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## What Happens to COVID-19 Coverage After May 11?

In preparation for the rapidly approaching end of the COVID-19 public health emergency (PHE) on May 11, the Centers for Medicare & Medicaid Services (CMS) released a useful publication (the Guide) at the end of February. The Guide, titled [\*What Do I Need to Know? CMS Waivers, Flexibilities, and the Transition Forward from the COVID-19 Public Health Emergency\*](#), outlines some initial changes that will go into effect once the PHE expires. The Guide covers four topics:

- COVID-19 vaccines, testing and treatments
- Telehealth services
- Continuing flexibility for healthcare professionals
- Inpatient hospital care in the home setting

One of the hot topics covered in the Guide is what happens to coverage for COVID-19-related expenses once the PHE ends. **It is clear that the availability of no-cost, over-the-counter COVID-19 tests will end with the end of the PHE—regardless of what kind of insurance or coverage an individual has.** The following is a summary of coverage for COVID-19-related expenses after the PHE ends, as outlined in the Guide.

	Vaccines	Testing	Treatment
Medicare	No-cost coverage for COVID-19 vaccinations will continue.	Coverage will continue for no-cost COVID-19 testing if ordered by certain healthcare providers (but note that Medicare Advantage plans may add cost-sharing obligations after the PHE ends).	COVID-19 treatment is subject to standard cost sharing.
Medicaid and the Children's Health Insurance Plan <sup>[1]</sup>	After 9/30/24, each state will determine coverage, but most states likely will continue to cover vaccines at no cost.	After 9/30/24, coverage will vary by state.	After 9/30/24, coverage will vary by state.
Commercial Insurance	Under the Affordable Care Act, most plans must continue to cover vaccines without cost sharing if provided by an in-network	Coverage and cost sharing will vary by plan.	There will be no change in coverage after the end of the PHE.

provider. There may be a cost-sharing requirement for vaccination by an out-of-network provider.

CMS makes clear that it anticipates *additional* guidance will be issued, so healthcare professionals and organizations should monitor the U.S. Department of Health & Human Services [website](#). [1] Under the American Rescue Plan Act of 2021, states must provide no-cost coverage for vaccines, testing and treatment until September 30, 2024 (approximately 16 months following the end of the PHE).

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For more Day Pitney alerts and articles related to the impact of COVID-19, as well as information from other reliable sources, please visit our [COVID-19 Resource Center](#). COVID-19 DISCLAIMER: As you are aware, as a result of the COVID-19 pandemic, things are changing quickly and the effect, enforceability and interpretation of laws may be affected by future events. The material set forth in this document is not an unequivocal statement of law, but instead represents our best interpretation of where things stand as of the date of first publication. We have not attempted to address the potential impacts of all local, state and federal orders that may have been issued in response to the COVID-19 pandemic.

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