

FREQUENTLY ASKED QUESTIONS:

COVID-19

Updated September 2, 2022

For additional questions not covered in this FAQ:

We are committed to providing you with answers and support in this rapidly changing environment. Please continue to use your Single Point of Contact as a resource or use the dedicated service line for all of your COVID-19 related questions.

Phone number: 1-800-592-3005

Email: COVIDquestions@humana.com

COVID-19 TESTING

You may access member testing FAQs [here](#).

What is Humana doing to comply with the new federal at-home, over the counter COVID-19 test kit requirement announced in January 2022?

Humana is committed to complying with this requirement and covering the cost of at-home, over-the-counter (“OTC”) COVID-19 test kits for our members within the limitations outlined below.

As announced by the U.S. Department of Health and Human Services, as of January 15, 2022, all private insurance members are eligible to receive up to 8 at-home, OTC COVID-19 tests per 30 days (or calendar month) at no out-of-pocket cost. Eligible test kits must meet the following criteria:

- At-home, OTC, viral test kits for personal use that you are able to take and read at home without the help of a healthcare provider
- Viral test kits that test for current infection; antibody/serology tests are not included
- Only at-home, OTC test kits that are approved by the US Food & Drug Administration (FDA) or emergency use authorized will be covered. You can find out which test kits are included by visiting the [FDA At-Home OTC COVID-19 Diagnostic Tests](#) list
- Test kits purchased for employment screening or public health surveillance purposes are not eligible for coverage
- Please be aware that each test is counted separately even if sold in packs that contain multiple tests. For example, if you purchase a box that contains two tests, it will count as two tests toward your monthly limit of 8.

PLEASE NOTE: Humana does not manufacture or make available these at-home, OTC COVID-19 tests for members. These tests are in high demand across the country and may be difficult to find. You may find them at local pharmacies, local stores or trusted online retailers.

Commercial group members have three options to get covered at-home, OTC COVID-19 tests for a **total** of 8 tests per 30 days (or calendar month):

- 1) Purchase online at CVS.com using your insurance card for a \$0 copay
- 2) Purchase in-store at an in-network pharmacy counter for a \$0 copay
- 3) Pay the full amount for the test up-front at a pharmacy or another trusted retailer in-store or online and file a reimbursement claim and be reimbursed up to \$12 per test

OPTION 1: Purchase online at CVS.com:

1. Go to the [CVS.com](#) COVID-19 test kit page
2. Navigate to “Get tests paid for up front” and click “[Request at-home tests](#)”
3. You will be asked a series of questions to confirm your eligibility, identify a store near you and select whether your tests will be picked up in-store or shipped to you
 - Note: If you are a Puerto Rico member, please only enter the first 11 digits of your member ID (without dashes)
4. Once you select your store, you will be promoted to log in to your CVS account or create a new one
5. Verify your information
6. Enter the information on your Humana ID card
7. Submit request

OPTION 2: Purchase at-home, OTC COVID-19 test kits at an in-network **pharmacy counter** with your Humana ID card:

1. Take the kit(s) to the pharmacy counter for check-out
2. You will be asked to provide your Humana ID card
3. The pharmacy staff will process your purchase you will owe \$0 for up to 8 test kits, per member, per 30 days (or calendar month)

Please note: If you purchase the at-home, OTC COVID-19 test kits from the **retail counter**, you will need to pay upfront and follow the instructions laid out in option 3. As of March 16, 2022, tests purchased at the retail counter will be reimbursed up to \$12 per test

OPTION 3: Purchase an at-home, OTC COVID-19 test at a trusted retailer online or in-store:

