

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

http://www.dmas.virginia.gov

MEDICAID MEMO

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

Medicaid and FAMIS Programs

FROM: Karen Kimsey, Director **DATE:** 4/1/21

Department of Medical Assistance Services (DMAS)

SUBJECT: Update to Reimbursement Rate for COVID-19 Vaccine Administration

The purpose of this memorandum is to inform providers of:

• Reimbursement rate changes for COVID-19 vaccine administration.

• Automatic reprocessing of previously submitted vaccine administration claims.

The previous Medicaid Memos "Coverage of COVID-19 Vaccine Administration" (dated December 11, 2020) and "Coverage of Single-Dose COVID-19 Vaccine Administration" (dated March 2, 2021) communicated coverage of COVID-19 vaccination, effective December 10, 2020 and February 26, 2021 onwards, respectively.

The Centers for Medicare & Medicaid Services (CMS) recently announced an increase in the Medicare payment amount for administering the COVID-19 vaccine. The objective of the rate increase is to support provider actions designed to increase the number of vaccines they can administer each day, including establishing new or growing existing vaccination sites, conducting patient outreach and education, and hiring additional staff. DMAS will increase reimbursement rates for COVID-19 vaccine administration to match current Medicare rates. Claims for the codes below with dates of service on or after April 1, 2021 will be reimbursed by DMAS Fee for Service (FFS) and all DMAS Managed Care Organizations (MCOs) at the following updated reimbursement rates:

CPT Code	Description	Reimbursement
		Rate
91300	Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use	\$0.01
0001A	Immunization administration by intramuscular injection of severe acute respiratory syndrome	\$40.00

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	coronavirus 2 (SARSCoV-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 severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted; second dose	\$40.00
91301	Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use	\$0.01
0011A	Immunization administration by intramuscular injection of Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage; first dose	\$40.00
0012A	Immunization administration by intramuscular injection of Severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage; second dose	\$40.00
91303	SARSCOV2 VAC AD26 .5ML Janssen Covid-19 Vaccine	\$0.01
0031A	ADM SARSCOV2 VAC AD26 .5ML Janssen Covid-19 Vaccine Admin.	\$40.00

Claims for the codes above submitted under member medical benefits with dates of service on or after April 1, 2021 that were initially reimbursed at previously stated rates will be reprocessed by Medicaid FFS (fee for service) and all managed care plans without requiring resubmission of claims.

All COVID-19 vaccine claims submitted with NDC (national drug code) codes through the pharmacy point-of-sale system with dates of service on or after April 1, 2021 will be reimbursed with an administration fee of \$40 per individual immunization dose. Previously submitted claims on or after April 1, 2021 which were reimbursed at previously published rates may be reversed and resubmitted at the pharmacy level or by the Pharmacy Benefit Manager (PBM) at the corporate level.

CMS continues to anticipate that, at this time, providers will not incur a cost for vaccine products (CPT 91300, 91301, 91303). Providers should not bill for vaccine products if they received it for free.

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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	Visit: www.virginiamedicaid.dmas.virginia.gov		
Portal Automated Response			
System (ARS)			
Member eligibility, claims			
status, payment status, service			
limits, service authorization			
status, and remittance advice.			
Medicall (Audio Response	Call : 1-800-884-9730, or		
System)	1-800-772-9996		
Member eligibility, claims			
status, payment status, service			
limits, service authorization			
status, and remittance advice.			
KEPRO			
Service authorization	Visit: https://dmas.kepro.com/		
information for fee-for-service			
members.			
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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	Visit: http://www.dmas.virginia.gov/#/med4
CCC Plus	Visit: http://www.dmas.virginia.gov/#/cccplus
PACE	Visit: http://www.dmas.virginia.gov/#/longtermprograms
Magellan Behavioral Health	Visit: http://www.magellanhealth.com/Provider
Behavioral Health Services	For credentialing and behavioral health service information:
Administrator, check	Visit: www.magellanofvirginia.com
eligibility, claim status, service	Email: VAProviderQuestions@MagellanHealth.com
limits, and service	Call: 1-800-424-4046
authorizations for fee-for-	
service members.	
Provider HELPLINE	Call : 1-804-786-6273, or
Monday-Friday 8:00 a.m5:00	1-800-552-8627
p.m. For provider use only,	
have Medicaid Provider ID	
Number available.	
Aetna Better Health of Virginia	Visit: www.aetnabetterhealth.com/virginia
	Call: 1-800-279-1878

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Anthem HealthKeepers Plus	Visit: www.anthem.com/vamedicaid, or
	Call: 1-800-901-0020
Magellan Complete Care of	Visit: www.MCCofVA.com
Virginia	Call : 1-800-424-4518 (TTY 711), or
	1-800-643-2273
Optima Family Care	Call: 1-800-881-2166
United Healthcare	Visit: www.uhccommunityplan.com/VA, or
	www.myuhc.com/communityplan
	Call: 1-844-752-9434, TTY 711
Virginia Premier	Call : 1-800-727-7536 (TTY: 711), <u>www.virginiapremier.com</u>