Medicare Advantage Provider Bulletin



News and Information

Dec. 2, 2021

COVID-19 Vaccines, Tests and Treatment for Medicare Advantage Members

Member Out of Pocket Expenses

Aspirus Health Plan will continue to waive coinsurance, copays and deductibles for in-network hospital observation and inpatient services to treat COVID-19 through the COVID-19 public health emergency for members in our Medicare Advantage plans.

If a member goes to the emergency department for treatment and is not admitted as an inpatient or placed under observation, cost sharing will continue to apply according to the terms of the member's Evidence of Coverage (EOC) for services provided in the emergency department.

Aspirus Health Plan will continue to cover copays, coinsurance or deductibles for provider-ordered COVID-19 tests meeting Centers for Disease Control and Prevention (CDC) guidelines through the COVID-19 public health emergency.

At this time, Aspirus Health Plan will cover copays, coinsurance or deductibles for medically necessary clinic and urgent care visits when a COVID-19 test is administered.

Changes in Billing for COVID-19 Vaccines and Monoclonal Antibodies

Effective Jan. 1, 2022, Aspirus Health Plan is responsible for the payment of COVID-19 vaccines, vaccine administration, monoclonal antibodies and administration of monoclonal antibodies for members in our Medicare Advantage Plans. Providers should not bill Aspirus Health Plan for vaccines or antibodies they received for free.

Effective Jan. 1, 2021, and through the COVID-19 public health emergency, for the laboratory services outlined below, Aspirus Health Plan will not impose any ICD-10 diagnosis restrictions, including screening diagnosis codes:

- U0001 U0004 Diagnostic panels
- 87635, 86328, and 86769 Laboratory studies
- G2023 and G2024 Specimen collection codes

