Effective Date: 01/01/22

## COVID-19 Testing at section 1905(a)(4)(F) of the Social Security Act

During the period starting March 11, 2021 and ending on the last day of the first calendar quarter that begins one year after the last day of the emergency period described in section 1135(g)(1)(B) of the Social Security Act (the Act):

Coverage	e

Control and	ate assures coverage of COVID-19 testing consistent with the Centers for Disease Prevention (CDC) definitions of diagnostic and screening testing for COVID-19 and ndations for who should receive diagnostic and screening tests for COVID-19.
X The st	rate assures that such coverage:
2. 3. 4.	Includes all types of FDA authorized COVID-19 tests; Is provided to all categorically needy eligibility groups covered by the state that receive full Medicaid benefits; Is provided to the optional COVID-19 group if applicable; and Is provided to beneficiaries without cost sharing pursuant to section 1916(a)(2)(1) and 1916A(b)(3)(B)(xiii) of the Act; reimbursement to qualified providers for such coverage is not reduced by any cost sharing that would otherwise be applicable under the state plan.
Please descr CFR 440.23	ibe any limits on amount, duration or scope of COVID-19 testing consistent with 42 0(b).
Pharmacy:	Allowable for 4 tests per member per month; overrides available.
X The st	Applies to the state's approved Alternative Benefit Plans, without any deduction, sharing, or similar charge, pursuant to section 1937(b)(8)(B) of the Act. atte assures compliance with the HHS COVID-19 PREP Act declarations and ns, including all of the amendments to the declaration.
Additional I	nformation (Optional):

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## Reimbursement

X The state assures that it has established state plan rates for COVID-19 testing consistent with the CDC definitions of diagnostic and screening testing for COVID-19 and its recommendations for who should receive diagnostic and screening tests for COVID-19.

List references to Medicaid state plan payment methodologies that describe the rates for COVID-19 testing for each applicable Medicaid benefit:

The fee schedule for COVID-19 testing can be found on the website, <a href="https://www.medicaid.alabama.gov">www.medicaid.alabama.gov</a>, on the Provider tab under Fee Schedules, labelled "COVID-19 Testing and Specimen Collection Vaccine Administration, and Monoclonal Antibody Infusion"

 $\underline{X}$  The state is establishing rates for COVID-19 testing pursuant to pursuant to sections 1905(a)(4)(F) and 1902(a)(30)(A) of the Act.

The state's rates for COVID-19 testing are consistent with Medicare rates for testing, including any future Medicare updates at the:

Medicare national average, OR Associated geographically adjusted rate.

 $\underline{X}$  The state is establishing a state specific fee schedule for COVID-19 testing pursuant to sections 1905(a)(4)(F) and 1902(a)(30)(A) of the Act.

The state's rate is as follows and the state's fee schedule is published in the following location:

Pharmacy follows the state plan policy for the ingredient cost plus professional dispensing fee: Attachment 4.19-B, page 3. The rates can be found online here: <a href="https://www.medicaid.alabamaservices.org/alportal/NDC%20Look%20Up/tabId/5/Def">https://www.medicaid.alabamaservices.org/alportal/NDC%20Look%20Up/tabId/5/Def</a> ault.aspx

Reimbursement rates for non-Pharmacy codes can be found on the website, <a href="https://www.medicaid.alabama.gov">www.medicaid.alabama.gov</a>, on the Newsroom tab under Fee Schedules dated April 13, 2022 named "COVID-19 Testing and Specimen Collection Vaccine Administration, and Monoclonal Antibody Infusion."

X The state's fee schedule is the same for all governmental and private providers.

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	payment to these providers for COVID-19 testing is described under the benefit payment methodology applicable to the provider type:
Addit	ional Information (Optional):
	The payment methodologies for COVID-19 testing for providers listed above are described below:

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