1. Purchase your test kit from a trusted retailer* and keep your itemized receipt. Humana will not reimburse test kits sold person-to-person through platforms such as eBay, Facebook Marketplace, Craigslist, etc.
2. Select the claim form that applies to you
 - a. **Members residing in the United States**
 - i. Members residing in the **United States**, use the [At-home Over-the-counter \(OTC\) COVID Test Reimbursement Form](#) (opens in new window)
 - b. **Members residing in Puerto Rico**
 - i. **English:** Members residing in **Puerto Rico**, please use [Puerto Rico Commercial Members Reimbursement Form, Over-the-Counter COVID-19 Home Tests](#)(opens in new window)
 - ii. **Spanish:** Members residing in **Puerto Rico**, use [Solicitud de Reembolso Para Suscriptores Comerciales de Puerto Rico](#) (opens in new window)
3. Complete all information requested on the at-home, OTC COVID-19 test kit claim form (see step 2 for form options)
4. Mail the completed form with the original itemized receipt to:
Humana Claims
P.O. Box 14601
Lexington, KY 40512-4601
5. It can take up to 30 days to process your claim, and the reimbursement will be sent as a check to the address Humana has on file
6. As of March 16, 2022, tests purchased from a trusted retailer and submitted for reimbursement will be reimbursed up to \$12 per test

IMPORTANT NOTE: If you purchase your test kit(s) using your HSA and then file for reimbursement, you are required by law to pay back your HSA account with the funds you receive from Humana. As such, for simplicity you may prefer to purchase using a different method of payment.

For additional information on the at-home, OTC test kit requirement, please see the member testing FAQs [here](#)

Does Humana still cover the cost of tests ordered by a physician or other licensed healthcare professional?

Humana Commercial Group members will continue to be eligible for COVID-19 testing with no out-of-pocket costs when an [FDA approved or emergency use authorized COVID-19 test](#) (including at-home tests) has been ordered by a physician or other licensed healthcare professional because the member:

- has COVID-19 symptoms,
- has been exposed to someone with suspected or confirmed COVID-19, or
- requires pre-admission or pre-procedural testing in an asymptomatic individual.

Humana Commercial Group members may NOT be eligible for coverage of COVID-19 testing for any indications other than those listed above including, but not limited to, the following:

- Employment (e.g. pre-employment, return to work) or school purposes (e.g. return to school);
- Entertainment purposes (e.g. prior to a concert or sporting event);
- General population or public health screening;
- Physicals (executive or routine);
- Screening in a congregate setting;
- Sports participation; or
- Travel purposes.

Will Humana cover diagnostic testing required by employers for employees to return to work?

Humana is following CDC guidelines for testing. Those who have symptoms consistent with COVID-19 infection or those without symptoms who may have been exposed to the virus would qualify for healthcare provider-ordered testing.

Will Humana cover COVID-19 antibody testing with no member cost sharing?

Humana will cover medically necessary antibody testing that is ordered by a physician. Humana will **not** cover antibody testing for return to work or school or for general health check purposes, except as required by applicable law.

Will Humana consider allowing clients to order a batch of rapid COVID-19 testing kits to keep onsite at manufacturing or other industries where working from home is not an option?

No. Humana is unable to provide clients with a batch of rapid COVID-19 tests to keep onsite, as claims are tied to individuals, not groups.

COVID-19 VACCINES

What you should know about the COVID-19 Vaccine

Vaccines are an important tool to help communities fight the spread of COVID-19 and help people stay healthy. The CDC has determined that “People who were unvaccinated had a greater risk of testing positive for COVID-19 and a greater risk of dying from COVID-19 than people who were vaccinated with a primary series. Also, people who were vaccinated with a primary series and an additional or booster dose had lower case rates overall compared with those without an additional or booster dose.”¹

We strongly encourage all Humana members to consider getting the COVID-19 vaccine when they are eligible. Talk to your doctor about what is best for you.

It is important to take prevention steps to protect yourself and others, including wearing masks, practicing social distancing, and washing your hands based on your COVID-19 Community Level, in order to minimize the chances of catching or spreading the disease. A level can be low, medium, or high and is determined by looking at hospital beds being used, hospital admissions, and number of new COVID-19 cases in an area². You can use the new COVID-19 Community Level tool to check your county’s current level and guidance for your community by visiting [COVID.gov](#).

Source (1): CDC: [Rates of COVID-19 Cases and Deaths by Vaccination Status](https://covid.cdc.gov/covid-data-tracker/#rates-by-vaccine-status) [url: <https://covid.cdc.gov/covid-data-tracker/#rates-by-vaccine-status>]

If someone has already tested positive for COVID-19 antibodies, is a COVID-19 vaccination necessary and why?

