

**FOR EMPLOYEES, RETIREES, AND COBRA PARTICIPANTS WITH NEPA SCHOOL DISTRICTS
HEALTH TRUST'S HIGHMARK HEALTH PLAN COVERAGE -- IMPORTANT NOTICE ENDING
TEMPORARY COVID-19 COVERAGES AND BENEFITS AND ENDING EXTENSIONS OF
HEALTHCARE-RELATED TIMELINES**

Temporary COVID-19 pandemic-related coverages and benefits **without cost sharing** provided under the Public Health Emergency (PHE) **are extended through May 31, 2023*** instead of the minimum required end date of May 11, 2023. In addition, there are healthcare-related timeframes that were temporarily extended under a separate National Emergency (NE) and Outbreak Period that **will end on June 9, 2023**. The information below provides notice to you of the impact and the process as your Plan returns to pre-pandemic status.

*Exception: Coverage for COVID-19 OTC At-home Test Kits under your Plan will end on May 11, 2023 with the PHE.

COVERAGES AND BENEFITS EFFECTIVE JUNE 1, 2023 (Except as otherwise noted)

COVID-19 Vaccines and Boosters – The Plan will begin to cover both COVID-19 vaccines and vaccine administration as a preventive benefit with **no cost share to you when administered by in-network providers**. When vaccine is administered by **out-of-network providers, out-of-pocket costs may result**. Vaccines and boosters stockpiled by the Federal Government will remain free until the supply runs out.

COVID-19 Diagnostic Testing – Medically necessary COVID-19 diagnostic testing **will be covered** according to your Plan's benefit design. **You may incur cost share (such as deductibles, copays, and coinsurance)**. Also, standard payment guidelines for out-of-network providers will apply. Testing for employment purposes is not covered.

***COVID-19 Over-the-Counter (OTC) At-home Test Kits** – COVID-19 OTC test kits through the medical or pharmacy benefit **will no longer be covered under your Plan**. However, the Federal Government continues to have a supply of free OTC test kits available. Visit [COVIDTests.gov](https://www.covidtests.gov) to learn how to receive the kits at no cost to you while supplies last.

Provider Visits Resulting in a COVID-19 Test – Provider office, urgent care, or emergency room visits during which a COVID-19 test is deemed necessary **are covered with applicable cost share to you** according to your Plan's benefit design.

Inpatient Treatment for COVID-19 – **Inpatient treatment for COVID-19 is covered; however, you may incur cost share (such as deductibles, copays, and coinsurance)** based on your Plan's benefits.

Paxlovid and Other Oral Antiviral Treatments for COVID-19 – Paxlovid and other oral antiviral medications to treat COVID-19 early onset of symptoms **will remain available on and after May 12** under the FDA EUAs (Federal Drug Administration and Emergency Use Authorizations) as long as the Federal Government's stockpile lasts. Express Scripts indicates "antivirals will see no changes post-May 12", and "once a commercial product is available, we expect claims will process in accordance with each client's formulary and copays."

NOTE: If you have questions about the coverages listed above regarding this Notice, you are encouraged to contact Member Services as it appears on your Health ID card.

PRE-COVID-19 HEALTHCARE RELATED DEADLINES AND TIMEFRAMES RETURN JUNE 10, 2023

This list is a summary of deadlines and timeframes that will revert to standard calculation of time periods that occur on or after June 10, 2023. For timelines that occur on or before June 9, 2023, the applicable deadlines will generally be extended 60 days from June 9th in most circumstances.

- Timeframe for providing a COBRA Election Notice
- Election Period for COBRA continuation of healthcare coverage
- Timeframe for making COBRA premium payments
- Timeframe for Individuals to notify the Plan of a Qualifying Event or determination of disability
- Timeframe within which Individuals may file a benefit claim under the Plan's claims procedure
- Timeframe within which Claimants may file an appeal of an adverse benefit determination under the Plan's claims procedure
- Timeframe within which Claimants may file a request for an external review after receipt of an adverse benefit determination or final internal adverse benefit determination
- Timeframe within which a Claimant may file information to perfect a request for external review upon a finding that the request was not complete
- Timeframe to Request a Special Enrollment

Here are examples using the 60-day deadline to elect COBRA coverage:

COBRA Election Example #1: The end of the pandemic's National Emergency Outbreak Period is June 9, 2023. Therefore, if a qualified beneficiary was provided a COBRA election notice on April 1, **2023**, the required date to make their COBRA election is no later than 60 days after June 9 which is **August 8, 2023**.

COBRA Election Example #2: The end of the pandemic's National Emergency Outbreak Period is June 9, 2023; however, the COBRA election notice was provided to a qualified beneficiary on **June 15, 2023**. Since the COBRA extension timelines reverted to standard timeframes on June 10, the required date for the qualified beneficiary to make their COBRA election is on or before **August 14, 2023**.

NOTE: If you are currently a participant within the COBRA election timeframe, or the timeframe for payment of your initial premium, and your timeframes are impacted, you are encouraged to contact your COBRA Administrator or your Employer's Human Resource Staff Member with questions.