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COVID-19 Testing

Testing coverage

1. Are Blue Shield and Blue Shield Promise covering COVID-19 screening and testing?

Yes. Blue Shield and Blue Shield Promise is waiving out-of-pocket costs for co-payments, coinsurance, and deductibles for COVID-19 diagnostic testing and related screening services ordered using telemedicine and for testing and screening services ordered or performed in a doctor's office, urgent care, hospital, or emergency room in accordance with applicable state and federal law¹.

Coverage is provided for diagnostic testing that is provided by, or with a referral from, a licensed or authorized healthcare provider. This may include testing of symptomatic patients, as well as testing of asymptomatic patients, regardless of whether the patients have a recent known or suspected exposure.

2. Are Blue Shield and Blue Shield Promise covering serology (antibody) testing under the blanket of COVID-19 testing?

Blue Shield of California and Blue Shield Promise will continue to abide by all state and federal rules and regulations, including covering out-of-pocket costs for coronavirus (COVID-19) diagnostic testing as part of the current federal emergency declaration. For purposes of providing coverage of diagnostic testing for COVID-19, Blue Shield and Blue Shield Promise are following federal guidance under the Families First Coronavirus Relief Act (FFCRA) and the Coronavirus Aid, Relief, and Economic Security (CARES) Act, along with guidance from the Centers for Medicare & Medicaid Services (CMS) and All Plan Letter (APL) 21-011 issued by the California Department of Managed Health Care. Blue Shield Promise additionally is following applicable guidance from the California Department of Health Care Services for Medi-Cal managed care plans.

In accordance with this guidance, Blue Shield and Blue Shield Promise are providing coverage without cost sharing for medically necessary diagnostic serological (antibody) testing and diagnostic (PCR or antigen) testing that is provided by, or with a referral from, a licensed or authorized healthcare provider.

According to guidance from the Food and Drug Administration (FDA) and the CDC, antibody tests should not be used as the sole basis for diagnosis, and there are only very limited medically necessary applications for the use of antibody tests in the diagnosis and treatment of COVID-19.

Testing performed for non-diagnostic purposes, such as for public health surveillance or to support return-to-work purposes will not be covered.

3. Can employees be covered for multiple COVID-19 tests?

There is no limitation on repeat testing if coverage requirements are met. Coverage will be provided and the cost-share will be waived for any claim that comes in for COVID-19 testing that is provided by, or with a referral from, a licensed or authorized health care provider through the end of the federal public health emergency.

4. Does Blue Shield and Blue Shield Promise cover at-home Coronavirus test kits and will the co-payment be waived?

¹ Please note that COVID guidance is evolving rapidly and this information may be subject to change based on any new legal or regulatory developments.

Blue Shield and Blue Shield Promise require that self-administered tests are ordered by a health care provider, sent to the approved laboratory specified on the kit, and processed in accordance with FDA and other guidance, as applicable to be covered at \$0 cost-share. This policy is in accordance with applicable legislation, including the federal CARES Act.

Blue Shield and Blue Shield Promise only cover self-administered test kits that are FDA-approved, emergency use authorized, or authorized under other guidance from the Secretary of the Department of Health and Human Services consistent with the federal CARES Act. Other self-administered tests available on in the market may not be accurate and are not covered.

5. Is Blue Shield and Blue Shield Promise providing and covering the cost of rapid test kits?

Rapid test kits use antigen testing, which allows test samples to be processed at the point of testing, as opposed to the Polymerase Chain Reaction (PCR) testing, which must be processed in a laboratory.

However, while rapid testing can provide faster results, the accuracy of rapid testing is lower than PCR tests. Read the CDC overview of COVID-19 testing.

Coverage for rapid test kits aligns with coverage for other COVID-19 diagnostic testing under federal law; if rapid testing is provided by, or with a referral from, a licensed or authorized healthcare provider, it is a covered benefit with no member cost sharing.

This coverage requirement applies to both fully-insured and self-funded plans.

6. Are Blue Shield and Blue Shield Promise providing coverage for testing provided through pop-up/temporary and drive-through testing sites, including sites administered by state, county, or local governments?

Yes. Coverage is provided without member cost sharing for COVID-19 diagnostic testing received from a licensed or authorized provider, including licensed or authorized providers offering testing through pop-up/temporary and drive-through testing sites. This includes testing provided through state, county, and locally administered testing sites.

