

ADVISORY

No. 240

February 8, 2022

COVID-19 Home Test Kit Coverage

Testing is vitally important to help reduce the spread of Coronavirus-2019 (COVID-19) and to diagnose COVID-19 quickly so that it can be effectively treated. Over-the-Counter (OTC) diagnostic SARS-CoV-2 antigen tests for home use are convenient, efficient, and accurate in rapidly detecting the presence of certain proteins on the surface of the virus that causes COVID-19.

This Advisory applies to Participants enrolled in the Maryland Fee-for-Service (FFS) program and Participants enrolled in Managed Care Organizations (MCOs) that participate in the Maryland HealthChoice Program.

Effective February 17, 2022, Maryland Medicaid Fee-For-Service (FFS) will expand access to Food and Drug Administration (FDA) Emergency Use Authorized (EUA) and/or FDA approved OTC COVID at-home tests for Maryland Medicaid Participants.

Maryland Medicaid will cover a maximum of four tests every rolling 30 days. Tests may be selected from the list in Table 2 and mixed and matched between kits for a total of four tests. Coverage of additional test kits exceeding the quantity limit described above will require prior authorization. Participant copayment will not apply.

The ninth amendment to the <u>COVID 19 PREP Act</u> Declaration provides liability immunity to licensed pharmacists and expands the scope of authority for them to order and administer select COVID 19 therapeutics to populations authorized by the FDA. If the participant does not have an order from a prescriber, prior to ordering an OTC COVID-19 at-home test, the pharmacist shall gather and document the following information and retain it in the record just as any other prescription:

- a. Participant's Name and Date of Birth,
- b. Participant's Medicaid Identification number,
- c. Reason for a test (such as COVID-like symptoms, COVID exposure), and

d. Date of symptom onset or date of known COVID-19 exposure, as appropriate

Pharmacies shall utilize the following billing instructions (Table 1) when submitting claims for the test kits.

NCPDP D.0. Claim Segment Field	Value
436-E1 (Product/Service ID Qualifier)	Enter a value of "03" (NDC)
407-D7 (Product/Service ID)	Enter one applicable NDC from Table 2
411-DB (Prescriber ID)	Enter Prescriber National Provider Identifier (NPI) number During a the federal Public Health Emergency, the Service Provider ID (2Ø1-B1) may be submitted as for qualifying COVID 19 related products

Table 2 - OTC COVID-19 At-Home Covered Tests² and Reimbursement

NDC	Drug Name	Test Count (Package Count)	Billin g Unit	Reimbursem ent ³
11877001 133	BINAXNOW COVID AG CARD HOME TEST	1	1	\$ 10.00 + PDF
11877001 129	BINAXNOW COVID-19 AG CARD	1	1	\$ 10.00 + PDF
56964000 000	ELLUME COVID-19 HOME TEST	1	1	\$ 10.00 + PDF

¹ More details on the COVID-19 OTC diagnostic SARS-CoV-2 antigen tests for home payer sheet is available under Payer Specific Information at: <u>https://www.mdrxprograms.com/ooep.html#PI</u>

² As more products become available, this guidance will be updated.

³ PDF (Professional Dispensing Fee as defined in COMAR 10.09.03.07)

82607066 026	FLOWFLEX COVID-19 AG HOME TEST	1	1	\$ 10.00 + PDF
14613033 937	QUICKVUE SARS ANTIGEN TEST	1	1	\$ 10.00 + PDF
14613033 908	SOFIA SARS ANTIGEN FIA TEST	1	1	\$ 10.00 + PDF
11877001 140	BINAXNOW COVID-19 AG SELF TEST	2	2	\$ 20.00 + PDF
50010022 431	CARESTART COVID-19 AG HOME TEST	2	2	\$ 20.00 + PDF
82607066 027	FLOWFLEX COVID-19 AG HOME TEST	2	2	\$ 20.00 + PDF
56362000 589	IHEALTH COVID-19 AG RAPID TEST	2	2	\$ 20.00 + PDF
08337000 158	INTELISWAB COVID-19 RAPID TEST	2	2	\$ 20.00 + PDF
14613033 972	QUICKVUE AT-HOME COVID- 19 TEST	2	2	\$ 20.00 + PDF

In an effort to give timely notice to the pharmacy community concerning important pharmacy topics, the Maryland Department of Health (MDH) 3 Office of Pharmacy Services (OPS) has developed the Maryland Medicaid Pharmacy Program Advisory.

To expedite information timely to the pharmacy and prescriber communities, an email network has been established which incorporates the email lists of the Maryland Pharmacists Association, EPIC, CARE, Long Term Care Consultants, headquarters of all chain drugstores and prescriber associations and organizations.

It is our hope that the information is disseminated to all interested parties. If you have not received this email through any of the previously noted parties or via MDH, please contact the OPS representative at 410-767-1455.