Yes. Individuals who have tested positive for COVID-19 antibodies should still get the COVID-19 vaccine to prevent potential re-infection and safeguard against false-positive test results. A false-positive antibody test would lead an individual to believe they have COVID-19 antibodies when they, in fact, do not.

In cases where the antibody test is accurate, vaccination is still important because it is unknown how long the COVID-19 antibodies in a person's system may offer protection from the virus - and how high the antibody levels would need to be to offer that protection. Additionally, there have been some reports of people getting re-infected with the virus, which indicates that the natural immunity may wear off over time. ¹

SOURCE: (1) [Hackensack Health](#)

How long should someone wait to get vaccinated for COVID-19 if they've already had the COVID-19 virus?

Individuals who have previously been infected with COVID-19 should still get the COVID-19 vaccine to prevent potential re-infection. The timing for vaccination should align with CDC-recommendations, which depend upon severity of the infection.

- In COVID-19 cases that are mild and do not require hospitalization, an individual should wait through the CDC-recommended isolation period before getting vaccinated. For most people, this means 10 days after symptom onset and resolution of fever for at least 24 hours, without the use of fever-reducing medications.
- For more severe COVID-19 infections that were treated with monoclonal antibodies or convalescent plasma, the CDC is recommending a 90 day wait, so that your immune system is recovered and ready. ¹

SOURCE: (1) [CDC](#)

How long will the COVID-19 vaccine be effective? Will people have to receive the vaccine annually, similar to the flu?

COVID-19 vaccinations are still being researched and it is too soon to know how long the existing vaccines will be effective and whether annual vaccines will be required. What is known is that, of those who have received the vaccine, protection from COVID-19 has lasted for at least 4 months.

Important information around COVID-19 booster shots: COVID-19 vaccine booster shots are now available for everyone ages 16 years and older. To determine your eligibility, check the [CDC's web page on COVID-19 boosters](#) for the latest information.

Once someone is fully vaccinated for COVID-19, does that person still need to take precautions such as mask wearing?

Once fully vaccinated, you will still need to take precautions. The CDC has put out new recommendations for what you can do, and what protocols you should continue to observe after you've been fully vaccinated.

[Click here to learn more](#) from the CDC about when you've been fully vaccinated.

Do the COVID-19 vaccines protect against variants (e.g., Delta or Omicron)?

Yes. Vaccines are highly effective, including against the different variants.

The COVID-19 vaccines approved or authorized in the United States are highly effective at preventing severe disease and death, including against the Delta and Omicron variants. But they are not 100% effective, and some fully vaccinated people will become infected. For all people, the vaccine provides the best protection against serious illness and death.

Low vaccination coverage in many communities is driving the current rapid surge in cases involving COVID-19 variants, which also increases the chances that more variants could emerge.

Vaccination is the best way to protect yourself, your family and your community. High vaccination coverage will help to reduce spread of the virus and help prevent new variants from emerging.

SOURCE: (1) [CDC Delta Variant](#)

VACCINE COVERAGE

Will I be able to get the vaccine at no charge to me?

Yes. All FDA-authorized COVID-19 vaccines will be covered at no additional cost during the public health emergency. Coverage applies no matter where you get the vaccine —including at both in-network and out-of-network providers. It also covers instances in which two vaccine doses are required.

How claims are processed: The cost of the vaccine doses will be paid for by the federal government. Humana will cover any cost from vaccine providers for administering the vaccine, and there will be no cost-share for members.

Remember to bring your Humana Insurance member ID card when you get your vaccine in case the vaccine provider requests it.

Can I choose which vaccine I want to get? Is one vaccine better than another?

All vaccines that are out on the market and approved for use have been rigorously reviewed for both efficacy and safety. Studies show that COVID-19 vaccines are effective at keeping you from getting COVID-19. Getting a COVID-19 vaccine will also help keep you from getting seriously ill even if you do get COVID-19.¹

All COVID-19 vaccines that have been approved by the FDA or authorized under the EUA are [safe](#) and [effective](#).

