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Federal Department of Home Affairs FDHA
Federal Office of Public Health FOPH
Health and Accident Insurance Directorate

Fact sheet
COVID-19 (novel coronavirus disease) **Arrangements for cost coverage for Sars-CoV-2 testing and the associated medical care**

Date: 28 January 2021
(redacted version of 3 February 2021)

Contents

Further information:

Federal Office of Public Health, Health and Accident Insurance Directorate, leistungen-krankenversicherung@bag.admin.ch, www.bag.admin.ch
This publication is also available in German, French and Italian.

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1 Background

Since 25 June 2020, the federal government has covered the costs of outpatient diagnostic molecular biological analyses (e.g. PCR) and immunological analyses for Sars-CoV-2 antibodies (serological test) for people meeting the FOPH's suspected case, testing and reporting criteria. Since 2 November 2020, it has additionally covered the costs of the diagnostic immunological analysis for Sars-CoV-2 antigens and the non-automated single-patient rapid tests for direct detection of Sars-CoV-2[1] (Art. 26 para. 1 of COVID-19 Ordinance 3).[2]

With the emergence of new virus variants that are considerably more infectious, testing is even more important. This situation has given rise to an amendment of the FOPH's suspected case, testing and reporting criteria. As of 28 January 2021, the federal government will assume the costs for testing and the early detection of outbreaks in the vicinity of people at especially high risk as well as in areas in which there is an increased risk of transmission. At the same time, the group of authorised service providers is also to be expanded.

With the amendment to COVID-19 Ordinance 3, the federal government will, with retroactive effect from 1 January 2021, assume the costs for a mutation-specific PCR test should the result of the molecular biological analysis prove positive. On the order of the cantonal medical officer, the federal government will also cover the costs of diagnostic sequencing as of 28 January 2021.

The costs of analyses for Sars-CoV-2, including Sars-CoV-2 rapid tests, which do not meet the FOPH's testing criteria, are not covered by the federal government, or by the compulsory health insurance. They are to be charged to the person who requests them or the ordering party.

These rules and arrangements governing the coverage of costs relate to analyses for Sars-CoV-2 carried out on an outpatient basis. The costs of analyses for Sars-CoV-2 that are performed on individuals being treated on an inpatient basis in accordance with Art. 49 of the Federal Act on Health Insurance (HIA) are included in the diagnostic-related groups pursuant to Art. 49 para. 1 HIA and are not covered by the federal government. Care homes do not fall under the scope of Art. 49 para. 1 HIA.

[1] Referred to in the text as Sars-CoV-2 rapid test
[2] SR 818.101.24

Further information:

Federal Office of Public Health, Health and Accident Insurance Directorate, leistungen-krankenversicherung@bag.admin.ch, www.bag.admin.ch
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2 Conditions for costs to be covered by the federal government

The coverage of the costs of analyses for Sars-CoV-2 by the federal government is subject to the FOPH's suspected case, testing and reporting criteria. These guidelines were amended on 27 January 2021.[3]

2.1 FOPH's suspected case, testing and reporting criteria of 27 January 2021[4]

Testing for COVID-19 is recommended for[5]:

For **symptomatic people** who meet one of the clinical criteria[6][7]:

1. **In outpatient settings**
   - **Molecular biological analysis** (e.g. PCR-based methods)[8]
   - Use of **antigen rapid tests** is possible if all three of the following criteria are met:
     - Symptoms appeared less than four days ago AND
     - The person is not at especially high risk[9] AND
     - The person does not work in healthcare with direct patient contact
2. In **inpatient settings**, in retirement and care homes as well as other social medical institutions
   - **Molecular biological analysis** (e.g. PCR-based methods)[10]
   - Use of **antigen rapid tests** is possible if symptoms began less than four days ago[11]
3. In the case of **vaccinated individuals**[12] or if a person is **re-infected with COVID-19,** a molecular biological analysis (PCR) and, in the event of a positive PCR test, diagnostic sequencing should be performed.[13]

[3] See the FOPH's suspected case, testing and reporting criteria of 27 January 2021, available at www.bag.admin.ch > Diseases > Combating infectious diseases > Infectious diseases requiring notification > Declaration forms (German, French and Italian only)
[4] The FOPH suspected case, testing and reporting criteria set out in this fact sheet are not binding. For the binding FOPH suspected case, testing and reporting criteria, see FOPH suspected case, testing and reporting strategy of 27 January 2021, which can be accessed at: www.bag.admin.ch > Diseases > Combating infectious diseases > Infectious diseases requiring notification > Declaration forms (German, French and Italian only).
[5] The rapid tests to be paid for must be listed by name in the FOPH's "whitelist", available (in German, French and Italian) at www.bag.admin.ch > Medizin & Forschung > Medikamente und Medizinprodukte > Fachinformationen über die Covid-19-Testung
[6] Symptoms of acute respiratory disease (e.g. cough, sore throat, shortness of breath, chest pain) and/or fever without other aetiology and/or sudden loss of sense of smell and/or taste and/or acute confusion or worsening of condition in elderly people without other aetiology. Other, non-specific or less common symptoms include: muscle pain, headache, general weakness, head cold, gastrointestinal symptoms (e.g. nausea, vomiting, diarrhoea, stomachache), skin rashes (e.g. pseudo-frostbites, urticarial, vesicular or morbilliform exanthema).
[7] For children under 12 years of age, there are different test indications (see recommendations for children under 12)
[8] In the event of a positive PCR test, a second mutation-specific PCR test is to be conducted by the laboratory immediately (within 24 hours). A whitelist of the mutation-specific PCR tests can be found (in German, French and Italian) on the FOPH website.
[9] The definition of people at especially high risk can be found on the site People at especially high risk
[10] In the event of a positive PCR test, a second mutation-specific PCR test is to be conducted by the laboratory immediately (within 24 hours). A whitelist of the mutation-specific PCR tests can be found (in German, French and Italian) on the FOPH website.
[11] In the case of hospitalised individuals or those at especially high risk, confirmation by means of a PCR test is required in the event of a negative result.
[12] In the case of vaccinated individuals who exhibit symptoms less than seven days after receiving their second vaccination, it must be checked whether the relevant case involves a new variant against which the vaccination would offer no protection.
[13] The order for diagnostic sequencing is issued by the competent cantonal authority..

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In **asymptomatic people**:

4. Testing using **molecular biological analysis** (e.g. PCR) or antigen **rapid test**

4.1 For contacts who are in **quarantine.**[14]

4.2 After **notification of a contact** with a case of COVID-19 case via the **SwissCovid app**.[15]

4.3 In the case of **outbreak investigations and controls** ordered by a doctor.[16]

4.4 To **prevent COVID-19 infections in people at especially high risk** in hospitals, retirement and care homes as well as other social medical institutions, certain groups of people[17] can be tested repetitively.

4.5 In **situations with an increased risk of transmission**, the competent cantonal authority can order repetitive testing in targeted groups of people.[18]

5 Positive antigen rapid tests in accordance with **nos. 4.4 and 4.5** or **that fall outside the scope of the testing criteria** as well as positive pooled molecular biological analyses are immediately confirmed by means of a molecular biological analysis (e.g. PCR).

