Saskatchewan **Saskatchewan** **Ministry of Health** **Drug Plan and Extended Benefits Branch**	**Section** *Pharmacy Professional Services*	**Reference** DP-PPS-20 **Date of Issue** July 29, 2024 **Revised** October 15, 2024 October 14, 2025

COVID-19 RAPID ANTIGEN TESTS ASSESSMENT AND DISTRIBUTION PROGRAM
Policy and Procedures

POLICY

- The Drug Plan and Extended Benefits Branch (DPEBB) will pay community pharmacies, a COVID-19 Rapid Antigen Test Assessment Fee (RATAF), under the COVID-19 Rapid Antigen Tests Assessment and Distribution Program Policy, as per Table 1.
- The DPEBB will reimburse pharmacies for the cost of the COVID-19 Rapid Antigen Test (RAT) kits when provided to eligible patients.
- **No incentives shall be provided** by the Proprietor, or an agent on behalf of the Proprietor, to any other person in relation to the provision of publicly funded COVID-19 RAT kits. *"Incentives" means any money, gifts, donations to a charity, rebates, refunds, customer loyalty programs, points, coupons, discounts, goods and/or rewards which can be redeemed for a gift or other benefit.*

PURPOSE

- To ensure continued access to COVID-19 RAT kits for eligible Paxlovid™ patients

LEGISLATIVE AUTHORITY

- *The Pharmacy and Pharmacy Disciplines Act*
- *The Prescription Drugs Act (Saskatchewan)*
- *The Drug Schedules Regulations, 1997 Amendment Regulations*
- *The Health Administration Act*

ELIGIBILITY

- Pharmacies are eligible to claim RATAF when pharmacists screen patients with a valid Saskatchewan Health Services Number (HSN) to assess whether they require a COVID-19 RAT to determine Paxlovid™ prescribing eligibility criteria.
- The RATAF will be paid to pharmacies (as outlined in Table 1) for patient assessments resulting in:
  - a COVID-19 Rapid Antigen Test determined to be required; OR
  - a COVID-19 Rapid Antigen Test was determined not to be required.

- The cost of the COVID-19 RAT kit will be reimbursed to the pharmacy (as outlined in Table 1) if the patient has a valid Saskatchewan HSN and:
  - They meet the DPEBB's Exception Drug Status (EDS) criteria for Paxlovid™; OR
  - They meet the Non-Insured Health Benefits Branch (NIHB) Paxlovid™ criteria.
  - Patients do not need to be symptomatic with COVID-19 to be eligible for a RAT (provided for future use).

PROCEDURE

The Pharmacist will:

- Remain up-to-date with provincial Paxlovid™ dispensing process and review the medSask website, https://medsask.usask.ca/covid-19-treatments, for supporting documents and information on COVID-19 Therapeutics.
- Upon patient request assess for provision of COVID-19 RAT kit using the medSask COVID--19 Testing Assessment for Community Pharmacies form at https://medsask.usask.ca/sites/medsask/files/2024-07/COVID-19TestingAssessment2024.pdf
- Provide a COVID-19 RAT kit to the patient if eligibility criteria is met.

The Pharmacy will:

- Submit the appropriate RATAF claim to the DPEBB as per Appendix I.
- Submit the cost of the COVID-19 RAT to the DPEBB as per Appendix II, when applicable.
- Retain the medSask COVID-19 Testing Assessment for Community Pharmacies form as per the Saskatchewan College of Pharmacy Professionals requirements. https://www.saskpharm.ca/document/5233/REF_Record_Keeping_Requirements_20190919.pdf
- Upon request, provide documentation (medSask form) related to provision of publicly funded COVID-19 RAT kits to the DPEBB within two business days.

The Drug Plan and Extended Benefits Branch will:

- Pay pharmacies the appropriate RATAF upon receipt of the electronic claim.
- Pay pharmacies for the cost of a COVID-19 RAT kit upon receipt of the electronic claim.
- Request and review documentation to confirm pharmacists and pharmacies have adhered to the COVID-19 Rapid Antigen Tests Assessment and Distribution Program Policy and Procedures.
- Recover related fees if the DPEBB determines, based on its review, there was inappropriate submission for this fee.
- Regularly review and update the COVID-19 Rapid Antigen Tests Assessment and Distribution Program Policy and Procedures.

