California Department of Public Health
CA COVID-19 Vaccination Program

COVID-19 Billing and Reimbursement Webinar
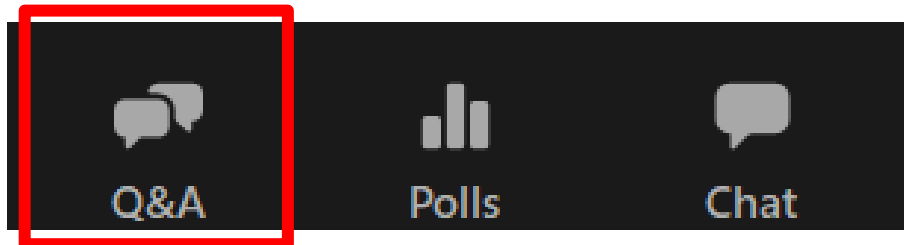
Wednesday May 25, 2022

11:00AM – 12:00PM

COVID-19 Vaccine Billing and Reimbursement Webinar

During today's session, please use the **Q&A panel** to ask your questions, so our subject matter experts can respond directly.

Housekeeping

Reminder to Panelists:

Please mute yourself when not speaking.

Please monitor the Q&A panel for questions you may be able to answer.

Reminder to Attendees:

Today's session is being recorded. Access today's slides and archived presentations at: https://eziz.org/covid/education/

For post-webinar-related questions, please email leslie.amani@cdph.ca.gov

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Agenda: Wednesday May 25, 2022

No.	Item	Speaker(s)	Time (PM)
1	Welcome and Introductions	Leslie Amani (CDPH)	**11:00 – 11:05**
2	CA Department of Public Health: Welcome and Overview	Jennie Chen, M.D. (CDPH)	**11:05 – 11:10**
3	Department of Healthcare Services: COVID-19 Billing and Reimbursement	Hisham Rana, M.D. (DHCS) and Cindy Garrett (Medi-Cal)	**11:10 – 11:25**
4	Question and Answers	Leslie Amani (CDPH)	**11:25 – 12:00**

Thank you!

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California Department of Public Health: Welcome and Overview
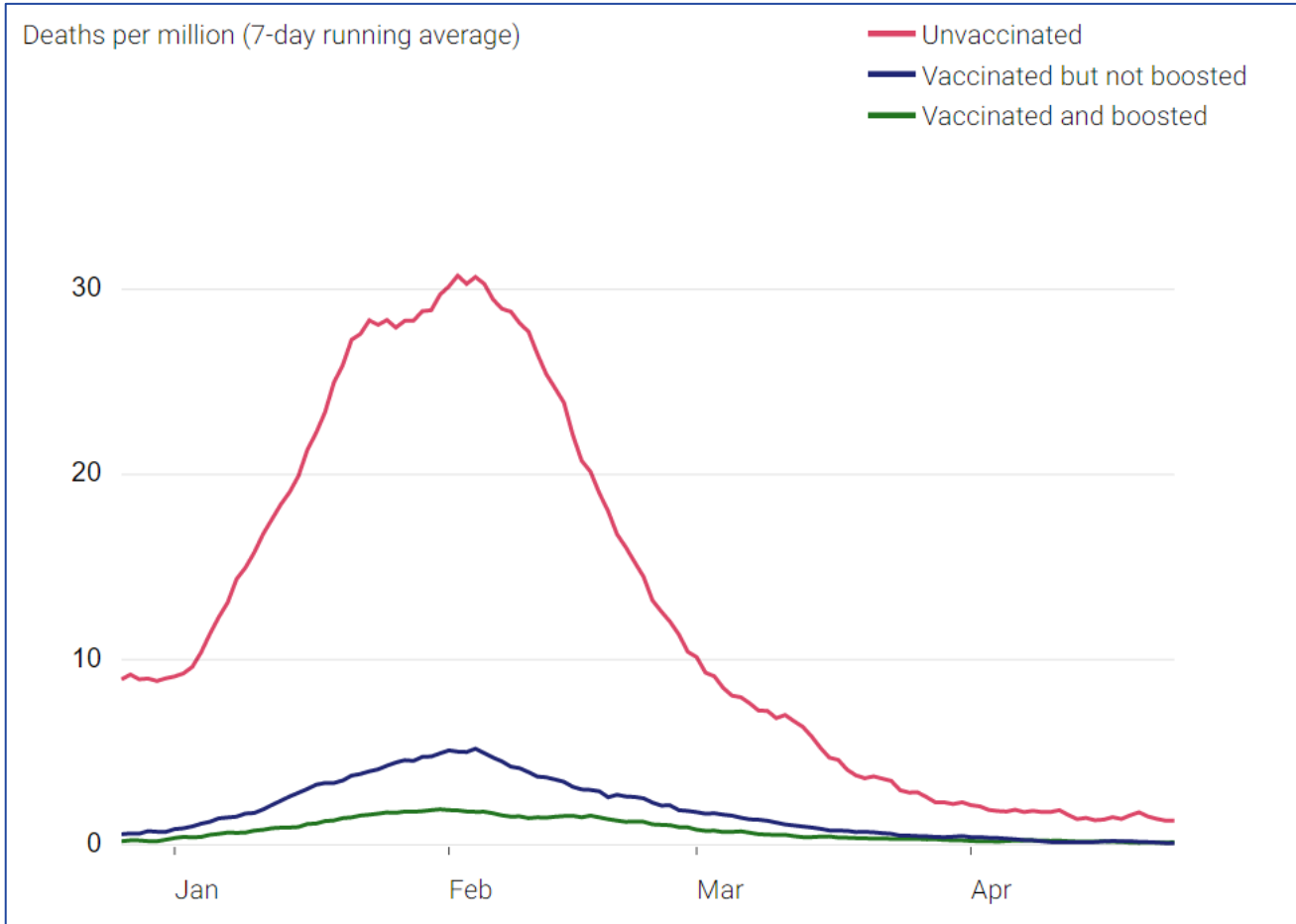
Jennie Chen, M.D., CDPH

