

116TH CONGRESS
2D SESSION

S. 4745

To prevent surprise medical bills with respect to COVID–19 testing.

IN THE SENATE OF THE UNITED STATES

SEPTEMBER 29, 2020

Ms. SMITH (for herself, Mrs. MURRAY, Mrs. SHAHEEN, Ms. HIRONO, Ms. HASSAN, and Ms. KLOBUCHAR) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To prevent surprise medical bills with respect to COVID–
19 testing.

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. SHORT TITLE.**

4 This Act may be cited as the “Stop COVID–19 Test
5 Surprise Medical Bills Act of 2020”.

6 **SEC. 2. MEDICAL MANAGEMENT.**

7 Section 6001 of the Families First Coronavirus Re-
8 sponse Act (Public Law 116–127) is amended by adding
9 at the end the following:

1 “(e) **MEDICAL MANAGEMENT.**—For purposes of this
 2 section, the term ‘medical management’ includes deter-
 3 minations about why an individual sought testing, the na-
 4 ture of the clinical assessment that was associated with
 5 the testing, whether the individual was showing symptoms,
 6 what provider ordered the testing, the frequency of testing
 7 obtained by the individual, and other reviews of the en-
 8 counters or events that proceeded or followed a service de-
 9 scribed in subsection (a). Such term does not include rea-
 10 sonable efforts by a group health plan or health insurance
 11 issuer to encourage individuals to obtain tests from lower
 12 priced providers (provided that such reasonable efforts do
 13 not delay or otherwise impede access to testing).”.

14 **SEC. 3. IMPROVEMENTS TO TRANSPARENCY POLICY.**

15 (a) **IN GENERAL.**—Section 3202 of the CARES Act
 16 (Public Law 116–136) is amended by adding at the end
 17 the following:

18 “(c) **IMPROVEMENTS TO TRANSPARENCY POLICY.**—
 19 Not later than 30 days after the date of enactment of this
 20 subsection, the Secretary of Health and Human Services
 21 shall survey a sample of providers of the items and serv-
 22 ices described in section 6001(a) of division F of the Fam-
 23 ilies First Coronavirus Response Act (Public Law 116–
 24 127) regarding the cash prices for such items and services
 25 as listed by the providers on a public internet website. The

1 Secretary shall survey no fewer than 200 providers rep-
2 resenting a diversity of sizes, geographic locations, test
3 types, and care settings (such as hospitals, laboratories,
4 and free-standing emergency rooms).

5 “(d) PUBLIC REPORT.—Not later than 45 days after
6 the date of enactment of this subsection, the Secretary of
7 Health and Human Services shall publish a report on cash
8 prices for items and services published under subsection
9 (b)(1), which shall include—

10 “(1) the compliance rate of providers with the
11 cash price publication requirement under subsection
12 (b)(1);

13 “(2) the average cash price for each item and
14 service described in section 6001(a) of division F of
15 the Families First Coronavirus Response Act (Public
16 Law 116–127) and published under subsection
17 (b)(1);

18 “(3) with respect to each such item and service,
19 a comparison of such average cash price to the reim-
20 bursement rate under the Medicare program under
21 title XVIII of the Social Security Act (42 U.S.C.
22 1395 et seq.); and

23 “(4) any outlier cash prices published under
24 subsection (b)(1) (including the names of the pro-

1 viders charging such prices) that substantially ex-
2 ceed the average cash price.”.

3 **SEC. 4. GUIDANCE ON BILLING FOR PROVIDER VISITS AS-**
4 **SOCIATED WITH COVID-19 TESTING.**

5 The Secretary of Health and Human Services, the
6 Secretary of Labor, and the Secretary of the Treasury,
7 shall jointly issue guidance, not later than 30 days after
8 the date of enactment of this Act for purposes of clari-
9 fying—

10 (1) the process for submitting claims for items
11 and services described in section 6001(a) of the
12 Families First Coronavirus Response Act (Public
13 Law 116–127) to ensure that individuals enrolled in
14 individual or group health insurance coverage or
15 group health plans to whom such items and services
16 are furnished are not subject to cost-sharing or prior
17 authorization or other medical management require-
18 ments; and

19 (2) that providers should not collect cost-shar-
20 ing amounts from individuals seeking items and
21 services described in section 6001(a) of such Act.

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