

New York State Teamsters Council Health and Hospital Fund

Mailing Address:
PO Box 4928
Syracuse, NY 13221-4928
Telephone: 315.455.9790
Fax: 315.234.1046
E-mail: benefits@nytfund.org



BOARD OF TRUSTEES

Employer Representatives

Michael S. Scalzo, Sr.
Co-Chairman
Broad Brook, CT

Mark A. Gladfelter
Carlisle, PA

Samuel D. Pilger
Holland, MI

Daniel W. Schmidt
Lebanon, PA

Labor Representatives

John A. Bulgaro
Co-Chairman
Albany, NY

Brian K. Hammond
Potsdam, NY

George E. Harrigan
Orchard Park, NY

Mark D. May
Syracuse, NY

PARTICIPATING TEAMSTER LOCALS

118 Rochester, NY

264 Cheektowaga, NY

294 Albany, NY

317 Syracuse, NY

355 Baltimore, MD

445 Newburgh, NY

449 Buffalo, NY

687 Potsdam, NY

1149 Baldwinsville, NY

January 19, 2022

To: Participants

From: New York State Teamsters Council Health and Hospital Fund

Re: **At-Home COVID-19 Test Kits**

Under the recently enacted law, effective January 15, 2022, the New York State Teamsters Council Health and Hospital Fund ("Fund") is required to cover the cost of **At-Home COVID-19 tests for diagnostic reasons** during the public health emergency. The public health emergency was recently extended to April 17, 2022, but it could be further extended.

Express Scripts, our pharmacy benefit manager, will be administering this benefit for the Fund. Currently, if you purchase tests kits, you will need to submit a paper claim form to Express Scripts for reimbursement. This means that when purchasing your COVID-19 tests for diagnostic reasons you must present the test at the pharmacy counter, obtain a receipt and then submit that to Express Scripts for reimbursement of your payment. You can locate more information on paper claims submissions at www.express-scripts.com or via their cell phone app.

The Fund has been informed that presenting your *prescription card* for point of service purchase is not available at this time. ESI estimates that it will be two weeks before this service is available.

To be eligible to purchase the test kits, you will need to attest to the reason for acquiring the COVID-19 test. Please note the following:

- If you are acquiring the test for personal diagnostic reasons (and not for employment purposes), you will be allowed to purchase up to eight tests per month at a \$0 copay. For example, a box with two tests would count as two total tests. Once you have exhausted the maximum number, you will be responsible for the cost of any additional tests purchased. This benefit extends to each qualified beneficiary covered under the plan.
- You will also be required to attest that the test has not (and will not be) reimbursed by another source and is not for resale.

If you are unable to make the required attestation(s), you will be required to pay for the test according to the existing benefit design.

The Fund also became aware that as of January 19th, 2022 you may be able to obtain four (4) test kits for free through the mail, directly from this government website <https://www.covidtests.gov/>

As this benefit is newly enacted, if you have any questions contact the Fund Office at 877.698.3863 or through our e-mail at benefits@nytfund.org

Sincerely,

NEW YORK STATE TEAMSTERS COUNCIL
HEALTH & HOSPITAL FUND