

# SmarterHealthCareCoalition

## Utilizing Value-Based Insurance Design to Help Address and Limit the COVID-19 Pandemic: Legislative and Regulatory Action

April 2020

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- March 11: [IRS published notice 2020-15](#), which allows Health Savings Account-eligible high deductible health plans to provide pre-deductible coverage of “medical care services and items purchased related to testing for and treatment of COVID-19”. The notice also states “vaccinations continue to be considered preventive care under section 223(c)(2)(C) for purposes of determining whether a health plan is an HDHP.”
- March 18: the president signed into law COVID package #2 (H.R. 6201, which became Public Law 116-127). The bill included a requirement that all health plans shall provide coverage without cost sharing for COVID-19 testing during the public health emergency.
- March 27: the president signed into law COVID package #3, the [Coronavirus Aid, Relief, and Economic Security \(CARES\) Act](#) (H.R. 748, which became Public Law 116-136). Among many other provisions, the bill:
  - Specifies options for how COVID-19 testing must be reimbursed by health plans;
  - Allows Health Savings Account-eligible high deductible health plans to cover “telehealth and other remote care” pre-deductible for plans beginning before 2021; and
  - Requires all health plans cover future COVID-19 vaccines without imposing cost sharing.
- March 30: CMS [released](#) regulatory guidance in the [Interim Final Rule](#) to further support hospitals’, physicians’, and other healthcare organizations’ capabilities during the COVID-19 pandemic, including expanding Medicare coverage of [telehealth visits](#) – expanding access to high-value care during the crisis through appropriate (virtual) settings.
- Throughout March and April: several health plans, including United, Cigna, Aetna, Humana, Anthem and others committed to provide COVID-19 treatment without cost sharing for various amounts of time.