



October 7, 2021

To whom it may concern,

Vero Diagnostics is a state-of-the-art clinical laboratory that incorporates the latest technology and methods to provide comprehensive diagnostic testing.

Vero Diagnostics follows all recommended guidelines for billing claims for service performed by the laboratory. Below is an outline of the billing process for COVID -19 claims:

If the patient is uninsured, the claim is filed with HRSA (Health Resources and Services Administration) who reimburses Vero Diagnostics for its service performed for COVID – 19 tests.

If the patient is insured, Vero must bill the insurance (Medicare, Medicaid, or commercial payors) as per the CMS guidelines. Federal government has mandated all the insurances to pay for COVID testing regardless of the network status of the billing provider (in-network or out of network).

The provider cannot charge any patients for copays for any COVID – 19 tests performed.

In the rare event that the insurance denies the claim submitted for COVID – 19 tests, Vero then files an appeal with the HRSA (The Health Resources and Services Administration) who will then make the decision on the reimbursement for the claim.

Please feel free to reach out to our billing team at (919) 341-1256 or [info@verodx.com](mailto:info@verodx.com) should you have any questions or concerns.

*Dipesh Shah*

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Managing Partner and COO

Vero Diagnostics