



1200 Washington Ave, Bay City, Michigan 48708  
<http://www.baycounty-mi.gov/Health>

989-895-4009, PHONE  
989-895-2083, FAX  
989-895-4049, TDD

James A. Barcia  
Bay County Executive

Joel R. Strasz  
Public Health Officer

Thomas John Bender, MD, PhD  
Medical Director

## FOR IMMEDIATE RELEASE

To: All Media  
From: Joel Strasz, Public Health Officer – Bay County Health Department  
Date: May 11, 2023  
Re: **Bay County Health Department Provides Information About the End of the Public Health Emergency Declaration for COVID-19**

**BAY COUNTY, MICHIGAN** – On May 11, 2023, the Public Health Emergency (PHE) Declaration for COVID-19 will end. There are a number of health policies that will change and others that will remain in effect past the May 11 date.

**COVID-19 vaccines changes:** Private plans/issuers are no longer required to cover COVID-19 vaccines without cost-sharing even when out-of-network, BUT, for consumers, vaccines are still free of charge while federal supplies last. The 100% federal Medicaid matching payments for vaccine administration will end after September 2024; then healthcare providers will receive regular matching payments. What remains the same: As long as the supply of federal purchased vaccines last, COVID-19 vaccines will remain free to all. After supply is gone, vaccines will remain free to almost everyone with private and public insurance (with some cost-sharing for out-of-network). Those who are uninsured will no longer have guaranteed free access to vaccines.

**COVID-19 at-home tests changes:** The end of the eight free tests per month for those with private insurance and Medicare (insurers, including Medicare Advantage plans, may choose to cover home tests, although traditional Medicare cannot). People on Medicaid will continue to receive free tests through September 2024; and then after that date, coverage will be variable by state. Temporary Medicaid option to provide uninsured with free COVID-19 tests will end. What remains the same: The uninsured in most states will continue to have to pay for at-home tests unless they were able to access federally purchased tests (no one can be charged for federally purchased tests).

**COVID-19 provider-ordered tests changes:** Although most insured people will still have coverage for COVID tests ordered or administered by a health professional, they may face cost-sharing for tests or testing-related services and there could be new limits. People on Medicaid will continue to receive free tests with no cost-sharing through September 2024; then cost-sharing will be variable by state. The Temporary Medicaid option to provide uninsured with free COVID-19 tests will end. What remains the same: Traditional Medicare beneficiaries will continue to receive provider-ordered tests at no-cost (though there may be cost-sharing for a visit). The uninsured in most states will continue to have to pay for tests unless they were able to access federally purchased tests (no one can be charged for federally purchased tests).

**COVID-19 treatment changes:** Medicare beneficiaries may face cost-sharing for certain treatments (unless due to federal supply). People covered by Medicaid and CHIP programs will continue to receive treatments at no-cost through September 2024; and then after that date, these treatments will continue to be covered, but limits on usage and a copay on some treatments may take place. The Temporary Medicaid option to provide uninsured people with free COVID-19 treatments will end. The 20% Medicare payment increase for COVID-19 hospitalizations will end. The end to Medicare COVID-19 treatment Ad-on payments after September 30, 2023. What remains the same: Any treatment doses (e.g., Paxlovid)

purchased by the federal government are still free to all, regardless of insurance coverage. Most insured people already face cost-sharing for hospitalizations and outpatient visits related to COVID treatment. After federal supply is gone, uninsured will no longer have guaranteed access and have to pay out of pocket for treatments.

COVID-19 telehealth changes: In-person visits will be required to receive prescriptions for controlled substances, and healthcare providers will most likely need to be licensed in the state where the patient is located. Temporary waiver of penalties against providers using technologies that do not comply with federal privacy and security rules (i.e., HIPAA) in the provision of telehealth services will end. What remains the same: Medicare beneficiaries will have access to expanded telehealth coverage through December 31, 2024. Private coverage varies, though most private insurers already covered telehealth before the pandemic. Medicaid beneficiaries in most states have made, or plan to make, access to expanded telehealth coverage permanent.

CDC recommendations for individuals still includes isolating from others when you are sick and monitoring for signs of illness if you had a known exposure. Individuals who experience COVID-19 symptoms should continue to take precautions and seek medical care and treatment as appropriate. COVID-19 is a communicable disease that will continue to be monitored and investigated across the US, and mitigation measures are still required to ensure employers and schools keep employees and community members safe. Hospital case data, death rates, and wastewater monitoring data will continue to be collected in order to monitor the effectiveness of on-going prevention and control strategies. CDC guidance for individuals sick with COVID-19 are found on the [CDC Isolation and Precautions for People with COVID-19 webpage](#).

To learn more about the end of the PHE, visit: <https://www.kff.org/policy-watch/the-end-of-the-covid-19-public-health-emergency-details-on-health-coverage-and-access/>. To view a fact sheet by the U.S. Department of Health and Human Services, visit: <https://www.hhs.gov/about/news/2023/02/09/fact-sheet-covid-19-public-health-emergency-transition-roadmap.html>.

During this time of change, the Bay County Health Department will continue to provide updated guidance and resources to help individuals and communities stay healthy and safe.

If you have questions about the end of the PHE or any of our services, please contact the Bay County Health Department at (989) 895-4009, Monday through Friday, 8am-5pm, or on Facebook or Instagram @BayCountyHD.

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