Frequently Asked Questions
How to get your At-Home Over-The-Counter COVID-19 Test for Free

1. **How do I get a free at-home over-the-counter COVID-19 test?**

   Starting January 15, most people with a health plan can go online, or to a pharmacy or store to purchase an at-home over-the-counter COVID-19 diagnostic test authorized by the U.S. Food and Drug Administration (FDA) at no cost, either through reimbursement or free of charge through their insurance. This applies whether you purchased your health plan on your own or whether you get health insurance through your job.

   The test will either be free directly at the point of sale, if your health plan provides for direct coverage, or by reimbursement if you are charged for your test. Be sure to keep your receipt if you need to submit a claim to your insurance company for reimbursement. If your plan has set up a network of preferred providers at which you can obtain a test with no out-of-pocket expense, you can still obtain tests from other retailers outside that network. Insurance companies are required to reimburse you at a rate of up to $12 per individual test (or the cost of the test, if less than $12).

2. **Will I have to pay for my test up front?**

   The Biden-Harris Administration is strongly incentivizing health plans and insurers to set up a network of convenient locations across the country such as pharmacies or retailers where people with private health coverage will be able to order online or walk in and pick up at-home over-the-counter COVID-19 tests for free, rather than going through the process of having to submit claims for reimbursement. Consumers can find out from their plan or insurer if it provides direct coverage of over-the-counter COVID-19 tests through such a program or whether they will need to submit a claim for reimbursement. If you are charged for your test after January 15, keep your receipt and submit a claim to your insurance company for reimbursement.

3. **How much will I be reimbursed for an at-home over-the-counter COVID-19 test if I purchase the test upfront and then submit a claim for reimbursement to my insurance company?**

If you purchase an over-the-counter COVID-19 test from a pharmacy, store, or online retailer and are charged for your test, keep your receipt and submit a claim to your insurance company for reimbursement. If your plan has not set up a network of preferred stores, pharmacies, and online retailers at which you can obtain a test with no out-of-pocket expense, you will be reimbursed the amount of the cost of the test. For example, if you buy a two-pack of tests for $34, the plan or insurer would reimburse $34.

If your plan has set up a network of preferred stores, pharmacies, and online retailers at which you can obtain a test with no out-of-pocket expense, you can still obtain tests from other retailers if you buy them outside of that network. Your plan is required to reimburse you at a rate of up to $12 per individual test (or the cost of the test, if less than $12). Save your receipt(s) to submit to your plan for reimbursement at a rate of up to $12 per individual test (or the cost of the test, if less than $12).

4. **Why would these companies be incentivized to cover the cost up front?**

If a plan or insurer sets up a network of convenient options such as pharmacies or retailers, including online retailers, in which individuals on their plans can get their tests' cost covered up front (at the point of sale), then it is permitted to limit the per test reimbursement amount for retailers outside of that network. Specifically, if a plan or insurer establishes this type of direct coverage option, then the plan or insurer is permitted to limit the reimbursement for tests purchased outside of their network to $12 per test (or the actual price of the test, if less). Many commercially available at-home tests run about $12 or less per test.

If the plan or insurer does not set up a process through which individuals can obtain test with no upfront costs, then the plan and insurer must reimburse in the full cost of the test, even if the test costs more than $12. For example, if an individual buys a two-pack for

$34, and the plan or insurer has not set up a system to cover costs upfront, then the plan or insurer would have to reimburse the $34 instead of $24.

5. **Where can I find a location that has at-home over-the-counter COVID-19 tests?**
Consumers can visit stores online or in-person. The Biden-Harris Administration is also strongly incentivizing health plans and insurers to set up a network of convenient options across the country like pharmacies or retailers, including online retailers, where people can get COVID-19 tests for free at the point of sale, rather than having to submit claims for reimbursement. Consumers can find out from their plan or insurer if it is providing direct coverage of over-the-counter COVID-19 tests through such a network of preferred pharmacies or retailers.

6. **What if I can't afford to pay for the at-home over-the-counter COVID-19 test(s) upfront?**
Health plans and insurers are strongly incentivized to set up a network of convenient options across the country, such as pharmacies and retailers, where people will be able to order online or walk in and pick up at-home over-the-counter COVID-19 tests for free rather than going through the process of having to submit claims for reimbursement. Consumers can find out from their plan or insurer if it is providing direct coverage of over-the-counter COVID-19 tests through such a network of preferred pharmacies or retailers.

You can also access free testing in the community. A list of community-based testing sites can be found here. COVID-19 tests are also available without cost-sharing to covered individuals when administered by a health care provider like a nurse, doctor, or pharmacist, without limitation.

7. **What if I'm uninsured? Can I still get free at-home over-the-counter COVID-19 tests?**

The Biden-Harris Administration is purchasing 500 million over-the-counter at-home tests to be distributed for free to all Americans who want them, with the initial delivery starting in January 2022. There will be a website where Americans can request at-home tests for home delivery—for free. More information on this federal program is expected soon.

People without insurance can also get free at-home test from some community health centers.

