



# The Corona Virus Aid, Relief, and Economic Security (CARES) Act



## Small Business Benefits

On March 27, 2020, President Donald Trump signed The Corona Virus Aid, Relief, and Economic Security (CARES) Act in response to the COVID-19 pandemic. Here are some highlights of the legislation that impact employer-sponsored, self-funded health benefit plans:

### Free Testing Coverage for COVID-19

Individual and group health plans<sup>1</sup>, including both fully-insured and self-insured, **must cover COVID-19 testing**, whether or not that testing is FDA-authorized. This provision is an update of the previous stimulus package that required coverage for FDA-authorized tests only.

### Payment Amount for COVID-19 Testing and Related Services

Self-insured health plans<sup>1</sup> and insurance carriers must pay the provider performing the testing for COVID-19 (along with costs incurred during the medical visit when testing is performed) at an **amount equal to their in-network negotiated rate** for the testing and related services.

If the carrier or self-insured plan does NOT have a negotiated payment rate, or does not then negotiate a specified price with the provider, the payment amount should equal the cash price of the service, which the provider is required to post on the provider's publicly available Internet site.

### No Required Payment for COVID Treatment

This legislation does NOT require coverage for *treatment* of COVID-19 (only for *testing* and related services), so benefits will be administered in accordance with the terms of the health benefit plan document. However, further legislation on this issue could be forthcoming.

### **Free Coverage for COVID-19 Vaccine**

Once a COVID-19 vaccine is developed and “recommended” as a preventive service, insurance carriers and self-insured plans **must cover the cost of the vaccine without any cost-sharing**. This requirement would go into effect 15 business days after the U.S. Preventive Service Task Force rates it an “A” or “B” or after it is recommended by the Advisory Committee on Immunization Practices of the CDC.

### **HSA-Eligible HDHP Exemption for Telehealth**

An HSA-eligible HDHP is allowed to pay for the costs associated with a telehealth visit before the deductible is met. The member would also continue to be eligible to make tax-free contributions to their HSA. This exemption is only available for plan years beginning on or before December 31, 2021.

### **HSA/FSA Payments for Feminine Hygiene OTC Products without Prescription**

A patient may use funds from a HSA or FSA to purchase over-the-counter menstrual care products.

We're closely watching the decisions in Washington and at the state level as this situation continues to evolve. We'll ensure that COVID-19 claims are processed and paid in compliance with all applicable federal and state laws.

For continuing updates on COVID-19, please [visit the CDC website](#).

<sup>1</sup> Does not apply to self-insured non-ERISA governmental health benefit plans.

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