



## EGYPTIAN AREA SCHOOLS EMPLOYEE BENEFIT TRUST

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DATE: January 18, 2022

TO: All Egyptian Trust Covered Members

RE: Plan Coverage Updates Specific to COVID-19

Continue to visit our website at <http://www.eitrust.org> to view important information regarding your Egyptian Trust benefits.

Effective January 15, 2022, **over-the-counter (OTC) COVID-19 at-home diagnostic tests** will be covered by all Trust health plans with no member cost-share (i.e. deductible, copays, or coinsurance). Important points to note:

- Members do NOT need a prescription to purchase these OTC COVID-19 tests.
- Benefits are provided under the prescription portion of the plan and should be purchased at an in-network pharmacy. Members must use the pharmacy counter for benefits to be applied at point of sale. If member buys OTC tests from the front counter or general checkout area, the member will be required to pay for the purchase and submit a manual claim with their receipt to Prime for reimbursement. (Click link for the manual prescription claim form: [Rx Claim Form](#))
- Coverage is limited to \$12 per test. Covered members are allowed up to eight (8) tests every 30 days (or for example, 4 boxes with 2 tests per box).
- Tests purchased prior to the January 15<sup>th</sup> date are not eligible for reimbursement.
- This coverage will remain in effect through the end of the federal public health emergency.

Below is confirmation of how other COVID services continue to be covered by Trust health plans:

- **COVID Vaccines:** There will be no member cost-share when a COVID vaccine is received from any BCBSIL PPO network or non-network provider until the end of the federal public health emergency. After expiration of the federal public health emergency, COVID vaccines will be covered at the appropriate Network or Non-Network preventive benefit level.
- **COVID Testing from Medical Provider:** There will be no member cost share for testing or testing-related visits from any BCBSIL PPO network or non-network provider until the end of the federal public health emergency. Testing must be medically necessary, consistent with CDC guidance and at the direction of a physician. After expiration of the federal public health emergency, COVID testing will be covered at the appropriate Network or Non-Network benefit level.
- **COVID Treatment:** Normal member cost share, such as office visits copays or deductible and coinsurance, applies to any COVID treatment received on or after January 1, 2021. Member cost share was waived on COVID treatments received from a BCBSIL PPO network provider, or as a non-network emergency, prior to December 31, 2020.
- **Telehealth Visits:** Normal member cost share, such as office visit copays or deductible and coinsurance, applies to any Telehealth visit with a BCBSIL PPO network provider, including behavioral health services, received on or after January 1, 2021. Telehealth visits are services provided via phone or video conference, replacing an in-person office visit with a medical provider. Member cost share was waived on Telehealth visits with BCBSIL network providers prior to December 31, 2020. *This Telehealth visit benefit should not be confused with the Trust's separate **Teladoc** option, which provides similar services at no cost to participating members.*

For more information on COVID-19 and the symptoms you may experience, please visit the following website:  
<https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

If you have any questions concerning your health plan benefits, please contact a BCBSIL Benefits Value Advisor (BVA) Customer Service Representative at 855-686-8517.