COVID-19 OTC TEST KIT MEMBER GUIDE

Direct Claims Self Service (DCSS) Commercial

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Current Direct Claims Process

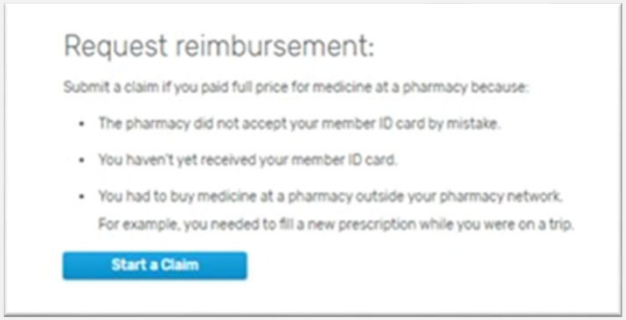
Introduction

Members can submit a claim form for prescriptions purchased without their member ID card.

Currently, members can obtain a claim form by:

- Calling Member Services and having it mailed to them
- Logging in to express-scripts.com and printing a copy or requesting a mailed copy

They complete the form and mail it to us for processing.



The claim form is now available for completion and submission **electronically**, facilitating the process for members and Express Scripts.

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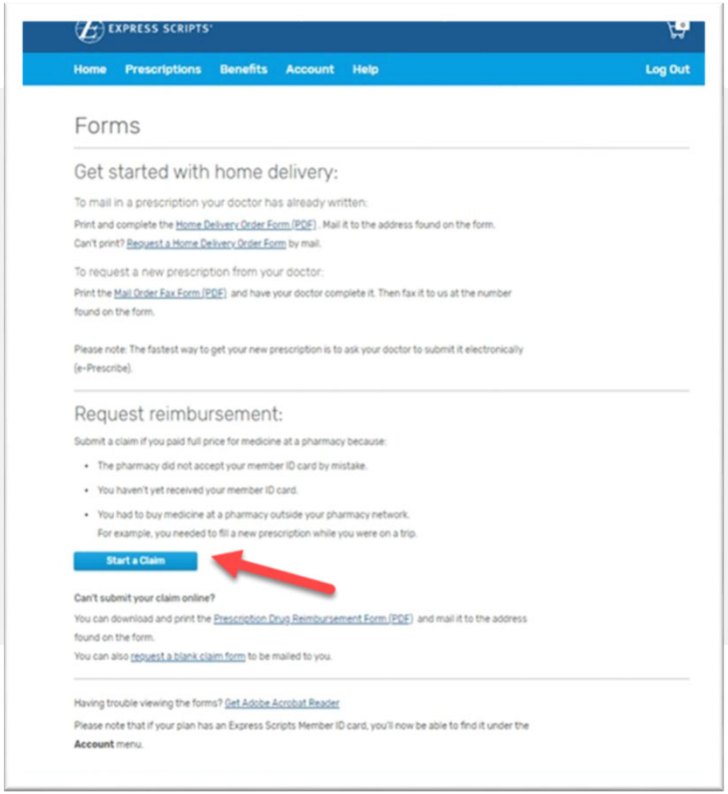
Electronic Direct Claim Process

A member can submit an electronic direct claim on the Forms page via

- Submit a Claim Online button



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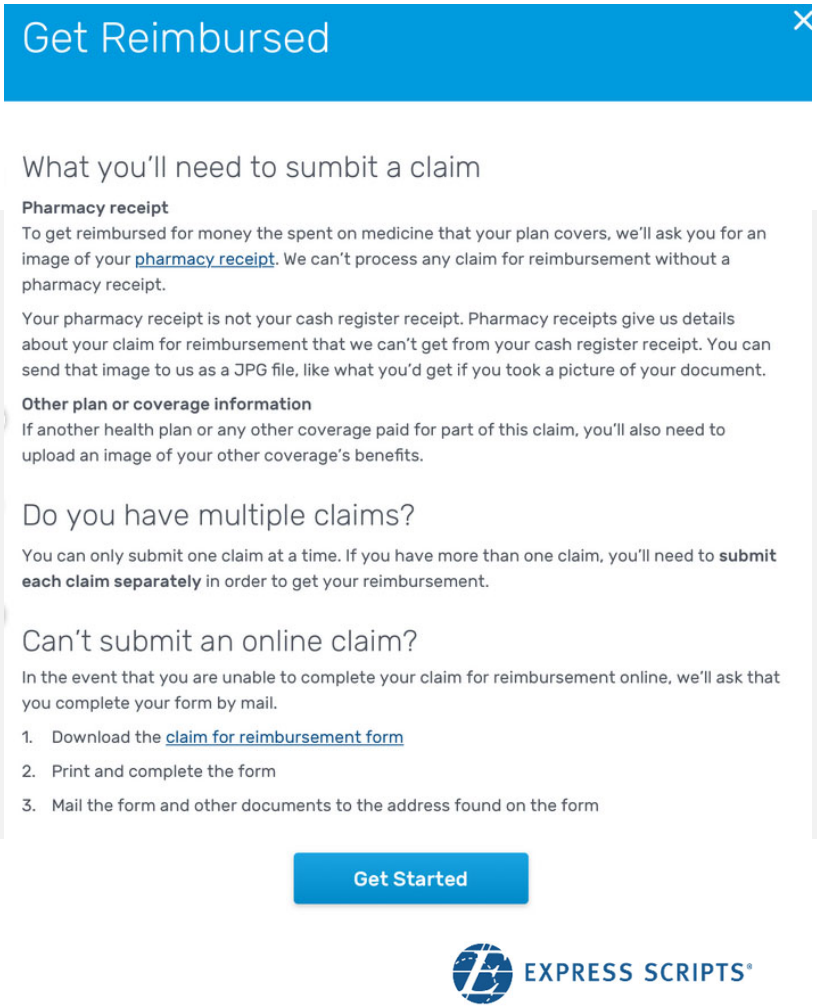
Informational Claim Page