Overview: Billing and Reimbursement Webinar

Thank you again for:

- Providers continued vaccination efforts
  - **~75 M doses** of COVID-19 vaccine administered!
- Ongoing assistance and partnership from DHCS

Please Continue to Vaccinate!

Deaths per million (7-day running average)
- Unvaccinated
- Vaccinated but not boosted
- Vaccinated and boosted

From April 18, 2022, to April 24, 2022, unvaccinated people were **9 times more likely to die** from COVID-19 than people who received their booster dose.

Many still need their initial or booster doses!

Federal Policy Updates

- Suspension of HRSA reimbursement
  - Congressional negotiations on funding continue

- White House FY 22-23 Budget Proposals include
  - Federal purchase of routine vaccines for uninsured adults
  - Shift adult vaccine coverage from Medicare Part D to Part B

- How long will feds be the sole purchaser of COVID-19 doses?
  - Reminder: Under ACA, all non-grandfathered private plans must cover ACIP-recommended routine adult vaccines without charging a copayment or coinsurance when provided by an in-network provider.

Updates: FDA and CDC Review of COVID-19 Vaccines

- Recently recommended
  - 1st Pfizer booster, ages 5-to-11 years
  - 2nd mRNA vaccine booster,
    - ages 50+ or
    - immunocompromised 12-to-49 years

- Anticipated review over next month
  - Novavax vaccine, ages 18+ years
  - Moderna vaccine, 6 months – 18 years
  - Pfizer vaccine, 6 months – 4 years

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Department of Healthcare Services: COVID-19 Reimbursement and Billing

Dr. Hisham Rana, Department of Health Care Services

Cindy Garrett, Provider/Member Services Director, Medi-Cal Business Operations Fiscal Intermediary

DHCS Program Enrollment

- Presentation scope: Medi-Cal Fee for Service (FFS) policy as implemented.