Given the impressive safety and effectiveness of all the available COVID-19 vaccines, it is most prudent to receive any one of the available approved vaccines at your earliest opportunity. Widespread vaccination is a critical tool to help stop the pandemic.²

On Thursday December 16th, the Centers for Disease Control and Prevention (CDC), released a statement withdrawing their recommendation of getting the single shot Johnson and Johnson vaccine. The recommendation states that the “CDC is endorsing updated recommendations made by the Advisory Committee on Immunization Practices (ACIP) for the prevention of COVID-19, expressing a clinical preference for individuals to receive an mRNA COVID-19 vaccine over Johnson & Johnson’s COVID-19 vaccine. ACIP’s unanimous recommendation followed a robust discussion of the latest evidence on vaccine effectiveness, vaccine safety and rare adverse events, and consideration of the U.S. vaccine supply.” [Learn more about the CDC’s decision.](#)

If you have a preference of one type of vaccine over another, you can find COVID-19 vaccines by going to [vaccines.gov](#), text your ZIP code to 438829, or call 1-800-232-0233 to find locations near you.

SOURCE: (1) [CDC Key Things](#) (2) [CDC FAQ](#)

If there is a negative or allergic reaction to the vaccine, will the costs associated with that treatment be covered?

No, costs associated with treatment for an allergic reaction to the COVID-19 vaccine will not be waived. In this instance, standard benefits and cost-share applies.

Will the vaccine administration fee have to be paid for by the claims fund for ASO groups?

Yes. The claims for COVID testing and vaccine administration will be deducted from an ASO group’s claims fund.

What if I was charged for my vaccine and need to be reimbursed?

Vaccine doses purchased with U.S. taxpayer dollars will be given to the American people at no cost. However, vaccination providers may charge an administration fee for giving someone the shots. If you’ve been vaccinated and you received a bill – either for the vaccine itself or for its administration - you can file for reimbursement directly from Humana.

Note that there are separate claim forms for the Pfizer and the Moderna vaccines.

1. Complete all information requested on the appropriate Health Benefits Claim Form below:
 - [COVAX Claim Form Moderna](#)
 - [COVAX Claim Form Pfizer](#)
2. Enclose the original itemized bill(s) you paid.
3. Mail the completed form with the original itemized bill(s) to the address on the back of your Humana member ID card.

Please note it can take up to 30 days to process the claim, and the reimbursement will be sent as a check to the home address we have on file for you

Is Humana going to adjust renewals to accommodate for the impact the COVID-19 vaccine might have on claims?

Every year we evaluate a number of inputs to determine renewal adjustments. The vaccine and any related expenses will all be included in our standard evaluation that informs annual renewal adjustments.

VACCINE ELIGIBILITY & DISTRIBUTION

When will I be able to get the vaccine?

It’s important to note that states are developing their own prioritization plans based on the CDC’s recommendations, so eligible groups may vary somewhat from state to state.

Visit our coronavirus home page to [find specific information for your state or territory.](#)

Where will I be able to get the vaccine?

Vaccine supply has increased rapidly and securing appointments for vaccinations is less challenging. There are several places to look to receive the vaccine.

- Visit [Vaccines.gov](https://www.vaccines.gov) to find vaccination providers near you. In some states, information may be limited while more vaccination providers and pharmacies are being added. Learn more about [COVID-19 vaccination locations on Vaccines.gov](#).
- Text your ZIP code to **438829** or call **800-232-0233** to find vaccine locations near you.
- Check your local pharmacy's website to see if vaccination appointments are available. Find out which pharmacies are participating in the Federal Retail Pharmacy Program.
- Contact your state health department to find additional vaccination locations in the area.
- Check your local news outlets. They may have information on how to get a vaccination appointment.

For more information, visit [How Do I Get a COVID-19 Vaccine | CDC](#)

Remember to bring a government-issued ID with you when you get your vaccination. Because age is an important criterion for eligibility in most states, many vaccine providers are requiring a government-issued ID showing date of birth as proof of age.

Remember to bring your Humana Insurance member ID card when you get your vaccine in case the vaccine provider requests it.