Requirements

Members can submit an electronic direct claim if:

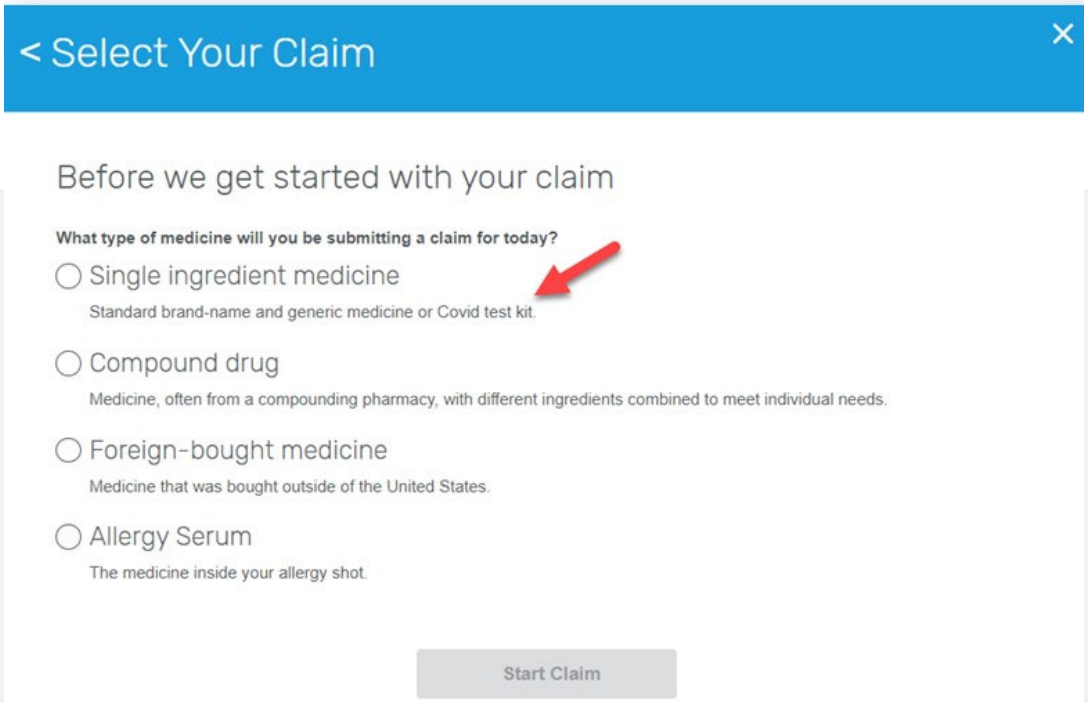
- It is a single-ingredient drug
  - COVID-19 OTC Test Kits should be submitted under single-ingredient drug
- It is a compound drug
- It was purchased in the US or it is foreign-bought medicine
- It is allergy serum
- Coordination of benefits (COB)
- They are registered on express-scripts.com



Starting a Direct Claim – Select Your Claim

Select claim type:

- Single-ingredient medicine
- Compound drug
- Foreign-bought medicine
- Allergy Serum



