


ISSUE DATE February 1, 2022	EFFECTIVE DATE August 30, 2021	NUMBER 24-21-55
SUBJECT At-Home Over-The-Counter COVID-19 Tests	BY  Sally A. Kozak, Deputy Secretary Office of Medical Assistance Programs	

IMPORTANT REMINDER: All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMISE to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at: <https://www.dhs.pa.gov/providers/Providers/Pages/PROMISE-Enrollment.aspx>.

PURPOSE:

The purpose of this bulletin is to notify providers that the Medical Assistance (MA) Program will pay for U.S. Food and Drug Administration (FDA) authorized over-the-counter (OTC) SARS-CoV-2 (COVID-19) tests provided to Medical Assistance (MA) Program beneficiaries, effective with dates of service on and after August 30, 2021.

SCOPE:

This bulletin applies to MA enrolled pharmacies who render services to MA beneficiaries. Providers rendering services to MA beneficiaries in Physical Health HealthChoices or Community HealthChoices should address any billing and payment questions with the applicable managed care organization (MCO).

BACKGROUND/DISCUSSION:

The Centers for Medicare and Medicaid Services (CMS) issued guidance on August 30, 2021, regarding Medicaid coverage and reimbursement of COVID-19 testing under the American Rescue Plan Act of 2021 (ARP). See State Health Official letter #21-003. CMS' guidance provided that under ARP, states must cover both diagnostic and screening tests for COVID-19. In addition, all types of FDA-authorized COVID-19 tests must be covered under CMS' interpretation of the ARP testing coverage requirements, including "point of care" or "home" tests that have been provided to a Medicaid beneficiary by a qualified Medicaid provider of COVID-19 tests. Home tests include those where a specimen is collected at home

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Fee-for-service provider service center: 1-800-537-8862

Visit the Office of Medical Assistance Programs website at:

<https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/Contact-Information-for-Providers.aspx>

and then sent to a clinical laboratory or other certified testing site for testing and those that are entirely performed at home, meaning the test system includes the ability to perform the test without involvement of a laboratory.

The MA Program currently covers other COVID-19 laboratory tests; however, to comply with CMS' interpretation of ARP COVID-19 testing requirements and broaden access to COVID-19 testing, the MA Program will also cover COVID-19 OTC and at-home COVID-19 tests provided to beneficiaries by enrolled pharmacies without cost-sharing.

PROCEDURE:

Effective with dates of services on and after August 30, 2021, the Department will pay for OTC COVID-19 tests. The Department added procedure code T1999, defined as "Miscellaneous therapeutic items and supplies, retail purchases, not otherwise classified; identify product in 'remarks'," to the MA Program Fee Schedule to be used when billing for OTC COVID-19 tests in the FFS delivery system. No prescription is required in the FFS delivery system. Providers should contact the applicable MCO regarding coding and payment questions for services provided to MA beneficiaries in the managed care delivery system.

The MA Program will pay providers in the FFS delivery system as outlined in the chart below:

Procedure Code	Description	Provider Type	Specialty	Place of Service	MA Fee	Prior Auth	MA Units	Limits
T1999	Miscellaneous therapeutic items and supplies, retail purchases, not otherwise classified; identify product in "remarks"	24	ALL	11	\$11.51	No	Per test	8 tests per month

NOTE: Kits may include more than one test, and the limit is 8 tests per month.

Because OTC COVID-19 tests are a covered service, beneficiary payment for these tests is considered a supplemental payment under 55 Pa. Code § 1101.63(a). If a MA beneficiary in the FFS delivery system presents a pharmacy with proof of payment for an OTC COVID-19 test purchased between August 30, 2021, and the issuance of this MA bulletin, the pharmacy should provide a refund to the beneficiary and then bill the MA Program for the OTC COVID-19 test with the appropriate date of service. Claims for OTC COVID-19 tests submitted within 60 days of the issuance of this bulletin will not be subject to the time frames for

submission of claims in 55 Pa. Code § 1101.63(b). Providers in the managed care delivery system should contact the appropriate MCO regarding providing refunds to beneficiaries.

For up-to-date information about current FDA-authorized OTC COVID-19 tests, please refer to the FDA's website at: <https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/in-vitro-diagnostics-euas-antigen-diagnostic-tests-sars-cov-2>.

Providers may access the on-line version of the MA Program Fee Schedule, which reflects the above changes, via the Department's website at: <https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/MA-Fee-Schedule.aspx>.