In addition, the U.S. Department of Health and Human Services (HHS) is providing up to 50 million free, at-home tests to community health centers and Medicare-certified health clinics for distribution at no cost to patients and community members. The program is intended to ensure COVID-19 tests are made available to populations and settings in need of testing, especially populations at greatest risk from adverse outcomes related to COVID-19. As of December 21, 2021, all Health Resources and Services Administration (HRSA) -supported health centers (including look-alikes) and Medicare-certified rural health clinics are eligible to participate in the program after completing the on-boarding process. More information about this program is here.

HHS also has established more than 10,000 free community-based pharmacy testing sites around the country. To respond to the Omicron surge, the Department of Health and Human Services (HHS) and the Federal Emergency Management Agency (FEMA) are creating surge testing sites in states across the nation.

Additional information about testing resources for people without insurance are available here: https://www.hhs.gov/coronavirus/covid-19-care-uninsured-individuals/index.html.

8. **What if I already bought and paid for at-home over-the-counter COVID-19 tests? Can I still get reimbursement for those?**

   Plans and insurers are required to cover at-home over-the-counter COVID-19 tests purchased on or after January 15, 2022. Plans or issuers may, but are not required by federal law to, provide such coverage for at-home over-the-counter COVID-19 tests purchased before January 15. Contact your health plan to inquire about getting reimbursed for tests purchased before January 15, 2022. Some states may have existing requirements related to coverage of at-home over-the-counter COVID-19 tests.

9. **What if I buy more than one test at a time?**

   Your plan is required to provide reimbursement for 8 tests per month for each individual on the plan, regardless of whether the tests are bought all at once or at separate times throughout the month.

   If your plan has set up a network of convenient options such as pharmacies and retailers, in which individuals can get their tests' cost covered up front (at the point of sale) then the plan is permitted to limit the reimbursement for tests purchased outside of their network to $12 per test (or the actual price of the test, if less than $12). If more than one test is purchased or ordered at a time, such as a package with two tests in it, then the insurer would reimburse up to $12 for each of the tests purchased at that time.

10. **If I pay up-front, how do I get reimbursed?**

    If you are charged for your test, keep your receipt and submit a claim to your health plan for reimbursement. You can find out directly from your plan how to submit reimbursement claims. They are not allowed to design their reimbursement process in a way that unduly delays your reimbursement. You will not need a prescription or a note from your provider.

11. How long will it take to receive my reimbursement from my plan?

Health plans are encouraged to provide prompt reimbursement for claims for at-home tests, and consumers can find out directly from their plan how their claims process works and ask questions about reimbursement timing.

The Biden-Harris Administration is strongly incentivizing plans to offer at-home over-the-counter COVID-19 tests through preferred pharmacies, retailers and online and mail-order programs without up-front out-of-pocket costs to you. Consumers can find out from their plan if it is providing such direct coverage of over-the-counter COVID-19 tests. You will not need to seek reimbursement later for tests received through such a program.

12. How many tests can I get reimbursed for?

Health plans must cover 8 individual at-home over-the-counter COVID-19 tests per person enrolled in the plan per month. That means a family of four can get 32 tests per month for free.

Note that tests may be packaged individually or with multiple tests in one package (for example, two tests packaged in one box). Plans are required to cover 8 tests per covered individual per month, regardless of how they are packaged and distributed.

There is generally no limit on the number of COVID-19 diagnostic tests, including at-home tests, that must be covered when ordered or administered by a health care provider.

13. My employer requires that I test myself multiple times per week and send them the results as a condition of employment. Can I get these tests reimbursed by insurance?

Plans are not required to provide coverage of testing (including an at-home over-the-counter COVID-19 test) that is for employment purposes.

14. I'm covered by Medicare. How do I get an at-home over-the-counter COVID-19 test?

HHS is providing up to 50 million free, at-home tests to community health centers and Medicare-certified health clinics for distribution at no cost to patients and community members. You can learn more about this program here. HHS also has established more than 10,000 free community-based pharmacy testing sites around the country. To respond to the Omicron surge, HHS and FEMA are creating surge testing sites in states across the nation. The Biden-Harris Administration is purchasing 500 million at-home, over-the-counter tests to be distributed for free to Americans who want them, with the initial delivery starting in January 2022. There will be a website where all Americans can request at-home tests for home delivery—for free. More information on this federal program is expected soon.

For people covered by original fee-for-service Medicare, Medicare pays for COVID-19 diagnostic tests performed by a laboratory, such as PCR and antigen tests, with no beneficiary cost sharing when the test is ordered by a physician, non-physician practitioner, pharmacist, or other authorized health care professional. People with Medicare can access one lab performed test without cost sharing per patient per year without an order. At this time original Medicare cannot pay for at-home tests through this program. Medicare Advantage plans may offer coverage and payment for at-home over-the-counter COVID-19 tests, so consumers covered by Medicare Advantage should check with their plan.

15. Do state Medicaid and CHIP programs cover at-home COVID-19 tests?

In accordance with the American Rescue Plan, State Medicaid and CHIP programs are required to cover FDA-authorized at-home COVID-19 tests. People with Medicaid or CHIP coverage should contact their state Medicaid or CHIP agency for information

regarding the specifics of coverage for at-home COVID-19 tests, as coverage rules may vary by state.

<div align="center">###</div>