



COVID-19 Response: HEALTH CARE PROVIDERS and PATIENTS

The legislation provides a \$340 billion surge in emergency funding to combat the coronavirus outbreak. More than 80 percent of the funding package goes to state and local governments and communities to help combat the pandemic.

- **What are my testing options as a patient?**

The Families First Coronavirus Response (FFCR) Act mandates that all insurers, Medicare, Medicaid, and other federal medical programs cover the cost of COVID-19 tests for patients.

For specific information on testing sites in Arkansas, please visit:

<https://govstatus.egov.com/ar-covid-19>.

- **What's being done to address the PPE and COVID-19 testing shortage?**

The Coronavirus Aid, Relief, and Economic Security (CARES) Act provides \$16 billion explicitly for the national stockpile. This funding can purchase medical supplies, equipment, and medicine to be distributed to states.

- **What's being done to address telehealth needs?**

The CARES Act expands telehealth services under Medicare to allow seniors across the nation to receive any current telehealth approved service. It eliminates the requirement that a doctor had to have treated a patient within the last three years to use expanded telehealth authorities.

- It allows federally qualified health centers and rural health clinics to furnish telehealth service to beneficiaries in another location during the COVID-19 emergency and to be reimbursed at a rate that is similar to the national average for comparable services under the Medicare physician fee schedule.
- It requires High Deductible Plans to cover telemedicine and remote services prior to meeting that deductible.
- It allows individuals receiving home dialysis to do their periodic assessments via telehealth. Face-to-face encounters for recertifying eligibility for hospice care could be conducted via telehealth during the emergency period instead of in person.

- **How will funds be distributed to hospitals, including rural hospitals?**

The CARES Act includes \$100 billion to hospitals and other health care providers to ensure they receive the support they need for coronavirus-related expenses and lost revenue.

HHS plans to hire a third-party claims processor who will use criteria, outlined by HHS, to determine (1) eligibility of provider, (2) justifiability of amount, (3) amount of claim, (4) payment, and any other information determined by HHS.

The CARES Act provides money for providers through Medicare:

- Allows for accelerated Medicare payments to help hospitals, especially those in rural areas, to get the reliable cash flow they need to help maintain an adequate workforce, buy essential supplies, create additional infrastructure, and keep their doors open to care for patients.
- Creates a 20 percent add on payment for inpatient treatment.
- Delays the sequester until the end of this calendar year.

For more information and regular updates regarding the state of COVID-19 in Arkansas, please visit: <https://govstatus.egov.com/ar-covid-19>.