

IMPORTANT!

Molina Provider News:



COVID-19 Vaccination

Booster Shot Administration

Molina Healthcare remains committed to ensuring Medicaid recipients receive medically necessary care to prevent and treat the 2019 novel coronavirus (COVID-19). The purpose of this alert is to provide information on **COVID-19 vaccine booster shots**. Florida Medicaid will continue to align with the Medicare vaccine administration rates. All guidance is applicable to both the fee-for-service and Statewide Medicaid Managed Care delivery systems unless otherwise stated.

As a reminder, there are no prior authorization requirements for the vaccine administration or product. There are no co-payments for COVID-19 vaccine administration and products.

Florida Medicaid covers the COVID-19 vaccine administration by age, as specified in the Food and Drug Administration Emergency Use Authorization approval for each vaccine product.

Eligible Members and Requirements

Covered: All Medicaid recipients who have full or limited Medicaid benefits are eligible for Medicaid to cover the administration of the COVID-19 vaccine. This includes individuals:

- With Medically Needy/ Share of Cost Medicaid who have incurred their share of cost for the month and whose Medicaid is activated.
- Eligible for Family Planning benefits (beginning March 11, 2021).
- Eligible for emergency Medicaid services (beginning March 11, 2021).

Not Covered: If the recipient has any other primary insurance, the primary insurance must be billed since Medicaid is the payor of last resort.

Florida Medicaid will not reimburse the COVID-19 vaccine administration for recipients with:

- Medicare; or
- Commercial insurance.

Eligible Providers and Requirements

Molina Healthcare will reimburse the following providers for the administration of the COVID-19 vaccine, for any place of service:

- Physicians and physician extenders, including those functioning in a County Health Department, Federally Qualified Health Center, or Rural Health Clinic.
- Pharmacies for COVID-19 vaccine administration rendered by pharmacists.

Billing & Reimbursement

The following reimbursement information is specific to recipients in the fee-for-service delivery system:

Florida Medicaid providers administering COVID-19 vaccines to Florida Medicaid recipients are required to submit claims with the specific vaccine product Current Procedural Terminology (CPT), its corresponding National Drug Code (NDC) and the specific vaccine product administration CPT code in order to receive reimbursement for administration.

The manufacturer specific products, NDC, and their dose-specific administration code(s) must be submitted for each COVID-19 vaccine dose administered on the claim form.

**Newly assigned procedure codes.*

Billing Code	CPT Description	Labeler Name	Physician Rate	Extender Rate	Effective Date
91300	SARSCOV2 VAC 30MCG/0.3ML IM	Pfizer	\$0.00	\$0.00	3/15/2021
0001A	ADM SARSCOV2 30MCG/0.3ML 1ST	Pfizer	\$40.00	\$32.00	3/15/2021
0002A	ADM SARSCOV2 30MCG/0.3ML 2ND	Pfizer	\$40.00	\$32.00	3/15/2021
0003A*	ADM SARSCOV2 30MCG/0.3ML 3RD	Pfizer	\$40.00	\$32.00	8/12/2021
0004A*	ADM SARSCOV2 30MCG/0.3ML BOOSTER	Pfizer	\$40.00	\$32.00	9/22/2021
91307*	SARSCOV2 VAC 10MCG PEDIATRIC	Pfizer	\$0.00	\$0.00	10/29/2021
0071A*	ADM SARSCOV2 10MCG PEDIATRIC 1ST	Pfizer	\$40.00	\$32.00	10/29/2021
0072A*	ADM SARSCOV2 10MCG PEDIATRIC 2ND	Pfizer	\$40.00	\$32.00	10/29/2021
91301	SARSCOV2 VAC 100MCG/0.5ML IM	Moderna	\$0.00	\$0.00	3/15/2021
0011A	ADM SARSCOV2 100MCG/0.5ML 1ST	Moderna	\$40.00	\$ 32.00	3/15/2021
0012A	ADM SARSCOV2 100MCG/0.5ML 2ND	Moderna	\$40.00	\$32.00	3/15/2021
0013A*	ADM SARSCOV2 100MCG/0.5ML 3RD	Moderna	\$40.00	\$32.00	8/12/2021
91306*	SARSCOV2 VAC 50MCG/0.25ML IM BOOSTER	Moderna	\$0.00	\$0.00	10/20/2021

Billing Code	CPT Description	Labeler Name	Physician Rate	Extender Rate	Effective Date
0064A*	ADM SARSCOV2 50MCG/0.25ML BOOSTER	Moderna	\$40.00	\$32.00	10/20/2021
91303	SARSCOV2 VAC AD26 0.5ML IM	Johnson & Johnson (Janssen)	\$0.00	\$0.00	3/15/2021
0031A	ADM SARSCOV2 VAC AD26 0.5ML	Johnson & Johnson (Janssen)	\$40.00	\$32.00	3/15/2021
0034A*	ADM SARSCOV2 VAC AD26 0.5ML BOOSTER	Johnson & Johnson (Janssen)	\$40.00	\$32.00	10/20/2021

Federally Qualified Health Centers, Rural Health Clinics and County Health Departments will be reimbursed outside of the encounter rate and receive the applicable Physician and Physician Extender rates for COVID-19 vaccine administration.

Pharmacy claims submitted for COVID-19 vaccine administration reimbursement must identify the administering pharmacist by Florida pharmacist license number (i.e., PSXXXXX), submitted as the prescriber ID in the National Council for Prescription Drug Programs Online database (NCPDP) field 411-DB.

Pharmacist administered COVID-19 vaccines receive Physician Extender rates and require the following submission clarification codes (SCC) be entered in NCPDP field 420-DK:

- SCC = 2 (indicates administration of the initial dose)
- SCC = 6 (indicates final/single dose administration)

Health Plan Billing & Reimbursement, and Open Network Requirement

Florida Medicaid health plans cover COVID-19 vaccine administration costs for their members. COVID-19 reimbursement rates are the same for health plans and the fee-for-service delivery system.

Providers should contact Molina Healthcare directly for billing questions and instructions.

Additional Information

If you have fee-for-service coverage questions, please contact the Florida Medicaid Helpline at 1-877-254-1055.

If you have coverage questions, please contact Molina Healthcare at: 855-322-4076.

For more information related to Medicaid coverage during the state of emergency, please visit the Agency's [COVID web page](#).

If you have questions, please contact Molina Healthcare at: 855-322-4076

Thank you for your continued care to our members!

Molina Healthcare of Florida