RECOMMENDATIONS FOR CONSIDERING COVID-19 HOME-BASED TESTS FOR PUBLIC HEALTH RESPONSE

Date: October 22, 2021

Several types of tests for current infection are available, including laboratory-based tests, tests offered at the point-of-care (POC) by a healthcare provider, and home-based tests. There are also different types of home-based tests. While all involve self-collection of specimens, some home-based test kits require a prescription and others are over-the-counter (OTC), also referred to as self-tests. Some collections/tests are observed by a telehealth provider, some involve self-collection but are sent to a laboratory for processing, and others use self-collection and self-testing without any involvement of a healthcare provider.

While home-based tests offer accessible and affordable testing options, test results may not be reported to public health, thereby relying on the individual to self-isolate for the recommended period of time and to notify contacts of possible exposure.

Additionally, the use of home-based tests without the oversight of a healthcare provider or laboratory (self-tests) pose challenges when determining public health actions. In general, NJDOH recommends a conservative approach to self-tests in order to maximize COVID-19 prevention.

Public health reporting

Home-based tests that involve healthcare oversight or that are sent for testing in a laboratory must be reported to public health authorities (positive and negative results). These test results should be treated as any other molecular or antigen test.

Self-tests are not CLIA-waived tests and are authorized for self-collection, self-testing, and self-reading of test results. Some self-tests require testing several times over different days (serial testing). CDC advises that individuals who take a self-test notify their healthcare provider (or local health department if they don't have a healthcare provider) with their self-test results. Healthcare provider or local health department notification may not occur in all cases. Clinicians who are notified by patients of positive self-test results should notify their local health department so that public health action can be taken.

Agencies using self-tests for routine screening testing programs should report positive self-test results to their local health department so that public health action can be taken.

** Agencies that are implementing mandated screening testing programs must refer to appropriate New Jersey Executive Orders and NJDOH Executive Directives to ensure compliance with reporting requirements.

Public health action

Local health departments should implement public health actions if positive test results are reported, including isolation recommendations and contact tracing.

Self-test results should be entered into CDRSS selecting "COVID-19 HOME BASED TEST" under Test Name and classifying the case as POSSIBLE. NJDOH is working on porting positive results to CommCare for investigation and contact tracing, but this functionality is not yet in place. CommCare will also be updated to capture self-tests. Self-tests will not be counted in official COVID-19 statistics.

Acceptable uses of self-tests (*for public health action*)

NJDOH considers self-tests to be acceptable in the following lower-risk settings:
1. Routine screening programs: Screening asymptomatic persons with no known COVID-19 exposure, including pre-operative testing, worksite or school screening, etc. *Worksites, schools, and others performing screening testing may choose a more conservative approach and not accept self-tests.*
2. Post-travel quarantine: Negative self-test results are acceptable to shorten quarantine from 10 to 7 days after travel. *Schools, worksites, and other groups may choose a more conservative approach and not accept self-tests.*
3. 90-day exception to quarantine: Previous positive self-test results (within 90 days) **IF REPORTED TO PUBLIC HEALTH AUTHORITIES AT THE TIME THE TEST WAS TAKEN** (*i.e. entered into CDRSS*) are acceptable to recommend not quarantining as long as the individual remains asymptomatic.

Unacceptable uses of self-tests (*for public health action*)

For the purpose of public health response, NJDOH does NOT consider self-tests to be acceptable in the following higher-risk settings:
1. Rule-out COVID-19 infection: Negative self-test results in symptomatic persons are NOT acceptable to return to work/school.
2. Shorten post-exposure quarantine: Negative self-test results are NOT acceptable to shorten quarantine from 10 to 7 days after a **close contact** exposure.
3. 90-day exception to re-test if symptomatic: Previous positive self-test results (within 90 days), *even if reported to public health at the time the test was taken,* are NOT acceptable to defer a testing recommendation for someone with COVID-19 compatible symptoms.

Confirmatory Testing

If an asymptomatic individual with no known exposure to COVID-19 tests positive using a self-test, a confirmatory PCR test performed within 2 days (by a healthcare provider or in a laboratory) should be considered.

Frequently Asked Questions

1. **If a healthcare professional (with a CLIA waiver) assists or oversees someone using a self-test, should that test result be considered to have healthcare provider oversight?**

   a. *No. Self-tests are not CLIA-waived tests and are only authorized to be used by the individual performing the test (self-collection, self-testing, self-reading of the results).*

2. **My agency is using self-tests for routine screening testing, how can we verify self-test results?**

   a. *NJDOH considers self-tests to be acceptable when used as part of routine screening testing programs, where persons taking the test are asymptomatic and do not have a known exposure to someone with COVID-19. Agencies may require that the individual provide them with test results. Most self-tests require that the individual taking the test read the results in 15-30 minutes (individuals should carefully follow the test kit instructions). Reading test results before or after the manufacturer-recommended time may lead to inaccurate results. Some options agencies may consider if they are using self-tests for routine screening testing programs include:*

      i. *Arranging for individuals to perform the test onsite where results can be visualized by someone from the agency, OR*

      ii. *Asking staff to provide an attestation (e.g., form provided by the agency) stating date/time test was taken and the result of the test.*

3. **Is a self-test acceptable for international travel requirements?**

   a. *Travel requirements vary by country. Travelers should check COVID-19 travel requirements for their* [country of destination](). *Travelers should also check* [CDC travel guidance]() *for current information on requirements for arrival into the U.S. As of October 16, 2021, self-tests that do not have healthcare oversight are NOT acceptable for international travelers arriving to the U.S.*

4. **An unvaccinated individual has been identified as a close contact of someone with COVID-19. The individual says they tested positive using a self-test 2 months ago. Does this person need to quarantine?**

   a. *It depends. If the person is asymptomatic AND if public health authorities have the positive self-test result from 2-months ago documented in CDRSS, the individual does not need to quarantine. They should continue to self-monitor for symptoms for 14 days, and if symptoms develop, be tested with a COVID-19 PCR or Antigen test offered by a healthcare provider or performed in a laboratory.*
   b. *If public health authorities do not have a record of the positive self-test result taken 2 months prior, the individual should quarantine and be tested 5-7 days after last exposure*

with a COVID-19 PCR or Antigen test offered by a healthcare provider or performed in a laboratory.

5. **An employee with COVID-compatible symptoms is sent home from work, recommended to isolate, and be tested for COVID-19. The employee says that they just had COVID-19 6 weeks ago and that they tested positive using a self-test. The positive test result from 6-weeks ago is documented in CDRSS. Can the employee discontinue isolation and return to work?**

    a. *No. Even though the local health department has a record of the positive self-test from 6 weeks ago, a self-test is not acceptable to defer testing if someone has COVID-19 compatible symptoms. The employee should seek medical care if needed and should be tested with a PCR or Antigen test offered by a healthcare provider or performed in a laboratory. If that test is negative, the employee can return to work.*