



The End of the COVID-19 Public Health Emergency

On May 11, 2023, the public health emergency declarations ended. What does this mean to you? Here's what major health policies will and won't change:



Vaccines

What's changing?

Nothing. The availability, access, and costs of COVID-19 vaccines, including boosters, are determined by the supply of federally purchased vaccines, *not the public health emergency*.

What's the same:

As long as federally purchased vaccines last, COVID-19 vaccines will remain free to all people, regardless of insurance coverage.

At-home COVID tests

What's changing?

- At-home (or over-the-counter) tests may become more costly for people with insurance. *After May 11, 2023, people with traditional Medicare will no longer receive free, at-home tests.*

WHILE SUPPLIES LAST.....



- For those on Medicaid, at-home tests will be covered at no-cost through September 2024. After that date, home test coverage will vary by state.

What's the same

Uninsured and other people who cannot afford at-home tests may still be able to find them at a free clinic, community health center, public health department, library, or other local organization.

Before You Throw

Out "Expired" Tests:

[Check to see if your COVID-19 tests' expiration dates have been extended](#)

Place Your Order for Free At-Home COVID-19 Tests

Residential households in the U.S. can order one set of 4 free at-home tests from USPS.com. Here's what you need to know about your order:

- Limit of one order per residential address
- Under this program, addresses are eligible if your last order was before Dec. 15, 2022

[Click to Order Tests](#)

[Click for More Details About At-Home Tests](#)

Tune into CNBC's Healing & Hope TV show on Tuesday, May 23rd and Thursday, May 25th, when our guest will be Dr. Ram Koppaka, MD, PhD, Associate Director, Adult Immunization and Vaccine Equity at Centers for Disease Control and Prevention (CDC). Dr. Koppaka will share valuable information regarding the way forward following the end of the Public Health Emergency.



PCR and Rapid Tests Ordered or Administered by a Health Professional

What's changing?

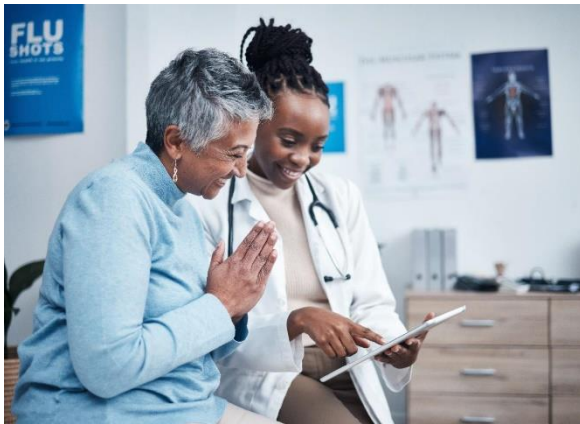
Although most insured people will still have coverage of COVID tests ordered or administered by a health professional, these tests may no longer be free.

- For people with traditional Medicare, there will be no cost for the test itself, but there could be cost-sharing for the associated doctor's visit.
- For people with Medicare Advantage and private insurance, the test and the associated doctor's visit both might be subject to cost-sharing, depending on the plan.
- For people with Medicaid, there will continue to be free tests through September 2024, after which point, rules will vary by state.
- Uninsured people in the 15 states that have adopted the temporary Medicaid coverage option will no longer be able to obtain COVID-19 testing services with no cost-sharing, as this program ends with the public health emergency.

What's the same?

Uninsured people in most states were not eligible for the temporary Medicaid pathway for COVID testing and therefore will continue to pay full price for tests, unless they can get tested through a free clinic or community health center.

COVID Treatment



What's changing?

- People with public coverage may start to face new cost-sharing for pharmaceutical COVID treatments (unless those doses were purchased by the federal government).
- Medicare beneficiaries may face cost-sharing requirements for certain COVID pharmaceutical treatments after May 11.
- Medicaid and CHIP programs will continue to cover all pharmaceutical treatments with no-cost sharing through September 2024. After that date, these treatments will continue to be covered;

however, states may impose utilization limits and nominal cost-sharing.

What's the same?

- Any pharmaceutical treatment doses (e.g. Paxlovid) purchased by the federal government are still free to all, regardless of insurance coverage, based on the availability of the federal supply.
- Most insured people already faced cost-sharing for hospitalizations and outpatient visits related to COVID treatment.

Telemedicine

What's changing?

Some flexibilities associated with providing health care via telehealth during the public health emergency will end.

- During the public health emergency, providers writing prescriptions for controlled substances were allowed to do so via telemedicine, but in-person visits will be required after May 11.
- All states and D.C. temporarily waived some aspects of state licensure requirements during the PHE so that providers with equivalent licenses in other states could practice remotely via telehealth. Those policies may end after May 11, 2023.



What's the same?

- Expanded telehealth for Medicare beneficiaries was once tied to the public health emergency but, due to **recent legislation**, will remain unchanged through December 31, 2024.
- Most **private insurers already covered telemedicine** before the pandemic.
- In Medicaid, states have broad authority to cover telehealth without federal approval.
- Most **states** have made, or plan to make, some Medicaid telehealth flexibilities permanent.