Cost

*How much do the vaccines cost?* The COVID-19 vaccine must be provided at no cost to recipient. The vaccine, along with the ancillary supplies, is provided by the federal government at no cost to enrolled COVID-19 vaccine providers. Vaccine providers should bill third party payers whenever possible, including commercial insurance, Medicare or Medicaid, for the administration fee as appropriate. As noted in the CDC COVID-19 Vaccination Program Provider Agreement signed by your organization’s leadership, providers may not seek any additional reimbursement, including through balance billing, sliding fee scales or co-pays from the vaccine recipient.

*Source: CDC - Key Things to Know About COVID-19 Vaccines*

Coding


This level of specificity offers the ability to track each vaccine dose, even when the vaccine product is not reported (e.g., when the vaccine may be given to the patient for free). These CPT codes report the actual work of administering the vaccine, in addition to all necessary counseling provided to patients or caregivers and updating the electronic record.”


Billing

“Vaccine doses purchased with U.S. taxpayer dollars will be given to the American people at no cost. However, vaccination providers may be able to charge administration fees for giving the shot. Vaccination providers can get this fee reimbursed by the patient’s public or private insurance company or, for uninsured patients, by the Health Resources and Services Administration’s Provider Relief Fund (HRSA).”

*Source: CDC - Key Things to Know About COVID-19 Vaccines*
Make sure you enter the CPT Codes for the vaccine and the administration fee into your billing system.

<table>
<thead>
<tr>
<th>Vaccine CPT Code</th>
<th>ICD-10 Code</th>
<th>Vaccine Admin Code(s)</th>
<th>Vaccine Name</th>
<th>Unit of Coverage</th>
<th>NDC 11 Digit Product ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>91300</td>
<td>Z23</td>
<td>0001A (1st dose)</td>
<td>Pfizer BioNTech COVID-19 Vaccine</td>
<td>0.3mL</td>
<td>59267-1000-01, 59267-1000-02, 59267-1000-03, NDC Units reported as &quot;UN1&quot;</td>
</tr>
<tr>
<td>91301</td>
<td>Z23</td>
<td>0011A (1st dose)</td>
<td>Moderna COVID-19 Vaccine</td>
<td>0.5mL</td>
<td>80777-0273-10, 80777-0273-99, NDC Units reported as &quot;UN1&quot;</td>
</tr>
<tr>
<td>91303</td>
<td>Z23</td>
<td>0031A</td>
<td>Janssen COVID-19 Vaccine</td>
<td>0.5mL</td>
<td>59676-0580-05, 59676-0580-15, NDC Units reported as &quot;UN1&quot;</td>
</tr>
</tbody>
</table>

**Medicare COVID-19 Vaccine Administration Billing Guidance**

Effective March 15, 2021 CMS has increased the reimbursement rate for COVID-19 vaccine administration to $40. Medicare will reimburse $40 for single dose COVID-19 vaccine administration. For COVID-19 vaccines requiring multiple doses, Medicare will pay $40 for each dose in the series.

For dates of service through March 14, 2021:
- Administration of a single-dose COVID-19 vaccine - $28.39
- Administration of the first dose of a COVID-19 vaccine requiring a series of two or more doses - $16.94
- Administration of the final dose of a COVID-19 vaccine requiring a series of two or more doses - $28.39

For dates of service on or after March 15, 2021:
- Administration (per dose) of a COVID-19 vaccine - $40.00
  - You'll be able to bill on single claims for COVID-19 shot administration or submit claims on a roster bill for multiple patients at one time.
  - When COVID-19 vaccine doses are provided by the government without charge, only bill for the vaccine administration. **Don't include the vaccine codes on the claim when the vaccines are free.**
  - If you participate in a Medicare Advantage Plan, submit your COVID-19 claims to Original Medicare for all patients enrolled in Medicare Advantage in 2020 and 2021.

For dates of service on or after June 8, 2021:
- Administration (per dose) of a COVID-19 dose in the home — additional $35
  - Medicare will pay the $35 amount in addition to the standard administration amount (approximately $40 per COVID-19 vaccine dose), when billing M0201, for a total payment of approximately $75 for a vaccine dose administered in a patient's home.
  - View the [infographic](https://www.cms.gov) on [CMS.gov](https://www.cms.gov) for additional details

**Private Payers Coding and Billing Guidance**

In North Carolina, all the private payers have adopted AMA codes as specified above. All currently reimburse based on Medicare or Medicaid rates for the administration fee. Specific information from each payer is linked below.

**NC Insurers COVID-specific Resources**
- [Aetna](https://www.aetna.com)
NC Medicaid & NC Health Choice COVID-19 Vaccine Administration Billing Guidance

Effective March 15, 2021 NC Medicaid aligned reimbursement for COVID-19 vaccine administration with the Centers for Medicare & Medicaid Services’ (CMS) increased Medicare rate of $40 for the administration of single-dose COVID-19 vaccines (including $40 for each subsequent dose required as part of a series).

For dates of service through March 14, 2021:
- Administration of a single-dose COVID-19 vaccine - $28.39
- Administration of the first dose of a COVID-19 vaccine requiring a series of two or more doses - $16.94
- Administration of the final dose of a COVID-19 vaccine requiring a series of two or more doses - $28.39

For dates of service on or after March 15, 2021:
- Administration (per dose) of a COVID-19 vaccine - $40.00
  - The ICD-10-CM diagnosis code required for billing is: Z23 - Encounter for immunization
  - Providers must bill 11-digit NDCs
  - The NDC units should be reported as “UN1”
- Pfizer BioNTech COVID-19 Vaccine 0.3mL = 1 unit
- Moderna COVID-19 Vaccine 0.5mL = 1 unit
- Janssen COVID-19 Vaccine 0.5mL = 1 unit
  - Claims must contain both administration codes and vaccine codes to pay.
  - Vaccine codes should be reported as $0.00.
  - Claims for first vaccine dose must have been processed in NCTracks prior to processing a claim for second dose.
  - Modifiers
- TJ modifier should be used for NC Health Choice claims (age 6 through 18 years).
- EP modifier should be used for all non-NC Health Choice (only Medicaid beneficiaries) younger than 21 years of age.

