

CORNAVIRUS

WHAT YOU NEED TO KNOW

COVID-19 Vaccine Billing and Reimbursement

NCPA has prepared this information for pharmacies claiming reimbursement for administering COVID-19 vaccine during the public health emergency. The document will be updated when new or additional information is available. The footer of the document posted at www.ncpa.org will show the date of the most recent revisions.

Pharmacist readiness

Pharmacists are [authorized](#) to *order and administer* COVID-19 vaccine. Pharmacists may need a Type 1 NPI number to submit on claims where they are ordering/prescribing the vaccine. Apply for, or lookup, an NPI number at: <https://npiregistry.cms.hhs.gov/>. Pharmacists should also be certain they meet requirements from the board of pharmacy for a pharmacy-based immunization program.

Qualified pharmacy technicians and state-authorized pharmacy interns are [authorized](#) to *administer* COVID-19 vaccine. Check with your board of pharmacy to determine if pharmacy technicians and interns can support your pharmacy-based immunization program. During the COVID-19 public health emergency, this authorization also extends to COVID-19 testing and childhood vaccines.

Pharmacy readiness

Typically, pharmacies are the entity that submits claims for immunization services provided by a pharmacist and most already have a Type 2 NPI number.

Payers

1. **Medicare** – COVID-19 vaccine will be covered under the Part B benefit. Pharmacies can enroll in Medicare as a *Pharmacy* or as a *Mass Immunizer* online via the Provider Enrollment, Chain, and Ownership System (PECOS) [website](#) or using the [CMS-855b form](#) (see Section 2 below). Enrollment fees are waived during the COVID-19 Public Health Emergency.


SECTION 2: IDENTIFYING INFORMATION

A. Type of Supplier

Check the appropriate box to identify the type of supplier you are enrolling as with Medicare. If you are more than one type of supplier, submit a separate application for each type. If you change the type of service that you provide (i.e., become a different supplier type), submit a new application.

Your organization must meet all Federal and State requirements for the type of supplier checked below.

TYPE OF SUPPLIER: (Check one only)

- | | |
|--|---|
| <input type="checkbox"/> Ambulance Service Supplier | <input type="checkbox"/> Mass Immunization (Roster Biller Only)  |
| <input type="checkbox"/> Ambulatory Surgical Center | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Clinic/Group Practice | <input type="checkbox"/> Physical/Occupational Therapy Group in Private Practice |
| <input type="checkbox"/> Hospital Department(s) | <input type="checkbox"/> Portable X-ray Supplier |
| <input type="checkbox"/> Independent Clinical Laboratory | <input type="checkbox"/> Radiation Therapy Center |
| <input type="checkbox"/> Independent Diagnostic Testing Facility | <input type="checkbox"/> Other (Specify): _____ |
| <input type="checkbox"/> Intensive Cardiac Rehabilitation | |
| <input type="checkbox"/> Mammography Center | |

Pharmacies that are already enrolled in Medicare as a *DMEPOS Supplier* or *Independent Clinical Laboratory*, need to enroll as a *Pharmacy* or *Mass Immunizer* to obtain a PTAN for vaccine claims. Both supplier types, *Pharmacy* and *Mass Immunizer*, are able to submit claims for administering COVID-19 vaccine. CMS publishes geographically adjusted payment rates, download them [here](#).

Ask all Medicare patients (including patients with Medicare Advantage plans) to bring their red, white, and blue [Medicare card](#). This card has is the ID number pharmacies need to use for billing COVID-19 vaccine administration to original fee-for-service Medicare (Medicare Part B). Pharmacies can use the MBI lookup tool in their A/B MAC portal and patients can print off a copy from <https://account.mymedicare.gov/>. MBIs can also be obtained by running an eligibility check (E1) to the Part D Eligibility Search BIN 011727 PCN 222222222 using the patient's Social Security Number as the Member ID.

Claims for patients enrolled in a hospice program must be submitted by a pharmacy enrolled as a Pharmacy using a terminal care modifier; the Mass Immunizer roster bill does not support this.

Claims for patients who get their care from a Veterans Administration facility and do not have Part B or TRICARE may be submitted to the HRSA Uninsured Program (see Payers Section 4 below)

2. **Medicaid** – State Medicaid programs have significant discretion in determining vaccine administration reimbursement rates but all must provide [coverage](#) for vaccine administration except to those with narrow range of benefit that does not ordinarily include vaccine coverage. States may elect to include vaccine administration coverage in their managed care plan contracts. Pharmacies should become familiar with vaccine administration coverage details for each state Medicaid program their patients have.
3. **Commercial** – Health plans are required to reimburse in-network and out-of-network vaccine providers for administering the COVID-19 vaccine. Health plans may cover this service on the medical benefit, the prescription drug benefit, or both. Pharmacies should consider workflow, transaction fees, reimbursement rates and timing of remittance when given the option of medical billing or PBM billing. If a prescription claim doesn't process as expected, try submitting to the medical benefit.
4. **UNinsured - **SECTION REVISED**** The [CARES Act \(P.L. 116-136\) Provider Relief Fund has an allocation for uninsured patients](#). HHS (via HRSA) will provide reimbursement for these services generally at Medicare rates, subject to available funding through the CARES Act. Pharmacies must enroll as a provider, check patient eligibility, submit patient information, and submit the claim in order to receive payment via direct deposit. Enrollment takes a couple weeks. Watch the videos linked in the following paragraphs, they are helpful.

