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prevea360.com

June 14, 2021

Dear Prevea360 Health Plan Provider:

Prevea360 Health Plan temporarily waived requirements and operationalized interim processes for certain services in response to the COVID-19 pandemic. As the public health emergency stabilizes, Prevea360 Health Plan is evaluating these requirements and processes to determine appropriate timing for resumption of pre-COVID-19 operations. This notification contains information regarding:

- Reinstating member cost share for facility stays.
- Resuming usual processes for prior authorization of some services.

Information in this notification applies to the following Prevea360 Health Plan products: Commercial (fully insured, including ACA), Dean Administrative Services Only (ASO), and Medicare Advantage.

Reinstating Member Cost Share for Facility Stays

Prevea360 Health Plan temporarily waived cost share for in-network hospitalizations for COVID-19. Effective July 1, 2021, member cost share amounts will be reinstated, and members will be responsible for payment of their out-of-pocket costs for facility stays under the terms of their health care coverage.

Prior Authorization

In the <u>April 23, 2020, COVID-19 provider communication</u>, Prevea360 Health Plan published interim prior authorization processes for some services in response to the public health emergency.

Reinstating In-Network Facility Requirement

Prevea360 Health Plan temporarily suspended any requirement for members to be transferred from an out-of-network facility to an in-network facility. Effective June 21, 2021, Prevea360 Health Plan may require that members be transferred from an out-of-network facility to an in-network facility, when medically appropriate.

Authorization Date Spans

Prevea360 Health Plan adjusted prior authorization processes for some services to eliminate timeline constraints and allow for care unique to the COVID-19 pandemic. For authorization requests received on and after June 21, 2021, the Health Plan is resuming full reliance on our published medical policies, authorization requirements, and member coverage. As such, providers are reminded to submit all relevant medical documentation with their authorization requests.

Prevea360 Health Plan offers the following comprehensive and up-to-date resources accessible from the Prevea360 Health Plan Medical Management web page:

 Medical Prior Authorization Service List, also referred to as the Master Service List, which includes medical service codes that require prior authorization and links to medical policies that require prior authorization and/or have coverage limitations.

- Non-Covered Services which lists medical procedures and services not covered by the Health Plan.
- Medical and Drug Policies which are published in our Document Library.
- Prior Authorization web pages designated for certain services.

Please call the Customer Care Center at 877-230-7555 if you have any questions about your prior authorizations.

Additional Health Plan Information

For additional health plan information and previous provider communications, refer our <u>COVID-19 provider information web page</u> located at the top of all <u>Prevea360.com</u> web pages. Providers are encouraged to check our website regularly for new and updated information

Please contact your assigned Provider Network Consultant with any questions.

Thank you for your continued dedication and commitment to the health and well-being of our members during this public health emergency.

Sincerely,

Loretta A. Lorenzen

Vice President- Network Management & Contracting