Wherever you get the vaccine, it is important to confirm the source is safe and reputable to avoid becoming a victim of fraud. A recent warning from the FBI provides information on potential indicators of COVID-19 vaccine related fraud and tips on how to avoid it. You can find a [link to the FBI warning here](#).

If you are a victim of a scam or attempted fraud involving COVID-19, you can:

- File a complaint with the National Center for Disaster Fraud, opens new window or call their hotline at 866-720-5721
- Report it to the FBI's [Internet Crime Complaint Center](#)
- Contact your local FBI field office or submit a tip online at tips.fbi.gov

What if a member waives the initial offer to get the vaccine and reconsiders. What is the process to get "back in line"?

Members will not be penalized for passing on their first opportunity to receive the vaccine. Upon reconsideration, the member should use the same state and local resources they used to sign up originally to get back on the appropriate lists.

Will Humana be able to coordinate on-site workplace vaccine distribution, similar to the coordination of on-site flu shots?

The COVID-19 vaccination landscape is evolving quickly and we are committed to providing as much support to our clients and members as possible. Depending on your company's needs, Humana can help to provide educational materials, dedicated vaccine events at local retailers or on-site vaccination events. Contact your SPOC to inquire about how Humana can assist in educating and vaccinating your workforce.

VACCINE SAFETY

Are the COVID-19 vaccines safe and effective?

Yes. In order to receive Emergency Use Authorization from the FDA, vaccines must pass rigorous safety and efficacy trials. According to the CDC, clinical trials of all vaccines must first show they are safe and effective before any vaccine can be authorized or approved for use, including COVID-19 vaccines.

Per the CDC, "The U.S. vaccine safety system ensures that all vaccines are as safe as possible." Learn how federal partners are working together to [ensure the safety of COVID-19 vaccines](#).

Note: that the CDC and FDA released a statement on the Johnson & Johnson COVID-19 vaccine stating that, "women younger than 50 years old should be aware of the rare risk of blood clots with low platelets after vaccination, and that other COVID-19 vaccines are available where this risk has not been seen." If you received a Johnson & Johnson vaccine, here is what you need to know.

On Thursday, December 16th, the Centers for Disease Control and Prevention (CDC), released a statement withdrawing their recommendation of getting the single shot Johnson and Johnson vaccine. The recommendation states that the "CDC is endorsing updated recommendations made by the Advisory Committee on Immunization Practices (ACIP) for the prevention of COVID-19, expressing a clinical preference for individuals to receive an mRNA COVID-19 vaccine over Johnson & Johnson's COVID-19 vaccine. ACIP's unanimous recommendation followed a robust discussion of the latest evidence on vaccine effectiveness, vaccine safety and rare adverse events, and consideration of the U.S. vaccine supply." [Learn more about the CDC's decision](#).

Note: The Pfizer COVID-19 vaccine received FDA approval on August 23, 2021, for all individuals 16 years of age and older. The vaccine also continues to be available under EUA, including for individuals 5 through 15 years of age and for the administration of a third dose in certain immunocompromised individuals.

[Learn more about the different COVID-19 vaccines.](#)

[Read more from the CDC about the benefits of getting the COVID-19 vaccine.](#)

Are there any side effects?

It is possible that you will experience some side effects after receiving the COVID-19 vaccine. According to the CDC, “After COVID-19 vaccination, you may have some side effects. This is a normal sign that your body is building protection”. Common vaccine side effects highlighted by the CDC range from pain at the injection site to flu-like symptoms. For more information from the CDC on dealing with these symptoms and when to call the doctor, visit <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/expect/after.html>

There have been extremely rare incidents of significant allergic reactions reported. The CDC is working with vaccine providers to put safeguards in place for dealing with severe allergic reactions. [Learn more about COVID-19 vaccines and severe allergic reaction here](#)

After receiving the vaccine, consider signing up for **V-safe** from the CDC. “V-safe is a smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after you receive a COVID-19 vaccination. Through **v-safe**, you can quickly tell CDC if you have any side effects after getting the COVID-19 vaccine. Depending on your answers, someone from CDC may call to check on you and get more information. And **v-safe** will remind you to get your second COVID-19 vaccine dose if you need one.” [Learn more about V-safe here.](#)

How can a person identify whether they might have an allergic reaction to the COVID-19 vaccine?

