

**DATE:** August 19, 2021 (**Updated**)

**SUBJECT:** COVID-19 Vaccine Administration Billing Guidelines

**Billing Information for COVID-19 Vaccine Administration Fees for Members 12 Years of Age and Older for the Pfizer Vaccine, and 18 Years of Age and Older for the Moderna Vaccine and Janssen Vaccine**

**Provider Qualifications**

AHCCCS and its Contractors shall reimburse for the COVID-19 vaccine administration fee(s) to the following AHCCCS registered providers:

- Pharmacies obtaining the vaccine directly from the federal government; and
- The Arizona Department of Health Services (ADHS) COVID-19 On boarded providers.

This includes pharmacies when the vaccine is administered by a pharmacist or interns and technicians under the supervision of a pharmacist, who are currently licensed and certified by the Arizona State Board of Pharmacy consistent with the limitations of state law A.R.S §32-1974.

**Reimbursement Rates**

AHCCCS Contractors and the AHCCCS Fee-For-Service Program shall reimburse providers the following rates for the COVID-19 vaccine administration fees:

Dates of service **12/14/2020** through **3/14/2021**

- Initial vaccine administration - \$16.94
- Second vaccine administration - \$28.39
- Single dose vaccine administration - \$28.39

Dates of service **3/15/2021** through **8/8/2021**

- Initial vaccine administration - \$40.00
- Second vaccine administration - \$40.00
- Single dose vaccine administration - \$40.00

Dates of service **8/9/2021** and after

- Initial vaccine administration - \$83.00
- Second vaccine administration - \$83.00
- Single dose vaccine administration - \$83.00

Dates of service **8/12/2021** and after

- Third Dose vaccine administration - \$83.00

### **Provider Claim Requirements**

- COVID-19 vaccines are provided at no charge from the Federal government at this time. Therefore, when billing for the vaccine itself a cost for the vaccine greater than zero shall not be entered on the CMS 1500 claim form, in the 837P format or Pharmacy POS formats.
- Non-Pharmacy Providers must use the NPI(s) of the ordering and rendering provider on the CMS 1500 medical claim form or in the 837P format when billing for the vaccine administration fee. The ordering and rendering provider(s) must be registered with AHCCCS.
- CPT codes to be used for claims submission for COVID-19 Vaccines and Administration are specific to the vaccine being administered; therefore the NDC is not required when using the CMS 1500 medical form or the 837P format.
- Pharmacies must submit the National Provider Identifier (NPI) of the pharmacy as the ordering and rendering provider on the claim. The ordering and rendering provider(s) must be registered with AHCCCS.
- Pharmacy claims for administration of the COVID-19 vaccines may be submitted through the point-of-sale (POS) system following the guidelines from the National Council for Prescription Drug Programs (NCPDP) and as outlined below.
- Retroactive billing will be allowed for the administration of the Pfizer COVID-19 vaccination back to Dates of service 12/14/20, for the Moderna COVID-19 vaccine administration back to Dates of service 12/18/20, and for the Janssen COVID-19 vaccine administration back to Dates of service 2/27/2021.

### **Managed Care Organization (MCO) Requirements**

MCOs must suspend network requirements and reimburse for the COVID-19 vaccine administered by all qualified providers. AHCCCS MCO Contractors shall require providers to submit claims for reimbursement of the COVID-19 vaccine administration fee using the CMS 1500 medical form, in the 837P format or through the point-of-sale (POS) system.

### **AHCCCS Provider types that can be reimbursed for the COVID-19 Vaccination Administration**

- All providers submitting claims for the administration fee for COVID-19 vaccines must use the CMS 1500 claim form or the 837P format.
  - 02 Hospital
  - 03 Pharmacy
  - 05 Clinic
  - 06 Emergency Ground Transportation
  - 08 MD
  - 09 CNM
  - 10 Podiatrist
  - 18 PA
  - 19 RNP
  - 20 Respiratory Therapist
  - 22 Nursing Home
  - 23 Home Health Agency
  - 29 Community Rural Health
  - 31 DO
  - 41 Dialysis Clinic
  - C2 FQHC
  - C5 638 FQHC
  - IC Integrated Clinic
  - TR Treat and Refer

**American Medical Association (AMA) Current Procedural Terminology (CPT) for Medical Claims and NDC Codes for Pharmacy Claims for COVID-19 Vaccines and Administration Fees are below:**

<b>CPT Vaccine Codes for Medical Claims</b>	<b>Vaccine - Procedure Name</b>	<b>Vaccine Descriptor</b>	<b>Vaccine NDC Codes for Pharmacy POS Claims</b>	<b>Minimum Dosing Interval (general guidelines)</b>	<b>AHCCCS Payment</b>
91300	<b>Pfizer-Biontech Covid-19 Vaccine</b>	Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNALNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use.	59267-1000-01 vial 59267-1000-02 carton 59267-1000-03 diluent		\$.00
0001A	Pfizer-Biontech Covid-19 Vaccine Administration  First Dose	ADM SARSCOV2 30MCG/0.3ML1ST	59267-1000-01 vial 59267-1000-02 carton 59267-1000-03 diluent		\$16.94 for dates of service prior to <b><u>3/15/2021</u></b> and \$40.00 for dates of service through <b><u>8/8/2021</u></b> and \$83.00 for dates of service <b><u>8/9/2021</u></b> and after
0002A	Pfizer-Biontech Covid-19 Vaccine Administration  Second Dose	ADM SARSCOV2 30MCG/0.3ML2ND	59267-1000-01 vial 59267-1000-02 carton 59267-1000-03 diluent	21 days after the initial dose	\$28.39 for dates of service prior to <b><u>3/15/2021</u></b> and \$40.00 for dates of service through <b><u>8/8/2021</u></b> and \$83.00 for dates of service <b><u>8/9/2021</u></b> and after
0003A	Pfizer-Biontech Covid-19 Vaccine Administration	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2	59267-1000-01 vial 59267-1000-02 carton		\$83.00 <b><u>08/12/2021</u></b> and after

