

**COMMONWEALTH OF MASSACHUSETTS**  
**Office of Consumer Affairs and Business Regulation**  
**DIVISION OF INSURANCE**

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COMMISSIONER OF INSURANCE

**BULLETIN 2022-02**

To: Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc.,  
and Health Maintenance Organizations

From: Gary D. Anderson, Commissioner of Insurance 

Date: January 19, 2022

Re: At-Home Testing for COVID-19

The Division of Insurance (“Division”) issues this Bulletin to update Bulletin 2021-08 regarding COVID-19 testing and to provide information to Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc., and Health Maintenance Organizations (“Carriers”) about the Division’s expectations regarding Carriers’ coverage for testing for COVID-19 in light of new federal requirements. This Bulletin addresses required coverage for over-the-counter diagnostic SARS-CoV-2 tests approved or authorized via emergency use authorization, or otherwise approved or authorized by the U.S. Food and Drug Administration, that can be self-administered and self-read at home or elsewhere without the involvement of a health care provider (“at-home tests”).

The federal government issued guidance on January 10, 2022<sup>1</sup> regarding required coverage for at-home tests beginning January 15, 2022. A Carrier is encouraged to provide coverage by directly reimbursing sellers of at-home tests for COVID-19. The Carrier may alternatively require a covered person or member who purchases an at-home test for COVID-19 to submit a claim for reimbursement to the Carrier in accordance with the Carrier’s reasonable internal claims procedures, consistent with applicable federal and state law. The Division expects all Carriers providing insured health benefit plans in Massachusetts to comply with current state and federal guidance regarding COVID-19 testing.

**The COVID-19 Risk**

Testing is vitally important to help reduce the spread of COVID-19 and to quickly diagnose

<sup>1</sup> [FAQs about Affordable Care Act Implementation Part 51, Families First Coronavirus Response Act and Coronavirus Aid, Relief, and Economic Security Act Implementation \(dol.gov\)](https://www.dol.gov/eis/volume/86/FAQs%20about%20Affordable%20Care%20Act%20Implementation%20Part%2051,%20Families%20First%20Coronavirus%20Response%20Act%20and%20Coronavirus%20Aid,%20Relief,%20and%20Economic%20Security%20Act%20Implementation%20(dol.gov))

COVID-19 so that it can be effectively treated. At-home tests are convenient, efficient, and accurate in rapidly detecting the presence of certain proteins on the surface of the virus that causes COVID-19. The cost of COVID-19 testing should not be a barrier for Massachusetts residents, and health insurance coverage plays a critical role in the public's actual and perceived access to and affordability of health care services. Therefore, the Division is notifying Massachusetts Carriers that it expects them to take all appropriate steps to enable their covered members to obtain appropriate testing and treatment that will help fight the spread of COVID-19.

### **Procedures for Covering At-Home Testing for COVID-19**

Please note that the Massachusetts Department of Public Health has issued a standing order for such tests, and the Division expects that Carriers do the following to make at-home tests for COVID-19 available for the duration of the federal declared public health emergency:

- Eliminate prior approval requirements for at-home tests in accordance with federal guidelines. Carriers may not employ medical necessity reviews, nor may they require an order from a provider responsible for providing care to the patient. This Bulletin does not modify previous federal or state guidance addressing coverage for purposes not primarily intended for individualized diagnosis or treatment of COVID-19, including guidance stating that Carriers are not required to provide coverage of at-home testing for COVID-19 that is for employment purposes.
- Apply no limit to the number of covered at-home COVID-19 tests that is fewer than 8 tests for each covered person or member per 30-day period (or per calendar month). If tests are provided within a box of 2, a Carrier is to allow a minimum of 4 boxes per covered individual over a 30-day period (or per calendar month). Carriers may not impose equivalent limits for shorter time periods; for example, 4 tests per covered individual over a 15-day period.
- Continue to provide coverage for COVID-19 tests that are administered or obtained with a provider's involvement or prescription.
- Forego any cost-sharing (copayments, deductibles, or coinsurance) for COVID-19 testing.
- Update all web-based and other consumer-facing materials to: (1) explain how to obtain at-home tests for COVID-19; and (2) specifically identify a list of a Carrier's preferred providers or retailers through which a covered member may obtain such at-home tests without submitting a claim or being subject to any cost-sharing or other payment.
- Ensure that web-based and other consumer-facing materials prominently note how members may also obtain at-home tests for COVID-19 from non-preferred providers without cost-sharing if the Carrier has direct coverage through preferred pharmacies and retailers and/or direct-to-consumer systems. These materials should prominently note that the member may be required to process claims with the Carrier for reimbursement and may be responsible for any amount paid above the \$12 cap per test identified in federal guidance. Such information should explain how a member can submit such claims to the Carrier for reimbursement.

Carriers are expected to establish all appropriate contractual, billing, and other administrative processes to reimburse preferred pharmacies or retailers for the cost of at-home tests, and to ensure that these processes are clearly explained in writing to in-network providers.

### **Carriers Acting as Administrators**

Due to the public health crisis caused by COVID-19, when Carriers are acting as administrators for employment-sponsored non-insured health benefit plans, the Division expects Carriers to

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follow all applicable federal guidance and to encourage plan sponsors to take steps that are consistent with the provisions of this Bulletin. Plan sponsors should be made aware of the public health risks to all Massachusetts residents, and Carriers should do all they can to encourage plan sponsors to take steps to remove barriers to accessing appropriate testing, diagnosis, counseling, and treatment of COVID-19.

If you have any questions about this Bulletin, please contact Kevin Beagan, Deputy Commissioner for the Health Care Access Bureau, at (617) 521-7323.