FOR IMMEDIATE RELEASE
March 10, 2020

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CMS Issues Guidance to help Medicare Advantage and Part D Plans Respond to COVID-19

Agency provides flexibility to Medicare Advantage and Part D plans to waive unnecessary barriers that could prevent access to care

Today, the Centers for Medicare & Medicaid Services (CMS) is taking further action to ensure patients have access to the critical healthcare services they need in the wake of the 2019 Novel Coronavirus (COVID-19) outbreak. Today, following a meeting with President Trump and Vice President Pence, many leading insurance companies and their industry associations announced they will be treating COVID-19 diagnostic tests as covered benefits and will be waiving cost sharing that would otherwise apply to the test. The President also directed CMS to provide more flexibility to Medicare Advantage and Part D plans to ensure they have the tools they need to provide seniors with the best coverage. As a result, CMS published a memorandum to Medicare Advantage (MA) and Part D health and prescription drug plans informing them of the flexibilities they have to provide healthcare coverage to Medicare beneficiaries for COVID-19 testing, treatments, and prevention.

“The President directed CMS to make sure Medicare Advantage beneficiaries have access to the healthcare services they need during this time,” said CMS Administrator Seema Verma. “Today we announced guidance to Medicare Advantage and Part D plans to remove barriers that could prevent or delay beneficiaries from receiving care. Medicare beneficiaries are at the greatest risk of serious illness due to COVID-19 and CMS will continue doing everything in our power to protect them.”

In the memorandum issued today, CMS outlines the flexibilities MA and Part D plans have to waive certain requirements to help prevent the spread of COVID-19. These flexibilities include:

- Waiving cost-sharing for COVID-19 tests
- Waiving cost-sharing for COVID-19 treatments in doctor’s offices or emergency rooms
- And services delivered via telehealth
Removing prior authorizations requirements
Waiving prescription refill limits
Relaxing restrictions on home or mail delivery of prescription drugs
Expanding access to certain telehealth services

These waivers break down barriers to beneficiaries accessing care and allow plans to work with pharmacies and providers to treat patients without burdensome requirements limiting their options during this outbreak.

This action is part of the broader effort by the White House Coronavirus Task Force to ensure that all Americans – particularly those at high-risk of complications from the COVID-19 virus – have access to the benefits that can help keep them healthy while helping to contain the spread of this disease. To keep up to date with the important work CMS is doing in response to COVID-19, please visit the Current Emergencies Website.


Summary of CMS’s COVID-19 response actions to date:

Summary of CMS Public Health Action on COVID-19 to date:

On March 9, 2020: CMS delivered guidance on the screening, treatment and transfer procedures healthcare workers must follow when interacting with patients to prevent the spread of COVID-19 in a hospice setting. CMS also issued additional guidance specific to nursing homes to help control and prevent the spread of the virus.


On March 9, 2020: CMS issued a press release highlighting the telehealth benefits in the agency’s Medicare program for use by patients and providers. Expanded use of virtual care, such as virtual check-ins, are important tools for keeping beneficiaries healthy, while helping to contain the community spread of the COVID-19 virus.


CMS published guidance to hospitals with emergency departments (EDs) on patient screening, treatment and transfer requirements to prevent the spread of infectious disease and illness, including COVID-19. Medicare-participating hospitals are to follow both CDC guidance for infection control and Emergency Medical Treatment and Labor Act (EMTALA) requirements.


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