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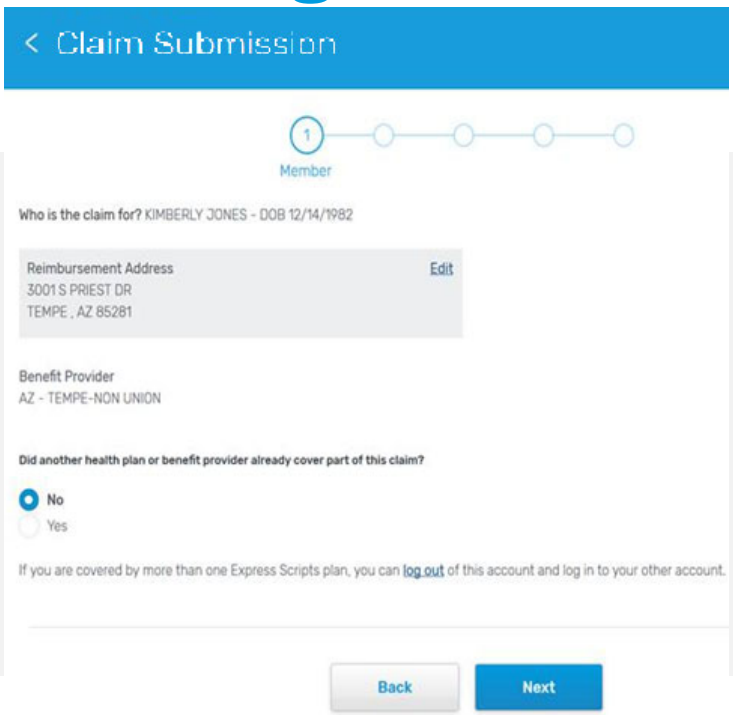
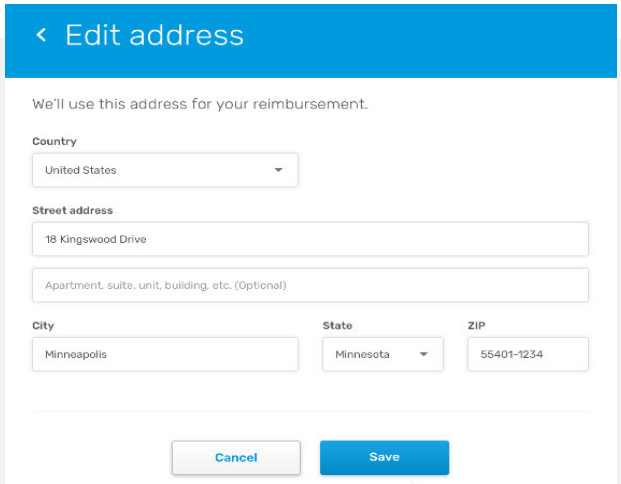
Starting a Direct Claim





Getting Started (regular claim)

- Member's eligibility address is the default address.
- The address can be changed but will only be used for reimbursement.
- The member can't submit the claim under any other benefit except the one they are logged in under.

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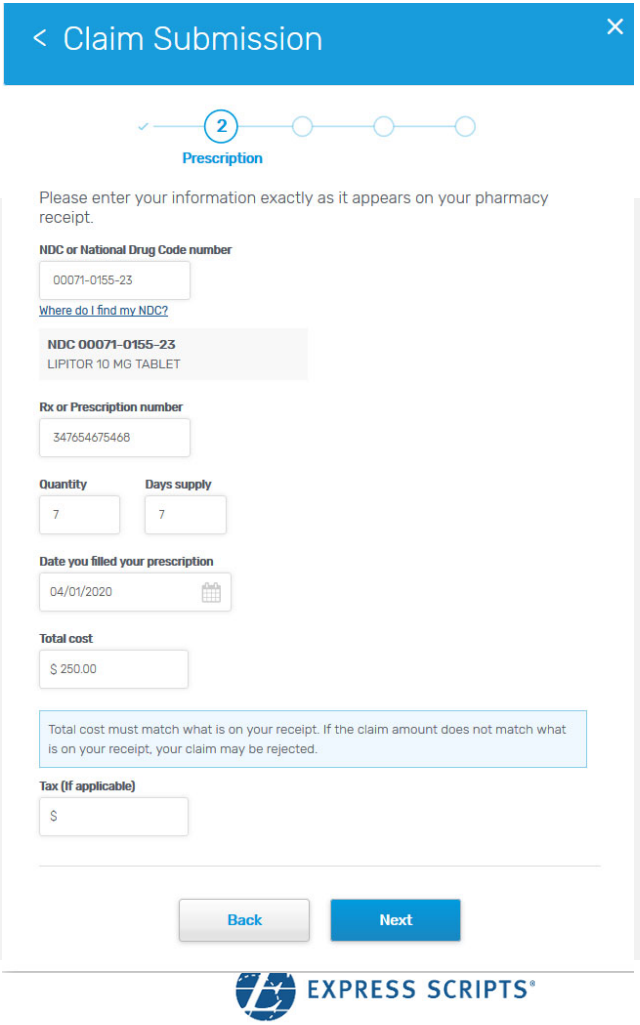
Prescription Information

Completing each step – COVID-19 OTC Test Kit

- Pharmacy receipts are the recommended receipt which includes details information about your prescription and payment (provided at pharmacy counter, after submission through benefit)
- If pharmacy receipt is not provided, a standard cashier receipt with COVID-19 OTC Test Kit UPC can be used
  - NDC – please see next slide for NDCs associated with approved COVID-19 OTC Test Kits
  - Rx or Prescription number – member may enter a default Rx number '1234567'
  - Quantity = 1 ; Days Supply = 30
  - Date – purchase date of COVID-19 OTC Test Kits
  - Cost – include cost of kits as shown on receipt



Approved COVID-19 OTC Test Kit NDC

Find the name of your purchased COVID-19 OTC Test Kits from the list. Input the associated NDC into Step 2 of the online submission form

