To: All Medi-Cal PCPs
From: IEHP – Provider Relations
Date: January 28, 2022
Subject: Free OTC COVID-19 Antigen Kits Available

The Department of Health Care Services (DHCS) has announced that effective February 1, 2022, Over-the-Counter (OTC) Emergency Use of Authorization (EUA) U.S. Federal Drug Administration (FDA)-authorized, self-administered COVID-19 antigen test kits can be billed and reimbursed as a pharmacy-billed medical supply benefit through Medi-Cal Rx in accordance with current Centers for Disease Control and Prevention (CDC) recommendations.

Coverage is restricted to specific 1-test-per-kit or 2-tests-per-kit OTC EUA COVID-19 FDA authorized, self-administered COVID-19 antigen tests listed in the List of Covered Emergency Use Authorization (EUA) COVID-19 Antigen Tests, found on the Medi-Cal Rx Web Portal under “Forms and Information,” and require dispensing from a pharmacy, written (or electronic equivalent) on a prescription pad signed by a licensed prescriber or a pharmacist.

The following coverage criteria applies:

- Restricted to EUA for the diagnostic condition of suspected COVID-19 (Code I Restriction).
- Restricted to up to 8 tests (4 kits for 2 tests/kit) per 30 days per beneficiary.
- No refills allowed; the beneficiary would need to obtain a new prescription for each dispensing.
- To receive a test or test kit, the Member must be eligible for Medi-Cal on the date of service.

Members who purchased OTC EUA COVID-19 FDA-authorised, self-administered COVID-19 antigen tests between March 11, 2021 and January 31, 2022, over-the-counter and paid for them out-of-pocket may be able to be reimbursed by Medi-Cal.

- Reimbursement is limited to up to 8 tests (4 kits for 2 tests/kit) per 30 days per beneficiary and is restricted to specific 1-test-per-kit or 2-tests-per-kit OTC EUA COVID-19 FDA-authorised, self-administered COVID-19 antigen tests.
- Beneficiaries must be eligible for Medi-Cal on the date of purchase and must include proof of purchase and a copy of their beneficiary Benefits Identification Card (BIC) with the request for reimbursement.

For more information on how to obtain a refund, please visit the Medi-Cal Out-of-Pocket Expense Reimbursement (Conlan) web page on the California Department of Health Care Services (DHCS) website at: https://www.dhcs.ca.gov/services/medi-cal/Pages/Medi-Cal_Conlan.aspx

As a reminder, all communications sent by IEHP can also be found on our Provider portal at: www.iehp.org > For Providers > Plan Updates > Correspondence

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054 or (866) 223-4347.