- Department of Health Care Services (DHCS) administered programs include:
  - The Medi-Cal program, a public health insurance program, pays for a variety of medical services for children and adults with limited income and resources. These services also include COVID-19 diagnostic testing, testing-related services, vaccine administration and other treatment services – for both full scope and restricted scope beneficiaries.
    - Requires Medi-Cal program enrollment

  - DHCS also administers the COVID-19 Uninsured Group program, which covers COVID-19 diagnostic testing, testing-related services, vaccine administration and other treatment services – for the uninsured or underinsured population.
    - Requires Medi-Cal program enrollment AND Qualified Provider (QP) enrollment via a Presumptive Eligibility (PE) program

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DHCS Program Enrollment

Medi-Cal provider enrollment is required for the Medi-Cal program and to become a QP:

- DHCS Provider Enrollment Division (PED) is responsible for enrollment and re-enrollment of eligible fee-for-service health care providers in the Medi-Cal program.
    - Provider Application and Validation for Enrollment (PAVE)

- DHCS established streamlined Medi-Cal provider enrollment requirements and procedures for providers seeking enrollment in order to assist Medi-Cal beneficiaries with the national Public Health Emergency (PHE).

- Section 1135 waiver was granted by the Centers for Medicare and Medicaid Services (CMS) and provisions are effective for dates of service on or after March 1, 2020.
    - Requirements and Procedures for Emergency Medi-Cal Provider Enrollment

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DHCS Program Enrollment

Once successfully enrolled in the Medi-Cal program, providers must enroll as a QP via a Presumptive Eligibility (PE) program to also participate in the COVID-19 Uninsured Group (UIG) program. Some PE programs require the provider to enroll in a separate Health Access Program (HAP) as well.

Note, the COVID-19 UIG program ends the last day of the calendar month in which the COVID-19 PHE ends.

Hospital Presumptive Eligibility

- Hospital Presumptive Eligibility (HPE): Provider Enrollment Instructions

Presumptive Eligibility for Pregnant Women

- Presumptive Eligibility for Pregnant Women Provider Enrollment Instructions

Child Health and Disability Prevention

- EPSDT/CHDP

Every Woman Counts

- Every Woman Counts

Breast and Cervical Cancer Treatment Program

- BCCTP Overview

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COVID-19 Uninsured Group Program Recap

The COVID-19 UIG program was implemented by DHCS on August 28, 2020, and covers COVID-19 vaccine administration, diagnostic testing, testing-related services, and treatment services, including hospitalization and all medically necessary care, at no cost to the individual, for up to 12 months or the end of the PHE, whichever comes first.

Note, per federal guidance applications for the COVID-19 UIG can be retroactive to April 8, 2020, if submitted by a QP.

To qualify for the COVID-19 UIG, individuals must be a California resident and meet one of the following criteria:

- Have no health insurance, or

- Have private health insurance that does not cover diagnostic testing, testing-related services, and treatment services, including all medically necessary care for COVID-19, or

- Not have Medicare, or

- Are not eligible under any of the other Medi-Cal programs (with the exception of individuals who have not met their Medi-Cal Share of Cost obligation).

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COVID-19 Uninsured Group Program Recap

Applicants do not have access to the COVID-19 Uninsured Group Application Web Portal to enroll in the COVID-19 UIG themselves and must work with a QP to successfully enroll.

In most scenarios, enrollment into COVID-19 UIG can only be conducted while the individual in need of services is present in the office or clinic; exceptions are described in the October 21, 2021, article: COVID-19 Uninsured Group Program Off-Premise Flexibilities.

Instructions on how to enroll an uninsured or underinsured individual requiring immediate access to services to COVID-19 UIG may be found in the Coronavirus (COVID-19) Uninsured Group Application Web Portal User Guide.

