The Governor of the State of Oklahoma has issued a Declaration of Emergency. That Executive Order 2020-07 was issued March 15, 2020.

All health carriers, other insurance industry representatives and other interested parties are encouraged to review the latest Oklahoma information about COVID-19 released by the Oklahoma Department of Health. (https://coronavirus.health.ok.gov/).

The Department is issuing this bulletin to assist individuals and entities regulated by the Department in effectuating the provisions of insurance related services during this urgent public health challenge.

The Oklahoma Department of Insurance is asking health carriers providing coverage through health benefit plans to Oklahoma residents to take the following immediate measures related to the potential impact of COVID-19.

- Health carriers should review their internal processes and continuity of operations, including ability to telecommute, to ensure that they are prepared to address COVID-19 cases in Oklahoma and serve their members, including by providing insureds with information and timely access to all medically necessary covered health care services. As the COVID-19 situation continues to evolve, health carriers should continually assess their readiness and make any necessary adjustments. This includes notifications to producers and brokers to keep consumers up to date.

- Access to accurate information and avoiding misinformation are critical. Therefore, health carriers should inform insureds of available benefits specifically related to telemedicine, quickly respond to insured inquiries, and consider revisions needed to streamline responses and benefits for insureds. Health carriers should make all necessary and useful information available on their websites and staff their nurse-help lines accordingly.
• Health carriers should waive any cost-sharing for COVID-19 laboratory tests so that cost-sharing does not serve as a barrier to access to this important testing. In addition, health carriers should also waive the cost-sharing for an in-network provider office visit and an in-network urgent care center visit when testing for COVID-19.

• Given that COVID-19 is a communicable disease, some insureds may be using telehealth services instead of in-person health care services. Health carriers should review and ensure their telehealth programs with participating providers are robust and will be able to meet any increased demand. Additionally, health carriers should waive telehealth copayments for insureds and reimburse the provider for the copayment.

• Health carriers are asked to verify their provider networks are adequate to handle a potential increase in the need for health care services in the event COVID-19 cases are diagnosed in Oklahoma. If a health carrier does not have a health care provider in its network with the appropriate training and experience to meet the particular health care needs of an insured, health carriers are asked to make exceptions to provide access to an out-of-network provider at the in-network cost-sharing.

• Timely decision making is critically important to responding appropriately to COVID-19, and it is particularly important with respect to utilization review. Health carriers are reminded that utilization review decisions must be made in the timeframes required. Health carriers should not use preauthorization requirements as a barrier to access necessary treatment for COVID-19, and health carriers should be prepared to expedite utilization review and appeal processes for services related to COVID-19, when medically appropriate.

• Health carriers should, where appropriate, make expedited formulary exceptions if the insured is suffering from a health condition that may seriously jeopardize the insured’s health, life, or ability to regain maximum function or if the insured is undergoing a current course of treatment using a non-formulary prescription drug.

• Health carriers should identify and remove barriers to testing and treatment of COVID-19 and be prepared to address COVID-19 cases in Oklahoma. The Department extends its appreciation to health carriers in working with the State to address this public health challenge.

• Health carriers shall not cancel the coverage of any person who has been diagnosed with COVID-19 and is unable to return to work or maintain coverage under their current health carrier because of COVID-19 for the next ninety (90) days. Health carriers should extend the traditional thirty (30) day grace period to a sixty (60) day grace period for nonpayment of premiums. Federal rules governing marketplace policies (ACA) will remain in effect with respect to grace periods.
PHARMACY BENEFIT MANAGER

- Pharmacists writing “COVID-19” or substantially similar language on a prescription shall be equivalent to receiving a signature. The goal is to reduce requirements for face-to-face interactions. Pharmacy benefit managers should immediately cease all audits while the Declaration of Emergency is in place. Additionally, a sixty (60) day supply may be provided for a thirty (30) day prescription for maintenance drugs with appropriate copays. This does not apply to controlled substances. Further, all restrictions on pharmacies doing mail order should be waived.

- Pharmacy benefit managers and allied health providers are subject to price gouging laws. The Department will continue to work with the Attorney General to enforce them.

This Bulletin is intended to apply to all insured plans that are regulated by the Oklahoma Insurance Department, but it is strongly recommended that Oklahoma self-funded plans follow the same directives.

The provisions of this bulletin are in effect until the emergency is no longer in effect.

Oklahoma Insurance Department, 400 North East 50th St., Oklahoma City, OK 73105

Questions or comments applicable to this bulletin should be directed to Mike Rhoads or Ron Kreiter

mike.rhoads@oid.ok.gov
ron.kreiter@oid.ok.gov

About the Oklahoma Insurance Department
The Oklahoma Insurance Department, an agency of the State of Oklahoma, is responsible for the education and protection of the insurance-buying public and for oversight of the insurance industry in the state.