6 The competent cantonal authority can order **serological tests** and, in certain situations, **diagnostic sequencing**.[19]

[14] A single test can be performed from the fifth day following the (initial) contact. A negative test does not prematurely end the quarantine period.
[15] A single test can be performed from the fifth day following the (initial) contact. A negative test does not prematurely end the quarantine period.
[16] Recommendations on dealing with infected individuals and their contacts from 14 December 2020.
[17] This refers to employees in direct contact with patients (including Spitex employees), visitors, fellow patients and housemates.
[18] The competent cantonal authority must submit a concept to the FOPH in advance. The concept should be in compliance with the FOPH checklist/information sheet. The canton provides the FOPH with a summary report of the findings.
[19] For example, where there is justified suspicion of the existence of a worrying variant for which no screening method (e.g. mutation-specific PCR) is established or available yet.

2.2 Service providers

The costs of molecular biological analyses for Sars-CoV-2, immunological analyses for Sars-CoV-2 antigens, Sars-CoV-2 rapid tests and immunological analyses for Sars-CoV-2 antibodies done on an outpatient basis and the associated medical care (as per Annex 6 to COVID-19 Ordinance 3) are covered by the federal government for people meeting the FOPH's suspected case, testing and reporting criteria of 27 January 2021.

The corresponding care must be delivered by the following service providers as specified in the HIA:

- Doctors
- Pharmacists
- Hospitals
- Laboratories under the terms of Art. 54 para. 3 of the Health Insurance Ordinance[20] (HIO) and hospital laboratories under the terms of Art. 54 para. 2 HIO. Laboratories must be licensed as per Art. 16 para. 1 of the Epidemics Act (EpidA),[21]
- Care homes
- Organisations for assistance and care at home (=Spitex)

Also in:

- Test centres (including drive-ins) run by or on behalf of the canton. In the case of test centres, the federal government will only cover the costs if these facilities are run by the canton or on its behalf. With an eye to quality assurance, these test centres and drive-ins should at the minimum meet cantonal requirements. Services provided by test centres and drive-ins organised on a private basis without a cantonal remit will therefore not be covered by the federal government,
- Retirement homes,
- Social medical institutions (especially homes for the disabled and children).

2.3 Performance of analyses in licensed laboratories

Molecular biological analyses for Sars-CoV-2 and immunological analyses for Sars-CoV-2 antigens and Sars-CoV-2 antibodies can be conducted in licensed laboratories subject to the conditions that

- the reliability and the expected performance of the testing systems used are assured, and
- the other operational and organisational requirements to assure the quality of the results are complied with.

2.4 Sars-CoV-2 rapid tests

Since 21 December 2020, not only the use of antigen rapid tests, but rather also of other, non-automated single-patient rapid tests for direct detection of Sars-CoV-2 (e.g. non-automated rapid tests for the detection of Sars-CoV-2 ribonucleic acids), known as "Sars-CoV-2 rapid tests", has been permitted.

[20] SR 832.102
[21] SR 818.101

Only rapid tests that meet the minimum criteria set out under Annex 5*a* of COVID-19 Ordinance 3 and that feature on the FOPH whitelist[22] can be used. Independent validation of the test systems is understood to mean that the laboratory has no conflict of interest in carrying out the validation.

The legal requirements regarding these Sars-CoV-2 rapid tests with the required test conditions can be found in Art. 24, 24*a* and 24*c* of COVID-19 Ordinance 3.

2.4.1 Use of non- molecular biological Sars-CoV-2 rapid tests

Since 2 November 2020, COVID-19 Ordinance 3 has allowed for sampling and the execution of Sars-CoV-2 rapid tests outside licensed laboratories, namely at medical practices, pharmacies, laboratories that have not been issued a license under Art. 16 EpidA and hospitals as well as at test centres operated by the respective canton or on its behalf. Since 28 January 2021, the Sars-CoV-2 rapid tests can also be performed at retirement and care homes, social medical institutions and at organisations for nursing and care at home (Art. 24 para. 1 let. b and para. 1bis of COVID-19 Ordinance 3; further information can be found in section 2.4.). All of the aforementioned facilities are temporarily exempted from the licensing requirement under Art. 16 EpidA while COVID-19 Ordinance 3 is in force, subject to compliance with all requirements set out under Art. 24 para. 4 of COVID-19 Ordinance 3:

- Basic requirements:
  - Appropriate safety and precautionary measures are in place and complied with to protect humans, animals, the environment and biological diversity.
- Operational and organisational requirements to assure the quality of results:
  - The personnel conducting the tests must have specific training and follow the instructions of the test manufacturer.
  - The result of the test must be interpreted under the supervision of people with the necessary specific expertise. External experts may also be brought in for this purpose.
  - Facilities conducting the tests must keep documentation to demonstrate the traceability and quality of the analysis systems. This documentation must be retained.
  - The facilities must be authorised by the canton to conduct such tests.[23]

The cantons are responsible for monitoring adherence to and the enforcement of all requirements set out in Art. 24-24*b* of COVID-19 Ordinance 3 outside licensed laboratories (Art. 24 para. 1 let. b as well as para. 1bis of COVID-19 Ordinance 3).

Sars-CoV-2 rapid tests may also be conducted outside of these facilities, provided a laboratory head, doctor or pharmacist assumes responsibility for compliance with the requirements of Art. 24-24*b* of COVID-19 Ordinance 3 (Art. 24 para. 2 of COVID-19 Ordinance 3).

The dispensing of Sars-CoV-2 rapid tests to the public is prohibited in accordance with Art. 17 para. 3 of the Medical Devices Ordinance (MedDo).

[22] See the FOPH's whitelist, available (in German, French and Italian) at www.bag.admin.ch > Medizin & Forschung > Medikamente und Medizinprodukte > Fachinformationen über die Covid-19-Testung
[23] For further information, see Section 5.3 Checking entitlement to submit invoices

2.4.2 Use of Sars-CoV-2 rapid tests using molecular biological methods

Rapid Sars-CoV-2 tests based on molecular biological detection methods may only be conducted in licensed laboratories or outside these laboratories if the laboratory manager assumes responsibility for conducting the tests (Art. 24 para. 3 of COVID-19 Ordinance 3).

2.4.3 Persons who may undergo Sars-CoV-2 rapid tests

Sars-CoV-2 rapid tests may be conducted on people who meet the FOPH's suspected case, testing and reporting criteria of 27 January 2021 (Art. 24*b* para. 1 COVID-19 Ordinance 3).

Since 21 December 2020, Sars-CoV-2 rapid tests can be conducted on people who do not meet the suspected case, testing and reporting criteria, if all the following criteria are met:

- Requirements of the facility in accordance with Art. 24 para. 4 and Art. 24a COVID-19 Ordinance 3
- The facility or person conducting the Sars-CoV-2 rapid test:
    - allows sampling for molecular biological analysis for Sars-CoV-2 as a confirmatory diagnostic test,
    - informs the cantonal authority responsible for contact tracing if no confirmatory diagnostic test is carried out.

For the use of Sars-CoV-2 rapid tests on people who do not meet the testing criteria, note must be taken of the "Fact sheet on the use of rapid tests that do not meet the FOPH's testing criteria of 18 December 2020".[24]

Analyses that are performed outside the scope of the FOPH's suspected case, testing and reporting criteria are not subject to the reporting requirement (Art. 26*b* para. 9 of COVID-19 Ordinance 3). In the event of a positive rapid test for Sars-CoV-2, samples for the confirmatory molecular biological analysis (e.g. PCR) must immediately be taken at the location at which the test was performed or the cantonal authority responsible for contact tracing must be informed if no confirmatory diagnostics take place. If the result of the confirmatory analysis is positive, this must be reported (Art. 26*b* para. 9 of COVID-19 Ordinance 3).