7. For HMO Blue Shield Away from Home Care members in another state: how do they find out what type of testing is covered, cost of coverage, and where to get tested for COVID-19 and antibodies?

Away from Home Care enables members to receive Guest Membership benefits from other participating Blue Plans while traveling outside their Home Plan service area. The member will need to contact the Blues plan that they are enrolled in by calling the Member Services number on the back of their Blue Shield member ID card.

Types of tests

8. What types of tests are available?

There are two types of tests available for COVID-19:

Diagnostic tests tell if someone has a current infection and is contagious. These tests
are done by either spitting into a cup or having a swab inserted into the nose or
throat. There are two kinds of diagnostic tests: laboratory-based tests and point-ofcare tests (also called rapid tests). Laboratory tests take longer but are more
accurate.

• Antibody or serology tests measure the presence of antibodies in the blood. These indicate previous infection but cannot tell if there is an active infection at the time of the test. These tests require blood to be drawn.

9. What are the two types of diagnostic tests?

- 1. Molecular tests: PCR (polymerase chain reaction) and LAMP tests
 - Done in a laboratory
 - Thought to be the most accurate option
 - Generally take longer. This is because they take a few hours to complete after they are sent to the lab.

2. Antigen tests

- Most common type of rapid or point-of-care tests
- Most often much faster
- Most often cheaper than PCR or LAMP tests
- Tend to be less accurate when the result is negative
- This means you may get a "false negative" result. For example, your rapid test
 may show you are negative for an active COVID-19 infection. But a PCR test may
 show that you are actually positive. Sometimes testing more often can make up
 for some of these issues.

Members should talk to their doctor before using a rapid antigen test. Here are questions to ask:

- Is this the right test?
- What do the results mean?

10. What are the differences between the two diagnostic tests?

- All tests may vary in their accuracy. This can depend on:
- How specimens are collected and handled,
- Time between exposure and testing,
- How much virus is present in the test sample,
- The manufacturer of the test kit, and
- The lab analyzing the test sample.

11. What are concerns with antibody tests?

An antibody or serology test generally cannot show if there is a current infection. This is because it can take 1 to 3 weeks after infection to make antibodies. This test is not suitable for the diagnosis of a current infection.

Also, it hasn't been determined if having antibodies to the virus or a positive test result can protect someone from getting infected with the virus again. If there is protection, it is also not known how long it might last or if someone with antibodies could still be contagious.

Blue Shield will not cover antibody tests unless ordered by a healthcare provider licensed to order COVID-19 tests (and for a rare case in which it is needed to help make a diagnosis).

Who can get tested

12. Who can get tested for COVID-19?

Everyone can get tested. Most individual diagnostic testing ordered or performed by a health care provider is covered without out-of-pocket costs. But there may be some

instances when a copay is required or the member may be required to pay for the full cost of a test. See the testing coverage FAQs for more details.

COVID-19 diagnostic testing ordered or provided by a health care provider is covered with no out-of-pocket costs:

Whether or not the individual has symptoms of COVID-19.

Whether or not the individual thinks they were exposed to someone who has COVID-19.

When should individuals get tested

13. When should individuals get tested?

Timing for testing is important. The incubation period for COVID-19 is around 5 to 7 days. But it can be up to 14 days.

If an individual has symptoms, it is advised that they take a test 3 days after symptoms develop. If they have been exposed to COVID-19 but have no symptoms, it is advised that they take a test 4 - 8 days after exposure.

Testing too early or too late is likely to result in a negative test even if the individual has been infected. A healthcare provider can help determine when an individual should be tested.



14. If a test result shows negative, does that mean the individual does not have COVID-19?

If a diagnostic test for COVID-19 is negative, the individual could still have COVID-19. This can happen if the test was taken too early or too late in the infection. It can also depend on the type of test taken. The negative test result just means that the individual probably did not have COVID-19 at the time of the test. Also, sometimes the test can be wrong. That does not mean the individual will not get sick or that they are not contagious. The individual could also be exposed to COVID-19 and get infected after the test. Everyone needs to take precautions even if they have had a negative test.

15. What should an individual do if they test positive?

They should speak with their healthcare provider about the next steps for care. They can also read more about <u>getting care</u>.

