

Frequently Asked Questions How to get your At-Home Over-the-Counter Rapid Antigen COVID-19 Test for Free January 21, 2022

1. What is the new regulation regarding health plan coverage of Over-the-Counter (OTC) At- Home COVID testing?

Beginning January 15, 2022, individuals covered by an employer-sponsored or Individual & Family health insurance plan who purchase an OTC COVID-19 diagnostic test authorized, cleared, or approved by the U.S. Food and Drug Administration (FDA) will be able to have those test costs covered by their health plan or insurance.

In addition, every home in the U.S. is eligible to order four free at-home COVID-19 tests from the U.S. government. The tests are completely free. To order your tests, go to COVIDtests.gov.

2. What is an Over-the-Counter (OTC) At-Home COVID-19 test?

This means it is an antigen test that you purchase, administer at home, and obtain the results rapidly in your home. You do not need a provider prescription or order to obtain an OTC At-Home COVID-19 test.

3. Requirements for the Over-the-Counter (OTC) Tests:

- It cannot be for the purpose of employment testing
- It must be for personal use
- Must be an "FDA Authorized, Cleared or Approved" COVID-19 test from the United States
- Excludes combination tests which may have COVID-19 and other virus tests included such as influenza, respiratory syncytial virus, etc. combined with the COVID-19 test
- Excludes COVID-19 tests that require you to send to an outside lab for results
- Purchase of the COVID-19 test must have been on or after January 15, 2022

4. Which AvMed plans cover At-Home Over-the Counter (OTC) COVID-19 tests? All AvMed plans EXCEPT for Medicare Advantage Plans (see Question 8 for Medicare Advantage options).

5. Where can I get the At-Home Over-the Counter (OTC) COVID-19 tests?

All households can obtain free at-home COVID-19 tests through the U.S. government at COVIDtests.gov. AvMed Employer-sponsored and Individual & Family plan Members may also obtain up to eight free OTC COVID-19 at-home tests per Member per month by presenting their AvMed ID card to any AvMed in-network pharmacy. In-network pharmacies include but are not limited to CVS, Sam's Club, Walmart and

Publix. Refer to your plan directory for additional in-network pharmacies. There are no up-front out of pocket costs if the test is obtained at an in-network pharmacy. Tests may also be purchased online (see Question 7 for details).

6. Are rapid tests purchased at out-of-network pharmacies eligible for reimbursement?

Eligible AvMed Members may purchase at-home tests at retail locations outside AvMed's preferred pharmacy network and submit receipt(s) for the reimbursement of the paid retail price (up to \$12 per test). Reimbursement forms are available here.

7. Are tests purchased online eligible for reimbursement?

Yes, eligible Members are able to purchase tests online; the reimbursement amount will vary if the pharmacy location is in-network or out-of-network. In-network purchases are eligible for full reimbursement while reimbursement for out-of-network purchases are limited to \$12.00 per test. Per guidance from the U.S government, Members are responsible for any delivery or shipping costs.

To request reimbursement for purchases made online, please complete the reimbursement <u>form</u>.

8. Where can Medicare Members get Over-the-Counter (OTC) at-home testing kits? Every home in the U.S is eligible to order 4 at-home COVID-19 tests. The tests are completely free. To order, go to COVIDtests.gov.

If you need an immediate test or need more than the four government tests, no-cost antigen and PCR COVID-19 tests continue to be available to everyone in the U.S. at more than 20,000 sites nationwide. A list of community based COVID-19 testing sites can be found here.

9. What if I cannot afford to pay for the At-Home Over-the-Counter (OTC) COVID-19 test(s) up

Free tests are currently available to every U.S. residential address including U.S. territories. The tests being sent through the program are all rapid antigen tests authorized by the FDA, and each shipment will include four individual rapid antigen COVID-19 tests. Visit COVIDtests.gov for more information and to order.

In addition, AvMed will continue to cover access to free testing within all our communities at pharmacies, health departments and COVID-19 testing sites. COVID-19 tests are also available without cost sharing (free to our AvMed Members) by health care providers like a nurse, doctor, or pharmacist, without limitation.

10. How do I find a list of FDA-Approved tests that are covered?

A list of FDA authorized, cleared, or approved COVID-19 tests can be found at: <u>In Vitro</u> <u>Diagnostics EUAs - Antigen Diagnostic Tests for SARS-CoV-2 | FDA</u>

11. How many tests can I be reimbursed for?

The maximum number of COVID-19 tests covered by AvMed is eight (8) total tests per eligible AvMed Member, per month. In the case of kits that include multiple tests, each test will be counted as one (1) test.

12. How will I get reimbursed for tests that I purchased?

Caremark will process post-service claims and mail a check to the Member. The Member must complete the Direct Member Reimbursement (DMR) <u>form</u> and include receipt of purchase. Follow the submission process listed on the form. Reimbursements for out of network purchases are limited to \$12.00 per test.

13. Where can I find more information?

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As the information evolves, updates will be shared. For additional questions, please visit AvMed.org or call the phone number listed on your Member ID.