Test Kit Name	Manufacturer	NDC	# Test per Kit
BD Veritor At-Home COVID-19 Test	Becton Dickinson	08290256088	1
BinaxNOW COVID-19 Ag Card Home Test	Abbott	11877001140	2
Ellume COVID-19 Home Test	Ellume	56964000000	1
Flowflex COVID-19 Antigen Home Test	ACON	82607066026	1
Flowflex COVID-19 Antigen Home Test	ACON	82607066027	2
Flowflex COVID-19 Antigen Home Test	ACON	82607066028	5
iHealth COVID-19 Antigen Rapid Test	iHealth Labs	56362000589	2
iHealth COVID-19 Antigen Rapid Test	iHealth Labs	56362000590	5
InteliSwab COVID-19 Rapid Test	OraSure	08337000158	2
QuickVue At-Home COVID-19 Test	Quidel	14613033972	2
QuickVue At-Home COVID-19 Test	Quidel	14613033968	5

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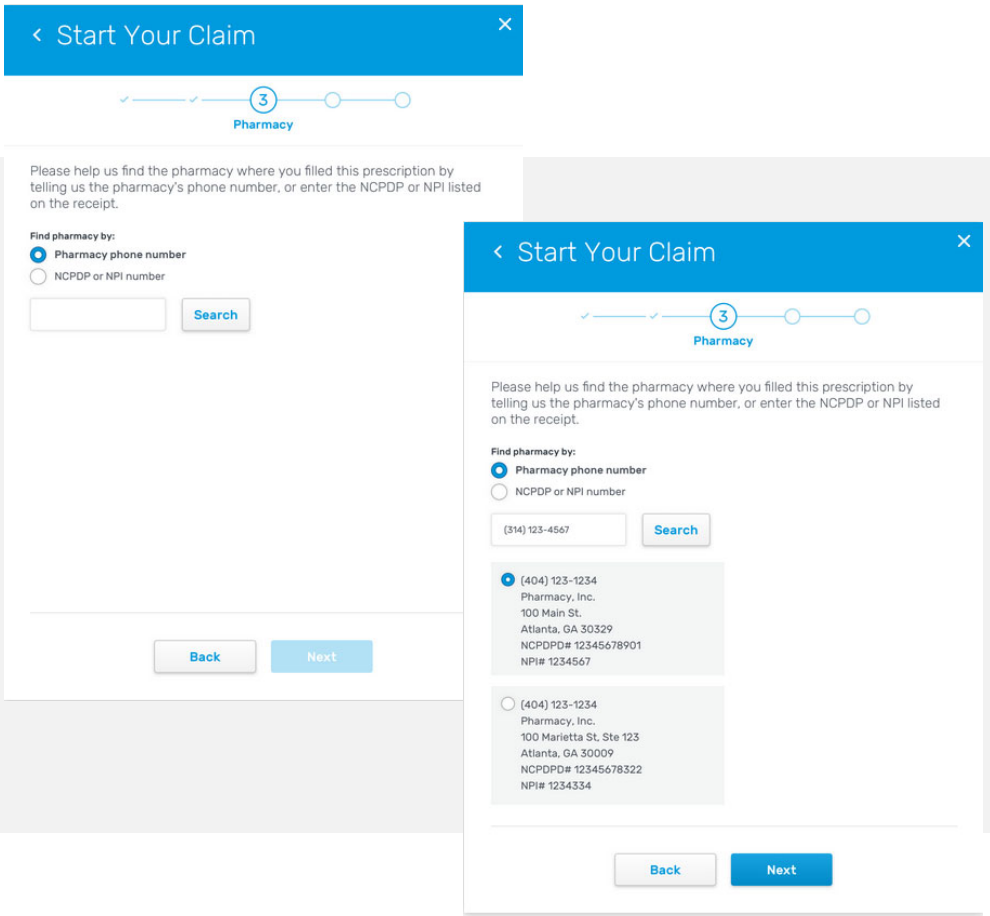
Retail Pharmacy

- For Single ingredient or Compound drugs, member enters a NCPDP or NPI number from their receipt