16. Should individuals still get tested even after fully vaccinated?

Yes. If they have symptoms of COVID-19, they should get tested. This is true even after being vaccinated. Tests for COVID-19 work the same in vaccinated people as they do in unvaccinated people.

As more is learned about the vaccine, this guidance may change.

Where can individuals get tested

17. Where can an individual get tested?

Blue Shield recommends that individuals visit an in-network testing site whether they have a healthcare provider order or not. However, diagnostic testing ordered or performed by licensed or authorized out-of-network health care providers is also covered.

If an individual has symptoms or thinks they have been exposed to someone who has COVID-19, they should contact their healthcare provider. The provider can tell the individual where to get a test if needed.

If the individual has no symptoms and doesn't think they have been exposed to COVID-19, they have a few options:

- Use the <u>State testing locator</u> to find a testing site. The location results from the State may include out-of-network sites.
- Check their county or local public health department.
- Find a health center that provides COVID-19 testing.
- There may be community testing sites available to help.
- Visit a network testing location, like one of these retail pharmacies:
 - CVS Pharmacies
 - Rite-Aid
 - Walgreens
 - Quest through Walmart
 - Ralphs' Clinic Testing Services for Viral or Rapid Antigen Tests
- In addition to the locations listed above, the individual can also call the COVID-19 state hotline (833) 422-4255 to find a test site near them.

Claims and operations

18. When did Blue Shield start to process testing claims with no cost-sharing for COVID-19-related services?

On March 18, 2020, Blue Shield began processing member co-pays, coinsurance, and deductibles at no cost. Any claims received between January 27, 2020 and March 18, 2020 were re-adjudicated at zero dollars for COVID-19-related testing and screening services in accordance with state and federal law.

19. If a member received a check from Blue Shield of California for their COVID-19 test performed by an out-of-network provider, what should they do with it? If the member has paid out-of-pocket, the check is their reimbursement.

If the member has not paid out-of-pocket for the testing, the check will need to be endorsed and forwarded to the provider of service. If the address for the provider is not located on the member's Explanation of Benefits, the member should contact the customer service phone number located on the back of their ID card for assistance with locating the provider's mailing address.

Policies and Regulations

20. How is Blue Shield responding to the California Department of Industrial Relations (DIR) Emergency Regulation issued on 11/30/2020?

The <u>California Department of Industrial Relations (DIR) Emergency Regulation</u> issued on November, 30, 2020 (revised on June 17, 2021) does not mandate health plans to cover COVID-19 testing that employers must provide under the regulation.

Blue Shield is providing coverage without cost-sharing for COVID-19 diagnostic testing (including PCR and antigen testing) that is provided by, or with a referral from, a licensed or authorized healthcare provider.

21. What does the Biden guidance announced on September 9, 2021 entail?

On September 9, the White House announced a COVID-19 action plan which outlines forthcoming requirements for certain workforces intended to increase vaccination rates to decrease the spread of COVID-19 and require testing for those who are unvaccinated. The requirements which the Department of Labor (DOL) will be enforcing include:

- Requirement for employers with a workforce of 100 or more employees to get vaccinated or get tested once a week if unvaccinated
- Vaccine requirement for all federal workers and millions of federal contractors.
- Vaccine requirement for health care workers at Medicare and Medicaid participating hospitals and other health care settings.

22. Will Blue Shield comply with COVID-19 testing expansions mandated in SB 510?

Blue Shield of California will continue to adhere to state and federal requirements regarding coverage of COVID-19 testing and vaccinations, including SB 510 when applicable. The bill goes into effect January 1, 2022 and applies only to fully-insured plans regulated under state law.

We anticipate additional guidance from the state in the coming weeks, and we will continue to provide updates to support our members and employer groups in the battle against COVID-19. Please visit our COVID-19 Resources page for information and resources regarding testing and vaccinations.

Online resources

Blue Shield resources

- Employer and Broker COVID-19 resource page
- <u>Blue Shield News Center</u>
- Member COVID-19 resource page
- Finding a Testing Location
- Member Testing FAQs

Government resources

- <u>State of California Testing Resources</u>
- State of California Testing Task Force
- Finding a Testing Site
- DMHC COVID-19 Response
- CDC COVID-19 Testing Overview