An allergy, particularly a severe one, is extremely rare (~0.001%) for both the Moderna and Pfizer COVID-19 vaccines. If a person has an allergic reaction to the first vaccine dose, the second dose should not be administered. If someone has a history of allergic reaction to other vaccines, they should consult their doctor to determine if the COVID-19 vaccine is recommended. The specific component that people have had allergic reactions to are polyethylene glycol (PEG). Anyone with a history of allergy to PEG or polysorbate should not get either of the two vaccines currently on the market. These recommendations may change as new vaccines made with different components become approved for use. Safeguards are in place at injection sites for vaccine recipients to be monitored for at least 15 minutes after injection, as most severe allergic reactions will be seen within that time frame.¹

It is also important to note that an allergy is not the same thing as a side effect. The side effects of the vaccine are fairly common and include pain and redness at the injection site, or fatigue, fever, and muscle aches for a couple of days after receiving the vaccine. These signs actually represent an immune response mounting up which is exactly what the vaccine is designed to do and should not be misconstrued as an allergic reaction.² SOURCES: (1) [MMWR](#), (2) [CDC](#)

What if I am high risk or have a special medical condition?

If you have concerns due to your health status or a specific medical condition, consult with your doctor about whether the vaccine is appropriate for you, and the safest way to get it.

If you have an underlying or chronic medical condition, make sure you are in communication with your doctor during this pandemic. Getting these conditions well-managed, by staying on top of your preventative and regular medical care, will help to manage your health risk during this pandemic.

Is it safe to get the COVID-19 vaccine at the same time as the flu or other vaccines?

Individuals should not get the COVID-19 vaccine at the same time as any other vaccinations. The CDC recommends that the COVID-19 vaccine be administered at least 14 days before or after any other vaccine.

For example, after getting the COVID-19 vaccine, one should wait at least 14 days before getting any other vaccine, including for the flu or shingles. Similarly, if another vaccination is administered first, one should wait at least 14 days before getting the COVID-19 vaccine.¹

SOURCE: (1) [CDC](#)

COVID-19 TREATMENT

Is Humana still waiving all member costs for treatment related to COVID-19?

No. Effective January 1, 2021, Commercial group members' standard benefits and cost-sharing will apply for COVID-19 treatment, including labs, hospitalizations, etc.

Regarding COVID-19 treatment, what medications will Humana cover?

Humana intends to cover FDA-approved medications when prescribed according to FDA-approved clinical indications. This includes Veklury® (remdesivir), which has been approved by the FDA for the treatment of patients with COVID-19 requiring hospitalization. If a member is prescribed non-FDA-approved medications for the treatment of COVID-19, he or she will be responsible for any cost sharing required per the plan design.

THE AMERICAN RESCUE PLAN ACT (ARPA)

COBRA & STATE CONTINUATION (MINI-COBRA)

What is the COBRA subsidy outlined in ARPA?

ARPA's mandatory federally funded COBRA subsidy provision requires insurers and employers to provide "assistance eligible individuals" (AEI) with a 100% subsidy for premiums otherwise owned for COBRA coverage during the period from April 1, 2021 to September 30, 2021. The party who makes the premium payment is eligible for the federal tax credit.

Which employers need to provide the subsidy?

ARPA Employers subject to COBRA continuation requirements must provide the subsidy to assistance eligible individuals. COBRA generally applies to all private sector group health plans maintained by employers with at least twenty employees. Several states have mini-COBRA laws that apply to employers that do not meet the twenty-employee threshold.

What plans are subject to the subsidy?

The COBRA subsidy is applicable to both fully insured and self-insured plans. The subsidy applies to COBRA coverage under medical, dental and vision plans, but not health flexible spending accounts.

Who is responsible for making the COBRA and mini-COBRA premium payments—the former employer or the insurer?

Premium payment responsibility and tax credit eligibility is based on the type of coverage.

COBRA: Humana will bill the Employer Group for the COBRA premium. The former employer is responsible for the subsidized premium payments, which will qualify the employer to receive the tax credit.

