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CMS issues guidance on coronavirus coverage

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Coronavirus tests| CDC via AP

WASHINGTON — CMS released information detailing how government health programs and certain plans will cover coronavirus-related services.

The agency also developed an additional code that labs can use to bill for coronavirus diagnostic tests not made by CDC, which CMS says will help boost testing and tracking of new cases.

Medicare will cover diagnostic tests on or after Feb. 4 for the coronavirus test, and the health program for the elderly also covers medically necessary hospitalizations, virtual “check-ins” and more.

Under Medicaid, coverage standards vary by state although they tend to be covered. However, children are able to receive all medically necessary testing and diagnostic services and recommended vaccines are covered without cost-sharing, CMS said.

In the new guidance, CMS reiterates that Obamacare plans will generally have to cover lab tests — with the caveat that states don’t all require the same standard of benefits and some people may see cost-sharing if the insurers haven’t waived co-pays for the tests.

Some insurers have already said they [would waive cost-sharing](#) for the tests. However, CMS notes that large employer plans don’t have to follow Obamacare’s rules — so patients with those plans may not be covered, or may be on the hook for a co-pay.

The agency hasn’t decided whether a vaccine would be free under Obamacare’s rules for covering preventive treatment, but said officials would offer new guidance if and when a vaccine hits the market.

Hospital costs associated with coronavirus treatment will also vary by state and by plan, CMS said, even though emergency care and hospitalization fall under the ACA’s essential health benefits.

On telehealth, Medicare pays for “virtual check-ins” for patients consulting practitioners they already know, given certain restrictions on time and content, CMS said. It also pays for communication through patient portals.

Medicare patients treated at rural health facilities may be covered for full virtual visits. Medicaid and CHIP telehealth coverage is determined by states.

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