



COVID-19 Testing: Requirements for Price Disclosure and Patient Protections



NAFEC

National Association of
FREESTANDING
Emergency Centers

Requirements Imposed by Families First Coronavirus Relief Act

1. Insurers may NOT charge a copay to privately insured patients for the COVID test ([Sec. 6001](#))
2. Coverage must be provided without imposing any cost-sharing requirements, prior authorization, or other medical management requirements ([Sec. 6001](#))
3. States have the option to provide coverage for uninsured individuals ([Sec. 6004](#))
4. Public Health and Social Services Emergency Fund provides reimbursement for testing uninsured individuals ([Title V](#) of FFCRA and [Title B of the Paycheck Protection Program and Health Care Enhancement Act](#))

Requirements Imposed by the CARES Act

1. Providers must clearly publicize cash price of COVID test on website (or be subject to civil monetary penalties up to \$300 per day while the violation is ongoing) ([Sec. 3202](#))
2. The negotiated rate, if there was one before the pandemic, is applicable during the duration of the public health crisis ([Sec. 3202](#))
3. If the provider does not have a negotiated rate with the insurer, the insurer must reimburse the provider the equivalent of the cash price listed on the provider's website ([Sec. 3202](#))
 - The insurer and provider may negotiate a rate that is less than the listed cash price

Recent State Legislation and Rules related to Freestanding Emergency Center Compliance

- **Facilities are reminded they must also comply with state laws for emergency services provided in conjunction with a COVID-19 test: FEC disclosure of rates, “unconscionable charges”, medical screening and prudent layperson**
- **Freestanding Emergency Center Disclosures**
 - Texas HB 2041 from 2019 require freestanding emergency medical care facilities to post their chargemasters online or provide to patient a range of fees in conjunction with the medical screening exam.
 - An updated disclosure form must be online and inside the facility that clearly states network status, billing procedures, etc.
 - The Bill can be found [here](#).
- **Unconscionable Charges**
 - Texas HB 1941 from 2019 regarding unconscionable prices charged by certain health care facilities, including freestanding emergency centers, for medical care.
 - The full text can be [found here](#)

Recent State Legislation and Rules related to Freestanding Emergency Center Compliance Cont.

- **Medical Screening Exams**

- All FECs shall provide, without regard to the individual's ability to pay, an appropriate medical screening, examination, and stabilization within the facility's capability to determine whether an emergency medical condition exists and any necessary stabilizing treatment.
- This statute can be found [here](#).

- **Prudent Layperson Standard**

- Emergency care is defined as health care services provided in a [freestanding emergency medical care facility](#) to evaluate and stabilize a medical condition of a recent onset and severity, including severe pain, that would lead a prudent layperson possessing an average knowledge of medicine and health to believe that the person's condition, sickness, or injury is of such a nature that failure to get immediate medical care could result in placing the person's health in serious jeopardy



Additional FAQ Documents

- **FAQS about Families First Coronavirus Response Act and Coronavirus Aid, Relief, and Economic Security Act Implementation Part 43**
 - Provides information on requirements providers must follow regarding COVID-19 testing and reimbursement for COVID-19 tests
- **FAQs for COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing and Treatment of the Uninsured**
 - Outlines the requirements to obtain funding for testing uninsured patients
- **COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing and Treatment of the Uninsured**
 - Outlines requirements for reimbursement for testing uninsured individuals
 1. Must check to verify the patient is uninsured
 2. Accept defined program reimbursement as payment in full
 3. Agree to not balance bill
 4. Must agree to program terms and conditions and may be subject to post-review audit