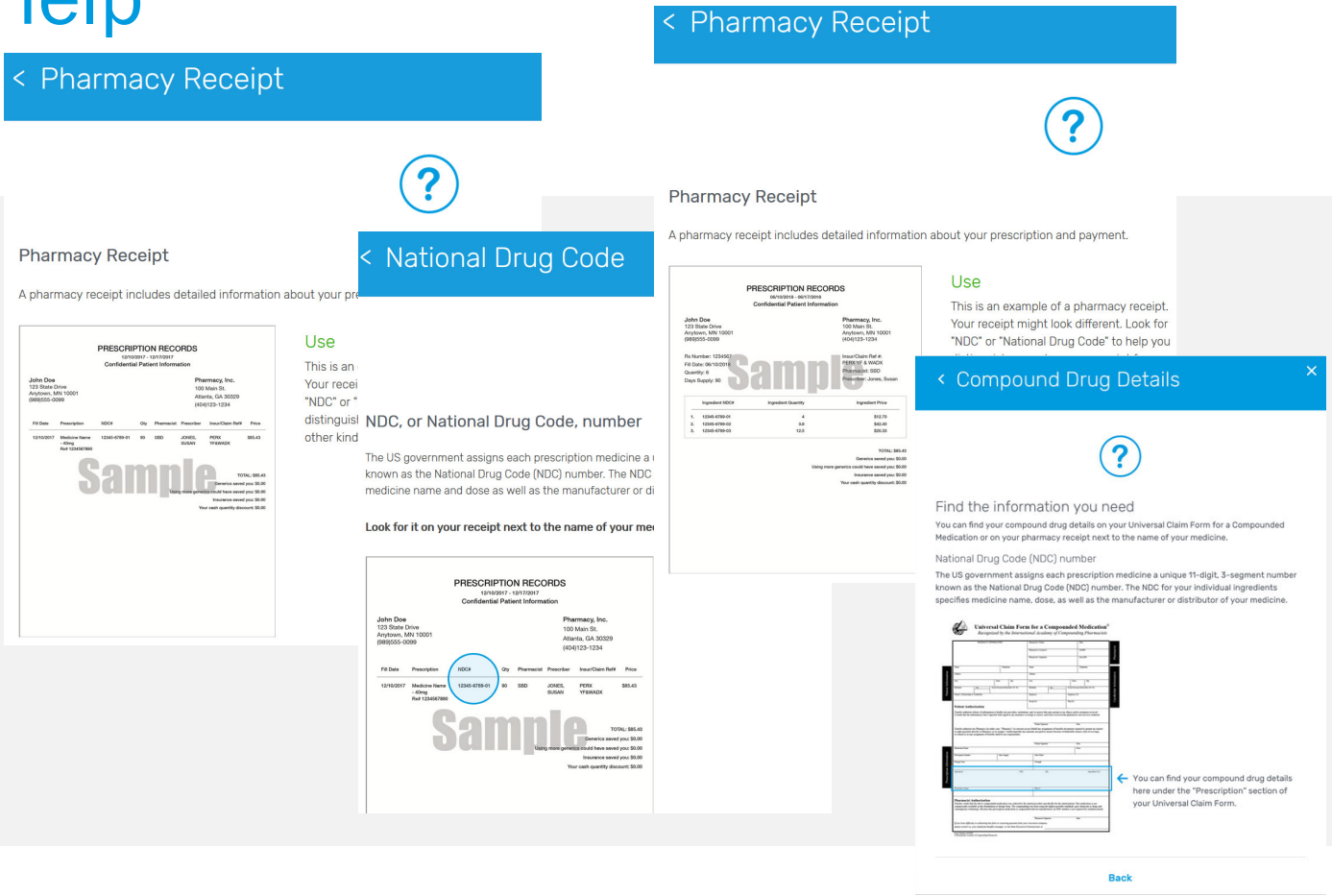
OR

- If COVID-19 Test kit was purchased in a pharmacy retail store, please input phone number to help locate pharmacy information
- If COVID-19 Test kit was purchased at a non-pharmacy retailer, input 3000003



Contextual Help

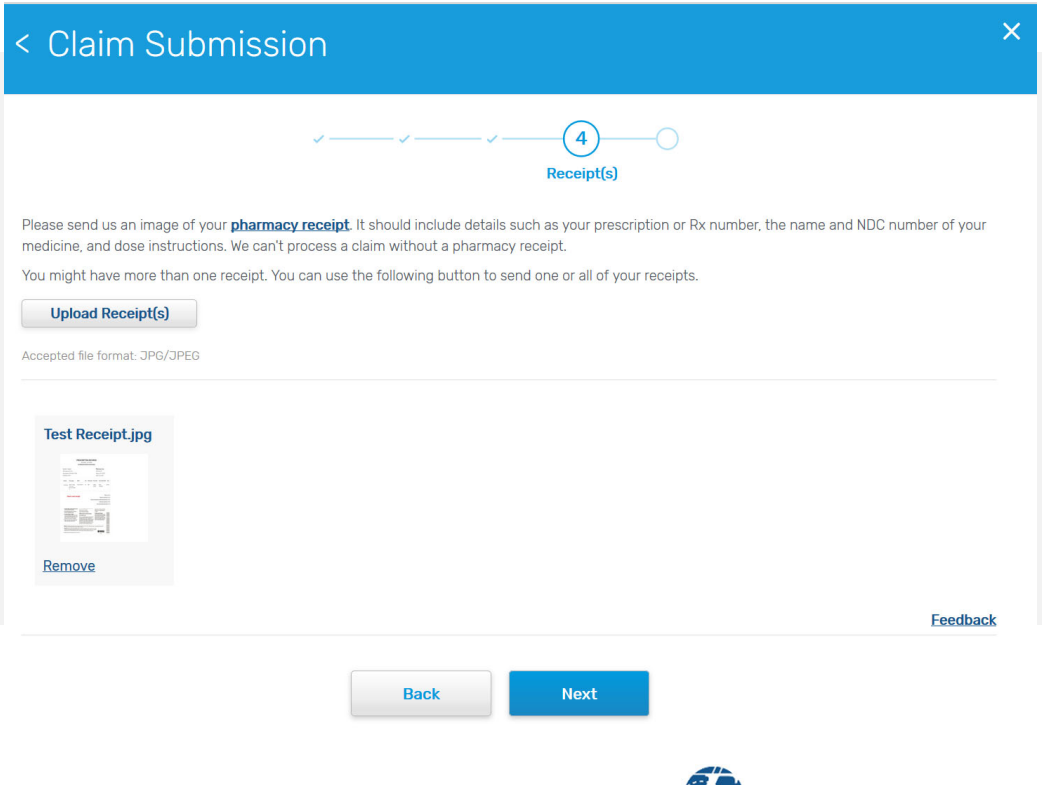
- Members are given contextual help throughout the process, showing them where different fields can be found on a typical pharmacy receipt.
- This will help in reducing member abandonment and confusion.



