

116TH CONGRESS  
2D SESSION

# H. R. 6263

To amend title XVIII of the Social Security Act to waive cost sharing under the Medicare program for certain visits relating to testing for COVID–19.

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## IN THE HOUSE OF REPRESENTATIVES

MARCH 12, 2020

Mr. SARBANES (for himself, Mr. DANNY K. DAVIS of Illinois, and Mr. COURNEY) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To amend title XVIII of the Social Security Act to waive cost sharing under the Medicare program for certain visits relating to testing for COVID–19.

1       *Be it enacted by the Senate and House of Representa-  
2 tives of the United States of America in Congress assembled,*

3       **SECTION 1. WAIVING COST SHARING UNDER THE MEDI-  
4 CARE PROGRAM FOR CERTAIN VISITS RELAT-  
5 ING TO TESTING FOR COVID–19.**

6       (a) IN GENERAL.—Section 1833 of the Social Secu-  
7 rity Act (42 U.S.C. 1395l) is amended—

- 1                             (1) in subsection (a)(1)—  
2                                 (A) by striking “and” before “(CC)”; and  
3                                 (B) by inserting before the period at the  
4                                 end the following: “, and (DD) with respect to  
5                                 a specified COVID–19 testing-related service  
6                                 described in paragraph (1) of subsection (cc)  
7                                 for which payment may be made under a speci-  
8                                 fied outpatient payment provision described in  
9                                 paragraph (2) of such subsection, the amounts  
10                                 paid shall be 100 percent of the payment  
11                                 amount otherwise recognized under such respec-  
12                                 tive specified outpatient payment provision for  
13                                 such service.”;  
14                             (2) in subsection (b), in the first sentence—  
15                                 (A) by striking “and” before “(10)”; and  
16                                 (B) by inserting before the period at the  
17                                 end the following: “, and (11) such deductible  
18                                 shall not apply with respect to any specified  
19                                 COVID–19 testing-related service described in  
20                                 paragraph (1) of subsection (cc) for which pay-  
21                                 ment may be made under a specified outpatient  
22                                 payment provision described in paragraph (2)  
23                                 of such subsection”; and  
24                             (3) by adding at the end the following new sub-  
25                                 section:

1       “(cc) SPECIFIED COVID–19 TESTING-RELATED  
2 SERVICES.—For purposes of subsection (a)(1)(DD):

3           “(1) DESCRIPTION.—

4              “(A) IN GENERAL.—A specified COVID–  
5              19 testing-related service described in this para-  
6              graph is a medical visit that—

7                  “(i) is in any of the categories of  
8              HCPCS evaluation and management serv-  
9              ice codes described in subparagraph (B);

10                 “(ii) is furnished during any portion  
11              of the emergency period defined in section  
12              1135(g)(1)(B) beginning on or after the  
13              date of the date of the enactment of this  
14              subsection; and

15                 “(iii) results in an order for or admin-  
16              istration of an in vitro diagnostic product  
17              (as defined in section 809.3(a) of title 21,  
18              Code of Federal Regulations) administered  
19              during any portion of such emergency pe-  
20              riod beginning on or after the date of the  
21              enactment of this subsection for the detec-  
22              tion of SARS-CoV-2 or the diagnosis of  
23              the virus that causes COVID-19 that is  
24              approved, cleared, or authorized under sec-

tion 510(k), 513, 515, or 564 of the Federal Food, Drug, and Cosmetic Act.

**(B) CATEGORIES OF HCPCS CODES.**—For purposes of subparagraph (A), the categories of HCPCS evaluation and management services codes are the following:

7                             “(i) Office and other outpatient serv-  
8                             ices.

9 “(ii) Hospital observation services.

10 “(iii) Emergency department services.

11 “(iv) Skilled nursing facility services.

12                                 “(v) Domiciliary, rest home, or custo-  
13                                 dial care services.

## 14 “(vi) Home services.

15               “(2) SPECIFIED OUTPATIENT PAYMENT PROVI-  
16               SION.—A specified outpatient payment provision de-  
17               scribed in this paragraph is any of the following:

18               “(A) The hospital outpatient prospective  
19 payment system under subsection (t).

“(B) The physician fee schedule under section 1848.

22                   “(C) The prospective payment system de-  
23 veloped under section 1834(o).

“(D) Section 1834(g), with respect to an outpatient critical access hospital service

1                 “(E) The payment basis determined in  
2 regulations pursuant to section 1833(a)(3) for  
3 rural health clinic services.”.

4                 (b) CLAIMS MODIFIER.—The Secretary of Health  
5 and Human Services shall provide for an appropriate  
6 modifier (or other identifier) to include on claims to iden-  
7 tify, for purposes of subparagraph (DD) of section  
8 1833(a)(1), as added by subsection (a), specified COVID–  
9 19 testing-related services described in paragraph (1) of  
10 section 1833(cc) of the Social Security Act, as added by  
11 subsection (a), for which payment may be made under a  
12 specified outpatient payment provision described in para-  
13 graph (2) of such subsection.

14                 (c) IMPLEMENTATION.—Notwithstanding any other  
15 provision of law, the Secretary of Health and Human  
16 Services may implement the provisions of, including  
17 amendments made by, this section through program in-  
18 struction or otherwise.