NC Medicaid: Special Bulletin COVID-19 #165: Update to Approved Vaccines Covered by NC Medicaid

As of March 11, 2021, North Carolina will be covering all approved COVID-19 vaccines to include the following limited benefit eligibility groups: COVID-19 testing limited benefit group, Family Planning, and women who qualify due to pregnancy. Vaccine providers may bill Medicaid if it is determined that the beneficiary is in one of these limited eligibility groups. Claims are now reimbursable even if originally denied for one of several reasons listed in the Medicaid COVID-19 Special Bulletin. Visit Medicaid’s website for more information. Please also note that claims may still not pay if the beneficiary has another insurance on file, provider is not enrolled in NC Medicaid, or the ordering provider is not listed on the claim.

If you have any questions about product specific information, please contact the Immunization Branch Help Desk at 1-877-873-6247 and press option ‘6.’ If you have any questions about billing NC Medicaid, please call the GDIT Call Center at 1-800-688-6696.

Visit Medicaid’s website for these guidelines.
NC Medicaid: Special Bulletin #168
Vaccination Counseling Code Reimbursement
Effective June 22, 2021, CPT 99401: Preventative medicine counseling and/or risk factor reduction intervention(s) provided to an individual, up to 15 minutes has been added to counsel Medicaid beneficiaries regarding the benefits of receiving the COVID-19 vaccine.

CPT 99401 can be billed at only one visit for each beneficiary per day, but there are not quantity limits for the number of times this education is provided to an individual beneficiary.

Providers are encouraged to counsel Medicaid beneficiaries of any age. Parents or guardians of Medicaid children can be counseled on the benefit of receiving the COVID-19 vaccination even if the parent or guardian is not enrolled in NC Medicaid. The counseling session for the parent or guardian can be billed to the child’s Medicaid ID.

This service can be provided by MD/DO, NP, PA, CNM and if provided at LHD, FQHC or RHC will be reimbursed outside of the PPS rate. Visit Medicaid’s website for these guidelines.

NC Medicaid: Special Bulletin COVID-19 #176:
Third COVID-19 Vaccine Available
On August 12, 2021, the FDA modified the Emergency Use Authorizations (EUAs) for Pfizer-BioNTech COVID-19 vaccine and Moderna COVID-19 vaccine to allow for administration of an additional dose (e.g., a third dose) of an mRNA COVID-19 vaccine after an initial two-dose primary mRNA COVID-19 vaccine series for certain immunocompromised people (e.g., people who have undergone solid organ transplantation or have been diagnosed with conditions that are considered to have an equivalent level of immunocompromise).

The age groups authorized to receive the additional dose are unchanged from those authorized to receive the primary vaccination series:

- Pfizer-BioNTech: ages ≥12 years
- Moderna: ages ≥18 years

According to an American Medical Association press release, the vaccine administration CPT code and long descriptor assigned to the third dose:

- Pfizer COVID-19 vaccine - 0003A - Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; third dose
- Moderna COVID-19 vaccine – 0013A - Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage; third dose

NC Medicaid will pay for administering an additional dose of COVID-19 vaccine consistent with the FDA emergency use authorization (EUA). Payment amount will be equivalent as for other doses of the COVID-19 vaccine at $40 each. Visit Medicaid’s website for more information.
Health Resources Services Administration (HRSA) COVID-19 Uninsured Program Coding and Billing for COVID-19 Vaccine Administration

Effective March 15, 2021, HRSA COVID-19 Uninsured Program’s has increased reimbursement of COVID-19 vaccine administration.

For dates of service through March 14, 2021:
- Administration of a single-dose COVID-19 vaccine - $28.39
- Administration of the first dose of a COVID-19 vaccine requiring a series of two or more doses - $16.94
- Administration of the final dose of a COVID-19 vaccine requiring a series of two or more doses - $28.39

For dates of service on or after March 15, 2021:
- Administration (per dose) of a COVID-19 vaccine - $40.00

Claims submitted for the administration of an FDA-licensed or authorized vaccine must be submitted as single line item claims, and must include one of the following codes to be eligible for reimbursement:
- Pfizer: 0001A, 0002A
- Moderna: 0011A, 0012A
- Janssen: 0031A

Please note that only the administration of the vaccine is eligible for reimbursement through the HRSA COVID-19 Uninsured Program. Visit HRSA’s Uninsured Program website for these guidelines.

Additional notes on billing for vaccinations:

*Evaluation by Provider related to COVID-19 Vaccination:* A provider that consults a patient, either in-person or telemedicine, for the purpose of evaluation of history and/or examination/assessment for receiving the COVID-19 vaccination may code and bill the appropriate evaluation and management service code for services rendered. The record of these visits must meet documentation standards required for reimbursement of services.

*Reporting of COVID-19 vaccine codes:* Although COVID-19 vaccines are not reimbursable at this time, payers may require providers to report the specific COVID-19 vaccine with a zero charge in order to be reimbursed for administration of the vaccine. Currently, NC Medicaid and NC Health Choice require the reporting of vaccine CPT codes.

Additional Resources

*Physician Professional Associations*
American Academy of Family Practice: Vaccine Coverage Requirements and Preliminary Payment Guidance