Other key points:

- Temporary immediate need Benefits Identification Cards are issued upon enrollment by the QP

- QPs can submit retro beneficiary applications to COVID19Apps@dhcs.ca.gov for review and processing

- To receive Medi-Cal services beyond immediate need, beneficiaries must apply to Medi-Cal

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DHCS COVID-19 Vaccine Administration Recap

- DHCS received federal approval to help support delivery of the vaccine to all Medi-Cal beneficiaries at no cost.
  - The federal approval covers the cost of vaccine administration for beneficiaries in specific programs (February 2022), including the COVID-19 Uninsured Group

- DHCS expanded the types of providers who could administer the COVID-19 vaccines in Q3 2021 and Q1 2022

- DHCS recently received State Plan Amendment (SPA) approval to reimburse additional providers for vaccine-only administration. Most recently instruction for following provider types was published:
  - Federally Qualified Health Centers (FQHCs), Rural Health Center (RHCs), and Tribal FQHCs (April 2022)

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DHCS COVID-19 Vaccine Administration Recap

- Reimbursement for vaccine administration is exclusively through the FFS delivery system and carved out from all managed care contracts.
  - Benefits Identification Card (BIC) required

- As of January 1, 2022, pharmacy claims for administration of the COVID-19 vaccine must be submitted to the FFS pharmacy program: Medi-Cal Rx, regardless of date of service.

- All other types of providers must continue to bill the FFS Medi-Cal program for vaccine administration reimbursement.
  - Refer to the COVID-19 Medi-Cal Response landing page for vaccine administration specifics
  - Program information, claim form completion instructions, as well as electronic billing options are available on the Medi-Cal website

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DHCS COVID-19 Vaccine Administration Recap

Consistent with State and federal guidance, the following vaccine manufacturers, doses and boosters are reimbursable by FFS Medi-Cal, unless otherwise indicated in the chart at right.

Refer to the FFS Medi-Cal Rx website for pharmacy specifics.

Dose	Manufacturer		
	Pfizer-BioNTech	Moderna	Janssen
First Dose	Yes	Yes	Yes
Second Dose	Yes	Yes	NA
Third Dose	Yes	Yes	NA
First Booster Dose	Yes	Yes	Yes
Second Booster Dose	Yes	Yes	NA
Refer to the COVID-19 Medi-Cal Response landing pages for current policy, including specifics for ages, formulations, and manufacturers.			

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Supplemental Rate for Administration of COVID-19 Vaccine in Home Setting

- Effective for DOS on or after 6/8/2021, Medi-Cal will reimburse providers an *additional* $35.00 per dose when administering a COVID-19 vaccine in the home of a beneficiary who is unable to travel to a vaccination site.

- The supplemental administration fee is designed to target Medi-Cal beneficiaries that have difficulty leaving the home. Detailed policy is available here.

Providers Holding Submissions of Claims May Now Submit

Providers were previously instructed to continue vaccine administration but hold billing for the following programs and or provider types:

- Home Health Agency (HHA) Services and Home and Community-Based Services (HCBS)
- Tuberculosis Program, Family PACT or COVID-19 Uninsured Group
- FQHC, RHC, or Tribal FQHC

- These above billing holds have been lifted.
  - Medi-Cal will waive the timeliness standard for vaccine administration claims for a finite period of time.
  - Providers are required to use Delay Reason Code "10" and provide documentation indicating that the vaccine was administered in the Remarks area of the claim or electronic submission equivalent.

- Erroneous Payment Correction (EPC)
  - EPCs for the aforementioned programs and/or provider types will be implemented to reprocess certain claims.

FQHC, RHC, or Tribal FQHC Providers Holding Submissions of Claims May Now Submit

- If FQHC, RHC, or Tribal FQHC providers did not hold vaccine administration claim submission and claims were billed with a usual and customary charge amount greater than or equal to the max. allowed amount, the claims are expected to be reprocessed via EPC.

- If claims were billed with a usual and customary charge amount less than the max. allowed amount, the claims are not eligible for EPC reprocessing. Providers will need to submit the electronic ASC X12 837 void/replace transaction or follow the paper two-step method to correct the claim submission:
  - Electronic method: Electronic Methods for Eligibility Transactions and Claim Submissions and Medi-Cal Part 1 Manual
  - Paper two step method:
    - Step 1: Void the claim using the Claims Inquiry Form (CIF). Once the provider has received confirmation of the void on their Remittance Advice Details (RAD), proceed to step 2.
    - Step 2: Resubmit the claim with the corrected charge amount using the Appeal Form (90-1).
    - Instructions to complete both the CIF and 90-1 can be found in the:
    - CIF Completion and Appeal Form Completion sections

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Second Booster Dose for Select COVID-19 Vaccines Now a Benefit

- Effective for DOS on or after 3/29/2022, the U.S. Federal Drug Administration amended the Emergency Use Authorization for Pfizer-BioNTech and Moderna COVID-19 vaccines to allow for use of a second booster dose, to be administered at least four months after initial booster dose, to the following groups for each respective vaccine:

- Pfizer-BioNTech:
  - Individuals 12 years of age or older with certain kinds of immunocompromise.
  - Individuals 50 years of age and older.