Receipt Upload

The member must upload at least one receipt to attach to the claim.

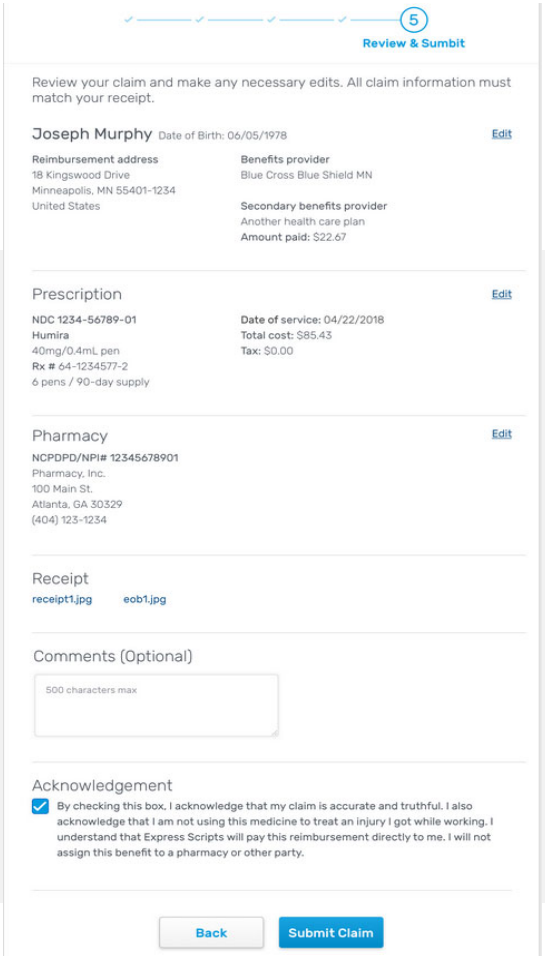
Please note: Currently, members are only able to upload JPG/JPEG files. We will be extending this to additional files in the future.

