

Bill Original Medicare for over-the-counter COVID-19 tests for Medicare Plus BlueSM and BCN AdvantageSM members

On April 4, 2022, Medicare began covering over-the-counter COVID-19 tests for people with Medicare Part B, including those with Medicare Advantage plans. Medicare covers these OTC tests with no out-of-pocket costs, annual deductible, coinsurance or copayment applied. This coverage will continue through the end of the public health emergency.

There's a limit of eight OTC tests per month that Medicare will cover. This doesn't include laboratory-performed COVID-19 tests. Providers can procure FDA-approved, authorized or cleared OTC COVID-19 tests from their supplier, and will receive \$12 from Medicare for each OTC COVID-19 test billed.

Billing for Medicare Advantage patients

Submit claims for OTC COVID-19 tests to Original Medicare through your [Medicare Administrative Contractor](#),* or MAC, using the patient's Medicare Beneficiary Identifier. Don't use their Medicare Advantage member ID when billing Original Medicare.

Note: Medicare won't cover tests billed by the following providers:

- Suppliers of durable medical equipment and prosthetics, orthotics, and supplies
- Providers who give OTC COVID-19 tests to patients in a hospital or skilled nursing facility

For more information on how to bill, who can participate and tips for providing tests, visit CMS' [webpage](#)* on OTC COVID-19 tests.

Follow previously published COVID-19 at-home testing policy for members with commercial coverage

Blue Cross and BCN commercial plans follow the [at-home COVID-19 testing policy published in February](#). Our commercial plans only cover COVID-19 at-home tests that are billed through the member's pharmacy benefit.

*Clicking this link means that you're leaving the Blue Cross Blue Shield of Michigan and Blue Care Network website. While we recommend this site, we're not responsible for its content.