- Moderna:
  - Individuals 18 years of age or older with certain kinds of immunocompromise.
  - Individuals 50 years of age and older.

- Providers may now submit claims for second booster dose administration, utilizing the applicable CPT codes, with one exception.
  - Further system updates are required for CPT code 0094A. Implementation target: June 2022.
    - Providers are advised to administer the new Moderna booster dose packaging (CPT 0094A) to the eligible populations and hold claim submission until further notice.

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Resources for FFS Medi-Cal

- For current COVID-19 Medi-Cal policy, see the COVID-19 Medi-Cal Response page on the Medi-Cal Provider website here:

  https://files.medi-cal.ca.gov/pubsdoco/COVID19_response.aspx

- For current Medi-Cal policy on the respective COVID-19 vaccines see the following web pages:
  - Pfizer-BioNTech: https://files.medi-cal.ca.gov/pubsdoco/Pfizer_BioNTech_COVID19_Vaccine.aspx
  - Moderna: https://files.medi-cal.ca.gov/pubsdoco/Moderna_COVID19_Vaccine.aspx
  - Janssen: https://files.medi-cal.ca.gov/pubsdoco/Janssen_COVID19_Vaccine.aspx

- For general claim submission instructions for Medi-Cal providers, refer to the appropriate Medi-Cal Provider Manual:

  https://files.medi-cal.ca.gov/pubsdoco/Publications.aspx

- For electronic claim submission instructions for Medi-Cal providers
  - https://files.medi-cal.ca.gov/pubsdoco/signup.aspx
  - https://files.medi-cal.ca.gov/pubsdoco/CTM_manual.aspx

- For other ways to contact Medi-Cal with questions, refer to the Medi-Cal Contact page on the Medi-Cal Provider website:
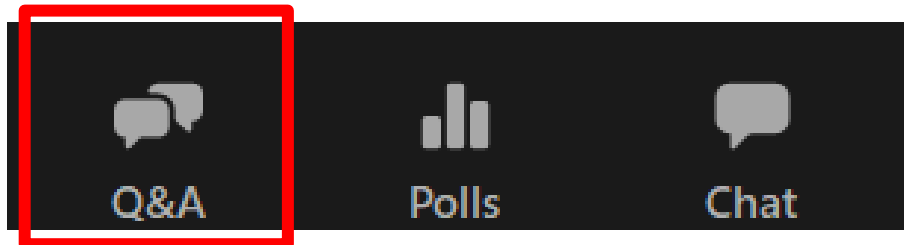
  https://files.medi-cal.ca.gov/pubsdoco/contact.aspx

- Provider billing questions: (800) 541-5555 (8AM – 5PM M-F, excluding holidays)

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Resources for FFS Medi-Cal Rx

- Medi-Cal Rx website

    https://medi-calrx.dhcs.ca.gov/home

- Medi-Cal Rx Provider Manual

    https://medi-calrx.dhcs.ca.gov/home/provider-manual

- Medi-Cal Rx Bulletins & News

    https://medi-calrx.dhcs.ca.gov/provider/pharmacy-news/

- Medi-Cal Rx Contract Drugs List

    https://medi-calrx.dhcs.ca.gov/home/cdl

- Provider billing questions: (800) 977-2273 (24/7/365)

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During today's session, please use the Q&A panel to ask your questions, so our subject matter experts can respond directly.

Wrap-up

Leslie Amani, CDPH

Thank you for attending today's
COVID-19 Vaccine
Billing and Reimbursement Webinar!