

USFHP OTC COVID-19 Test Form



*This form will be only used when the test kit is obtained via prescription for a medically necessary purpose, by a TRICARE-authorized provider.

Member Information

ID number

ÓPÜQVWÚJæ Å

ÅS Family Health Plan

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Date of birth / / Male Female

Name (First, Last)

Street Address

City State Zip

Member's relationship to primary cardholder:

Self Spouse/Domestic partner Dependent/Child

I certify that:

- The information on this form is correct
- The member named above is eligible for reimbursement
- The member named above received the test(s) listed

X

Member or legal representative signature

Pharmacy/Retailer Information

Pharmacy/ Retailer Name

Pharmacy/ Retailer Address

City State Zip

COVID-19 At-Home Test Information

Please provide proof of purchase by submitting the UPC code found on the outside of the testing box, ~~æ å~~ by submitting the itemized receipt.

UPC number

Date Purchased / /

Quantity of Tests _____

Brand of Test _____

Total Charge \$.

Instructions

1. Use a separate claim form for each member. All information provided on this claim form must be for the same person.
2. Update the claim form with the test purchase information

Note: Your claim will be sent back if required information is missing. ~~Å~~ ~~æ å~~ completed ~~Å~~ ~~æ å~~ and a copy of the prescription within 365 days of purchase to: ~~Å~~

CHRISTUS Health Plan
Attn: Claims Department
919 Hidden Ridge
Irving, TX 75038

Required Information

- ID number
- CHRISTUS Plan
- Date of Birth
- Pharmacy/Retailer name
- Pharmacy/Retailer address
- UPC number
- Quantity of Tests
- Brand of Test
- Total Charge
- Itemized Receipt
- Copy of Prescription

Ex: UPC bar Code on *BinaxNOW COVID-19 Antigen Self Test*

Abbott



Fraud Prevention Regulation: Any person who knowingly and with intent to defraud any health plan or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent health plan act, which is a crime and subjects such person to criminal and civil penalties.