

Find out how your plan covers treatment and vaccines.

Please note that the content provided within this website is only intended as general summary information and does not constitute your policy of insurance or summary plan description. The information on this website does not guarantee coverage or verify eligibility for benefits. The information provided on this website is designed to support, not replace, the relationship between Health Alliance and the members of the plans it offers and administers. Please see your member materials or contact the number on the back of your ID card for additional details specific to your health plan's coverage for diagnostic laboratory testing associated with COVID-19. Should a member require subsequent medically necessary treatment for COVID-19-related medical conditions, Health Alliance will cover such treatment pursuant to the terms and conditions associated with the member's health plan for the plans that Health Alliance itself offers. For self-funded employer plans that Health Alliance acts solely as the administrator, the employer / plan sponsor has the responsibility to make such determinations regarding what benefits are provided for COVID-19 treatment (subject to applicable law). This website's content is subject to change without notice to the Member. In any situation where the official printed publications of Health Alliance or of a self-funded plan sponsor differ from the text contained in this website, the official printed documents take precedence.

This coverage FAQ is based on the latest information from applicable resources which may include but are not limited to the Illinois Department of Insurance, federal law and CDC guidelines.

Will my health plan cover over-the-counter COVID-19 diagnostic tests for home use?

President Biden recently announced that individuals who purchase over-the-counter (OTC) COVID-19 diagnostic tests beginning on January 15, 2022 and continuing through the remainder of the public health emergency would be able to receive reimbursement from their health plan. As testing is critical to help reduce the spread of the COVID-19 virus, we have developed the following guidelines for members to receive reimbursement for these tests.

These processes, guidelines and limits may change as the pandemic evolves. Please call the number on the back of your health plan ID card if you have any questions about your coverage.

### Who is eligible for coverage of OTC COVID-19 diagnostic tests?

Eligibility for reimbursement for OTC COVID-19 diagnostic tests applies to all Fully-Insured and Self-Funded\* employer group members and Individual commercial members beginning January 15, 2022.

The coverage does not apply to Medicare Advantage, Medicare Supplement and Short-Term, Limited-Duration plan members. For members on Medicare Advantage, Medicare Supplement, or Short-Term, Limited-Duration plans, the U.S. Department of Health and Human Services (HHS) is providing up to 50 million free, at-home tests to community health centers and Medicare-certified health clinics for distribution at no cost to patients and community members. HHS also has established more than 10,000 free, community-based pharmacy testing sites around the country. To respond to the Omicron surge, HHS and FEMA are creating surge testing sites in states across the nation. The Biden-Harris Administration is purchasing 500 million at-home, over-the-counter tests to be distributed for free to Americans who want them, with the initial delivery starting in January 2022. There will be a website where all Americans can request at-home tests for home delivery – for free. More information on this federal program is expected soon.

\*Consult with your plan administrator for more details about this coverage.

#### Are there other resources available to get at-home COVID-19 tests?

Yes. The Biden-Harris will be providing free, at-home tests to community health centers and Medicare-certified health clinics to distribute at no cost to patients and community

members. Additionally, the federal government has committed to making tests available for shipping directly to your home at no cost to anyone in the U.S. by visiting covidtests.gov. We encourage you to explore these no-cost resources.

#### What type of COVID-19 tests or testing does my health plan coverage apply to?

This coverage applies to FDA-authorized at-home COVID-19 diagnostic tests which display results directly to the consumer in their home and are purchased over-the-counter at these preferred pharmacies listed here: <a href="Preferred Pharmacies for COVID-19">Preferred Pharmacies for COVID-19</a>
Over-the-Counter Diagnostic Tests. We will cover up to eight (8) tests per member per month.

Tests that are administered by a healthcare professional, or that require processing at a laboratory, are subject to the coverage requirements previously outlined by your health plan.

Testing for employment purposes, including OTC tests purchased to satisfy employment-based screening requirements, are not covered by our health plans.\*

\*Some self-funded employer group plans administered by Health Alliance or Health Alliance Northwest may cover employment-based screenings. Consult with your plan administrator for more details about this coverage.

#### Where can I purchase OTC COVID-19 diagnostic tests?

We encourage you to purchase these diagnostic tests at any of these preferred pharmacies listed here: <a href="Preferred Pharmacies for COVID-19 Over-the-Counter">Preferred Pharmacies for COVID-19 Over-the-Counter</a>
<a href="Diagnostic Tests">Diagnostic Tests</a>. At the time of purchase, you will need to present your health plan ID card at the pharmacy counter. Doing so will allow you to purchase the test at \$0 cost to you. Check back for additional pharmacies added to the list of preferred pharmacies for COVID-19 OTC diagnostic tests.

Please be aware that supply chain disruptions beyond our control may limit the availability or cost of tests through any given retailer at any given time. We encourage members to check with the retailer for product availability and be aware that numerous options exist.

# What if I purchase an OTC COVID-19 diagnostic test at a pharmacy or retail site other than the preferred network listed above?

If you choose to utilize a retailer other than those on our list of preferred pharmacies for

COVID-19 OTC diagnostic tests or if there is difficulty processing your claim during the retail transaction, please keep your original sales receipt and the original UPC proof of purchase panel from the OTC COVID-19 test box. OptumRx can reimburse members for tests purchased on or after January 15 if you submit the <a href="OptumRx COVID-19 Over-the-Counter Test Reimbursement Form">OptumRx COVID-19 Over-the-Counter Test Reimbursement Form</a>.

Please be aware that costs for OTC COVID-19 diagnostic tests vary. OptumRx will reimburse up to \$12 per test or the purchase price of the test, whichever is less.

\*This reimbursement form is not to be used on OTC COVID-19 diagnostic test purchases for employment purposes.

## Where can I learn more about testing and the Family First Coronavirus Response Act?

As a reminder, free testing remains available for community members. Resources to help community members find available free testing can be found through your state or local public health agency.

NOTE: Before traveling to a site for testing, check availability as sites may close during inclement weather conditions.

Additional information about the Families First Coronavirus Response Act (FFCRA) can be found here.

FAQs from the Centers for Medicare & Medicaid Services (CMS) can be found here.