

Why use this report...

Stay informed about potential COVID-19 claims activity and volume with insights from the Weekly COVID-19 Update.

In advance of the detailed Monthly Analytic Report, on a weekly basis you will have insight into Coronavirus-related data including:

- Weekly test volume
- Weekly claimants
- Adjudicated claim amounts

In addition, the weekly update provides information on:

- Telemedicine related claims (COVID-19 as well as non-COVID related services)
- Overall medical claim activity

Weekly Updates contain high level information on overall claims and telemedicine claims (both Coronavirus and non-Coronavirus) to provide insight into pattern changes. COVID-19 Monthly Reports more fully explore the types of services and population being impacted during the pandemic. We will continue to refine and expand the data within these views as we monitor changes that may impact the analysis.

Additional Resources....

You can find more information on COVID-19 at these links

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

<https://www.cdc.gov/coronavirus/2019-ncov/about/steps-when-sick.html>

<https://www.aetna.com/individuals-families/member-rights-resources/covid19.html>



Things to consider when reviewing the data...

Reporting is based on the primary diagnosis code on a claim

Standard codes and coding guidance have rapidly evolved. While health care institutions adjust to new codes and coding changes, claims may be understated based on:

- Provider variance in understanding billing guidance
- Inability to confirm diagnosis due to testing limitations
- Test results received by provider post-claim submission
- No claim submission (e.g., testing covered by public health entity or inpatient)
- Claim submission prior to the introduction of COVID-19 specific ICD-10 codes

Claim counts in this report represent the number of claims processed each week. If a claim is paid in one week and then adjusted in a subsequent week, the claim will be counted in each week

What codes are used in the weekly update.....

The following diagnoses and procedures are used to identify likely COVID-19 related claims in this update:

COVID-19- Specific Diagnosis Codes - New World Health Organization codes for COVID-19 cases released April 1, 2020. Widespread adoption expected to take time:
U07.1 - COVID-19 confirmed cases
U07.2 - Unconfirmed suspected cases not expected to be billed.

Coronavirus Diagnosis Codes - Providers were guided to bill these in the initial outbreak:
B97.29 - Other coronavirus as the cause of diseased
B34.2 - Coronavirus infection, unspecified

Exposure Diagnosis Codes - Pre-existing codes used for COVID-19 screenings and for non-confirmed/non-presumptive cases. Because these codes may also be used for suspected exposure to other biological agents and viral communicable diseases, some billing may be for non-COVID related scenarios:
Z03.818 - Suspected exposure to other biological agents ruled out
Z20.828 - Exposure to other viral communicable diseases

Testing Procedure Codes - Codes used to identify COVID-19 and antibody testing: **86328, 87426, 87635, 86769, C9803, 0202U, 0223U, 0224U, U0001, U0002, U0003, U0004, G2023, G2024**

Telemedicine - Metrics include Teladoc as well as community based providers performing approved telemedicine services

These codes represent our current best efforts to identify likely COVID-19 activity, reflected in this update.

COVID-19 population alerts

Hot Spots In the United States - Map (to the right)

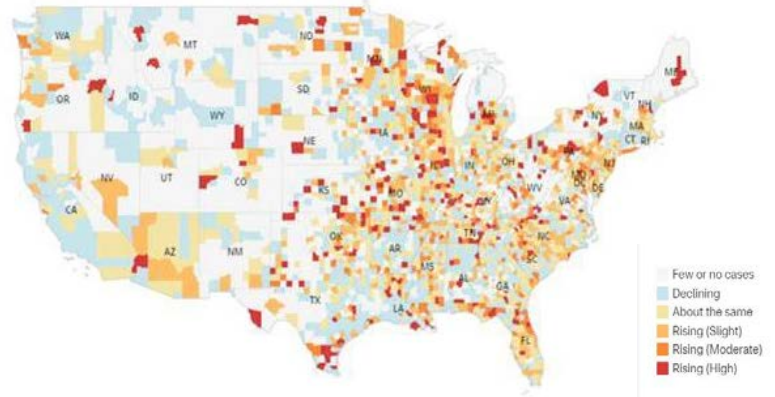
The map shows how the number of new cases have CHANGED in the last two weeks across the U.S. (not plan sponsor-specific). This provides an indication of which direction the level of new cases is trending.

