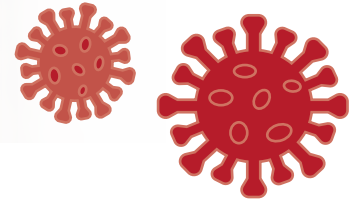


# COVID-19

## testing resources for long-term care facilities



### TESTING OPTIONS

All tests platforms utilized by Incyte have received Emergency Use Authorization from the FDA.

#### Testing for Active Infections

**Sample Type:** swab - NP, OP, Nasal

**Turnaround Time:** 24-48 hrs

#### Current Platforms\*:

Hologic Panther Fusion SARS-CoV-2 Assay

Thermofisher TaqPath COVID-19

Combo Kit (through our lab partner  
WSU One Health Diagnostics)

#### Methodology:

Incyte utilizes a multiplex real-time PCR (RT-PCR) in vitro diagnostic test intended for the qualitative detection of RNA from SARS-CoV-2 from individuals who meet COVID-19 clinical and/or epidemiological criteria.

In general, SARS-CoV-2 RNA can be detected during the acute phase of infection.

#### Testing for Antibodies

**Sample Type:** Serum

**Turnaround Time:** 24-48 hrs

The Roche Diagnostics Elecsys Anti-SARS-CoV-2 immunoassay is designed to detect antibodies in a blood sample that would indicate an adaptive immune response to COVID-19, indicating a recent or prior infection.

### SUPPLIES & TRANSPORT

Testing kits including swabs and transport media are packaged along with collection instructions. Specimens must be refrigerated after collection and during transport to the lab. Customized courier service will be established based on facility needs.

### TRAINING RESOURCES

Our training specialist can provide instruction to facility staff for optimal specimen collection. We also have print resources available with comprehensive instructions including diagrams, produced with details and guidelines from the CDC.

### INSURANCE & BILLING

- Client Bill to facility: \$100
- Option to Patient Bill insurance: \$150

Invoices are generated on a weekly basis and are sent out every Monday.

*Insurance regulations and guidelines change frequently. For the most up-to-date information on Medicare and Medicaid Services, please see: [cms.gov](https://www.cms.gov)*

\*Validations are currently underway for an additional testing platform.

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