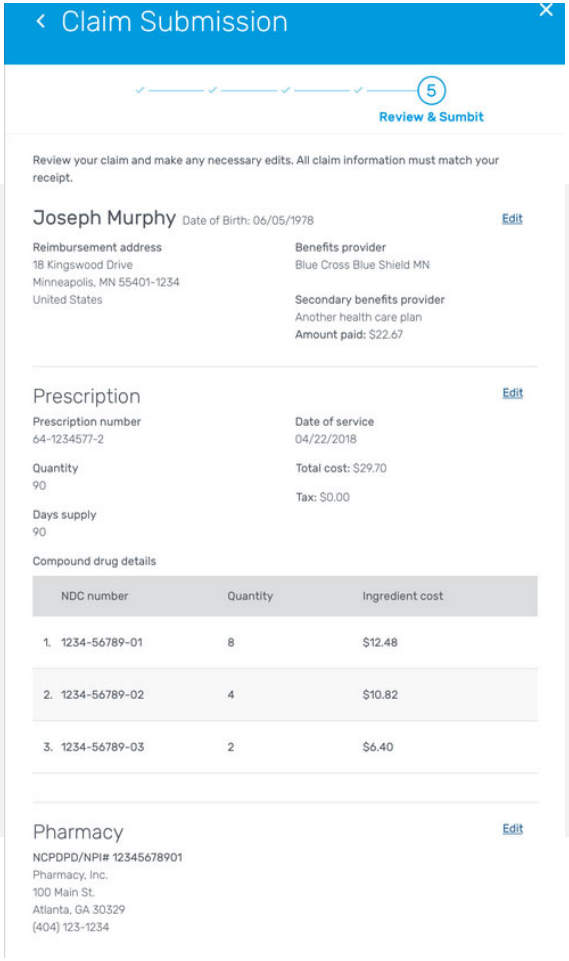


Review & Submit

Single Ingredient view

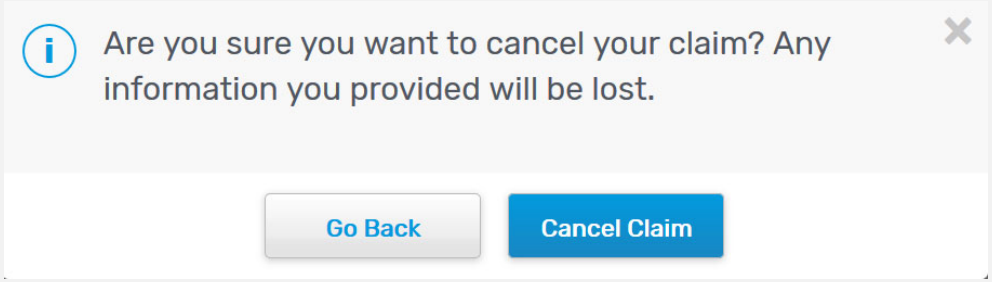
- Member has the opportunity to make edits, view the receipt they've uploaded and submit their claim.
- The member must agree to the legal terms before they can submit the claim.





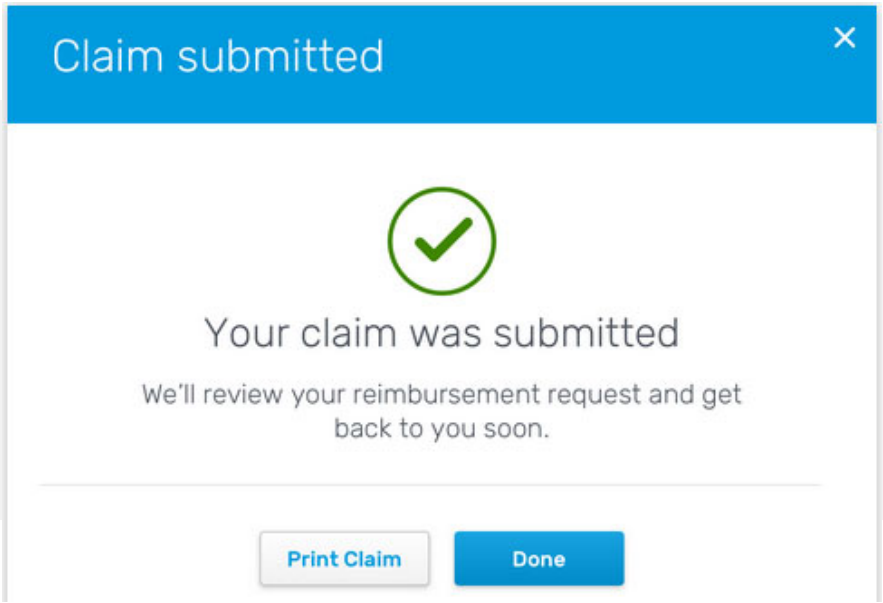
Close Prompt

- If the member chooses the close button at any point, the member will receive this message asking them if they wish to close out of the application.