County Alerts (below)

The tables below show the average daily new cases per 100,000 individuals by county over the past 7 days. These rates are reflective of the overall population of the county, not of your specific membership. We are providing this information to inform you where you have membership in counties that are experiencing a high or emerging rate of new cases.

The CDC collects new case counts at the county level. We are using this information to calculate a "7 day average new case count." This data is then normalized for population size (new cases per 100,000 individuals) to smooth unusual daily highs or lows, often caused by data collection fluctuations.

The county information below is for your top 25 counties (by membership) which have been identified as having either a high (>25) or emerging (10-24) average daily case rate. Note: There could be less than 25 counties in the tables or none at all if the alert criteria is not met in counties where you have membership.



Heat map of recent growth by county: This map shows the average growth between the last seven days and the previous seven days. Brown colors indicate an increasing trend while cool colors indicate a decreasing trend. Few or no cases indicates less than 20 new cases in the past 2 weeks.

Other colors in the legend are determined by % change in new cases in the past 2 weeks:

Declining <=-15%; **About the same** <15% and >=15%; **Rising (Slight)** >=15% and <50%; **Rising (Moderate)** >=50% and <100%; **Rising (High)** >=100%

Last Updated: 9/7/2020 | Source: John Hopkins Data/CDC

High risk counties (red) had greater than 25 daily new cases per 100,000 individuals last week
Emerging risk counties (orange) had between 10 and 25 daily new cases per 100,000 individuals last week

Scroll to the end of this report for a list of the top 50 counties with the highest average daily new case counts where you have membership

High Risk (>=25 new cases per 100,000 individuals)*

State, County	County population	Your members	Avg daily new cases per 100K
GA, Barrow	69,367	1	33.2

Emerging Risk (10-24 new cases per 100,000 individuals)*

State, County	County population	Your members	Avg daily new cases per 100K
DE, New Castle	538,479	13	12.3
FL, Lee	618,754	5	11.5
TN, Sumner	160,645	4	17.6
TN, Montgomery	172,331	4	10.6
TN, Robertson	66,283	4	22.0
FL, Brevard	543,376	4	11.4
FL, Citrus	141,236	4	23.5
FL, Flagler	95,696	3	15.2
GA, Camden	50,513	3	23.2
SC, Horry	269,291	3	11.9
TX, Harris	4,092,459	3	20.1
AZ, Pima	980,263	2	10.2
FL, Palm Beach	1,320,134	2	13.0
FL, Hernando	172,778	2	15.5
NC, Forsyth	350,670	1	10.7
MD, Prince George's	863,420	1	12.7
GA, Fulton	920,581	1	12.9
FL, Polk	602,095	1	21.5
FL, Highlands	98,786	1	12.7
AL, Shelby	195,085	1	17.4
NV, Clark	1,951,269	1	15.3
FL, Orange	1,145,956	1	16.3

* Counties with less than 20 new cases in the prior week will not appear in this report. New case data is not available for approximately thirty counties. County population is based on 2010 Census data. "Your members" represents your total Aetna self-insured membership.

COVID-19 Claims Activity

What claims have been adjudicated for COVID-19 related diagnoses and/or testing?

