

	Federal Requirements to Offer ACIP	Expected to cover COVID vaccine with no cost share	
	recommended vaccines without		
Insurance Product	cost sharing		
Commercial - Major Medical Plans Regulated as Health Insurance under Federal Law			
ACA-Compliant Individual     Includes Exchange (Marketplace)     Includes off-exchange ACA-compliant plans	Yes - ACA § 2713	Yes	
<ul> <li>Some Student Health Insurance</li> <li>ICHRAs – (even though employers fund)</li> <li>QSERAs – (even though employers fund)</li> </ul>			
ACA- Compliant Small Group Fully-Insured	Yes - ACA § 2713	Yes	
Small Group Self-Funded (ERISA)	Yes - ACA § 2713	Yes	
<ul> <li>Large Group - Includes:</li> <li>Fully insured</li> <li>Self-Insured (ERISA) – (Includes some student health)</li> <li>AHPs – (Includes some Farm Bureau)</li> </ul>	Yes - ACA § 2713	Yes	
Grandfathered Plans - can be large group, small group, individual	No	No*	
Grandmothered plans – can be small group or individual	Yes - ACA § 2713	Yes	
Expatriate Health Plans	No – exempted from most ACA market reforms	Provisions in FFCRA and CARES reference PHSA definitions, which include these plans – so likely will cover COVID vaccine	
Subtypes That Fall under the Types of Commercial Major Medical Coverage Listed Above			
HDHPs qualified for HSAs – Can be offered under large, small or individual markets	Yes - ACA § 2713	Yes	
AHPs - (even though individuals or small groups enroll, the plan follows large group rules)	See Large Group	Yes	
Individual coverage health reimbursement arrangements (ICHRAs)	See ACA-Compliant Individual	Yes	

Qualified small employer health	See ACA-Compliant	Yes	
reimbursement arrangements (QSEHRA)	Individual		
Student Health – Sometimes falls under ACA-	See ACA-Compliant		
compliant Individual and other times falls	Individual & Large	Yes	
under large group self-insured	Group Self-Insured		
Farm Bureau Plans – NOT Iowa	See Large Group	Yes	
	(AHPs)		
Commercial – Alternative Coverage			
Short-Term Limited Duration Insurance	No – State	No – State	
	regulations may	regulations may	
	apply	apply	
Health care sharing ministries	No - Not regulated as	No - Not regulated as	
	insurance	insurance	
Farm bureau plans - IOWA	No	No	
Direct primary care arrangements	Varies by state		
Commercial – Complimentary Products (not replacements for major medical)			
HIPAA-excepted benefit		No (but enrollee is	
	No	expected to have	
		other coverage)	
Government Programs			
TRICARE	No		
Medicare Advantage	No	Yes – CARES § 3713	
Medicare FFS	No	Yes – CARES § 3713	
Medicaid	No – varies by state	Children (yes); Adults	
		(varies by state)	
Medicaid Expansion	Yes - see 2013 CMS rulemaking	Yes	

<sup>\*</sup>From AHIP's outside counsel: while Congress did not expressly include grandfathered health plans in the CARES Act provision, with the broad definition included in the amendment, the fairly clear intent to make the offer of COVID vaccines widespread, and the ambiguity, it would not be unreasonable for the Tri-agencies to implement the vaccine coverage provision as applying to grandfathered plans.

Please note that even if a plan is not bound by federal law to cover ACIP recommended vaccines with or without cost sharing, states could create rules for coverage or the plans could choose to do so without laws mandating it.

## ACA § 2713

- "A group health plan and a health insurance issuer offering group or individual health insurance coverage shall, at a minimum, provider coverage for and shall not impose any cost sharing requirements for – ... (2) immunizations that have in effect a recommendation from the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention with respect to the individual involved."

#### CMS Rule 7/15/2013

- Preventive services are considered an essential health benefit, which apply to the new expansion population.

## **CARES § 3713**

- COVID-19 vaccine and its administration will be covered by Part B, where such deductible shall not apply with respect to a COVID-19 vaccine and its administration.
- COVID-19 vaccine and its administration will be covered by Medicare Advantage

#### **CARES § 4203**

- "...shall require group health plans and health insurance issuers offering group or individual health insurance to cover any qualifying coronavirus preventive service, pursuant to section 2713(a) of the Public Health Service Act. The requirement described in this subsection shall take effect with respect to a qualifying coronavirus prevention service on the specified date described in subsection (b)(2).
  - Qualifying Coronavirus Preventive Service: an item, service, or immunization that is
    intended to prevent or mitigate coronavirus disease 2019 and that is (A) an evidencebased item or service that has in effect a rating of "A" or "B" in the current
    recommendations of the USPSTF or (B) an immunization that has in effect a
    recommendation from ACIP of the CDC with respect to the individual involved.
  - Specified Date: The date that is 15 business days after the date on which a recommendation is made relating to the immunization as described in such paragraph.

#### Public Health Service Act § 291

Definitions of terminology regarding health plans

## CMS COVID-19 Fact Sheet

- Medicaid and CHIP cover recommended vaccines for children without cost sharing
- In states that have expanded Medicaid, states must cover preventive services including vaccinations without cost sharing for adults. States have flexibility to determine whether to provide coverage of vaccines for adults covered in other eligibility groups, like low-income parents.

# JAMA: State Policies on Access to Vaccination Services for Low-Income Adults

- 22 of 51 programs covered all 13 adult vaccines recommended by the ACIP for both fee-for-service and managed care organization enrollees.