Medicare & Coronavirus

Get a COVID-19 vaccine as soon as you can.

- Medicare covers the updated COVID-19 vaccine at no cost to you. The updated vaccine targets the original COVID-19 viral strain and 2 Omicron variants (BA.4/BA.5). Medicare covers the vaccine for anyone who has Medicare due to their age, a disability, End-Stage Renal Disease (ESRD), or ALS (also called Lou Gehrig's disease). Be sure to bring your Medicare card. You can get the updated vaccine at least 2 months after completing your primary vaccination series (2 doses of Pfizer-BioNTech, Moderna, or Novavax, or one dose of Johnson & Johnson)—regardless of how many original COVID-19 vaccines you got so far.
 - o The updated Pfizer vaccine is available for people 5 and older.
 - o The updated Moderna vaccine is available for people 6 and older.
 - Note: Some adults 18 years and older who have completed their primary vaccine series have the option to get a Novavax vaccine instead of the updated Pfizer-BioNTech or Moderna COVID-19 vaccine. Visit <u>CDC.gov</u> to learn more about the Novavax vaccine.
- If you're immunocompromised (like people who have had an organ transplant and are at risk for infections and other diseases), Medicare will cover an additional dose of the COVID-19 vaccine, at least 28 days after a second dose, at no cost to you. Note: Don't mix vaccines. If your first two doses were Pfizer, your third dose should also be Pfizer. If your first two doses were Moderna, your third dose should also be Moderna.
- COVID-19 vaccines are safe and effective. Get details about the vaccine.
- If you have Medicare and have a disability or face other challenges in getting to a location away from home for a vaccination, Medicare will pay a doctor or other care provider to give you the COVID-19 vaccine in your home. You may need to give them your Medicare Number for billing, but there's still no cost to you for the vaccine and its administration. Get details about the vaccine at home.

Find Vaccine Near Me

Medicare wants to help protect you from COVID-19:

- Medicare covers items & services related to COVID-19
- If you paid to get a COVID-19 vaccine

- Be alert for scammers trying to steal your Medicare Number
- How to stay up to date

Medicare covers items & services related to COVID-19

- <u>FDA-authorized and FDA-approved COVID-19 vaccines</u>. You pay no out-of-pocket costs.
- Lab tests for COVID-19. You pay no out-of-pocket costs.
- COVID-19 Over-the-Counter (OTC) tests—see section below for details.
- <u>FDA-authorized COVID-19 antibody (or "serology") tests</u> if you were diagnosed with a known current or known prior COVID-19 infection or suspected current or suspected past COVID-19 infection.
- Monoclonal antibody treatments for COVID-19.
- All <u>medically necessary hospitalizations</u>. This includes if you're diagnosed with COVID-19 and might otherwise have been discharged from the hospital after an inpatient stay, but instead you need to stay in the hospital under quarantine. You'll still pay for any hospital deductibles, copays, or coinsurances that apply.
- Expanded <u>telehealth services</u> during the Public Health Emergency.

Note

Military hospital ships and temporary military hospitals don't charge Medicare or civilians for care. If you're not sure whether the hospital will charge you, ask them.

• If you have a Medicare Advantage Plan, you have access to these same benefits. Medicare allows these plans to waive cost-sharing for COVID-19 lab tests. Many plans offer additional telehealth benefits and expanded benefits, like meal delivery or medical transport services. Check with your plan about your coverage and costs.

COVID-19 Over-the-Counter (OTC) tests

Medicare now covers up to 8 over-the-counter COVID-19 tests each calendar month, at no cost to you.

- This coverage continues until the COVID-19 public health emergency ends.
- Medicare Part B (Medical Insurance) will cover these tests if you have Part B. (Medicare won't cover over-the-counter COVID-19 tests if you only have Medicare Part A (Hospital Insurance) coverage, but you may be able to get free tests through other programs or insurance coverage you may have.)
- If you're in a Medicare Advantage Plan, you won't get this benefit through your plan, but will get it like you would if you weren't enrolled in the plan.
- You might need to show your red, white, and blue Medicare card to get your free overthe-counter COVID-19 tests (even if you have another card for a Medicare Advantage Plan or Medicare Part D plan).

Get the covered tests at any participating eligible pharmacy or health care provider at no cost to you, even if you aren't a current customer or patient.

Find a partial list of pharmacies participating in the Medicare COVID-19 Over-the-Counter (OTC) tests initiative.

Are there other ways I can get COVID-19 tests?

Medicare also covers COVID-19 tests you get from a laboratory, pharmacy, doctor, or hospital, and when a doctor or other authorized health care professional orders it. You can also get up to one lab-performed test during the COVID-19 public health emergency without an order, at no cost to you.

Some Medicare Advantage Plans may cover and pay for at-home over-the-counter COVID-19 tests as an added benefit. Check with your plan to see if it will cover and pay for these tests. If you get a test through your plan this way, you can still access up to 8 tests a month through the Medicare initiative apart from your Medicare Advantage Plan.

You can also access COVID-19 tests with no cost-sharing through healthcare providers at over 20,000 community-based testing sites nationwide.

If you paid to get a COVID-19 vaccine

When you get a COVID-19 vaccine, your provider can't charge you for an office visit or other fee if the vaccine is the only medical service you get. If you get other medical services at the same time you get the COVID-19 vaccine, you may owe a copayment or deductible for those services.

If you paid a fee or got a bill for a COVID-19 vaccine, check this list to see if your provider should have charged you:

- Check the receipts and statements you get from your provider for any mistakes.
- Call your provider's office to ask about any charges you think are incorrect. The person you speak to may help you better understand the services you got, or realize they made a billing error.
- If you have Original Medicare, review your "Medicare Summary Notice" for errors. Report anything suspicious to Medicare by calling 1-800-MEDICARE (1-800-633-4227).
- If you have other coverage like a Medicare Advantage Plan, review your "Explanation of Benefits." Report anything suspicious to your insurer.

If you think your provider incorrectly charged you for the COVID-19 vaccine, ask them for a refund. If you think your provider charged you for an office visit or other fee, but the only service you got was a COVID-19 vaccine, report them to the Office of the Inspector General, U.S. Department of Health and Human Services by calling 1-800-HHS-TIPS or visiting TIPS.HHS.GOV.

Be alert for scammers trying to steal your Medicare Number

Medicare covers the vaccine at no cost to you, so if anyone asks you for your Medicare Number to get the vaccine or to get a free <u>COVID-19 test</u>, you can bet it's a scam.

Scammers may use the COVID-19 public health emergency to take advantage of people while they're distracted. As always, guard your Medicare card like a credit card, check Medicare claims summary forms for errors. If someone calls asking for your Medicare Number, hang up.

How to stay up to date

- <u>CDC.gov/coronavirus</u> has the latest public health and safety information from CDC and for the overarching medical and health provider community on COVID-19.
- <u>USA.gov</u> has the latest information about what the U.S. Government is doing in response to COVID-19.