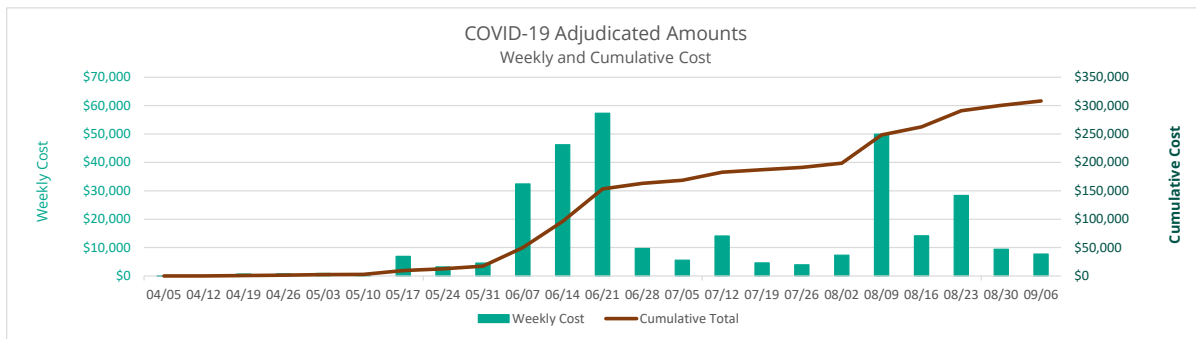
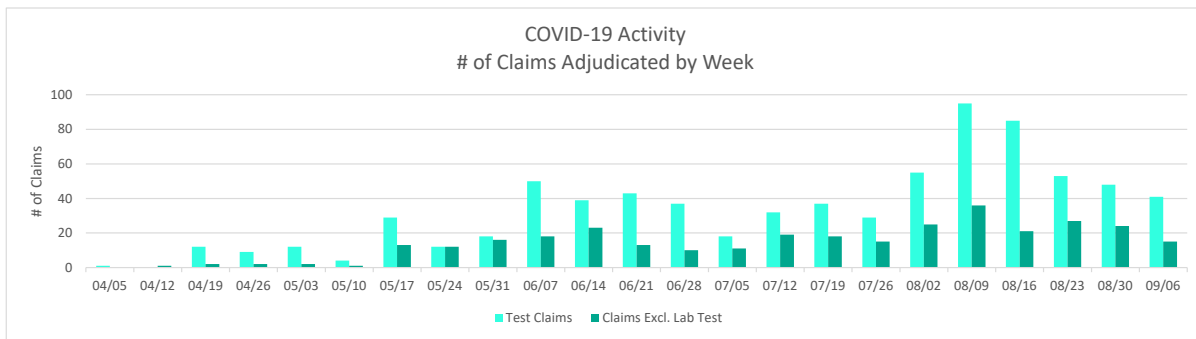
Use these insights to:

- ✓ Monitor estimated weekly plan expenses associated with COVID-19
- ✓ Understand the relative impact on overall claim spend

At a glance

	COVID-19 paid	# of Tests	Unique Claimants Excluding Lab Tests	Unique Claimants Lab Tests
Current Week	\$7,702	41	14	40
3/1 - 9/06	\$308,232	759	200	562

How does this week compare to previous weeks?



Telemedicine Monitor

What is the recent Telemedicine claims activity?

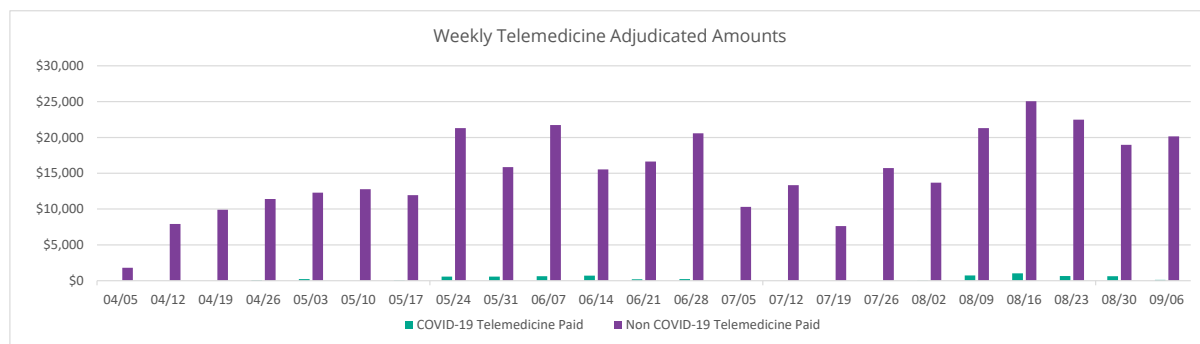
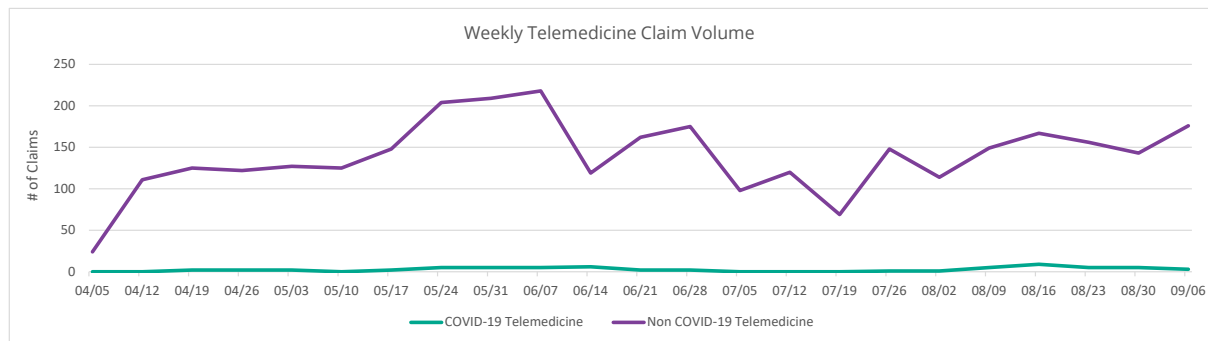
Use these insights to

