Frequently Asked Questions
Health Plan Coverage of COVID-19 Testing

Effective July 17, 2020, the California Department of Managed Health Care (DMHC) promulgated an emergency regulation regarding health plan coverage for COVID-19 diagnostic testing during the state of emergency proclaimed by the Governor on March 4, 2020, in response to COVID-19.

1. Does my health plan have to cover my COVID-19 test?
Yes, if you’re experiencing COVID-19 symptoms, you think you were exposed to someone who has COVID-19, or the test is otherwise medically necessary for your situation.

If you have symptoms of COVID-19 or you think you’ve been exposed to someone with COVID-19, under federal law, you can obtain a COVID-19 test anywhere and your health plan must pay for the test.

If you don’t have symptoms and don’t think you’ve been exposed to someone with COVID-19, but you are an “essential worker” as discussed below, your health plan must cover your COVID-19 test. However, you must contact your health plan before getting testing. They will help you get an appointment with a testing provider.

If you don’t have symptoms, don’t think you’ve been exposed to someone with COVID-19, and aren’t an “essential worker” as defined below, and you think you need a test, please contact your health plan or health care provider for further guidance.

2. How do I know if I’m an “essential worker” for purposes of COVID-19 testing coverage?
New state emergency regulations describe who are “essential workers” for purposes of coverage of COVID-19 testing.

You are an “essential worker” if you:

- work in a correctional facility;
- work in a congregate care facility (e.g., a residential care facility for the elderly or a shelter for people experiencing homelessness); or,
- provide care in the home to an elderly person or a person with a disability.

You are an “essential worker” if you work in one of the sectors listed below and regularly have contact with the public or with people who may have or been exposed to COVID-19:
• health care (e.g., hospitals, skilled nursing facilities, long-term care facilities, ambulatory surgery centers, health care providers’ offices, health care clinics, pharmacies, blood banks, dialysis centers, hospices, home health);
• emergency services (e.g., police and public safety departments, fire departments, emergency service response operations);
• public transportation (e.g., public transit, passenger rail service, passenger ferry service, public airports, commercial airlines);
• food service (e.g., grocery stores, convenience stores, restaurants, grocery or meal delivery services); or,
• education (e.g., childcare establishments, pre-kindergarten programs, primary and secondary schools, colleges and universities).

Finally, you are an “essential worker” if you work in one of the sectors listed below and have frequent interactions with the public or can’t regularly maintain at least six feet of space from other workers:

• retail;
• manufacturing;
• agriculture (e.g., harvesting sites or facilities, packing facilities, slaughter facilities); or,
• food manufacturing (e.g., food production and processing facilities, food packing facilities.

3. Will I have to pay a co-pay for a COVID-19 test?

If you are experiencing symptoms of COVID-19 or you think you were exposed to someone with COVID-19, under federal law, you do not need to pay a co-pay to be tested. In all other circumstances, you may be required to pay a co-pay, just like you would when getting any other health care services.

4. How long will I have to wait to get a test?

The length of time it will take depends on why you are seeking a test.

If you have symptoms of COVID-19 or think you were exposed, under federal law, you can go to any available testing site. The easiest way to find a testing site is to go to COVID19.ca.gov or call your health plan so they can direct you to an available testing location.

If you don’t have COVID-19 symptoms and don’t know if you have a known or suspected exposure COVID-19, but you are an “essential worker,” please call your health plan. The health plan must offer you a testing appointment that is no more than 48 hours after you contacted the plan. The testing site must be within 15 miles or 30 minutes of your residence or workplace. If the health plan can’t find you an available appointment within that time and distance, then you can go to any available testing site and your health plan will pay for the test.

If you don’t have symptoms or suspected exposure, and you are not an “essential worker, please call your health care provider. If your provider determines a COVID-19 test is medically necessary for you, your health plan must offer you a testing appointment that is no
more than 96 hours after you contacted the plan. The testing site must be within 15 miles or 30 minutes of your residence or workplace. If the health plan can’t find you an available appointment within that time and distance, you can go to any available testing site.

5. **How does my health plan know if I’m an “essential worker”?**

Your health plan can ask you questions about the nature of your work, to determine whether you are an essential worker.

However, your health plan can’t ask you to provide further documentation or evidence of your work status. For example, your health plan can’t ask you to provide written proof of where you work or the conditions of your workplace.

6. **I get my health care coverage through my employer, who has a “self-insured” plan. Do these new regulations apply to me?**

Self-insured plans are regulated by the federal government, rather than the state. If you have symptoms of COVID-19 or you were exposed to someone who you know or suspect has COVID-19, under federal law, your employer’s self-insured plan must cover your test.

In all other instances, you should talk to your employer’s self-insured plan to find out whether they will cover COVID-19 testing.