HRSA Releases Additional Resources on COVID-19 Uninsured Testing/Treatment Reimbursement

The Health Resources and Services Administration (HRSA) this week hosted webinars for health care providers on the agency’s COVID-19 Uninsured Program Portal. During the webinars, representatives from HRSA and United Health Group, the portal administrator, reviewed the process for submitting claims through the portal. They also announced the release of a number of new resources, including an interactive user guide, a provider checklist for claims reimbursement, and guides on Optum Pay™ direct deposit enrollment and alternative payment routing options. Additional materials will be released in the coming weeks.

Through this program, health care providers are eligible for reimbursement from the federal government for COVID-19 testing, treatment and related services provided to the uninsured. As of April 27, providers, including hospitals and health systems, are able to register to participate with HRSA, and beginning May 6, providers will be able to submit claims. This coverage of the uninsured was authorized and funded through the Families First Coronavirus Response Act and the Coronavirus Aid, Relief and Economic Security Act. More details about the program follow.

Reimbursement Program: Hospitals and other health care providers who conduct COVID-19 testing or provide COVID-19 treatment for uninsured individuals on or after Feb. 4, 2020, can request claims reimbursement. Claims generally will be reimbursed at Medicare rates, subject to available funding. Services eligible for reimbursement include, but are not limited to, COVID-19 testing, treatment and related services. Such services may be performed via telehealth, in provider offices, and in emergency, inpatient, outpatient and post-acute care settings. Providers must take the following steps to submit claims: enroll as a participating provider, attest to the patient’s uninsured status, submit patient information, submit a claim and arrange for payment via direct deposit. Participating providers must attest that they have checked the patient’s eligibility for public and private health care coverage and found the individual to be uninsured. In addition, providers must agree to the program’s terms and conditions, which include agreeing not to balance bill the patient. More information on frequently asked questions can be found here.

Program Timeline:

- April 27 – Provider registration begins for the program
- April 29 – On-demand training available for participating providers begins
- May 6 – Electronic claims submission process opens

© 2020 American Hospital Association | www.aha.org
- Mid-May – Reimbursement disbursement begins

**Claims Reimbursement Portal:** The claims reimbursement portal can be found here.

**Next Steps**
The AHA continues to seek further guidance on several issues related to this process, including appropriate coding for claims, timeline for filing for claims that will be older than 30 days at the time the claims submission process begins, and the reimbursement rate. We will share additional information as it becomes available.

**Further Questions**
If you have questions, please contact the AHA at 800-424-4301.