- ✓ Review monthly growth of both Teladoc and community based providers providing approved telemedicine services
- ✓ Understand trends driven by COVID-19 related claims verses overall utilization for non-virus related conditions

At a glance

	COVID-19 telemedicine paid	Non COVID-19 telemedicine paid	COVID-19 telemedicine claims	Non COVID-19 telemedicine claims
Current Week	\$110	\$20,160	3	176
3/1 - 9/06	\$6,472	\$349,750	62	3,225

How is Telemedicine changing over time?



Total Weekly Adjudicated Claims

What is the overall adjudicated claim activity on a weekly basis?

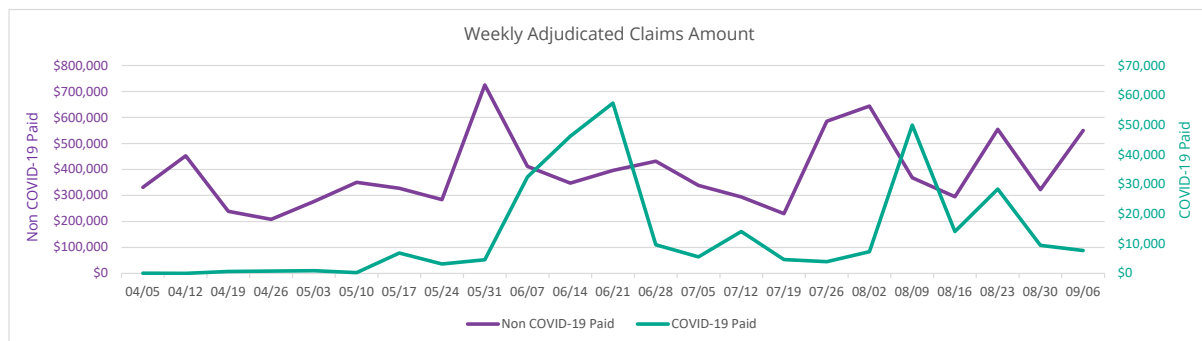
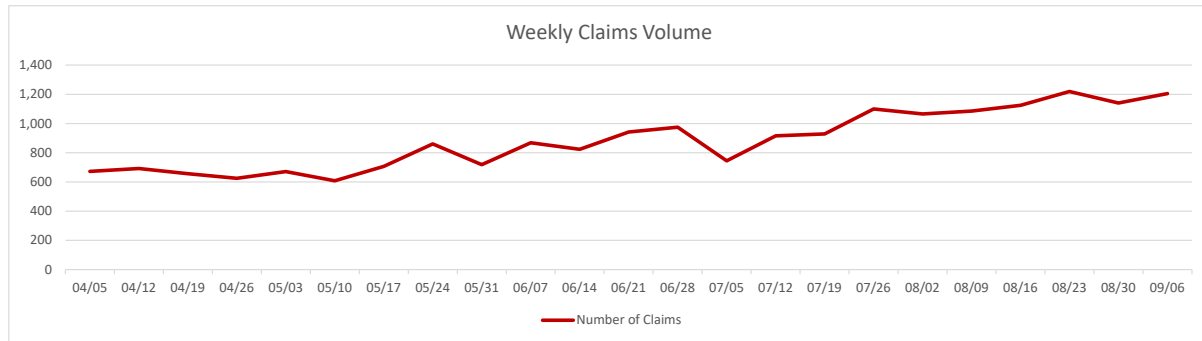
Use these insights to:

- ✓ Monitor weekly changes in claim levels for COVID-19 vs. other claim expenses
- ✓ Review how weekly claims are trending compared to anticipated levels or prior year experience

At a glance

Total paid (current week)	Total claims (current week)	Current week paid (change from last week)	COVID-19 % of total paid (3/1 - 9/06)
\$557,931	1,205	68.0%	2.7%

How does this week compare to previous weeks?