	Third Dose	(SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; third dose.	59267-1000-03 diluent		
91301	<b>Moderna Covid-19 Vaccine</b>	Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNALNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use	80777-0273-10 vial 80777-0273-99 carton		\$0.00
0011A	Moderna Covid-19 Vaccine Administration First Dose	ADM SARSCOV2 100MCG/0.5ML1ST	80777-0273-10 vial 80777-0273-99 carton		\$16.94 for dates of service prior to <b>3/15/2021</b> and \$40.00 for dates of service through <b>08/08/2021</b> and \$83.00 for dates of service <b>8/9/2021</b> and after
0012A	Moderna Covid-19 Vaccine Administration Second Dose	ADM SARSCOV2 100MCG/0.5ML2ND	80777-0273-10 vial 80777-0273-99 carton	28 days after the initial dose	\$28.39 for dates of service prior to <b>3/15/2021</b> and \$40.00 for dates of service through <b>8/8/2021</b> and \$83.00 for dates of service <b>8/9/2021</b> and after
0013A	Moderna Covid-19 Vaccine Administration Third Dose	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage; third dose	80777-0273-10 vial 80777-0273-99 carton		\$83.00 <b>08/12/2021</b> and after
91303	Janssen COVID-19 Vaccine	Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus	59676-0580-05		\$0.00

		disease [COVID-19] vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x1010 viral particles/0.5mL dosage, for intramuscular use	59676-0580-15 carton		
0031A	Janssen COVID-19 Vaccine Administration Single Dose	ADM SARSCOV2 5x1010 viral particles/0.5mL dosage	59676-0580-05 59676-0580-15 carton	N/A	\$28.39 for dates of service prior to <b>3/15/2021</b> and \$40.00 for dates of service through <b>8/8/2021</b> and \$83.00 for dates of service <b>8/9/2021</b> and after

**Billing Example 1500 - Professional Claim:**

24. A	B	C	D	E	F	G	H	I	J
Dates of Service	Place of Service	EMG	Procedure, Services or Supplies	Diagnosis Pointer	\$ Charges	Days or Units	EPSDT/Family Planning	ID Qual	Rendering Provider
12/15/2020 - 12/15/2020	11	N	91300	A	0.00	1		XX	123456789
12/15/2020 - 12/15/2020	11	N	0001A	A	16.94	1		XX	123456789
01/04/2021 - 01/04/2021	11	N	0002A	A	28.39	1		XX	123456789

\*\* Note pharmacies and other providers may bill both administration fees on a single claim after both vaccines have been administered or separate claims may be submitted as each vaccine administration is completed.

**Pharmacy Point-of Sale Processing for COVID-19 Administration Fees**

The pharmacy must follow the NCPDP billing guidance as noted below:

Billing for reimbursement of a free product (no associated cost) including an administration fee per NCPDP guidelines:

- The submitted Transaction Code (103-A3) is a “B1” (Claim Billing).
- The submitted Prescription/Service Reference Number Qualifier (455-EM) is a “1” (Rx Billing).
- The claim pricing segment follows the prescription claim request formula.
- The Product/Service ID (407-D7) should be submitted with the correct
- Product/Service ID Qualifier (436/E1) (in this example “03” (NDC))
- Product/Service ID (407-D7) contains the NDC Number of the vaccine or other product that was administered and obtained at zero cost.
- The Days’ Supply (405-D5) should be submitted with a value of “1”.
- The Quantity Dispensed (442-E7) should be submitted with the value that represents the quantity of drug product administered.
- The DUR/PPS Segment, with a “MA” (Medication Administered) in the Professional Service Code (440-E5), is submitted to identify the product was administered.
- The Incentive Amount Submitted (438-E3) is submitted to identify the pharmacy is seeking reimbursement for the administration of the product.
- The submission clarification code (420-DK)
  - Initial Dose(s) and Single Dose: Submission Clarification Code of **2** “**Other Override**” - defined as “Used when authorized by the payer in business cases not currently addressed by other SCC values to indicate the first dose of a multi-dose vaccine is being administered”
  - Final Dose: Submission Clarification Code of **6** “**Starter Dose**” - defined as “The pharmacist is indicating that the previous medication was a starter dose and now additional medication is needed to continue treatment to indicate the second dose of a multi-dose vaccine is being administered”
- The administration fee amount is as follows for vaccine requiring three doses:

Dates of service 12/14/2020 through 3/14/2021

- § Initial Dose: \$16.94
- § Final Dose: \$28.39
- § Single Dose: \$28.39

Dates of service on and after 3/15/2021 through 8/8/2021

- § Initial Dose: \$40.00
- § Final Dose: \$40.00
- § Single Dose: \$40.00

Dates of service 8/9/2021 and after

- § Initial Dose: \$83.00
- § Final Dose: \$83.00
- § Single Dose: \$83.00
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Dates of service 8/12/2021 and after

- § Third Dose: \$83.00

- Basis of Cost Determination (423-DN) should be submitted with the value “15” (Free product or no associated cost).