3 Costs covered by the federal government

3.1 Basic principles

The federal government covers the costs of analysis for Sars-CoV-2 and the costs of the associated medical care if the requirements of the FOPH's suspected case, testing and reporting criteria of 27 January 2021 are met. If these requirements are not met, the costs of the analyses for Sars-CoV-2 and the associated medical care are borne by the person requesting them or the ordering party.

The amounts covered by the federal government are maximum amounts, which means that if the actual costs are lower, they must be billed to the federal government accordingly. The amendment of the VAT Ordinance[25] (Art. 35 para. 2 let. o VATO) means that pharmacists in accordance with Art. 26 para. 2 let. a no. 2 and test centre employees as per Art. 26 para. 2 let. b of Covid-19 Ordinance 3 are deemed members of the health and care occupations for the conduct of analyses for Sars-CoV-2 under Art. 26 para. 1 of Covid-19 Ordinance 3, irrespective of whether the costs are covered by the federal

[24] See factsheet on the use of rapid tests that do not meet the FOPH's testing criteria of 18 December 2020, available (in German, French and Italian) at www.bag.admin.ch > Krankheiten > Infektionskrankheiten: Ausbrüche, Epidemien, Pandemien > Aktuelle Ausbrüche und Epidemien > Coronavirus > Informationen für Gesundheitsfachpersonen > Dokumente
[25] SR 641.201

government. The analyses and associated medical care performed by the aforementioned service providers are thus exempt from VAT. This applies to test centres with retrospective effect from 25 June 2020, and to pharmacists with retrospective effect from 2 November 2020.

Service providers may **not charge** persons tested, the insurers and the cantons **any further costs** (such as night, emergency and public holiday surcharges or costs for the telephone transmission of the test result and services performed in the absence of the patient) for analyses for Sars-CoV-2 and associated medical care in accordance with Annex 6 of COVID-19 Ordinance 3. The tested person shall not owe any **share of the costs** for services in accordance with Annex 6 of COVID-19 Ordinance 3.

If on the same order additional analyses are requested for the person tested, the laboratory may not charge to compulsory health insurance any order charge (item no. 4700.00 on the List of Analyses) or presence charge (item no. 4707.00 on the List of Analyses) in addition to the order processing, overhead costs and sampling materials covered by the federal government.

Since 28 January 2021, the costs for the regular testing of asymptomatic individuals in targeted groups have been covered by the federal government. Here, a distinction is made between the testing of people deemed to be at especially high risk and testing performed in situations in which there is an increased risk of transmission. The previous tariff headings, which can be charged for the testing of symptomatic individuals as well as within the context of outbreak investigations and controls, continue to apply. The costs assumed by the federal government are invoiced to the responsible insurer or canton.[26]

3.2 Tariff according to Annex 6 no. 1 of COVID-19 Ordinance 3 (nos. 1 to 4.3, 5 or 6 of the suspected case, testing and reporting criteria)

The federal government covers the costs for the **molecular biological analyses for Sars-CoV-2 (including pooled molecular biological analyses**) and **Sars-CoV-2 rapid tests** (sampling and analysis) if one of the following of the FOPH's suspected case, testing and reporting criteria of 27 January 2021 is met:

- Symptomatic individuals (nos. 1 to 3 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021)
- Asymptomatic individuals who are in quarantine (no. 4.1 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021)
- Asymptomatic individuals who have received a notification of an encounter with a COVID-19 case from the SwissCovid app (no. 4.2 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021)
- In the event of outbreak investigations and controls ordered by a doctor (no. 4.3 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021)
- In the case of a confirmatory molecular biological analysis following a positive antigen rapid test or after a positive pooled molecular biological analysis that was conducted to prevent COVID-19 infections among people at especially high risk or in situations with an increased risk of transmission or outside the scope of the FOPH's suspected case, testing and reporting criteria of 27 January 2021 (no. 5 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021).

For **analyses for antibodies against Sars-CoV-2**, an order from the competent cantonal authority is required in order for the costs to be covered by the federal government.

[26] For further information, see section 5.1 Invoicing

From 28 January 2021, the federal government will cover the costs for **pooled molecular biological analyses**, which can be conducted, for example, using a nose and throat swab or saliva.[27] The minimum pool size is four people. Depending on the size of the pool, a surcharge can also be charged as more sampling material is required. For **each** pooled molecular biological analysis carried out on individuals who meet one of the criteria 1 to 4.3 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021, the federal government will cover the following services a maximum of **once**:

- Pooled molecular biological analysis for Sars-CoV-2 (01.02.1050)
- Surcharge according to pool size (01.02.1200/.1210/.1220/.1230)[28]
- Order processing for own requirements (01.01.1350) or order processing on behalf of a third party (01.01.1400)

Sampling (01.01.1000) as well as the detailed doctor-patient consultation (01.01.1050) can be charged for once per tested person in the pool.

The services of the pooled molecular biological analysis are billed via the policyholder number of a person within the pool. If the result of the pooled molecular biological test is positive, a molecular biological analysis using PCR must be performed immediately. This can be invoiced for as normal in accordance with the tariff specified under Annex 6 no. 1. The result of the pooled molecular biological test is **not subject to the reporting requirement**.

With the amendment of COVID-19 Ordinance 3, the federal government will cover the costs for a **mutation-specific second PCR test** (tariff number 01.01.1310) that is performed in the event of a positive result from an initial PCR test. The second PCR test must take place within 24 hours of the primary PCR test. Costs for the second PCR test will be assumed retroactively with effect from 1 January 2021. Should a second PCR test be conducted without being ordered by a service provider in accordance with Art. 26 para. 2 of COVID-19 Ordinance 3, the maximum amount covered by the federal government is CHF 82. The federal government will cover no additional costs for tests ordered by the recipients themselves. In the case of tests performed by laboratories in accordance with Art. 54 para. 3 HIO and hospital laboratories in accordance with Art. 54 para. 2 on behalf of a service provider in accordance with Art. 26 para. 2, the federal government will cover a maximum of CHF 106.

If ordered to do so by the competent cantonal authority, the federal government will also assume the costs of **diagnostic sequencing** (tariff number 01.01.1320), for example in the case of a justified suspicion of the existence of a worrying variant for which no screening method (e.g. mutation-specific PCR) is established or available yet or in the event of a re-infection with COVID-19 and in the case of a positive molecular biological analysis. All sequencing must be individually ordered by the competent cantonal authority. The diagnostic sequencing may only be performed by microbiological diagnostic laboratories with SAS accreditation in sequencing[29] or reference laboratories that meet the requirements of Art. 17 EpidA.

The maximum amounts covered by the federal government for analyses for Sars-CoV-2 and associated medical care are described in detail under Annex 6 no. 1 of COVID-19 Ordinance 3 and illustrated in Figure 1.