By the numbers

What are the COVID-19 activity details by week?

Week Ending	# of Claimants*			# of Claims			Adjudicated Amount		
	Non-tests	Tests	Total	Non-tests	Tests	Total	Non-tests	Tests	Total
03/08	0	0	0	0	0	0	\$0	\$0	\$0
03/15	0	0	0	0	0	0	\$0	\$0	\$0
03/22	0	0	0	0	0	0	\$0	\$0	\$0
03/29	0	0	0	0	0	0	\$0	\$0	\$0
04/05	0	1	1	0	1	1	\$0	\$51	\$51
04/12	1	0	1	1	0	1	\$25	\$0	\$25
04/19	2	12	14	2	12	14	\$0	\$680	\$680
04/26	2	9	11	2	9	11	\$85	\$674	\$759
05/03	2	12	14	2	12	14	\$233	\$680	\$913
05/10	1	4	5	1	4	5	\$45	\$205	\$250
05/17	6	29	35	13	29	42	\$4,253	\$2,637	\$6,890
05/24	9	12	21	12	12	24	\$2,090	\$1,106	\$3,196
05/31	8	18	26	16	18	34	\$2,877	\$1,699	\$4,576
06/07	14	48	62	18	50	68	\$29,076	\$3,370	\$32,446
06/14	20	39	59	23	39	62	\$43,049	\$3,160	\$46,209
06/21	12	41	53	13	43	56	\$53,551	\$3,789	\$57,341
06/28	8	36	44	10	37	47	\$6,305	\$3,362	\$9,667
07/05	10	18	28	11	18	29	\$4,060	\$1,519	\$5,580
07/12	18	31	49	19	32	51	\$10,951	\$3,129	\$14,079
07/19	18	36	54	18	37	55	\$1,650	\$2,995	\$4,645
07/26	13	29	42	15	29	44	\$1,509	\$2,430	\$3,940
08/02	25	55	80	25	55	80	\$2,453	\$4,892	\$7,344
08/09	30	90	120	36	95	131	\$41,690	\$8,266	\$49,956
08/16	19	79	98	21	85	106	\$5,945	\$8,192	\$14,137
08/23	25	49	74	27	53	80	\$23,315	\$5,082	\$28,397
08/30	24	45	69	24	48	72	\$5,244	\$4,207	\$9,451
09/06	14	40	54	15	41	56	\$3,962	\$3,740	\$7,702
Total				324	759	1,083	\$242,368	\$65,864	\$308,232

* Claimants are unique to the individual week, so the same individual may be counted in multiple weeks

IMPORTANT: Testing and treatment for the new coronavirus is still evolving and as a result claims experience may be effected as the industry adapts to the changing circumstances. Information is believed to be accurate as of the production date; however, it is subject to change. Aetna makes no representation or warranty of any kind, whether express or implied, with respect to the information in this report and cannot guarantee its accuracy or completeness. Aetna shall not be liable for any act or omissions made in reliance on the information.

Appendix:

Alerts for the top 50 counties with high new cases rates in which you have membership

State, County	County population	Your members	Avg. daily new cases per 100K	Risk Level
GA, Barrow	69,367	1	33.2	High Risk
FL, Citrus	141,236	4	23.5	Emerging Risk
GA, Camden	50,513	3	23.2	Emerging Risk
TN, Robertson	66,283	4	22.0	Emerging Risk
FL, Polk	602,095	1	21.5	Emerging Risk
TX, Harris	4,092,459	3	20.1	Emerging Risk
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AZ, Pima	980,263	2	10.2	Emerging Risk

County Alerts

This table shows the rate of average daily new cases per 100,000 individuals by county. These rates are reflective of the overall general population of the county, not of your specific membership in that county. We are providing this information to inform you which counties you have membership in that are experiencing a high incidence rate of new cases.

The CDC collects new case counts at the county level. We use this information to calculate a '7 day average new case count.' This data is then normalized for population size (new cases per 100,000 individuals) to smooth unusual daily highs or lows, often caused by data collection fluctuations.

The county information is for your top 50 counties in which you have membership that have the highest average daily new cases over the past seven days. Average daily new cases of 25 per 100k members are denoted as high risk (red) and those with 10-24.9 are denoted as emerging risk (orange).

Note: There may be less than 50 counties or none at all depending upon where you have membership vs .the counties with the highest risk. Counties with less than 20 new cases will not appear in this list.