

## Reimbursement Process For Neighborhood Commercial Members ONLY:

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	Electronic Reimbursement: Submit your receipt for reimbursement through the CVS  Caremark website and/or mobile application. Users must register for a Caremark
	account.
Gener	ally, you will need to submit:
	Your mailing address (to send your reimbursement check)
	The number and type of tests you bought
	Where you bought the tests
	A copy of your receipt dated January 15, 20 22 or later (it's okay if there are other items on the receipt – you will only be reimbursed for the tests)
	You will also need to confirm that the test was used to diagnose a possible COVID-19 infection.
You de	o not need to submit:
	A prescription from your doctor
П	The results of your test

You'll get a response to your request within 30 days. If your reimbursement request is approved, a check will be mailed to you.

Paper Reimbursenent: Mail your completed CVS Caremark Prescription Reimbursement Claim Form along with a copy of your receipt dated on or after January 15, 20 22 to CVS Caremark, at the following address:

CVS Caremark P.O. Box 52136 Phoenix, AZ 850 72-2136

The maximum reimbursement is \$12 per COVID-19 rapid antigen test kit or the amount you paid out-of-pocket – whichever is lower. Many COVID-19 rapid antigen test kits are sold as a 2-pack kit (\$12 for each test) and these will be reimbursed at a maximum of \$24 per kit.

\*At-home COVID-19 rapid antigen test kits are covered throughout the public health emergency as a preventive service. Members deductibles and out of pocket maximums will not be impacted.

\*\*At-home COVID-19 rapid antigen test kits must be purchased for personal use. You will not be reimbursed for tests purchased for work, school, other requirements or resale. An attestation is required.