

NATIONAL PUBLIC HEALTH EMERGENCY EXPIRED MAY 11, 2023

COVID-19 benefits changed May 12, 2023. Please see the health plan member letters found here for more information: <https://www.tn.gov/partnersforhealth/covid-19-resources.html>

**COVID-19 Vaccine, Anti-Viral Medication and Disability Benefits Information for
PartNers for Health Plan Members**

Updated May 22, 2023

COVID-19 Vaccines and Anti-Viral Medication Benefits for State Health Plan Members and Retirees

The State Group Insurance Program has approved:

- Waiving all member costs for **COVID-19 vaccinations, boosters and vaccine administration**. Office visits associated with receiving the COVID-19 vaccination may have applicable cost share if the visit is not billed as preventive.
 - **COVID-19 vaccines are widely available in all 95 counties across the state.**
 - Go to [Vaccines.gov](https://www.vaccines.gov) to find vaccination locations in your community through the health department and private providers.
- Coverage of the COVID-19 **antiviral medications** *Lagevrio* from Merck and *Paxlovid* from Pfizer. Both drugs require a prescription. Members may fill prescriptions for these medications at zero cost as long as both products remain under an emergency use authorization because they are not FDA-approved. Once they become FDA-approved products and are placed on the drug formulary then the usual member cost share will apply (i.e., depending on whether the drug is classified as a preferred brand or non-preferred brand).
 - Pfizer's COVID-19 antiviral *Paxlovid* is available to people who:
 - Have tested positive for COVID-19 and have not yet been admitted to the hospital **and**
 - Are at high risk for developing severe COVID-19 **and**
 - Are 12 years of age or older and weigh at least 88 pounds
 - Merck's COVID-19 antiviral *Lagevrio* is available to people who:
 - Have tested positive for COVID-19 and have not yet been admitted to the hospital **and**
 - Are at high risk for developing severe COVID-19 **and**
 - Have no alternative FDA-authorized COVID-19 treatment options accessible to them or that are clinically appropriate for them **and**
 - Are 18 years of age or older
 - Initial supplies of these medications are limited, so if one is prescribed for you or your dependent, please contact your preferred pharmacy to inquire if they have the medication in stock and can dispense it.

What does this mean for our members?

- These benefits apply to health plan members in all plans: Premier PPO, Standard PPO, Limited PPO, CDHP/HSA and Local CDHP/HSA, with both carriers, BlueCross BlueShield and Cigna.
- Members won't have to pay a copay, coinsurance or any money toward their deductible for in-network COVID-19 vaccinations, boosters and vaccine administration. Office visits associated with receiving the COVID-19 vaccination may have applicable cost share if the visit is not billed as preventive.
- Members won't have to pay a copay, coinsurance or any money toward the costs of the COVID-19 antiviral medications, *Lagevrio* from Merck and *Paxlovid* from Pfizer, if members meet eligibility requirements listed above as long as both products remain under an emergency use authorization, because they are not FDA-approved. Once they become FDA-approved products and are placed on the drug formulary then the usual member cost share will apply (i.e., depending on whether the drug is classified as a preferred brand or non-preferred brand).

To stay informed about COVID-19, vaccines and boosters, these resources are available:

- For a list of statewide resources, please visit: <https://www.tn.gov/health/cedep/ncov.html>
- CDC has information and guidance available online at <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

Disability Benefits

After May 11, 2023, COVID-19 claims will be reviewed as would cold/flu/bronchitis claims. MetLife will no longer provide a one-time conditional approval for COVID-19 claims. At this time, there are no active COVID-19 emergency leave laws, only the standard absence leave types that existed pre-pandemic. Please refer to your certificates of coverage documents.

Partners Health & Wellness Center

The Partners Health & Wellness Center on the third floor of the Tennessee Tower continues to provide services including COVID-19 testing, vaccines and telehealth visits for state and higher education employees enrolled in the State Group Health Insurance Program. Learn more at <https://www.partnershealthcenter.com/>.

COVID-19 Benefits FAQs for State Health Plan Members

1. What should I do if I think I might have the COVID-19 virus?

- You can talk to your doctor or other health care provider about your need for a COVID-19 test if you think you have the virus.
- Additional resources:
 - COVID-19 Information and Resources for Tennesseans - <https://www.tn.gov/health/cedep/ncov.html>
 - CDC - www.cdc.gov/coronavirus/2019-ncov/index.html.
- Generally speaking, people should seek care if they experience a high fever, significant cough, shortness of breath or fatigue.
- **COVID-19 testing sites:** If you need a test, find information on testing sites near you at: <https://www.vaccines.gov>

2. Is COVID-19 treatment covered?

- Regular member cost-sharing applies for in-network COVID-19 medical treatment.
- All medical treatment not directly related to a COVID-19 diagnosis or received out-of-network will be covered under the member's enrolled health plan benefits with applicable member cost share.

3. Are the COVID-19 vaccines covered?

- Members won't have to pay a copay, coinsurance or any money toward their deductible for in-network COVID-19 vaccinations, boosters and vaccine administration. Office visits associated with receiving a COVID-19 vaccination may have applicable cost share if the visit is not billed as preventive.
 - COVID-19 vaccines are widely available in all 95 counties across the state.
 - Go to [Vaccines.gov](https://www.vaccines.gov) to find vaccination locations in your community through the health department and private providers.

4. What will my Explanation of Benefits show?

- Your EOB should show that you do not owe member cost share for in-network COVID-19 vaccinations, boosters and vaccine administration. If your EOB shows you owe a cost share, please call the number on the back of your BlueCross or Cigna ID card for help. They will be able to explain the status of your claim and provide you with more information. Your provider may need to resubmit your claim with updated coding.

5. Are prescriptions for COVID-19 treatment covered?

- Yes. COVID-19 antiviral medications, *Lagevrio* from Merck and *Paxlovid* from Pfizer are covered if members meet eligibility requirements listed at the top of this document. Members won't have to pay a copay, coinsurance or any money toward the cost of the prescription as long as both products remain under an emergency use authorization, because they are not FDA-approved. Once they become FDA-approved products and are placed on the drug formulary then the usual member cost share will apply (i.e., depending on whether the drug is classified as a preferred brand or non-preferred brand).

6. How long will these COVID-19 benefits last?

- COVID-19 benefits changed May 12, 2023, as noted in letters there were mailed or emailed to all current health plan members in early April 2023.