[27] See information sheet on the use of pooled molecular biological analyses, following shortly (in German, French and Italian) at www.bag.admin.ch > Medizin & Forschung > Medikamente & Medizinprodukte > Fachinformation über die Covid-19-Testung
[28] The surcharges depending on the pool size of the molecular biological analysis can be found in the pandemic tariff from 28 January 2021, accessible (in German, French and Italian) at: www.bag.admin.ch > Diseases > Infectious diseases: outbreaks, epidemics, pandemics > Current outbreaks and epidemics > New coronavirus > Health insurance arrangements
[29] The SAS (Swiss Accreditation Service) list of accredited diagnostic laboratories in Switzerland with experience in sequencing microbiological samples is available at https://www.sas.admin.ch/sas/en/home.html

Kostenübernahme gemäss Anhang 6 Ziffer 1

maximale Kostenübernahme durch den Bund in CHF

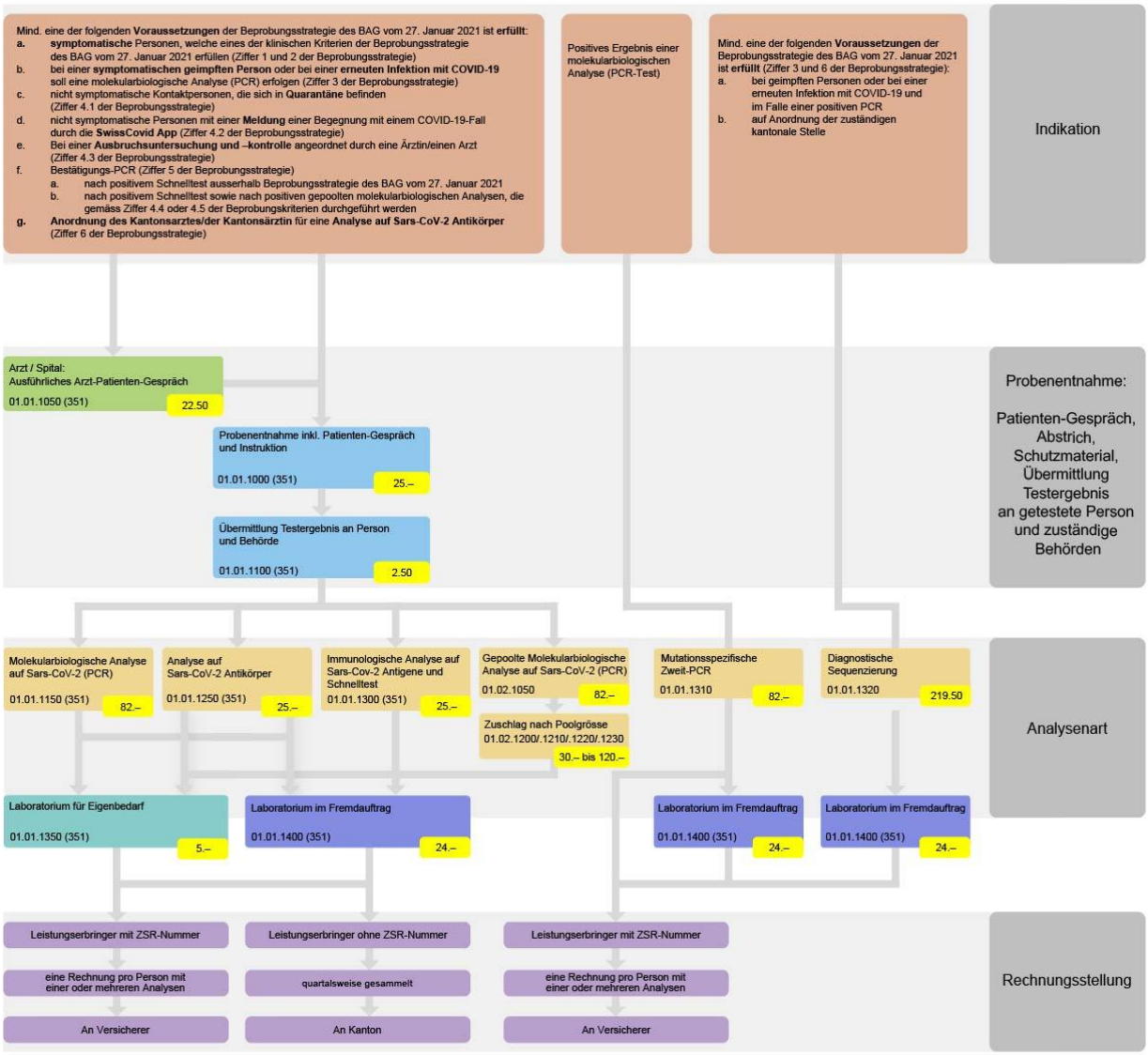

Fig. 1: Cost assumption for analyses for Sars-CoV-2: tariff in accordance with Annex 6 no. 1 (available in German, French and Italian)

Further information:

Federal Office of Public Health, Health and Accident Insurance Directorate, leistungen-krankenversicherung@bag.admin.ch, www.bag.admin.ch
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3.2.1 Sampling and transmission of the test result

Sampling involves the three components: taking the sample, communicating the test results, and a thorough medical consultation with the patient if necessary:

- Sampling (tariff number 01.01.1000, CHF 25) encompasses the patient's consultation, the swab and/or blood sampling (or collection of another validated sample) and the protective equipment.

  All service providers receive identical amounts for the taking of samples. The indication is based on the notification of the SwissCovid app or an internet-based COVID-19 infection risk evaluation tool (coronavirus check, etc.) or according to the FOPH's suspected case, testing and reporting criteria of 27 January 2021.

- Communication of the test results to the tested person and the compulsory notification in accordance with Art. 12 para. 1 EpidA to the authorities (tariff number 01.01.1100, CHF 2.50) also involves requesting the activation code that is generated by the Proximity Tracing System for coronavirus Sars-CoV-2 (PT System) if an infection is detected. This item can be charged once per patient per day by the notifying service provider.

- Only if a thorough doctor-patient consultation (tariff number 01.01.1050) including a possible clinical examination takes place for the indication of the analysis for Sars-CoV-2 in connection with an analysis for Sars-CoV-2, can the doctor charge the maximum amount of CHF 22.50 stipulated for this service. 30

- The thorough doctor-patient consultation is a real medical consultation with contact taking place between the doctor and patient. There is a discussion and if necessary, a brief clinical examination may be performed for the indication of the analysis for Sars-CoV-2. A clinical examination as part of the doctor-patient consultation when the sample is taken for an analysis for Sars-CoV-2 is not a requirement. The clinical examination may be limited to taking the patient's temperature or measuring their oxygen saturation (SpO2), for example.

  A thorough doctor-patient consultation is mainly carried out for patients with risk factors, or unclear or severe symptoms.

The federal government will also cover the costs of the analysis and associated care if the services are provided by different parties. Here, a binding agreement between the parties is essential in order to avoid duplicate charges. An example would be if a doctor were to provide the thorough patient consultation and communicate the results to the person tested and the authorities, while the sampling was performed by the laboratory, hospital, pharmacy or test centre.

The equipment required for the swab are made available by the laboratory and covered under order processing, except in the case of rapid tests for Sars-CoV-2, where the sterilised nasopharyngeal sampling swabs are provided in the test kit.

For the second PCR test and diagnostic sequencing, the federal government covers no costs for sampling, as these analyses are possible with the primary sampling for the molecular biological analyses.

3.2.2 Performance of the analysis, including order processing

If a laboratory under Art. 54 para. 3 HIO conducts an analysis for Sars-CoV-2 without an order from a service provider in accordance with Art. 26 para. 2 of COVID-19 Ordinance 3 (for private laboratories,

[30] If a doctor performance a thorough doctor-patient consultation at a test centre, invoicing takes place via the doctor's ZSR number.

this is only possible while COVID-19 Ordinance 3 is in force), only CHF 5 may be charged for order processing as per Annex 6 of COVID-19 Ordinance 3 (tariff number 01.01.1350).

