

COVID-19 UPDATE

At-Home COVID Test Kit Coverage Starting Jan. 15; Immediate Coverage for Antiviral Therapeutic Drugs

Federal Mandate Covers Diagnostic Testing Only

The federal government issued a <u>public notice</u> requiring commercial health plans to cover up to eight at-home testing kits per month per covered individual for diagnostic use starting January 15 and continuing through the <u>Coronavirus public health</u> <u>emergency period</u>, which we anticipate will be extended to April 15, 2022.

To meet the Jan. 15 deadline for compliance for U.S. Commercial clients Cigna will cover at-home testing kits as a medical benefit.

Purchasing OTC Testing Kits, Quantity Limits

Customers may receive reimbursement for up to eight over-the-counter (OTC) COVID-19 at-home tests per covered individual in the household per 30-day period (or per calendar month) without a health care provider order or individualized clinical assessment.

Health plans may count each test separately, even if multiple tests are sold in one package; i.e. if one package includes eight tests, it counts as eight tests and not one test package toward the quantity limit.

While this test quantity limit applies to OTC COVID-19 at-home tests purchased without the involvement of a health care provider, plans continue to cover COVID-19 tests performed by health care providers and those tests are not subject to this quantity limit.*

Claims Submission

In order to be reimbursed, customer claims can be submitted by following the directions on the back of the customer's Cigna ID card. The submission needs to include:

- The purchase receipt documenting the date of purchase and the price
- UPC code for the OTC COVID-19 test
- Signed, completed attestation stating the test:
 - o is not for employment purposes;
 - o has not and will not be reimbursed by another source, and
 - is not for resale.

Customer Reimbursement

According to the federal mandate, health plans must reimburse the costs of diagnostic OTC testing, regardless of where it was obtained (in- or out-of-network). Cigna has established a process to comply with the mandate to reimburse customers for the OTC tests purchased on or after Jan. 15, 2022.

What is the safe harbor rule?

- The safe harbor applies if plans that provide access to OTC tests through a pharmacy network and a direct-to-consumer shipping program, under which there is no upfront out-of-pocket expenditure by the participant.
- The federal government is not expecting the preferred pharmacies in a plan's "direct coverage" solution to represent the entire plan's entire pharmacy network, but has stressed that the plan must nevertheless

- ensure adequate access to OTC tests, including as it relates to retail pharmacies.
- Cigna is evaluating safe harbor rules and will communicate further guidance.

Mandate Does NOT Cover Workplace-Required Testing

It's important to reiterate, at-home testing used for employment purposes is not covered under this mandate. If a client chooses to cover testing for employment purposes, please notify your client or account manager who can discuss options with you. Also, Cigna offers Evernorth Rapid Antigen Self-Testing Solutions to control and manage the cost of workplace testing. Your client or account manager can provide more information on these programs.

To help better understand the difference in testing types, please visit the CDC web site for more information: COVID-19 Testing: What You Need to Know | CDC

Coverage for COVID Antiviral Oral Therapeutic Drugs

Late December 2021, the FDA approved COVID-19 antiviral therapeutic medications, Paxlovid (Pfizer) and Molnupiravir (Merck), to help reduce the severity of the virus. The government bought these therapies and is distributing them free of charge. Cigna will cover the medications on all formularies immediately. Customers will pay a \$0 ingredient cost when supplied and funded by the government, but may pay up to a \$6 dispensing fee when obtained at a pharmacy.

A COVID therapeutic locator has been established by the government and can be accessed here.

No Prior Authorization will be required. As with all COVID EUA products, COVID policies will be updated to include clinical guidance on when to use each product per specifications of the EUA.

Thank you for your continued partnership and collaboration to ensure the health and wellness of your employees.

If you have any questions, please contact your Cigna representative.

Together, all the way.®

* <u>The Families First Coronavirus Response Act</u> only requires coverage for diagnostic COVID-19 testing through the public health emergency period; employment-required testing is not covered.

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