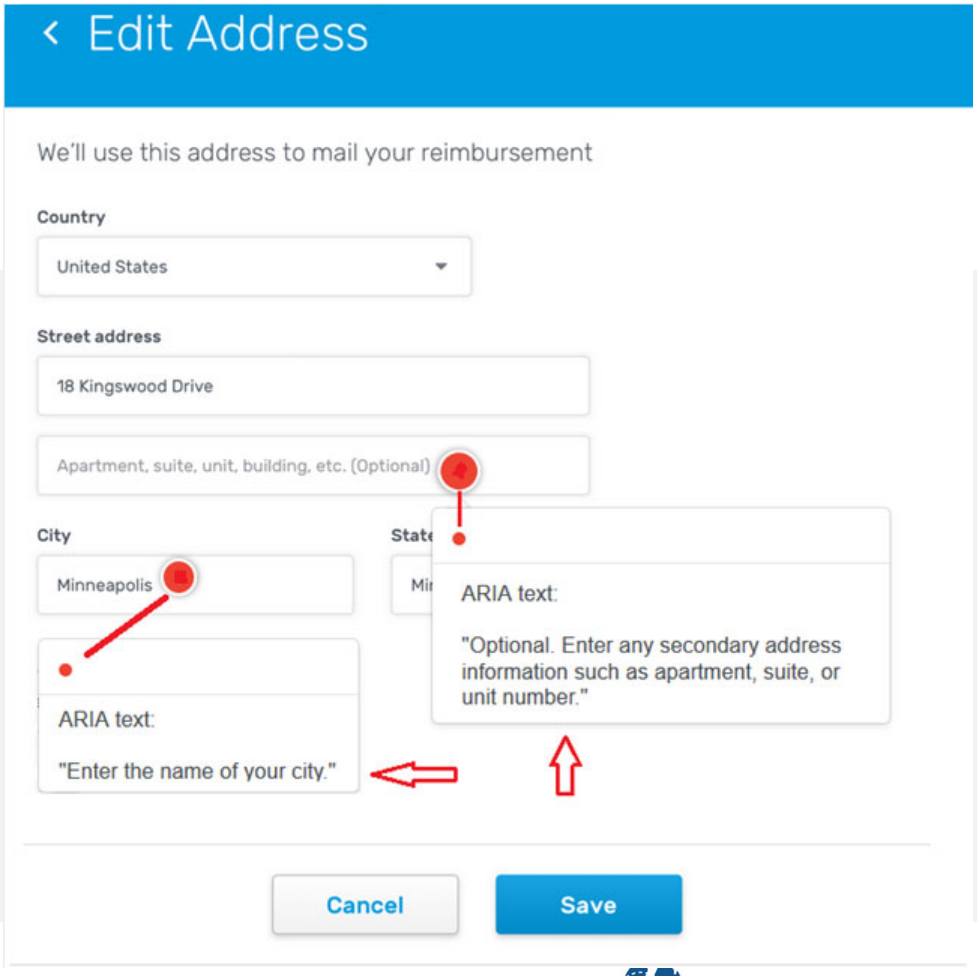
Confirmation

- Member can print the claim information that they submitted, if desired.
- Once member clicks Done, the application closes and the member is returned to the member website page they started from.



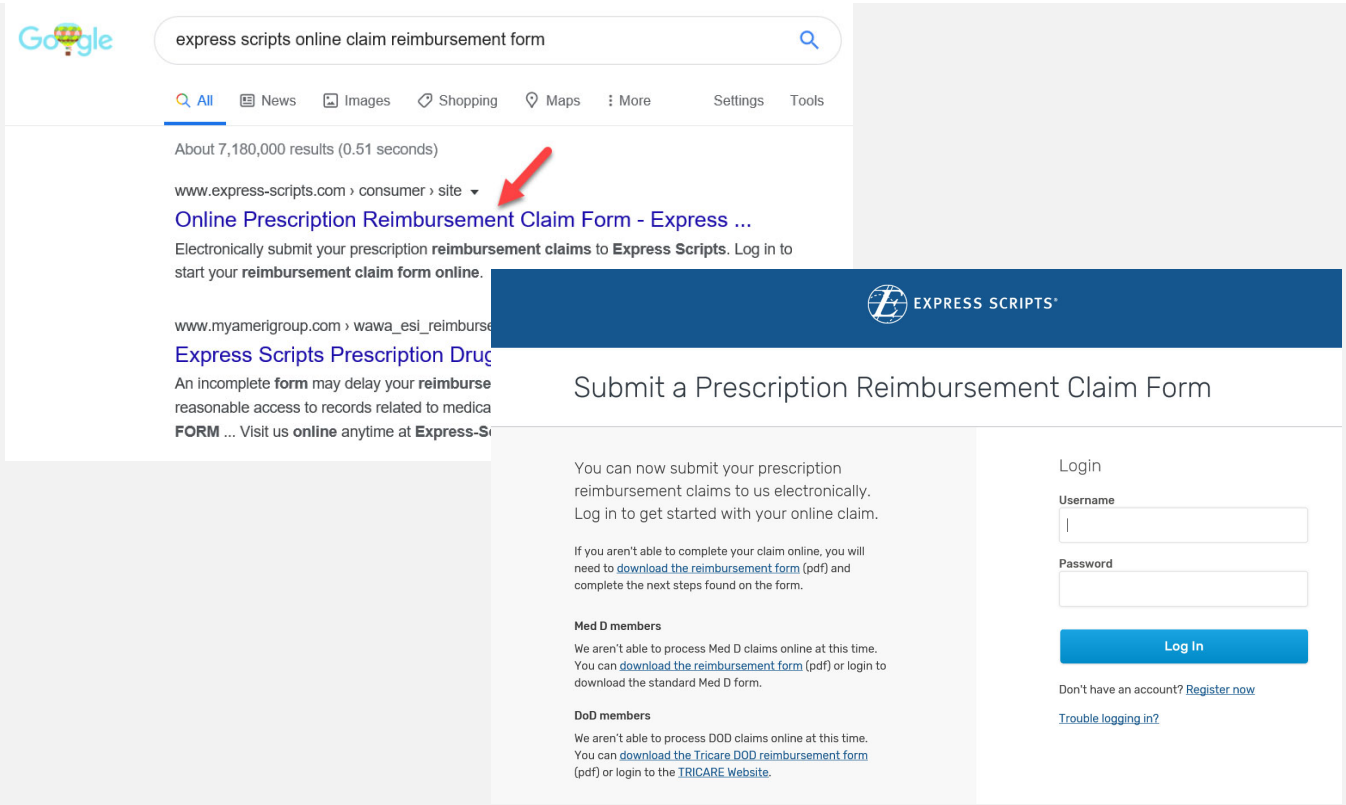
Accessibility

- DCSS tool is now available to users with disabilities, people who rely on screen readers and people who cannot use a mouse.
- *WAI-ARIA* (Web Accessibility Initiative – Accessible Rich Internet Applications) technique defines a way to make Web content and Web applications more accessible to people with disabilities.
- When user navigates trough the fields on the screen, custom messages are read to the user.



Landing page

- Prescription Reimbursement Claim Form Landing page were created to enhance search engine results to help drive the member experience through the improved ability to find and download an Express Scripts claim form.
- Landing page also provides users with a shortcut to the DCSS tool for electronic claim submission.



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