The HRSA Uninsured [Program](#) functions like a medical benefit and must be billed via the medical pathway to UnitedHealthcare. Claims billed to OptumRx (the PBM) will be rejected. To enroll in the program [sign in](#) with your One Healthcare ID (formerly, Optum ID), or if you do not have, you can create one from the link on the sign in page. Next, you will need to validate the pharmacy's [Taxpayer Identification Number \(TIN\)](#), set up [Optum Pay ACH payments](#) (video walk through [here](#)), and add a [Provider roster](#) (video walkthrough [here](#)). This may take up to 5-10 business days, be sure that pharmacy enrollment form matches data on the W-9.

Once enrolled, the pharmacy can load patient [rosters](#) to attest to patient lack of coverage (video walkthrough [here](#)) in order to obtain a temporary member ID. Double check that the pharmacy's vaccine intake form collects the necessary patient information. As described in the video, if a patient does not have an SSN or state-issued ID you can attest that you attempted to get the information and still request a temporary member ID. Allow 24-48 hours for the temporary member ID to be added to the portal. Your medical billing intermediary will route claims properly to the COVID19 HRSA Uninsured Testing and Treatment Fund.

When billing claims to the HRSA uninsured program, it is essential for pharmacies to attest to the following:

- a. You have checked for health care coverage eligibility and confirm that the patient is uninsured, verifying no other payer will reimburse you for the COVID-19 vaccine administration (i.e. no coverage through an individual or employer-sponsored plan, federal healthcare program or Federal Employees Health Benefits Program)
 - b. You accept the defined reimbursement as payment in full
 - c. You agree not to balance bill the patient
 - d. You agree to terms and conditions (with the potential of post-reimbursement audit review)
5. **UNDERinsured – **NEW SECTION**** HHS (via HRSA) has set up the COVID-19 Coverage Assistance Fund (CAF) to cover the costs of administering COVID-19 vaccines to patients whose health insurance does not cover vaccine administration fees, or does but typically has patient cost-sharing. While patients cannot be billed directly for COVID-19 vaccine fees, costs to pharmacies for administering COVID-19 vaccines to underinsured patients will be fully covered through the CAF (including vaccine administration fees and for any patient cost sharing related to vaccination, including co-pays, deductibles, and co-insurance), subject to available funding, at Medicare rates. After submitting a claim(s) for COVID-19 vaccine administration fees to patients' health plan carrier for payment, if the claim is either denied by that insurer or only partially paid, you may then submit a claim(s) to the CAF Portal for payment consideration. You must enroll in the program through the HRSA CAF Portal, agree to the Terms and Conditions, including accepting defined program reimbursement as payment in full and agreeing not to balance bill the patient, and also verify no other third-party payer will reimburse for vaccine administration fees for that patient encounter in order to receive payment via direct deposit. Claims are accepted via clearinghouses or through electronic or manual submissions via the CAF Portal. Please refer to the [CAF Portal Provider Guide](#) and a recording of a [webcast](#) that provides information such as enrolling as a provider participant, submitting patient information, submitting claims, and receiving payment via direct deposit—they are helpful.

When billing claims to the HRSA underinsured program, it is essential for pharmacies to attest to the following:

- a. You have submitted a vaccine administration claim to the patient's health care plan and confirmed that the patient has a health plan that either does not include COVID-19 vaccine administration as a covered benefit or covers COVID-19 vaccination but with cost-sharing. (Certain health plans are not required to provide coverage of qualifying

coronavirus preventive services, including recommended COVID-19 vaccines and their administration, without cost-sharing under section 3203 of the CARES Act. Examples include grandfathered health plans, excepted benefits, or short-term limited duration insurance plans.)

- b. You have verified that no other payer will reimburse you for COVID-19 vaccine administration fees for that patient, or other patient charges related to COVID-19 vaccination, including co-payments for vaccine administration, deductibles for vaccine administration, and co-insurance.
- c. You accept defined program reimbursement as payment in full.
- d. You agree not to balance bill the patient
- e. You agree to program terms and conditions (with the potential of post-reimbursement audit review)

Billing codes

1. **Medical billing pathway** – Pharmacies using the medical pathway will need to use a medical billing intermediary (e.g. OmniSys, FDS, EBS, Change Healthcare).

The medical billing intermediary should help simplify the process of submitting a claim with [CPT codes for the](#) vaccine code in combination with sequential administration codes. Talk to your medical billing intermediary about submitting claims for Medicare Part B, health plan medical benefits, and the HRSA uninsured program.

- a. Pfizer – product: 91300, first dose: 0001A, second dose: 0002A
 - b. Moderna – product: 91301, first dose: 0011A, second dose: 0012A
 - c. Janssen – product 91303, single dose: 0031A
 - d. *AstraZeneca* – product: 91302, first dose: 0021A, second dose: 0022A (not yet authorized)*
2. **Prescription billing pathway** – Pharmacies using the prescription pathway use the dispensing system to submit a claim to a PBM. This [guidance](#) from NCPDP is not a mandate for PBMs, but many may implement the recommendations as published.

Key highlights (which MAY VARY by PBM) are:

- a. use Prescription Origin Code 5 – Pharmacy when a pharmacist orders the vaccine
- b. use the actual liquid volume (e.g. 0.5 mL) for the Quantity Dispensed
- c. a Days Supply of “1”
- d. Professional Service Code “MA”
- e. Ingredient Cost of \$0.00 or \$0.01 (depending on the payer)
- f. submission clarification codes to indicate which dose (e.g. initial dose = SCC 2 and second dose = SCC 6; or single/final dose = SCC 6).