



**** Important Notice ****

At-Home Over-The-Counter COVID-19 Test Kits

POS Billing Guidance

January 21, 2022

New Hampshire Medicaid Pharmacy Program (Fee-for-Service and Managed Care)

New Hampshire Fee-for-Service Medicaid remains committed to ensuring New Hampshire Medicaid beneficiaries receive medically necessary care during the 2019 novel coronavirus (COVID-19) public health emergency, including preventive services to reduce and slow the spread of the disease.

New Hampshire Medicaid Fee-for-Service will reimburse Pharmacies for **all eligible** Medicaid beneficiaries for at-home over-the-counter (OTC) COVID-19 test kits through Point of Sale.

- New Hampshire Fee-for-Service Medicaid will be reimbursing Pharmacies at Point of Sale for the test kits for the following **additional** eligibility groups: Family Planning Expansion and COVID-19.
- Reimbursement for the OTC test kits is at the lesser of \$12.00 per **test** or usual and customary charge. The units billed must be the actual number of tests dispensed, not the number of kits.
- There is a limit of 8 tests per beneficiary per month.
- There is no copay for test kits.

At this time, Medicare cannot pay for at-home test kits through their program, therefore Medicaid will cover the at-home test kits for dually eligible beneficiaries.

A Standing Order for COVID-19 Rapid Antigen At-Home Tests has been issued by Department of Health and Human Services that is valid for persons who do not have access to an ordering provider. (see page 3)



NDC	Product
08337000158	INTELISWAB COVID-19 RAPID TEST
11877001140	BINAXNOW COVID-19 AG SELF TEST
14613033967	QUICKVUE AT-HOME COVID-19 TEST
14613033968	QUICKVUE AT-HOME COVID-19 TEST
14613033972	QUICKVUE AT-HOME COVID-19 TEST
50010022431	CARESTART COVID19 AG HOME TEST
50010022432	CARESTART COVID19 AG HOME TEST
50010022433	CARESTART COVID19 AG HOME TEST
56362000589	IHEALTH COVID-19 AG RAPID TEST
56362000590	IHEALTH COVID-19 AG RAPID TEST
56362000596	IHEALTH COVID-19 AG RAPID TEST
56964000000	ELLUME COVID-19 HOME TEST
82607066026	FLOWFLEX COVID-19 AG HOME TEST
82607066027	FLOWFLEX COVID-19 AG HOME TEST
82607066028	FLOWFLEX COVID-19 AG HOME TEST
82607066047	FLOWFLEX COVID-19 AG HOME TEST

Pharmacies needing assistance may call the
Magellan Call Center at (866) 675-7755.

Sincerely,
Magellan Medicaid Administration, Inc.



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

129 PLEASANT STREET, CONCORD, NH 03301
603-271-9544 1-800-852-3345 Ext. 9544
Fax: 603-271-4912 TDD Access: 1-800-735-2964
www.dhhs.nh.gov

Lori A. Shibinette
Commissioner

Jonathan R. Ballard
Chief Medical Officer

Standing Order for COVID-19 Rapid Antigen AT-Home Tests

At-Home COVID-19 Rapid Antigen Tests detect the presence of an antigen against COVID-19. These tests are for individuals who meet the Centers for Disease Control and Prevention (CDC) clinical and/or epidemiological criteria for COVID-19 testing as determined by the New Hampshire Department of Health and Human Services in support of the public health investigation and response to the COVID-19 pandemic, including for the purposes of community surveillance of COVID-19.

Pursuant to He-P 30 1.07, this order authorizes the dispensing of all versions of at-home COVID-19 tests sold as Over-The-Counter (OTC) tests that have received Emergency Use Authorization or full approval from the U.S. Food and Drug Administration to persons in State of New Hampshire to test specimens in accordance with the manufacturer's instructions and in accordance with guidance from the Division of Public Health Services at the New Hampshire Department of Health and Human Services for the control of infectious diseases.

This order is valid for persons who do not have access to an ordering provider for any person seeking to have At-Home Rapid Antigen COVID-19 tests within New Hampshire.

Quantity Limit: 8 tests (or 4 boxes containing two tests each) per month per person
Dispensing Instructions: Follow the manufacturer's written instructions for use to test for COVID-19.

Jonathan R. Ballard MD
Chief Medical Officer

Expiration Date: 12/31/2022
NPI# 1972731214
NH Med License# 15614

Lori A. Shibinette
Commissioner