Only laboratories under Art. 54 para. 3 HIO can charge CHF 24 for order processing, overhead costs and sampling material. These laboratories are contracted to perform the analyses by an external/third party service provider. The laboratories under Art. 54 para. 3 HIO include private laboratories and hospital laboratories that meet the laboratory management conditions set out under Art. 54 para. 3 HIO. While COVID-19 Ordinance 3 is in force, the hospital will be activated retroactively as of 2 November 2020 in the top group of partner types for the billing of order processing on the basis of a third-party order (tariff code 01.01.1400).

The costs of mandatory reporting to the authorities as per Art. 12 paras. 1 and 2 EpidA are included in the flat rates covered by the federal government. The detailed reporting criteria can be found in the FOPH's suspected case, testing and reporting criteria of 27 January 2021. According to Art. 26*b* para. 7 and Art. 27*c* para. 6 of COVID-19 Ordinance 3, the federal government can reclaim the remuneration from the service provider if the reporting obligations according to Art. 12 EpidA are violated by the service provider.

3.2.3 Limitations

If both a molecular biological analysis for Sars-CoV-2 (Annex 6 no. 1.1 of COVID-19 Ordinance 3) and an analysis for Sars-CoV-2 antibodies (Annex 6 no. 1.3 of COVID-19 Ordinance 3) are performed on the same person on the same day, the federal government will only cover the following costs once:

- The costs for the sampling and the transmission of the test result to the tested person and the responsible authority
- The costs for order processing and sampling material as well as overhead costs

If both a molecular biological analysis for Sars-CoV-2 (Annex 6 no. 1.1 of COVID-19 Ordinance 3) and an immunological analysis for Sars-CoV-2 antigens (Annex 6 no. 1.4 of COVID-19 Ordinance 3) or a Sars-CoV-2 rapid test (Annex 6 no. 1.4 of COVID-19 Ordinance 3) are performed on the same person on the same day, the federal government will cover the sampling costs only once.

This regulation does not apply in the case of a positive result for a pooled molecular biological analysis: for a pooled molecular biological analysis, the sampling is covered once per tested person within the pool plus the sampling for the confirmatory PCR test.

In addition, the costs for order processing and the overhead costs are only covered once if both a molecular biological analysis for Sars-CoV-2 and a mutation-specific second PCR test or sequencing are carried out on a person by the same service provider in accordance with Art. 26 para. 2.

The tariff numbers 01.01.1000 sampling and 01.01.1400 order processing on behalf of a third party may not be cumulated for the same person and same analysis (or invoice).

3.3 Tariff in accordance with Annex 6 no. 2 of COVID-19 Ordinance 3 (no. 4.5 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021)

Repetitive and widespread testing can be performed to monitor case numbers and prevent outbreaks (e.g. at schools and businesses or if there are increased levels of transmission in the local area). These tests in **situations with an increased risk of transmission** (no. 4.5 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021) are performed in targeted groups (e.g. schools, hotels or workplaces) on the **order of the competent cantonal authorities**. In the case of testing in situations with an increased risk of transmission, the competent cantonal authority must submit a **concept** to the

FOPH in advance that complies with the FOPH checklist/information sheet.[31] The **canton provides a summary report** to the FOPH of the findings of the analyses for Sars-CoV-2 that are performed in situations with an increased risk of transmission.[32]

In situations with an increased risk of transmission, the costs of rapid tests for Sars-CoV-2 as well as **pooled molecular biological analyses** have been covered by the federal government since 28 January 2021. Sampling (CHF 18.50) can be charged for once per tested person within the pool. If the result of the rapid test for Sars-CoV-2 or a pooled molecular biological test is positive, a molecular biological analysis using PCR must be performed immediately. Payment for confirmatory diagnostics is made in accordance with Annex 6 no. 1 of COVID-19 Ordinance 3.

For the analyses performed in situations with an increased risk of transmission, the service providers referred to in Art. 26 para. 2 of COVID-19 Ordinance 3 charge for the services pursuant to Annex 6 no. 2 of COVID-19 Ordinance 3. Analyses for Sars-CoV-2 in situations with an increased risk of transmission are invoiced exclusively to the canton.

[31] See information sheet on testing concept in situations with an increased risk of transmission, available (in German, French and Italian) at www.bag.admin.ch > Medizin & Forschung > Medikamente & Medizinprodukte > Fachinformation über die Covid-19-Testung

[32] Report to: COVID_Testung@bag.admin.ch

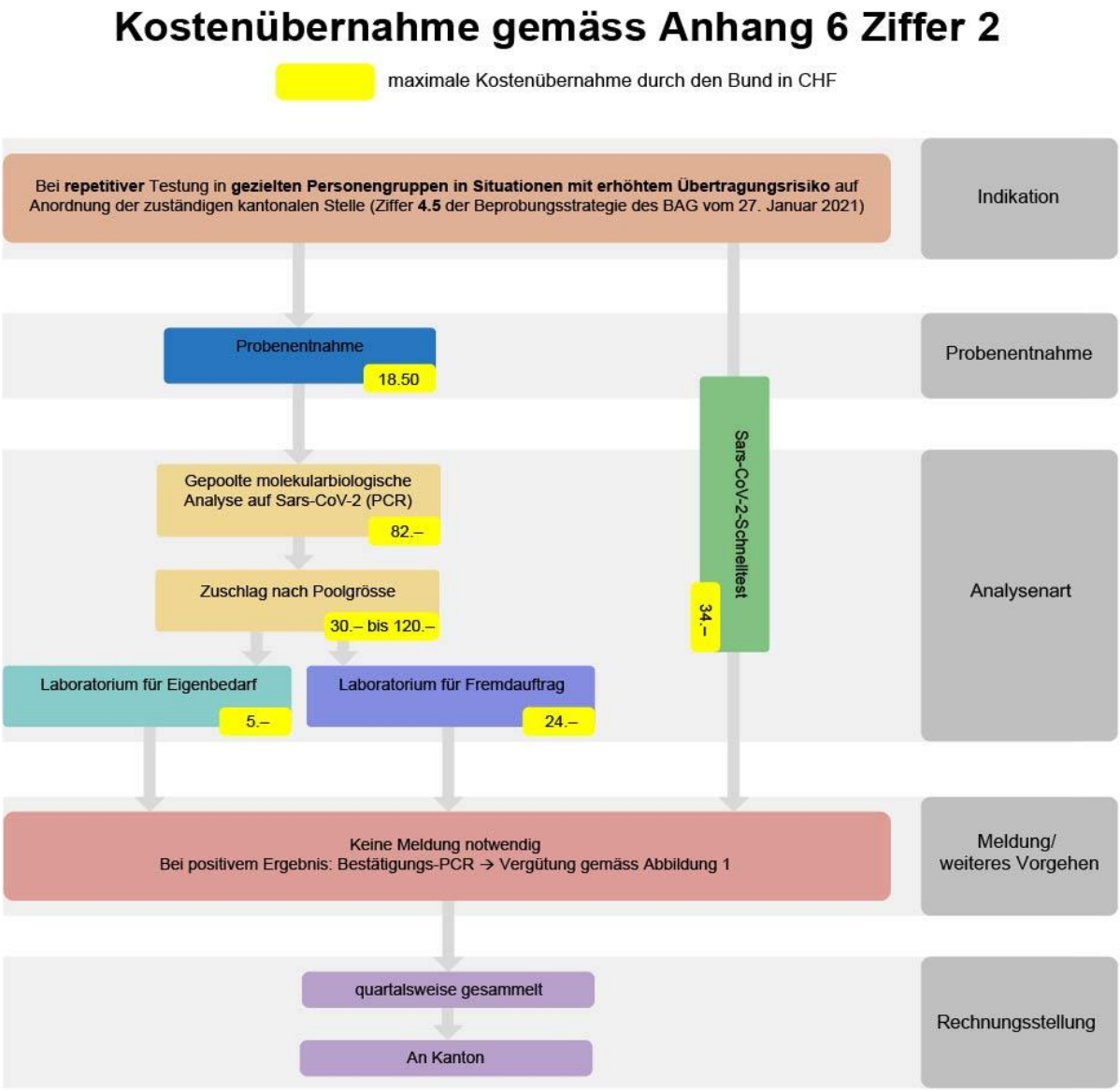

Figure 2: Assumption of costs for analyses for Sars-CoV-2: tariff in accordance with Annex 6 no. 2 (available in German, French and Italian)