State Continuation (mini-COBRA): Humana will not bill the Employer Group for the State Continuation (mini-COBRA) premium. The insurer is responsible for the subsidized premium payments, which will qualify the insurer to receive the tax credit. A process is being established to support this subsidy and will be communicated to the employer group and/or member as soon as possible.

When enrolling an individual in COBRA, we are currently required to enter the effective date as the 1st of the month following the termination. Under the American Rescue Plan Act (ARPA), it appears that employees can elect COBRA effective April 1, 2021, to take advantage of the subsidy, regardless of when their coverage terminated. Will Humana's online portal allow April 1, 2021 enrollment, even if an employee's coverage terminated prior to March 31, 2021?

ARPA does not alter the COBRA guidelines for timely enrollment.

Example: If an employee terminated effective February 28, 2021, their COBRA effective date would be March 1, 2021. The election for coverage in March 2021 will still be in the Outbreak Period and the employee will not be required to make a final decision on this until the end of the Outbreak Period, or one year from their standard election deadline, if earlier.

Will the subsidy apply retroactively, for individuals who enrolled in COBRA coverage between March 1, 2020 and March 31, 2021?

The subsidy and/or tax credit applies beginning April 1, 2021 and cannot be applied retroactively. As long as the individual is active and is still within their COBRA coverage eligibility period, the Employer Group should qualify for the tax credit beginning on April 1, 2021.

Can a member still enroll if they previously declined COBRA coverage?

Yes. As long as the member is still within their COBRA eligibility period, the member can still enroll in COBRA coverage to be effective on April 1, 2021. The expiration date of COBRA coverage is calculated based on the original termination date. The subsidy would begin on April 1, 2021 and end on September 30, 2021, or at the end of their COBRA eligibility, whichever comes first.

If the individual newly elects COBRA coverage the individual is entitled to the COBRA subsidy beginning April 1, 2021, without having to elect and pay for COBRA coverage retroactively for any months prior to the Subsidy Period.

When does the subsidized premium expire?

The subsidy will continue until the COBRA maximum coverage period expires, the COBRA participant becomes eligible for another group health plan or Medicare, or on September 30, 2021, whichever comes first.

Is the 18 months of COBRA eligibility based on the member's original termination date or on the April 1, 2021 effective date?

The 18 months of COBRA eligibility is based on the member's original termination date from their employer group plan.

Does ARPA change the State Continuation eligibility for LFP groups with less than twenty employees?

No. The members associated with LFP groups with less than twenty employees are not eligible for State Continuation or COBRA coverage. These members may qualify for subsidies being offered for the Marketplace plans.

COVERAGE QUESTIONS: ELIGIBILITY

If a significant number of employees are laid-off today, how long will the employees have coverage?

If premiums have been paid for the full month, the employee coverage will continue for the entire month.

Will employees who are laid off temporarily as a result of the COVID-19 pandemic be allowed to rejoin the fully insured plan without a waiting period when they return to work?

Yes. Humana will waive the waiting period for employees who are laid off temporarily as a result of COVID-19. However, new hires will still be subject to standard waiting periods.

COVERAGE QUESTIONS: BILLING

Will my rates/premium be subject to change if enrollment drops by more than 10% as a result of the COVID-19 pandemic?

No. If the loss of enrollment is a result of COVID-19, your rates and premiums will not be adjusted until your next renewal date.

Will Humana allow premium payment flexibility?

Yes. Humana will continue to offer a 30-day grace period for premium payments. In accordance with state requirements, additional premium payment flexibility may be available to employers facing financial hardship. If this is the case for your business or you are uncertain if you meet the requirements, call Humana at 1-800-592-3005 with any questions.

Will Humana allow groups to delay their open enrollment beyond their normal renewal date timing?

Yes. To account for the significant disruption caused by the COVID-19 pandemic, Humana will continue to allow employers an additional 30 days from their effective date to complete open enrollment activities.

COVERAGE QUESTIONS: TELEMEDICINE

Is Humana waiving member cost-share for telemedicine visits?

