### **Connecticut Medical Assistance Program**

Policy Transmittal 2021-58

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Provider Bulletin 2021-91 November 2021

Deidre S. Gifford, MD, MPH, Commissioner

Effective Date: As specified below Contacts: see below

TO: Physicians, Physician Assistants, Advanced Practice Registered Nurses, Certified Nurse Midwives, Medical Clinics, Family Planning Clinics, Dialysis Clinics, Federally Qualified Health Centers (FQHCs), Outpatient Hospitals, Hospice Agencies, Home Health Agencies, Dentists, and Pharmacy Providers

RE: CMAP COVID-19 Response Bulletin 57: Authorization of Pfizer-BioNTech COVID-19 Vaccine for Pediatric Administration (ages 5-11 years)

with Consistent the Food and Drug (FDA) Emergency Administration Use Authorization (EUA), effective for dates of service October 29, 2021 and through the end of the federal public health emergency (PHE), the Department of Social Services (DSS) will reimburse for the administration of the Pfizer-BioNTech COVID-19 vaccine for HUSKY Health members 5 through 11 years of age.

The amended EUA for the Pfizer-BioNTech COVID-19 vaccine allows for a two-dose primary series to be administered 3 weeks apart for individuals ages 5 through 11.

Pfizer-BioNTechPediatricCOVIDReimbursementforAdministrationofBoosters

## Medical, Hospice, Home Health and Dental Practitioners:

Providers eligible to bill for COVID-19 vaccine administration should use the following procedure codes:

Code	Descriptor /	Rate	Effective
	Vaccine Name		Date
	ADM		
	SARSCV2		
	10MCG TRS-		On or after
	SUCR 1		10/29/2021
0071A		\$40.00	
	Pfizer-		
	BioNTech		
	Pediatric 1 <sup>st</sup>		
	Dose		

Code	Descriptor /	Rate	Effective
	Vaccine Name		Date
	ADM		On or after
	SARSCV2		10/29/2021
	10MCG TRS-		
	SUCR 2		
0072A		\$40.00	
	Pfizer-		
	BioNTech		
	Pediatric 2nd		
	Dose		

<sup>\*</sup>Outpatient Hospitals please refer to CMAP Addendum B.

\*\*At the conclusion of the designated federal PHE period, DSS will reassess the reimbursement set for administration of a COVID-19 vaccine and update it according to current reimbursement methodologies for each applicable provider category. Providers will be notified in writing prior to any reimbursement change.

### **Outpatient Hospitals**

A claim submitted by an outpatient hospital must include both the administration procedure code (0071A or 0072A) with Revenue Center Code (RCC) 770 "Prevent Care Svs" **and** the applicable vaccine product procedure code including the National Drug Code (NDC):

 91307 - Pfizer-BioNTech Covid-19 Pediatric Vaccine SARSCOV2 VAC 10 MCG TRS-SUCR

### **Pharmacy Point of Sale (POS)**

Pharmacy providers submitting pharmacy POS claims for administration reimbursement should submit claims with a submission clarification code of 2 "Other Override" to indicate the first dose is being administered and submission clarification code of 6 "Starter Dose" to indicate the second dose is being administered. The CDC does not currently recommend booster doses in children aged 5 to 11 but in the event the guidance changes and allows for booster doses, CMAP recommends submitting with NCPDP Submission Clarification Code (420-DK) 10 "The pharmacy certifies that the transaction is in compliance with the program's policies and rules that are specific to the particular product being billed" to indicate that this booster dose is for a member who meets the criteria for the amended EUA.

## Non-Emergency Medical Transportation (NEMT) Guidance

NEMT is available for individuals that are eligible to receive the Pfizer-BioNTech COVID-19 vaccine consistent with the amended EUA and who are covered under HUSKY Health (A, C and D), Family Planning Limited Benefit, and Tuberculosis Limited Benefit.

Please continue to refer to <u>PB 2021-23</u> and <u>PB 2021-63</u> for additional information related to NEMT.

# Additional COVID-19 Vaccine Administration Guidance for Medical, Pharmacy and Other Providers

Providers must continue to refer to the following provider bulletins and important messages, available on the <a href="www.ctdssmap.com">www.ctdssmap.com</a> Web site, for more information for reimbursement of the COVID-19 vaccine administration:

- PB 2021-05 CMAP COVID-19
   Response Bulletin 48: COVID-19
   Vaccine Administration Medical Practitioners
- PB 2021-06 CMAP COVID-19 Response Bulletin 49: COVID-19 Vaccine Administration – Provided by

- Pharmacists, Pharmacy Interns and Pharmacy Technicians
- PB 2021-23 CMAP COVID-19
   Response Bulletin 51: Updated Guidance COVID-19 Vaccine Administration Medical Practitioners
- PB 2021-25 CMAP COVID-19
   Response Bulletin 52: Updated Guidance COVID-19 Vaccine Administration Provided by Pharmacists, Pharmacy Interns and Pharmacy Technicians
- PB 2021-63 CMAP COVID-19
   Response Bulletin 55: ADDITIONAL DOSE COVID-19 Vaccine Administration for Individuals who are Immunocompromised
- PB 2021-89 CMAP COVID-19 Response Bulletin 56: Booster Doses COVID-19 Vaccine Administration
- Important Message posted 4/29/2021:
   Eligible Dental Providers who can Administer the COVID-19 Vaccinations
- Additional guidance for Medical FQHCs is also published in the <u>COVID-19</u> <u>Information and FAQs</u>

### **Future Guidance**

Providers must continue to monitor the CMAP Web site for additional guidance related to COVID-19 vaccine administration. As additional State and Federal guidance is developed or received, CMAP will issue subsequent provider bulletins and updates to the COVID-19 Information and FAQs.

### **Accessing Fee Schedules**

The updated fee schedules can be accessed and downloaded by accessing the Connecticut Medical Assistance Program (CMAP) Web site: <a href="https://www.ctdssmap.com">www.ctdssmap.com</a>. From this Web page, go to "Provider", then to "Provider Fee Schedule Download". Click on the "I accept" button and proceed to click on the appropriate fee schedule. To access the CSV file, click the CSV link, then select "Open file".

## Accessing CMAP Addendum B (Outpatient Hospitals)

CMAP's Addendum B for outpatient hospital services can be accessed via the <a href="https://www.ctdssmap.com">www.ctdssmap.com</a> Web site by selecting the "Hospital Modernization" Web page. CMAP's Addendum B (Excel) is located under "Important Messages – Connecticut Hospital Modernization".

Questions: For questions about billing or if further assistance is needed to access the fee schedule on the CMAP Web site, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

<u>Posting Instructions</u>: Policy transmittals and the COVID-19 Information and FAQs can be downloaded from the Web site at www.ctdssmap.com.

<u>Distribution</u>: This policy transmittal is being distributed to providers of the CMAP by Gainwell Technologies.

### **Responsible Unit:**

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**Pharmacy:** DSS, Division of Health Services, Integrated Care, Herman Kranc,

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<u>Dentists:</u> DSS, Division of Health Services, Integrated Care Unit; Hope Mitchell-Williams, Health Program Associate, email <u>Hope.Mitchell-Williams@ct.gov</u>

**<u>Date Issued</u>**: November 2021