

Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, Virginia 23219

http://www.dmas.virginia.gov

## MEDICAID MEMO

TO: All Medicaid Providers and Managed Care Organizations Participating in the

Virginia Medical Assistance Program

**FROM:** Karen Kimsey, Director **DATE:** 12/11/2020

Department of Medical Assistance Services (DMAS)

**SUBJECT:** Coverage of COVID-19 Vaccine Administration

The purpose of this memorandum is to inform providers that DMAS fee-for-service (FFS) and all contracted managed care plans will cover two (2) new COVID-19 vaccine products and four (4) new COVID-19 vaccine administration codes for all full benefit Medicaid and FAMIS populations. Further contact information is included at the bottom of this document.

The codes below will be covered pending FDA approval of the associated vaccine with effective dates of service of December 10, 2020 and onwards.

CPT Code	Description	Reimbursement Rate
91300	Severe acute respiratory syndrome coronavirus 2 (SARS-	\$0.01
	CoV-2) (Coronavirus disease [COVID-19]) vaccine,	
	mRNA-LNP, spike protein, preservative free, 30	
	mcg/0.3mL dosage, diluent reconstituted, for	
	intramuscular use	
0001A	Immunization administration by intramuscular injection of	\$16.94
	severe acute respiratory syndrome coronavirus 2 (SARS-	*
	CoV-2) (Coronavirus disease [COVID-19]) vaccine,	
	mRNA-LNP, spike protein, preservative free, 30	
	mcg/0.3mL dosage, diluent reconstituted; first dose	
0002A	Immunization administration by intramuscular injection of	\$28.39
	severe acute respiratory syndrome coronavirus 2 (SARS-	4_0.07
	CoV-2) (Coronavirus disease [COVID-19]) vaccine,	
	mRNA-LNP, spike protein, preservative free, 30	
	mcg/0.3mL dosage, diluent reconstituted; second dose	
91301	Severe acute respiratory syndrome coronavirus 2 (SARS-	\$0.01
	CoV-2) (Coronavirus disease [COVID-19]) vaccine,	
	mRNA-LNP, spike protein, preservative free, 100	
	mcg/0.5mL dosage, for intramuscular use	

Medicaid Memo: Coverage of COVID-19 Vaccine Administration December 11, 2020

Page 2

CPT Code	Description	Reimbursement Rate
0011A	Immunization administration by intramuscular injection of	\$16.94
	Severe acute respiratory syndrome coronavirus 2 (SARS-	
	CoV-2) (Coronavirus disease [COVID-19]) vaccine,	
	mRNA-LNP, spike protein, preservative free, 100	
	mcg/0.5mL dosage; first dose	
0012A	Immunization administration by intramuscular injection of	\$28.39
	Severe acute respiratory syndrome coronavirus 2 (SARS-	,
	CoV-2) (Coronavirus disease [COVID-19]) vaccine,	
	mRNA-LNP, spike protein, preservative free, 100	
	mcg/0.5mL dosage; second dose	

The Centers for Medicare and Medicaid Services (CMS) anticipates that, at this time, providers will not incur a cost for vaccine products (CPT 91300, 91301). <u>Providers should not bill for vaccine products</u> if they received it for free.

For questions on coverage for members enrolled in a managed care organization, refer to the contact information listed below.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

PROVIDER CONTACT INFORMATION & RESOURCES				
Virginia Medicaid Web Portal Automated Response System (ARS) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	www.virginiamedicaid.dmas.virginia.gov			
Medicall (Audio Response System) Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.	1-800-884-9730 or 1-800-772-9996			
<b>KEPRO</b> Service authorization information for fee-for-service members.	https://dmas.kepro.com/			

## **Managed Care Programs**

Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), and Program of All-Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan may utilize different guidelines than those described for Medicaid fee-for-service individuals.

Medallion 4.0	http://www.dmas.virginia.gov/#/med4
CCC Plus	http://www.dmas.virginia.gov/#/cccplus
PACE	http://www.dmas.virginia.gov/#/longtermprograms

Medicaid Memo: Coverage of COVID-19 Vaccine Administration December 11, 2020 Page 3

Magellan Behavioral Health Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.	www.MagellanHealth.com/Provider For credentialing and behavioral health service information, visit: www.magellanofvirginia.com, email: VAProviderQuestions@MagellanHealth.com,or call: 1-800-424-4046
Provider HELPLINE Monday–Friday 8:00 a.m5:00 p.m. For provider use only, have Medicaid Provider ID Number available.	1-804-786-6273 1-800-552-8627
Aetna Better Health of Virginia	aetnabetterhealth.com/virginia 1-800-279-1878
Anthem HealthKeepers Plus	www.anthem.com/vamedicaid 1-800-901-0020
Magellan Complete Care of Virginia	www.MCCofVA.com 1-800-424-4518 (TTY 711) or 1-800-643-2273
Optima Family Care	1-800-881-2166
United Healthcare	Uhccommunityplan.com/VA and myuhc.com/communityplan 1-844-752-9434, TTY 711
Virginia Premier	1-800-727-7536 (TTY: 711)