Consistent with the timeline and extensions that have been previously communicated to employers and members, the expanded Doctor on Demand (DOD) coverage Humana offered throughout the pandemic crisis at \$0 cost share ends on June 30, 2021. Effective July 1, 2021, normal benefits and member cost share will apply to all DOD visits.

COVERAGE QUESTIONS: SPECIALTY

Dental – General

What is Humana’s direction on Teledentistry?

We are following the ADA’s suggested guidance in processing teledentistry claims, as outlined below.

- Humana will allow benefits for teledentistry consultation for limited and problem-focused evaluation and re-evaluation.
- Physician consultations via teledentistry will be covered.
- Frequency limits will be waived, so that these covered evaluations do not count toward members’ annual frequency limitations.

Vision - General

Can Humana members still use their vision benefits?

Yes. Humana is committed to maintaining service and helping members manage their health through these challenging times. Humana will follow all COVID-19 guidance and protocols provided by the Centers for Disease Control and Prevention (CDC), and state and local public health departments. We recommend members follow CDC guidelines regarding routine eye exams

Can vision members use their benefits online?

Yes. Vision members have multiple options to order prescription eyewear and contact lenses online using their benefits. Online sites will require a valid prescription. Importantly, members may not need to visit a vision provider in person to be able to use their vision benefits online. To help support vision health in light of COVID-19, many states are allowing extensions on prescription expiration dates.

Members should contact their vision provider to determine their prescription status. Online, in-network options include: [Glasses.com](#), [ContactsDirect](#), [Ray-Ban.com](#), [LensCrafters.com](#), and [TargetOptical.com](#). Under the circumstances, many of these online providers are offering free, expedited shipping and no-cost returns for extra convenience.

COVERAGE QUESTION: GO365

How will Humana’s Go365 Wellness Engagement Incentive and Points be impacted?

Humana has modified requirements to receive the Go365 Wellness Engagement Incentive (WEI) and is exploring alternative point-earning activities. For renewal groups with plan years ending April 2020 through March 2021 whose engagement levels were negatively impacted, Humana will recognize the greatest of prior year Go365 Reward Status, prior year Go365 Earned Status or Current Year Go365 Earned Status as the basis for the WEI. Go365 has introduced a variety of alternative earning options and continues to add safe alternatives for members to earn Go365 points and reach status—including support for stress and anxiety management, virtual group support and remote exercising.

RETURN TO WORK

We are bringing employees back to work. What is the process?

If you did not request a member termination, you do not need to take any action when they return to work (RTW). Coverage will remain in place until changes are reported by the group. However, if you need to rehire/reinstate, please use the following methods:

Submission Options:

- Written correspondence (letter, fax, etc.)
- Enrollment form
- General Spreadsheet (can be used for 1-25 rehire reinstatements)
- 1xSS (can be used for 26+ rehire reinstatements)

External Submission Methods:

- Fax (866-584-9140)
- Secure email through Humana.com portal

- Mobile app (for agent use only)
- Phone call to Customer Care
- Email to Account Services
- RTW/New Hire Renewal spreadsheet (Expanding Use of 1XSS for RTW situations)

Rehire rules:

- If employee RTW within 13 weeks, waiting periods can be waived.
- If employee RTW after 13 weeks but within 12 months, rehire provisions apply, if applicable. If no rehire provisions, waiting periods can be waived.
- If a group would like to waive waiting periods, please use one of the submission methods noted. If a group would like to apply the standard waiting periods, HRBA can be used to process rehire enrollment.
- RTW requests should be submitted within 30 days of the RTW date. If additional time is required, please work with your SPOC or Humana contact for further assistance.

WHAT IF I HAVE MORE QUESTIONS?

I have more questions. Who can help?

Please continue to use your Single Point of Contact as a resource or use the dedicated service line for all of your COVID-19 related questions. Phone number: 1-800-592-3005 and Email: COVIDquestions@humana.com

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This communication provides a general description of certain identified insurance or non-insurance benefits provided under one or more of our health benefit plans. Our health benefit plans have exclusions and limitations and terms under which the coverage may be continued in force or discontinued. For costs and complete details of the coverage, refer to the plan document or call or write your Humana insurance agent or the company. In the event of any disagreement between this communication and the plan document, the plan document will control.

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