

116TH CONGRESS
2D SESSION

H. R. 6232

To require the Secretary of Health and Human Services, through the National Disaster Medical System, to provide for certain laboratory reimbursement for diagnostic testing for COVID–19 in uninsured individuals.

IN THE HOUSE OF REPRESENTATIVES

MARCH 12, 2020

Mr. CÁRDENAS (for himself, Ms. SÁNCHEZ, and Mr. CASTRO of Texas) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To require the Secretary of Health and Human Services, through the National Disaster Medical System, to provide for certain laboratory reimbursement for diagnostic testing for COVID–19 in uninsured individuals.

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. REIMBURSEMENT FOR DIAGNOSTIC TESTING**
4 **FOR COVID–19 IN UNINSURED INDIVIDUALS.**

5 (a) REIMBURSEMENT.—Through the National Dis-
6 aster Medical System under section 2812 of the Public
7 Health Service Act (42 U.S.C. 300hh–11), and in coordi-
8 nation with the Administrator of the Centers for Medicare

1 & Medicaid Services, the Secretary of Health and Human
 2 Services shall, subject to the availability of appropriations
 3 under subsection (c), pay the claims of laboratories for
 4 reimbursement, as described in subsection (a)(3)(D) of
 5 such section 2812, for health services consisting of diag-
 6 nostic testing to detect or diagnose COVID–19 in unin-
 7 sured individuals. The amount that will be paid shall be
 8 equal to the amount that would have been paid to a physi-
 9 cian or laboratory under Clinical Laboratory Fee Schedule
 10 under section 1833(h)(8) of the Social Security Act.

11 (b) DEFINITION.—In this section, the term “unin-
 12 sured individual” means an individual who is not enrolled
 13 in—

14 (1) a Federal health care program (as defined
 15 under section 1128B(f) of the Social Security Act
 16 (42 U.S.C. 1320a–7b(f))); or

17 (2) a group health plan or health insurance cov-
 18 erage offered by a health insurance issuer in the
 19 group or individual market (as such terms are de-
 20 fined in section 2791 of the Public Health Service
 21 Act (42 U.S.C. 300gg–91)) or a health plan offered
 22 under chapter 89 of title 5, United States Code.

23 (c) FUNDING.—To carry out this section, there is au-
 24 thorized to be appropriated, and there is hereby appro-
 25 priated, out of amounts in the Treasury not otherwise obli-

1 gated, \$1,000,000,000, to remain available until ex-
2 pended.

○