



Last Updated: 07/13/2022

## Coverage of COVID-19 Vaccine Administration for Plan First

The purpose of this memorandum is to inform providers that DMAS will cover COVID-19 vaccine products and COVID-19 vaccine administration codes for individuals enrolled in the Plan First program. Further contact information is included at the bottom of this document.

The codes below will be covered for Plan First members with an effective date of service beginning on March 11, 2021. In accordance with American Rescue Plan Act of 2021, COVID-19 vaccines and vaccine administration fees will be covered for Plan First members “until the last day of the first calendar quarter that begins one year after the end of the federal public health emergency.”

| CPT Code | Description                                                                                                                                                                                                                                                           | Reimbursement Rate |
|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
| 91300    | 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, for intramuscular use                                                 | \$0.01             |
| 0001A    | 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/0.3mL dosage, diluent reconstituted; first dose  | \$40.00            |
| 0002A    | 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/0.3mL dosage, diluent reconstituted; second dose | \$40.00            |
| CPT Code | Description                                                                                                                                                                                                                                                           | Reimbursement Rate |
| 91301    | 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, for intramuscular use                                                                       | \$0.01             |
| 0011A    | 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/0.5mL dosage; first dose                        | \$40.00            |



# MEDICAID MEMO

|       |                                                                                                                                                                                                                                                 |         |
|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| 0012A | 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/0.5mL 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 |

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). Providers should not bill for vaccine products if they received it for free.

### Pharmacy procedure for COVID-19 vaccine

Please refer to the Medicaid Memo "Pharmacy Procedure For COVID-19 Vaccine" for further information on pharmacy procedures for COVID-19 vaccine products and administration. Note that for single dose vaccines, submission clarification codes are not required.

### Transportation for COVID-19 vaccine

Please contact the Fee For Service (FFS) or Managed Care Organization (MCO) Non-Emergency Medical Transportation (NEMT) program for which the Member is enrolled for transportation services. Contract telephone numbers can be found at <https://www.dmas.virginia.gov/#/nemtservices>. Please click on "Transportation Contacts for Reservations and Ride Assist/Customer Service" and call the reservation number for the FFS or MCO NEMT program for which the Member is enrolled.

\*\*\*\*\*

| <b>PROVIDER CONTACT INFORMATION &amp; RESOURCES</b>                                                                                                                                            |                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| <b>Virginia Medicaid Web Portal Automated Response System (ARS)</b><br>Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice. | <a href="http://www.viriniamedicaid.dmas.virginia.gov">www.viriniamedicaid.dmas.virginia.gov</a> |
| <b>Medicall (Audio Response System)</b><br>Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.                             | 1-800-884-9730 or 1-800-772-9996                                                                 |



# MEDICAID MEMO

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>KEPRO</b><br/>Service authorization information for fee-for-service members.</p>                                                                                                                                                                                                                                                                                                                                                                                 | <p><a href="https://dmas.kepro.com/">https://dmas.kepro.com/</a></p>                                                                                                                                                                                                                                                                                                                           |
| <p><b>Provider Appeals</b><br/>DMAS is launching an appeal portal in late May 2021. You can use this portal to file appeals and track the status of your appeals. Visit the website listed for appeal resources and to register for the portal.</p>                                                                                                                                                                                                                    | <p><a href="https://www.dmas.virginia.gov/#/appealsresources">https://www.dmas.virginia.gov/#/appealsresources</a></p>                                                                                                                                                                                                                                                                         |
| <p><b>Managed Care Programs</b><br/>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.</p> |                                                                                                                                                                                                                                                                                                                                                                                                |
| <p><b>Medallion 4.0</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                            | <p><a href="http://www.dmas.virginia.gov/#/med4">http://www.dmas.virginia.gov/#/med4</a></p>                                                                                                                                                                                                                                                                                                   |
| <p><b>CCC Plus</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <p><a href="http://www.dmas.virginia.gov/#/cccplus">http://www.dmas.virginia.gov/#/cccplus</a></p>                                                                                                                                                                                                                                                                                             |
| <p><b>PACE</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <p><a href="http://www.dmas.virginia.gov/#/longtermpromgrams">http://www.dmas.virginia.gov/#/longtermpromgrams</a></p>                                                                                                                                                                                                                                                                         |
| <p><b>Magellan Behavioral Health</b><br/>Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for-service members.</p>                                                                                                                                                                                                                                                                        | <p><a href="http://www.MagellanHealth.com/Provider">www.MagellanHealth.com/Provider</a><br/>For credentialing and behavioral health service information, visit:<br/><a href="http://www.magellanofvirginia.com">www.magellanofvirginia.com</a>, email:<br/><a href="mailto:VAProviderQuestions@MagellanHealth.com">VAProviderQuestions@MagellanHealth.com</a>, or<br/>Call: 1-800-424-4046</p> |
| <p><b>Provider HELPLINE</b><br/>Monday-Friday 8:00 a.m.-5:00 p.m.<br/>For provider use only, have Medicaid Provider ID Number available.</p>                                                                                                                                                                                                                                                                                                                           | <p>1-804-786-6273<br/>1-800-552-8627</p>                                                                                                                                                                                                                                                                                                                                                       |
| <p>Aetna Better Health of Virginia</p>                                                                                                                                                                                                                                                                                                                                                                                                                                 | <p><a href="http://www.aetnabetterhealth.com/Virginia">www.aetnabetterhealth.com/Virginia</a><br/>1-800-279-1878</p>                                                                                                                                                                                                                                                                           |
| <p>Anthem HealthKeepers Plus</p>                                                                                                                                                                                                                                                                                                                                                                                                                                       | <p><a href="http://www.anthem.com/vamedicaid">www.anthem.com/vamedicaid</a><br/>1-800-901-0020</p>                                                                                                                                                                                                                                                                                             |
| <p>Magellan Complete Care of Virginia</p>                                                                                                                                                                                                                                                                                                                                                                                                                              | <p><a href="http://www.MCCofVA.com">www.MCCofVA.com</a><br/>1-800-424-4518 (TTY 711) or 1-800-643-2273</p>                                                                                                                                                                                                                                                                                     |
| <p>Optima Family Care</p>                                                                                                                                                                                                                                                                                                                                                                                                                                              | <p>1-800-881-2166 <a href="http://www.optimahealth.com/medicaid">www.optimahealth.com/medicaid</a></p>                                                                                                                                                                                                                                                                                         |
| <p>United Healthcare</p>                                                                                                                                                                                                                                                                                                                                                                                                                                               | <p><a href="http://www.Uhcommunityplan.com/VA">www.Uhcommunityplan.com/VA</a><br/>and <a href="http://www.myuhc.com/communityplan">www.myuhc.com/communityplan</a><br/>1-844-752-9434, TTY 711</p>                                                                                                                                                                                             |
| <p>Virginia Premier</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                | <p>1-800-727-7536 (TTY: 711), <a href="http://www.virginiapremier.com">www.virginiapremier.com</a></p>                                                                                                                                                                                                                                                                                         |