OTC COVID-19 TESTS

Authorized by the FDA



Your Cigna plan covers FDA-authorized over-the-counter COVID-19 test kits.

Over-the-counter (OTC) test kits¹ are a quick and easy way to test for COVID-19.

The U.S. Food and Drug Administration (FDA) has authorized many rapid antigen tests, also known as "over-the-counter COVID tests," for use. These tests provide results in minutes and can protect you and others by lowering the chances of spreading COVID-19.²

- Your Cigna plan covers all FDA-authorized over-thecounter COVID-19 test kits.³
- You can get an authorized test kit at any pharmacy (in- or out-of-network), retail store, or online retailer that has it available.
- You don't need a prescription from your doctor.
- Your plan covers up to eight tests a month (typically four test kit packages)⁴ for each covered family member.

Your Cigna plan will reimburse you for the cost of the test kit.⁵

If you buy a FDA-authorized over-the-counter COVID-19 test kit(s) on or after January 15, 2022, you can ask your plan to pay you back the amount you spent out-of-pocket. Simply go to **Cigna.com** or log in to **myCigna.com*** to get started. You'll need to complete a claims form and provide your receipt. You can use the instructions on the form or on your Cigna ID card to send in your claim.

Vaccines are the best way to protect yourself and others against COVID-19.6

All currently approved or authorized COVID-19 vaccines are safe and effective, and lower your risk of severe illness.⁷ The Centers for Disease Control and Prevention (CDC) recommends that everyone **ages five years and older get the COVID-19 vaccine** and everyone ages 16 years and older get booster shots (when eligible).⁷

Together, all the way.



1. These are COVID-19 tests that you take (and get the results) at home, on your own, without the help of a doctor. 2. Centers for Disease Control and Prevention (CDC) website, "COVID-19 Testing: What You Need to Know", https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/testing.html, accessed 1/14/2022. 3. U.S. Department of Health & Human Services (HHS) website, "Biden-Harris Administration Requires Insurance Companies and Group Health Plans to Cover the Cost of At-Home COVID-19 Tests, Increasing Access to Free Tests." Released January 10, 2022. <a href="https://www.hhs.gov/about/news/2022/01/10/biden-harris-administration-requires-insurance-companies-group-health-plans-to-cover-cost-at-home-covid-19-tests-increasing-access-free-tests.html. It is anticipated this government-required coverage will remain in effect through the end of the Public Health Emergency. 4. This limit applies to the actual number of tests - not test kits - you buy (tests may be packaged individually or with multiple tests in one kit). This limit doesn't include any tests ordered or administered by your doctor. 5. To be reimbursed, you'll need to send in the completed and signed COVID-19 Over-the-Counter (OTC) Test Kit Claim Form and your receipt showing the date you bought the test(s) and how much you paid. 6. U.S. Food and Drug Administration (FDA) website, "Learn More About COVID-19 Vaccines from the FDA." Last updated 01/03/2022. https://www.fda.gov/consumers/consumer-updates/learn-more-about-covid-19-vaccines-fda.
7. Centers for Disease Control and Prevention (CDC) website, "Covid-19 Vaccines Work." Last updated 12/23/2021. https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/work.html.

Para obtener ayuda en español llame al número en su tarjeta de Cigna.

Health benefit plans vary, but in general to be eligible for coverage a drug must be approved by the Food and Drug Administration (FDA), prescribed by a health care professional, purchased from a licensed pharmacy and medically necessary. If your plan provides coverage for certain prescription drugs with no cost-share, you may be required to use an in-network pharmacy to fill the prescription. If you use a pharmacy that does not participate in your plan's network, your prescription may not be covered, or reimbursement may be limited by your plan's copayment, coinsurance or deductible requirements. Certain features described in this document may not be applicable to your specific health plan, and plan features may vary by location and plan type. Refer to your plan documents for costs and complete details of your plan's prescription drug coverage.

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