



## Highmark extends coverage of COVID-19 treatment and telemedicine to September 30, 2020

*Extension allows members to continue to receive needed care without cost-sharing costs*

**PITTSBURGH, Pa. (May 20, 2020)** – Highmark has announced that members who require in-network, inpatient hospital care for COVID-19 will not have to worry about paying cost-sharing such as deductibles, co-insurance and co-pays through Sept. 30. The health insurer had initially made the decision to waive cost-sharing for in-network, inpatient COVID-19 related hospital care through the end of May. Self-funded employer groups for which Highmark administers benefits may, however, opt-out of this waiver.

“As we’ve said since the beginning of the pandemic, the health and well-being of our members is what is most important, regardless of the cost to us,” said Deborah Rice-Johnson, President, Highmark Inc. “Our members have been getting COVID-19 treatment without having to worry about co-pays or co-insurance, and we want to make sure members can continue to receive that care as long as the pandemic continues to affect the regions we serve.”

In March, Highmark also made the decision to expand coverage of telehealth and to waive deductibles, coinsurance and copayments on all covered telehealth services from vendors and providers. With today’s announcement, Highmark is also extending coverage of telehealth services until Sept. 30. The waiver of cost-sharing for in-network telehealth visits will also be extended until Sept. 30. As with COVID-19 treatment, self-funded employer groups for which Highmark administers benefits may also opt-out of this waiver. Additionally, Medicare Advantage members will see no out-of-pocket costs for both in- and out-of-network care through Sept. 30.

To help ensure that members can access needed care through telehealth, Highmark expanded the list of telehealth services that are covered and that doctors are paid for, including some physical, occupational and speech therapy that does not require physical touch by definition, and additional behavioral health services. These expanded services will continue to be covered until Sept. 30.

“Telehealth has been an important care delivery channel during the pandemic,” said Rice- Johnson. “Medical experts both inside and outside of our organization tell us that individuals who suspect they have COVID-19 should avoid hospitals and physician offices and should instead contact a provider from home. Telehealth is a great way to do that. Additionally, those who have other medical concerns can use telemedicine to get the care they need while avoiding the risk of exposure.”

Rice-Johnson also noted that Highmark has expanded access to teleaddiction services for members in PA, WV and DE who are in addiction treatment and need immediate help, or who may not be able to access their regular provider during this time. These services continue to be covered without any cost sharing for members, she said.

For more information, visit [highmarkanswers.com](https://highmarkanswers.com).

#### About Highmark Inc.

One of America's leading health insurance organizations and an independent licensee of the Blue Cross Blue Shield Association, Highmark Inc. (the Health Plan) and its affiliated health plans (collectively, the Health Plans) work passionately to deliver high-quality, accessible, understandable, and affordable experiences, outcomes, and solutions to customers. As the fourth-largest overall Blue Cross Blue Shield-affiliated organization, Highmark Inc. and its Blue-branded affiliates proudly cover the insurance needs of more than 5.2 million members in Pennsylvania, Delaware, and West Virginia. Its diversified businesses serve group customer and individual needs across the United States through dental insurance and other related businesses. For more information, visit [www.highmark.com](https://www.highmark.com).