IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

BT202398 AUGUST 15, 2023

IHCP expands coverage for Moderna COVID-19 booster vaccine and administration codes

On Oct. 12, 2022, the Centers for Disease Control and Prevention (CDC) amended the Emergency Use Authorization (EUA) of the Moderna coronavirus disease 2019 (COVID-19) Vaccine, Bivalent product, to authorize its use as a one-dose booster series in younger individuals: Coronavirus (COVID-19) Update: FDA Authorizes Moderna and Pfizer-BioNTech Bivalent COVID-19 Vaccines for Use as a Booster Dose in Younger Age Groups.

Previously, the authorization was limited to ages 18 years and older, as announced in *IHCP Bulletin* <u>BT2022101</u>. After the EUA was amended, new coverage and billing information for ages 6 through 11 years was announced in <u>BT2022106</u>. The purpose of this bulletin is to announce coverage and billing information for ages 12 through 17 years.

Effective immediately, for dates of service (DOS) on or after **Oct. 12, 2022**, the Indiana Health Coverage Programs (IHCP) will reimburse IHCP-enrolled providers for the administration of the Moderna COVID-19 bivalent booster vaccine to members ages 12 through 17 years.



Any claims submitted with DOS on or after Oct. 12, 2022, that have denied in error will be reprocessed.

The vaccine and vaccine administration procedure codes in Table 1 will be expanded to members ages 12 through 17.

As established in previous IHCP bulletins, Emergency Medical Services (EMS) providers (<u>BT2020129</u>), pharmacy providers (<u>BT2020127</u>, <u>BT202102</u>), and federally qualified health center (FQHC) and rural health clinic (RHC) providers (<u>BT202112</u>) are allowed to bill for COVID-19 vaccine administration. In addition, Family Supports Waiver (FSW) and Community Integration and Habilitation (CIH) Waiver providers (<u>BT202129</u>) are allowed to bill COVID-19 vaccine and administration codes, with modifier U7 appended.

Vaccinations can be administered to all eligible IHCP members meeting vaccine EUA criteria and CDC Advisory Committee on Immunization Practices (ACIP) age and dosing interval recommendations. Any additional requirements or limitations specified by the Indiana Department of Health (IDOH), CDC, or Health and Human Services (HHS) Public Readiness and Emergency Preparedness (PREP) Act must also be met.

COVID-19 vaccines are to be supplied free of charge, without copay, to all IHCP members, including members in limited benefit categories, such as Emergency Services Only (ESO). COVID-19 vaccination claims for IHCP members who are dually eligible for both Medicare and Medicaid must be billed to the member's Medicare plan provider. Prior authorization is not required.

COVID-19 vaccination reimbursement is carved out of managed care benefits. Professional claims for managed care and fee-for-service (FFS) members should be submitted to the FFS claim-processing vendor, Gainwell Technologies. Pharmacy claims for managed care and FFS members should be submitted to the FFS pharmacy benefit manager, Optum Rx.

The updated code age expansion will be reflected in the next regular update to the Professional Fee Schedule, accessible from the IHCP Fee Schedules page at in.gov/medicaid/providers.

Updates will be made to the COVID-19 Vaccination Codes, accessible from the Code Sets page at in.gov/medicaid/ providers.

Table 1 - Moderna COVID-19 vaccine and vaccine administration codes expanded to include ages 12 through 17, effective for DOS on or after Oct. 12, 2022

Procedure code	Description	Program coverage	Reimbursement notes
91313	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 50 mcg/0.5 mL dosage, for intramuscular use	Covered for all programs, including limited benefit programs	Max Fee: \$0.00*
			Covered for ages 12 and older
			Linked to revenue code 636
0134A	Intramuscular administration of single severe acute respiratory syndrome coronavirus 2 (COVID-19) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 50 mcg/0.5 mL dosage, additional dose	Covered for all programs, including limited benefit programs	Max Fee: \$36.90
			Covered for ages 12 and older
			Linked to revenue code 636

^{*}Providers should note that the vaccine is available at no charge to providers at this time. Therefore, the IHCP will pay at zero until further notice.

QUESTIONS?

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