Table 1: Billing Codes and Claim Limitations

Service (RATAF)	Details	pseudoDIN	Fee	Claim Limitations
COVID-19 Rapid Antigen Test Assessment – No Test Provided	Pharmacist assesses the patient using the medSask COVID-19 Testing Assessment for Community Pharmacies form and determines the patient is **NOT** eligible for a publicly funded COVID-19 RAT.	00951660	$5.00	2 in a 90-day period per person
COVID-19 Rapid Antigen Test Assessment – Test Provided	Pharmacist assesses the patient using the medSask COVID-19 Testing Assessment for Community Pharmacies form and determines the patient **IS** eligible for a publicly funded COVID-19 RAT.	00951390	$5.00	2 in a 90-day period per person
COVID-19 Rapid Antigen Test Kit	DPEBB to reimburse the cost of the RAT(s) when provided to eligible patients as outlined above.	00951672	Up to a max of $15.00	2 in a 90-day period per person

Please Note:

- DPEBB will not accept paper claims for the RATAF.
- If you are unable to submit the RATAF claim electronically through your Practice Management System, please use the secure DPEBB web page by logging on to https://www.drugplan.health.gov.sk.ca.
- If you are not sure how to install the WEB certificate, please contact your software vendor.

APPENDIX I:
Rapid Antigen Test Assessment Fee (RATAF) Billing Procedure

1. Billing shall occur on a real-time basis and use the Billing Codes and Claim Limitations listed in Table 1.
2. The RATAF claim must be submitted for adjudication to DPEBB as a single transaction.
3. The RATAF claim must be submitted before the COVID-19 Rapid Antigen Test Kit claim.
4. The DPEBB pays 100% of the RATAF to the pharmacy.
5. Ensure the following fields are completed as follows:

• PATIENT IDENTIFIER	= nine-digit Health Services Number (HSN)
• DISPENSING DATE	= date of activity (e.g., May 19, 2022)
• RX NUMBER	= enter the sequential RX#
• HEALTH PROVIDER ORGANIZATION ID	= SKCP
• HEALTH PROVIDER ID	= Pharmacist ID number (e.g., D1234)
• PHARMACIST ORGANIZATION ID	= SK
• PHARMACIST ID	= Pharmacist ID number (e.g., D1234)
• DIN	= 00951390 or 00951660 as per Table 1
• COMPOUNDING FEE (CF)	= $0.00
• COMPOUND NAME	= blank
• QUANTITY (QTY)	= 1
• DAYS SUPPLY	= 5
• ACQUISITION COST (AC)	= $5.00
• DISPENSING FEE (DF)	= $0.00
• MARKUP	= 00 / 00 / 00
• TOTAL RX COST	= $5.00
• PATIENT PAID	= $0.00
• ADJUDICATION FLAG	= Y

APPENDIX II:
COVID-19 Rapid Antigen Test Kit Billing Procedure

1. Submit the RATAF **prior** to submitting the claim for the COVID-19 RAT.
2. The COVID-19 RAT claim must be submitted for adjudication to DPEBB as a single transaction on the same day as the RATAF.
3. The DPEBB pays 100% of the RAT to the pharmacy as per Table 1.

Ensure the following fields are completed as follows:

• **PATIENT IDENTIFIER**	= client nine-digit Health Services Number (HSN)
• **DISPENSING DATE**	= date of the activity (e.g., October 1, 2025)
• **RX NUMBER**	= enter the sequential RX#
• **HEALTH PROVIDER ORGANIZATION ID**	= SKCP
• **HEALTH PROVIDER ID**	= Pharmacist ID number (e.g., D1234)
• **PHARMACIST ORGANIZATION ID**	= SK
• **PHARMACIST ID**	= Pharmacist ID number (e.g., D1234)
• **DIN**	= 00951672
• **COMPOUNDING FEE (CF)**	= $0.00
• **COMPOUND NAME**	= blank
• **QUANTITY (QTY)**	= 1
• **DAYS SUPPLY**	= 1
• **ACQUISITION COST (AC)**	= enter actual acquisition cost up to a maximum of $15.00
• **DISPENSING FEE (DF)**	= 0.00
• **MARKUP**	= 0.00
• **TOTAL RX COST**	= enter total cost
• **PATIENT PAID**	= $0.00
• **ADJUDICATION FLAG**	=Y