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COVID-19 DIAGNOSTIC TESTING KIT COVERAGE INFORMATION

On Monday, January 10, the Biden Administration released guidance clarifying the previously-announced expanded coverage requirement for at home COVID-19 tests. President Biden had included this expanded coverage for at-home testing as part of his action plan aimed at addressing the COVID-19 pandemic in December 2021. The expanded coverage for the at-home tests will apply to tests purchased on or after January 15, 2022.

Under this new guidance, at-home, or OTC, tests must be covered without the involvement of a health care provider, an order or individualized clinical assessment, and for those OTC COVID-19 tests that do not require a health care provider's order under the applicable FDA authorization, clearance, or approval. This applies to those OTC COVID-19 tests available without an order or individualized clinical assessment by a health care provider purchased on or after January 15, 2022 and during the public health emergency.

These tests must be covered without imposing any cost-sharing requirements, prior authorization, or other medical management requirements. The agencies interpret the requirement for no cost-sharing to require coverage without out-of-pocket expense to the participant, beneficiary, or enrollee for the cost of the test, subject to certain safe harbors (see below).

The guidance does not require a plan to provide coverage by reimbursing sellers of OTC COVID-19 tests directly - a plan or issuer may instead require a participant who purchases an OTC COVID-19 test to submit a claim for reimbursement to a plan (in accordance with the plan's or issuer's reasonable internal claims procedures, consistent with applicable Federal and State law). However, the agencies strongly encourage plans to provide direct coverage for OTC COVID-19 tests to participants, beneficiaries, and enrollees by reimbursing sellers directly without requiring participants to provide up-front payment and seek reimbursement.

Plans Must Cover A Minimum Number Of OTC Tests

The guidance provides a second safe harbor that allows plans to limit the number or frequency of OTC COVID-19 tests covered without cost sharing under a plan. The Departments will not take enforcement action against any plan or issuer that, during the public health emergency, provides coverage without cost sharing for (and does not impose prior authorization or other medical management requirements on) such OTC COVID-19 tests, if the plan or issuer limits the number of OTC COVID-19 tests covered for each person covered under the plan to no less than 8 tests per 30 day period (or per calendar month). For a family of 4 this would be 32 tests per calendar month.

Under this safe harbor, a plan or issuer would be required to set the limit for at least 8 individual tests per 30-day period (or per calendar month) per participant, but must not limit participants to a smaller number of these tests over a shorter period (for example, limiting individuals to 4 tests per 15 day period).

Additionally, this safe harbor applies only with respect to the coverage of OTC COVID-19 tests that are administered without a provider's involvement; plans and issuers must continue to provide coverage for COVID-19 tests that are administered with a provider's involvement or prescription, as required by FFCRA and the Department's guidance, even when relying on this safe harbor.

<u>Preferred United Plans "Alternative Funding" Requirements for Reimbursements</u>

- The Over the counter (OTC) COVID-19 test must be approved by the Food and Drug Administration (FDA). Examples of FDA approved tests are:
 - BINAXNOW COVID-19 AG SELF TEST
 - CARESTART COVID19 AG HOME TEST
 - ELLUME COVID-19 HOME TEST
 - FLOWFLEX COVID-19 AG HOME TEST
 - IHEALTH COVID-19 AG RAPID TEST
 - QUICKVUE AT HOME COVID-19 TEST
- The COVID-19 kit cannot go through the pharmacy.
- You are required to purchase the kits and must submit the PUP COVID Reimbursement form (see link below), along with the required documentation listed on the form.
- We are not able to reimburse purchases from non-authorized sources including neighbors, Facebook Marketplace, etc.

You can send this information by:

By Mail Send to:
Preferred United Plans "Alternative Funding"
P.O. Box N
Grand Rapids, MI 49501-4914
Attn: Claims Dept.

By Fax Send fax to:

Attn: Claims Dept. at 616-454-4338

By E-Mail Send to: claims@secureoneinc.com

For any questions on anything listed above, please contact our Customer Service Department at 1-888-314-9066.

Click Here for Reimbursement Form

Website About Products & Services Contact

