



The influential voice of Nebraska's hospitals

October 29, 2020

The Honorable Eric Hargan  
Deputy Secretary  
U.S. Department of Health and Human Services  
200 Independence Avenue SW  
Washington, D.C. 20201

Dear Deputy Secretary Hargan:

Early detection and treatment of COVID-19 is vital for high-risk populations such as Medicare beneficiaries. The Centers for Medicare & Medicaid Services has recognized this by rewarding quick COVID-19 test results by making a payment add-on for tests turned around within two days. Early reporting of COVID-19 testing results is critical to the patient's health.

Hospitals have been challenged to find ways to perform COVID-19 testing at the local level in an accurate and timely manner. Lab testing equipment that allows hospital to perform these tests for COVID-19 are commonly on back order. Hospitals that already have the lab testing equipment grapple with access to reagents that seem to be available in limited allocations. Without having the means to do COVID-19 testing locally, the hospitals must rely on reference labs to perform the testing. This may take up to three or more days before they receive the results. In the rural areas, this timeline is further delayed due to limited courier services to deliver specimens to the reference lab. With the recent spikes in COVID-19 cases across Nebraska, hospitals must have a timelier response to diagnosis and treat COVID-19 in their communities.

Some hospitals have access to multiplex testing which is more timely. Multiplex testing assesses whether a patient is positive for COVID-19 as well as other targeted illnesses. However, most of the multiplex testing that is available to hospitals is not covered of Medicare. CMS is allowing the regional Medicare Administrative Contractor to develop their own Local Coverage Determination to specify whether to cover multiplex testing. Wisconsin Physician Services, the MAC for Nebraska, has implemented LCD (LCA) A57579. The LCD limits Medicare coverage for respiratory panels to three to five targets. Several Nebraska hospitals have purchased automated lab testing equipment and have access to testing supplies to test more targets than is allowed under the LCD. Medicare will not pay for these lab tests when performed.

The lack of diagnostic testing options for COVID-19, along with a restrictive WPS policy, place our hospitals at an unreasonable disadvantage. Our hospitals are left with the choice of outsourcing COVID-19 testing and delaying treatment or performing the test internally without compensation. This is especially alarming with the onset of an influenza season. Infectious disease experts indicate the onset of influenza season adds a new layer of unpredictability.

The NHA is asking CMS to consider waiving the LCD restrictions for multiplex lab tests during this public health emergency. Specially, we are asking CMS to allow for reimbursement of the multiplex testing that exceed five targets. We are also asking CMS to work with the manufacturers of the reagents to make multiplex tests of three to five targets that can test for COVID-19. Additionally, NHA is asking CMS to develop a National Coverage Determination because COVID-19 testing is not just a local issue, it is a national public health emergency.

Thank you for considering my requests. I look forward to your response.

Sincerely,

A handwritten signature in cursive script that reads "Laura J. Redoutey".

Laura J. Redoutey, FACHE  
President

Cc Dr. Patricia Meier  
Jeff Kahrs