3.4 Tariff in accordance with Annex 6 no. 3 of COVID-19 Ordinance 3 (no. 4.4 of the FOPH's suspected case, testing and reporting criteria of 27 January 2021)

For the protection of people at especially high risk in hospitals, retirement and care homes as well as other social medical institutions, the costs for the analyses for Sars-CoV-2 of employees with direct contact with patients, visitors and residents are covered by the federal government. The regular testing of asymptomatic individuals at healthcare facilities allows for the early identification of potentially infectious people and the prevention of outbreaks.[33] Repetitive testing provides an extra layer of

[33] For further information, see the information sheet COVID-19: serial testing of employees in direct contact with patients, visitors, fellow patients and residents in social medical institutions, especially in retirement and care homes, available (in German, French and Italian) under www.bag.admin.ch > Krankheiten > Infektionskrankheiten: Ausbrüche, Epidemien, Pandemien > Aktuelle Ausbrüche und Epidemien > Coronavirus > Informationen für Gesundheitsfachpersonen > Dokumente

Further information:

Federal Office of Public Health, Health and Accident Insurance Directorate, leistungen-krankenversicherung@bag.admin.ch, www.bag.admin.ch
This publication is also available in German, French and Italian.

protection for people at especially high risk. The result of analyses for Sars-CoV-2 provides a snapshot of the current situation and is no substitute for hygiene and precautionary measures.

The protection of people at especially high risk is fundamentally part of the duty of care of healthcare institutions. For the testing of these individuals, the federal government covers the costs of the **test material** in the case of a rapid test and the costs of the laboratory analysis, including order processing, in the case of a pooled molecular biological analysis. Only rapid tests for Sars-CoV-2 may be used for visitors to healthcare facilities. The service providers referred to in Art. 26 para. 2 of COVID-19 Ordinance 3 are not permitted to charge for any other services for the analyses for Sars-CoV-2. The results of the analyses, which are performed repetitively in asymptomatic individuals with the objective of preventing COVID-19 infections in people at especially high risk, are **not subject to the reporting requirement**. The cantons are responsible for the development of a training concept for the performance of sampling by the institutions.

If the result of the rapid test for Sars-CoV-2 or a pooled molecular biological test is positive, a molecular biological analysis using PCR must be performed immediately. Payment for confirmatory diagnostics is made in accordance with Annex 6 no. 1 of COVID-19 Ordinance 3.

The maximum amounts covered by the federal government for analyses for Sars-CoV-2 and associated medical care for analyses for the protection of people at especially high risk are described in detail under Annex 6 no. 3 of COVID-19 Ordinance 3 and illustrated in Figure 3. The invoicing of analyses for Sars-CoV-2 for people at especially high risk can be made optionally to either the canton or the insurer. However, invoices should primarily be sent to the cantons.

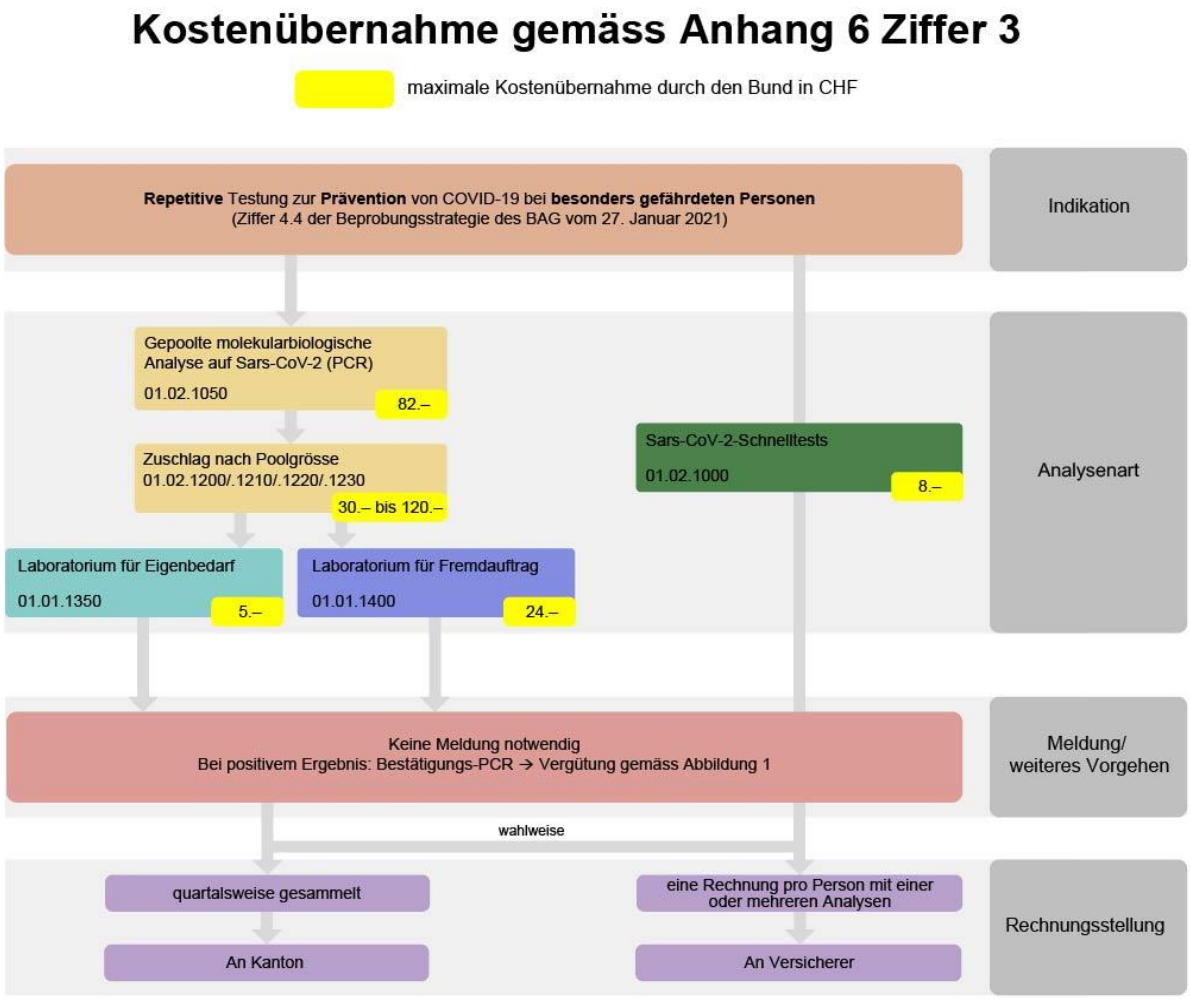

Fig. 3: Cost coverage of analyses for Sars-CoV-2. Tariff as per Annex 6 no. 3 (available in German, French and Italian)

4 Costs of analyses for Sars-CoV-2 that are not borne by the federal government

The **costs of analyses** (and associated care) that **do not meet the FOPH's suspected case, testing and reporting criteria** are **not covered by the federal government**. The costs are not reimbursed by the compulsory health insurance under the HIA either, but must instead be billed to the requesting person or ordering party (e.g. employer) with the note "Analysis for Sars-CoV-2 where testing criteria not met" (Art. 26*b* para. 9 of COVID-19 Ordinance 3). For invoicing, for example at the expense of the requesting person or employer (self-payer), the self-payer tariff numbers defined by the tariff partners should be used. The maximum amount for self-payers may differ from the amounts defined by the federal government.[34] The requesting persons or ordering parties must be informed of the price prior to the start of the service in accordance with the price disclosure obligation and that these costs will not be covered by the federal government or health insurers.

