareOnline*). Not all members with access to HorizonCareOnline through the app, www.horizoncareonline.com, or www.HorizonBlue.com member portal have coverage for these services.
 - As with all routine, primary care, mental health or follow-up office visits, no prior authorization is required.
- **Providing reimbursement uniformity to in-network physicians for services rendered via telemedicine.**
 - When conducted according to the standards for telemedicine established by N.J.S.A. 45-1-61 et al, in-network health professionals can submit claims for all CPT codes associated with office visits along with a modifier noting that the service was provided remotely via telemedicine in order to be fully reimbursed at the same negotiated rate as an office visit.

Horizon members also have no cost, 24/7 access to licensed nurses who can assess and assist members with symptoms that are consistent with suspected COVID-19 infection. Commercially insured members can access this service at 1-888-624-3096 and members covered through Medicaid plans can speak with a nurse at 1-800-711-5952. SHBP/SEHBP members have access

to the nurse line and their Horizon Health Guide service using 1-800-414-SHBP (7427). Depending on the specific benefits included in a member's plan, additional telehealth services, such as Horizon Chat for Care, may be available at no cost through the company's free "Horizon Blue" app and through www.HorizonBlue.com, the online member portal.

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