

The End of the Public Health Emergency (PHE) for COVID-19 What does this mean for me and my family?

On January 30, 2023, the White House announced its plans to end the coronavirus public health emergency (PHE) in May. The PHE is scheduled to end on May 11, which will result in changes that will affect the access and cost to vaccines, tests, and treatment for COVID-19. This will also include changes to telehealth policies. During the pandemic, many of you received COVID tests, vaccines and treatments free of charge. When the emergency period ends on May 11, changes will occur on the availability and cost of the above. The White House did not want to end the PHE quickly and has given both patients and providers several months' notice to learn more about the upcoming changes. Below is information to help guide you during this transition. This will likely be the first of several announcements as information changes and/or is updated. We will notify you as soon as we know more.

Q: Does the end of the PHE mean that the pandemic is over? Do I still need to worry about COVID?

A: No, it does not. How science defines a pandemic and how a government defines one are not necessarily the same. According to the U.S. Department of Health and Human Services, daily cases have decreased. Hospitalizations and deaths have also decreased, but children and adults are still getting COVID, and it remains a public health issue. At this time, COVID is not interfering with our lives like it did at the start because many people have some protection from COVID, either through vaccination or from previously having COVID. Vaccines continue to be the most reliable way to protect you and your child from getting this virus. If your child has not been vaccinated, and you want your child vaccinated, please call us to schedule this appointment. If your child missed any other shots over the last three years, you could schedule those at the same time.

Q: How does the Food and Drug Administration play into this change? Does this also mean the emergency use authorization for vaccines by the FDA goes away?

A: No. The emergency use authorization for both vaccines and boosters will remain in effect. The EUA is not connected to the public health emergency that ends in May.

Q: What will change for me and my family after May 11 when it comes to getting COVID vaccinations or boosters for my child?

A: As long as federally funded vaccines are available, the cost of the vaccines, including boosters, will remain free to everyone, regardless of healthcare coverage. Most physicians charge an administration fee which covers the process of measuring and administering the vaccine, counseling the parent on potential side effects, answering questions, reviewing the vaccine information sheet, etc. This administrative fee has always been billed to the insurance company. At this time, we do not know if insurance will continue to cover the administrative fee after the end of the PHE. Also, no one knows how long the supply of federally funded vaccines will last.

Q: Can my pediatrician charge me for those vaccines after May 2023?

A: Again, as long as the federally purchased vaccines are available, there is no charge. This may not include an administration fee. Even after the federally purchased vaccine supply is gone, vaccines will continue to be free for most individuals with insurance. You may need to confirm with your insurance plan that vaccines are covered after the supply is gone. However, even if covered, you may still need to make a co-pay or deductible for the vaccine.

Q: I like to use at-home-tests for my children if I suspect COVID. What changes will occur with at-

home COVID tests?

A: After May 11 the at-home tests for COVID will not be free. You may have to make a co-pay or apply the cost to your deductible. If you want to have a supply on hand, you may want to visit your local pharmacy and pick up some tests before May 11. Be sure to look at the expiration dates on any tests you purchase.

Q: What about a PCR or rapid COVID test ordered by the pediatrician or other health care provider? A: Most individuals with insurance will still have coverage for tests ordered by the health care provider, but these tests may no longer be free. You may have to make a co-pay at time of testing or apply the cost to your deductible.

Q: Will I be required to pay for treatment once the public health emergency ends?

A: For those with insurance, there has always been a cost-sharing for COVID treatments provided in a hospital or outpatient setting. This will not change. You will still be responsible for a shared cost which will be dependent on your insurance plan.

Q: When will the supply of federally purchased vaccines, tests, and treatments be gone?

A: No one knows when that will happen. When it does, there may be further changes announced related to availability and cost. The White House has said that it does not plan to fund more vaccines, tests or treatments at this time.

Q: Will telehealth visits still be allowed for COVID after the end of the public health emergency ends?

A: According to the Kaiser Family Foundation, recent legislation will allow telehealth policies adopted during the pandemic to remain through December 31, 2024. Depending on your insurance plan, there may be some cost-sharing such as copays or deductibles that apply to telehealth visits.

Q: Will my child still be able to receive a prescription via a telehealth visit after the end of the PHE?

A: As of February 24, the federal government is proposing some restrictions on telehealth prescriptions for some drugs, if the provider has not seen the patient in-person. This may include prescriptions for attention deficit disorder, addictive painkillers, or prescriptions prescribed for mental/behavioral health problems. Currently, the proposed new rule would require a patient to see a provider at least once in-person to get a prescription for these types of medications. If your child was prescribed a medication via telehealth during the pandemic, your child must see a provider within 180 days after the end of the public health emergency to receive a refill. Patients will still be able to get medications such as refills, insulin, and skin creams through a telehealth visit. A decision has not been made about whether a patient can be seen via telehealth when out-of-state, which was allowed during the pandemic. This could affect a child who is on vacation and becomes ill, or a college student attending an out of state university. The American Academy of Pediatrics is working with the Drug Enforcement Agency (DEA) to make sure that children and teens are not left out of the discussion about these changes. As May 11th approaches, we should know more about the future of telehealth visits-its continued expansion, well as the limitations. Stay tuned for more information about this very important healthcare option.