The molecular biological confirmatory analysis in the event of a previous positive rapid test for Sars-CoV-2 that was performed outside the scope of the FOPH's suspected case, testing and reporting

[34] See pandemic tariff of 28 January 2021, accessible (in German, French and Italian) at: www.bag.admin.ch > Diseases > Infectious diseases: outbreaks, epidemics, pandemics > Current outbreaks and epidemics > New coronavirus > Health insurance arrangements

criteria is part of the FOPH's suspected case, testing and reporting criteria of 27 January 2021 and the costs of the confirmatory analysis will therefore be assumed by the federal government in accordance with Annex 6 no. 1 of COVID-19 Ordinance 3.

5 Technical procedure

5.1 Invoicing

5.1.1 Basic principles

The service provider (doctors, laboratories, pharmacists, hospitals, care homes, organisations for assistance and care at home, retirement homes as well as social medical institutions and the test centre operated by the canton or working on its behalf) performs the sampling and is also responsible for the completion of the laboratory order with the personal details of the patient, the clinical details and the indication for analysis. The details required for electronic invoicing, in particular the tested person's policyholder or customer number with their health insurance provider, must be noted on the laboratory order (Art. 26 para. 3 of COVID-19 Ordinance 3). The service provider is responsible for checking compliance with the conditions for the assumption of test costs.

Invoices are generally to be submitted electronically (applicable standard: "General Invoice Request" of the Data Exchange Forum). The invoices must exclusively include services in accordance with Annex 6 of COVID-19 Ordinance 3. The invoice may only be sent to either the canton or the insurer, but not to both.

For additional evaluations or medical care which are not required for Sars-CoV-2 sampling and which are performed during or as a result of the coronavirus consultation (e.g. treatment for Sars-CoV-2 infection), the act applicable in each case (HIA, AIA, MIA and InvIA) is to be applied. Service providers must inform the person concerned of any costs arising which are not covered by the federal government's flat rate coverage and which thus give rise to additional costs (e.g. a co-payment) for the patient. Such medical care is to be invoiced separately from the analysis by the service provider in accordance with the applicable provisions in the relevant federal act.

While COVID-19 Ordinance 3 is in force (until 31 December 2021), tariff number 3186.00 of Annex 3 to the Health Insurance Benefits Ordinance[35] must not be applied for the analysis for Sars-CoV-2 (Art. 26*a* para. 2 of COVID-19 Ordinance 3).

The invoice may only contain tariff numbers from a single tariff version (according to fact sheet validity period).

The **canton** is responsible for **applying for the ZSR number** of the test centres operated by the canton or on its behalf and approved by the canton to SASIS AG and for the use of these ZSR numbers in invoicing the responsible insurer.[36]

The tariff headings, for sampling on the one hand and laboratory analysis on the other, must be itemised on the invoice with the corresponding tariff numbers and invoiced separately by the respective service provider, i.e. the invoice does not include services outside tariff code 351.

5.1.2 Invoicing exclusively to insurers (Art. 26*b* of COVID-19 Ordinance 3)

For analyses for Sars-CoV-2 carried out on individuals who meet the **criteria laid out under nos. 1 to 4.3, 5 or 6 of the FOPH's suspected case, testing and reporting criteria** of 27 January 2021 and which are performed by service providers with a **paying agent number** (ZSR number) of SASIS AG,

[35] SR 832.112.31
[36] For further information, see section. 5.3 Checking entitlement to submit invoices

the **insurer** owes payment for the services in accordance with Annex 6 **no. 1** of COVID-19 Ordinance 3 (Art. 26*a* para. 1 of COVID-19 Ordinance 3).

Responsibility lies with the insurer with which the tested person is insured against illness. In the case of individuals who do not have compulsory health insurance in accordance with the HIA, the Collective Institution is responsible in accordance with Art. 18 HIA. For individuals pursuant to Art. 1a para. 1 let. b (occupationally insured individuals) and Art. 2 MIA (voluntarily insured individuals), military insurance is responsible for making the payment (Art. 26*a* para. 1 let. a to c of COVID-19 Ordinance 3).

Invoicing by the service providers to the responsible insurer or the Collective Institution under the HIA[37] in accordance with the **tiers payant** system within the meaning of Art. 42 para. 2 HIA is carried out in standardised form with the administrative and medical details in accordance with Art. 59 HIO.

For each tested person, invoices to insurers for services that meet the criteria laid out under **nos. 1 to 4.3, 5 or 6 of the FOPH's suspected case, testing and reporting criteria** of 27 January 2021 must be sent on an individual basis or quarterly on a collective basis per person tested. The invoice must be sent to the insurer no later than **nine months** after the services have been provided. The services (sampling, analysis, order processing, etc.) must be listed individually, stating the respective date of treatment, in accordance with the defined tariff numbers of pandemic tariff 351 and invoiced separately by the respective service provider (Art. 26*b* para. 2 of COVID-19 Ordinance 3). The Collective Institution invoices the FOPH quarterly for its administrative costs incurred for its activities as an insurer in accordance with Art. 26*a* para. 1 let. c and para. 3 let. a of COVID-19 Ordinance 3 on an at-cost basis. The hourly rate is CHF 95 and includes salary costs, social benefits and infrastructure costs. For the expenses for any revisions, system adjustments and negative interest rates that are not included in the administrative costs, the actual costs are reimbursed (Art. 26*b* para. 8 of COVID-19 Ordinance 3).

5.1.3 Invoicing exclusively to cantons (Art. 26*c* of COVID-19 Ordinance 3)

For analyses for Sars-CoV-2 carried out on individuals who meet the **criteria laid out under nos.1 to 4.3, 5 or 6 of the FOPH's suspected case, testing and reporting criteria** of 27 January 2021, the canton is liable for the payment of services in the case of services providers pursuant to Art. 26*a* para. 2 of COVID-19 Ordinance 3 that **do not have a ZSR number** of SASIS AG. Invoices are sent to the canton in which the sample was taken (Art. 26a para. 2 of COVID-19 Ordinance 3).

For analyses for Sars-CoV-2 carried out on individuals who meet the **criterion specified under no. 4.5 (Situations with an increased risk of transmission) of the FOPH's suspected case, testing and reporting criteria** of 27 January 2021, invoices for the services referred to under Annex 6 **no. 2** of COVID-19 Ordinance 3 are sent exclusively to the canton (Art. 26*a* para. 4 of COVID-19 Ordinance 3).

