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Inland Empire Health Plan

# PHARMACY TIMES

BY IEHP PHARMACEUTICAL SERVICES DEPARTMENT

January 31, 2022

## Free OTC COVID-19 Antigen Test Kits Available

Dear IEHP Pharmacy Provider,

Starting **February 1, 2022**, IEHP Medi-Cal members may obtain up to eight (8) over the counter (OTC) Emergency Use of Authorization (EUA) COVID-19 antigen test kits at **no cost** through **Medi-Cal Rx**.

For a full list of eligible OTC EUA COVID-19 antigen tests, please visit the following web page: [www.medi-calrx.dhcs.ca.gov/provider/forms](http://www.medi-calrx.dhcs.ca.gov/provider/forms). There must be a order on a prescription pad (or electronic equivalent) written by a licensed **prescriber** or **pharmacist**, and the COVID-19 antigen tests must be dispensed from a pharmacy. The prescription must be billed to Medi-Cal Rx (BIN: 022659, PCN: 6334225, GROUP: MEDICALRX).

For full details on the guidance, please visit [www.medi-calrx.dhcs.ca.gov/provider/pharmacy-news/](http://www.medi-calrx.dhcs.ca.gov/provider/pharmacy-news/)

The following coverage criteria applies:

- Restricted to EUA for the diagnostic condition of suspected COVID-19 (Code I Restriction).
- Restricted to up to 8 tests (4 kits for 2 tests/kit) per 30 days per beneficiary.
- No refills allowed; the beneficiary would need to obtain a new prescription for each dispensing.
- To receive a test or test kit, the Member must be eligible for Medi-Cal on the date of service.

Members who purchased eligible OTC EUA COVID-19 antigen tests between **March 11, 2021, and January 31, 2022**, and paid for them out-of-pocket may be able to be reimbursed by Medi-Cal.

- Reimbursement is limited to up to 8 tests (4 kits for 2 tests/kit) per 30 days per beneficiary and is restricted to eligible tests, see full list in link above
- Beneficiaries must be eligible for Medi-Cal on the date of purchase and must include proof of purchase and a copy of their beneficiary Benefits Identification Card (BIC) with the request for reimbursement.

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For more information on how to obtain a refund, please visit the Medi-Cal Out-of-Pocket Expense Reimbursement (Conlan) web page on the California Department of Health Care Services (DHCS) website at: [https://www.dhcs.ca.gov/services/medi-cal/Pages/Medi-Cal\\_Conlan.aspx](https://www.dhcs.ca.gov/services/medi-cal/Pages/Medi-Cal_Conlan.aspx)

If you have any questions, please contact Medi-Cal Rx 24/7 customer service line (800-977-2273).

Sincerely,  
IEHP Pharmaceutical Services