

COVID Coverage on Medical and Pharmacy Plans after Emergency Ends

CVS Coverage	During PHE – before May 11	Post PHE – starting May 11
COVID-19 Vaccine	Plan coverage of \$40 administration fees for COVID-19 vaccines administered across all national pharmacies (not network constrained). During this time, the government covered the ingredient cost of the COVID-19 vaccine.	Post PHE, many pharmacies have ample supply of the government funded vaccines. Thus, we will continue to process COVID-19 vaccine claims consistent with client enrollment until these supplies are exhausted or a commercial product is available. Although timing is unknown, it is likely that COVID-19 vaccines will be commercially available in summer/fall 2023. At that time, we expect the COVID-19 vaccine will be added to the CVS Caremark standard seasonal vaccine program.
Over the Counter (OTC) COVID-19 Tests	Coverage of 8 OTC COVID-19 tests per month without a prescription, with a \$0 member cost share if obtained at a pharmacy or submission of a post-service reimbursement claim.	Effective May 11, OTC COVID-19 tests will no longer be covered.
Dispensing of COVID-19 Oral Antivirals	Coverage of COVID-19 oral antivirals with a standard \$10 dispensing fee, where the federal government pays for the ingredient cost.	No change. Will continue coverage consistent with the client's current enrollment until a commercial product is available. The FDA has not yet approved these drugs. The only product currently available is under an emergency use authorization (EUA). * While timing is unknown, once a commercial product is available, we expect claims will process in accordance with each client's formulary.
Pharmacist Assessment and Prescribing of Paxlovid	Coverage of the standard \$60 assessment fee.	For those clients who are enrolled in the Pharmacist assessment and prescribing Paxlovid program, coverage will continue consistent with current client enrollment.
COVID-19 Monoclonal Antibodies	Coverage for Administration of Monoclonal Antibodies is not being offered via the PBM pharmacy benefit.	No change.

*Under an EUA declaration, the FDA may authorize unapproved medical products or unapproved uses of approved medical products to be used in an emergency to diagnose, treat, or prevent serious or life-threatening diseases or conditions.

BCBS Plans	Coverage during Public Health Emergency (PHE)	Standard Coverage Post Public Health Emergency (PHE)
COVID-19 diagnostic tests	Covered at no cost-share to the member	Offer the standard coverage post Public Health Emergency (PHE)- For COVID-19 diagnostic tests, to be covered at the member's regular benefit level.
COVID-19 testing-related visits	Covered at no cost-share to the member at all sites of care	Covered at the member's regular benefit level
COVID-19 vaccines	Covered at no cost-share to the member	Covered at the member's preventive benefit level at an in-network provider office or in network pharmacy and standard benefit level OON.

Aetna UCHP	During the Emergency Period	Starting May 12, 2023
COVID-19 vaccines, including boosters	<p>Members pay \$0 for the vaccine at any location.</p> <p>The government covers the ingredient cost of the COVID-19 vaccine and requires plans to cover all vaccines at 100%, both in and out of network.</p>	<p>Members will pay \$0 for the vaccine at in-network locations.* Many pharmacies now have ample supply of the government funded vaccines.</p> <p>Although timing is unknown, it is likely that COVID- 19 vaccines will be commercially available in the summer or fall. At that time, we expect the COVID- 19 vaccine will be added to the Aetna standard seasonal vaccine program at 100% coverage for in- network administration.</p>
COVID-19 OTC test kits	<p>Members pay \$0 for select test kits. Plans cover eight OTC COVID-19 tests per month with a \$0 member cost share, if obtained at a pharmacy, or with a post-service reimbursement claim.</p>	<p>Members will pay the retail cost of test kits. They are no longer covered. Members will be able to get an at-home test kit for around \$12 per test, or \$24 for a box of two from CVS® and other retailers. Members can also use funds from a health savings account or a flexible spending account toward test kits.</p>
COVID-19 lab tests	<p>Members pay \$0 for lab tests, including rapid diagnostic and swab-and-send tests, at in-network locations.</p>	<p>Members will pay their copay, coinsurance or deductible at in-network locations. It will be applied to their out-patient testing benefit, which is part of their medical plan.</p>
COVID Evaluation & Management Visit (E&M) - Telemedicine, Urgent Care, ER and Office Visits	<p>Members pay \$0 for COVID-19 associated visits (INN and OON) when there's an associated COVID- 19 test done within 2 days before or 2 days after.</p>	<p>Members will pay their copay, coinsurance or deductible for COVID-19 associated visits (INN and OON) when there's an associated COVID-19 test done within 2 days before or 2 days after.</p>
COVID-19 anti-viral medications (Paxlovid)*	<p>Members pay \$0 for these prescriptions.</p>	<p>No change. Members will pay \$0 for these prescriptions while the government supply is available.</p>
Pharmacist Assessment and Prescribing of Paxlovid program	<p>For plan sponsors with this program, members pay \$0 for pharmacist assessment and prescribing of Paxlovid at pharmacies, including CVS.</p>	<p>No change. For plan sponsors with this program, coverage will continue, consistent with their current benefits.</p>
COVID-19 monoclonal antibodies	<p>Members pay normal cost sharing for EUA-approved monoclonal antibody treatments.*</p>	<p>No change. Members will continue to pay normal cost sharing for EUA-approved monoclonal antibody treatments.*</p>

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