Invoices must be sent to the canton **quarterly on a collective basis**. This means that the service provider invoices for the number of samples taken (or the test material) and the laboratory analyses with the corresponding amounts on a quarterly basis. The invoice must be sent to the canton no later than **nine months** after the services have been provided (Art. 26*c* para. 1 of COVID-19 Ordinance 3).

For service providers with a ZSR number, the service provider's invoice to the canton must include the same information as invoices sent to insurers. For invoices from service providers without a ZSR number, the following components must be included on the invoice:

- Name and contact data (contact person, telephone number) of the service provider
- Number of employees, number of visitors, number of residents plus the total number of all people

[37] Tests ordered by the Federal Department of Defence, Civil Protection and Sport (DDPS) are invoiced directly to the Armed Forces Staff (AFS).

- For each item listed under the respective nos. in Annex 6 of COVID-19 Ordinance 3, the number carried out, the flat-rate amount invoiced and the total amount must be indicated in each case
- Total number of services and total invoice amount (in Swiss francs)
- Period (quarter) of the performed services

5.1.4 Invoicing optionally to either the canton or insurer (Art. 26*a* para. 3 of COVID-19 Ordinance 3)

For analyses for Sars-CoV-2 carried out on individuals who meet the **criterion specified under no. 4.4 (Prevention of COVID-19 infections among people at especially high risk) of the FOPH's suspected case, testing and reporting criteria** of 27 January 2021, invoices for the services referred to under Annex 6 **no. 3** of COVID-19 Ordinance 3 are sent **optionally** to either the insurer or the canton (Art. 26*a* para. 3 of COVID-19 Ordinance 3). However, invoices should primarily be sent to the cantons. Invoices are sent to the canton in which the sample was taken (Art. 26a para. 2 of COVID-19 Ordinance 3). The components required on the invoice can be found in chapter 5.1.3 paragraph 4.

For each tested person, invoices to insurers for services that meet the criterion laid out under **no. 4.4 of the FOPH's suspected case, testing and reporting criteria** of 27 January 2021 must be sent on an individual basis or quarterly on a collective basis per person tested. The services (test material in the case of a rapid test or analysis with order charge in the case of pooled molecular biological analysis) must be listed individually in each case, stating the respective treatment day, according to the defined tariff codes of pandemic tariff 351 and invoiced separately by the respective service provider. The invoice must be sent to the insurer no later than **nine months** after the services have been provided (Art. 26*b* para. 2 of COVID-19 Ordinance 3).

5.2 Tariffs and tariff numbers to be used

For invoices from service providers sent to **insurers** for services provided from 28 January 2021, the tariffs and tariff numbers in accordance with the pandemic tariff of 28 January 2021 are to be used. [38] For the tariff number, a differentiation is made as to whether the tested person meets the FOPH's suspected case, testing and reporting criteria or not. For the use of analyses that fall outside the scope of the FOPH's suspected case, testing and reporting criteria, the self-payer tariff numbers must be used and the invoices must contain a note "Analysis for Sars-CoV-2 where testing criteria are not met". In this case, the maximum amount may differ from the amounts defined by the federal government.[39]

5.3 Checking entitlement to submit invoices

The following service providers as specified in the HIA are in principle authorised to conduct and bill analyses for Sars-CoV-2 and do not need to be individually licensed by the cantons or registered with SASIS AG:

- Doctors[40]
- Pharmacists

[38] For the invoicing of analyses for Sar-CoV-2 that were performed before 28 January 2021, the previous factsheets are decisive ("Previous factsheets", available at www.bag.admin.ch > Diseases > Infectious diseases: Outbreaks, Epidemics, Pandemics > Current outbreaks and epidemics > Coronavirus > Health insurance arrangements

[39] See pandemic tariff of 28 January 2021, available (in German, French and Italian) at www.bag.admin.ch > Diseases > Infectious diseases: Outbreaks, Epidemics, Pandemics > Current outbreaks and epidemics > Coronavirus > Health insurance arrangements

[40] In accordance with Art. 36 HIA, doctors who hold the federal diploma and specialised training recognised by the Federal Council are licensed. Dentists are only treated the same as doctors for care under Art. 31 HIA (dental care). They cannot perform analyses for Sars-CoV-2 and associated medical care that are covered by the federal government.

- Hospitals
- Laboratories in accordance with Art. 54 para. 3 HIO and hospital laboratories in accordance with Art. 54 para. 2 HIO that are licensed in accordance with Art. 16 para. 2 EpidA
- Care homes
- Organisations for assistance and care at home

For other service providers and test centres (operated by or on behalf of the canton) that conduct analyses for Sars-CoV-2 outside of the closed systems, the cantons can request a new **ZSR number/GLN number** (e.g. retirement homes or social medical institutions). The cantons must apply for the new ZSR number for the authorised facilities from SASIS AG[41] directly. SASIS AG can issue a maximum of ten new ZSR numbers a week across Switzerland.

With effect from 28 January 2021, the pandemic tariff 351 is authorised for the partner type top groups doctor, hospital, laboratory, pharmacies, care homes and organisations for assistance and care at home. For service providers run as test centres (operated by or on behalf of the canton), insurers must verify whether 'other invoicing parties' are authorised to submit invoices.

Insurers can decide which type of checks they wish to perform: they may use fully automated checks (authorisation request on entering into the contract V1), partially automated (e.g. filing of the authorised ZSR number as a rule) or manual checks (via deviation). SASIS also lists the authorised test centres on its website.

5.4 Invoice control

Insurers, the HIA Collective Institution and the cantons check invoices for the following points:

- Entitlement of service provider to submit invoices (see Art. 26 para. 2 of COVID-19 Ordinance 3)
- Compliance with flat rates (amounts specified in Annex 6 of COVID-19 Ordinance 3)
- whether the same analysis has been charged for more than once per day per person
- no number other than the stipulated flat rate are included in the invoice

If the legal requirements for invoicing are not fulfilled, the invoice is to be returned to the service provider and not settled. The burden of proof lies with the service provider. The service provider must then rectify and resubmit the invoice.

The cantons and the insurers must observe the respective data protection provisions (for insurers in accordance with Art. 84 – 84*b* HIA).

5.5 Reporting to the FOPH

Insurers or the HIA Collective Institution as well as the canton report quarterly to the FOPH the number of analyses for which they have reimbursed service providers in accordance with Art. 26 para. 2, and the amount covered, at the beginning of January, April, July and October (see Art. 26*b* para. 5 and Art. 26*c* para. 4 of COVID-19 Ordinance 3). The external auditors of the insurers and of the Collective Institution will check these notifications annually. They also check whether suitable controls are in place at the insurers and the Collective Institution in order to examine whether the service providers have charged for the services correctly in accordance with the defined legal requirements and report back to the FOPH (Art. 26*b* para. 5 of COVID-19 Ordinance 3).

The FOPH may request additional information from insurers and the HIA Collective Institution on amounts reimbursed per service provider in accordance with Art. 26 para. 2. The aim is to be able to

[41] If you have any questions or require further information, please contact: zsr-b2b@sasis.ch

control whether service providers have fulfilled their obligations, in particular reporting obligations in accordance with Art. 12 EpidA.

6 Entry into force

This fact sheet supersedes the fact sheet “Novel COVID-19 disease (coronavirus): Arrangements for cost coverage for Sars-CoV-2 testing and the associated services” dated 21 December 2020 and is valid from 28 January 2021.

Further information:

Federal Office of Public Health, Health and Accident Insurance Directorate, leistungen-krankenversicherung@bag.admin.ch, www.bag.admin.ch
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