

Commonwealth of Massachusetts Executive Office of Health and Human Services Office of Medicaid www.mass.gov/masshealth

> MassHealth All Provider Bulletin 304 December 2020

TO: All Providers Participating in MassHealth

FROM: Daniel Tsai, Assistant Secretary for MassHealth

Vette

RE: Coverage and Payment for Coronavirus Disease 2019 (COVID-19) Vaccine Administration, Testing, and Monoclonal Antibody Product Infusion

Background

The first COVID-19 vaccine product received Emergency Use Authorization (EUA) by the U.S. Food and Drug Administration (FDA) on December 11, 2020, and a second product received EUA on December 18, 2020.

MassHealth will cover the vaccines for members in MassHealth Standard, CommonHealth, Family Assistance, CarePlus, and the Children's Medical Security Plan. Guidance for the uninsured and for other programs (Health Safety Net and MassHealth Limited) is found later in this bulletin.

There is no cost sharing for any vaccines.

MassHealth anticipates the vaccine products will be distributed by the Massachusetts Department of Public Health (MDPH) to providers at no cost. The vaccine manufacturers will ship the vaccine products to long-term care facilities also at no cost. Please visit the MDPH vaccine website at <u>www.mass.gov/covidvaccine</u> for more information and the distribution timeline.

In addition, the FDA issued an EUA for two investigational monoclonal antibody therapies, bamlanivimab (Eli Lilly) and casirivimab/imdevimab (Regeneron), for the treatment of mild-tomoderate COVID-19 in adults and pediatric patients with positive COVID-19 test results who are at high risk for progressing to severe COVID-19 and/or hospitalization. MassHealth will cover this treatment for dates of service as specifically listed below, consistent with the terms of the EUA.

Finally, new testing codes have been added that MassHealth will be covering for dates of service as specifically listed below. MassHealth also anticipates that there will be a change to the payment methodology for high throughput COVID-19 diagnostic testing as described below.

There is no cost sharing for COVID-19 testing or treatment, including these new treatments and testing codes.

This bulletin applies to members enrolled in MassHealth fee-for-service, the Primary Care Clinician (PCC) Plan, or a Primary Care Accountable Care Organization (ACO). Information about coverage through MassHealth Managed Care Entities (MCEs) and the Program for All-inclusive Care for the Elderly (PACE) will be included in a forthcoming MCE bulletin.

Guidance will also be forthcoming in an Acute Inpatient Hospital (AIH) bulletin for members who receive services in an AIH, including members who are employed by an acute hospital.

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Payment for COVID-19 Vaccine Administration to Authorized Providers

MassHealth providers, including acute outpatient hospitals (AOHs) but excluding acute inpatient hospitals (AIHs),¹ may bill and receive payment for the administration of the COVID-19 vaccines to MassHealth members, including those who are employed by the provider, if they are:

- currently authorized to receive payment from MassHealth to administer vaccines;
- registered with MDPH's Massachusetts Immunization Information System (MIIS); and
- enrolled in the Massachusetts COVID-19 Vaccination Program via the MIIS to receive COVID-19 vaccines.

MassHealth expects to pay rates that are consistent with Medicare rates for these services. Specifically, MassHealth expects to pay the following rates to applicable providers for the following codes. These rates will be formally established through the promulgation of emergency regulations by the Executive Office of Health and Human Services (EOHHS):

Code	Allowable Fee	Description of Code	Effective for Dates of Service On or After
91300 SL	\$0.00	Pfizer-Biontech Covid-19 Vaccine (SARSCOV2 VAC 30MCG/0.3ML IM)	12/11/2020
0001A	\$16.94	Pfizer-Biontech Covid-19 Vaccine Administration – First Dose (ADM SARSCOV2 30MCG/0.3ML 1ST)	12/11/2020
0002A	\$28.39	Pfizer-Biontech Covid-19 Vaccine Administration – Second Dose (ADM SARSCOV2 30MCG/0.3ML 2ND)	12/11/2020
91301 SL	\$0.00	Moderna Covid-19 Vaccine (SARSCOV2 VAC 100MCG/0.5ML IM)	12/18/2020
0011A	\$16.94	Moderna Covid-19 Vaccine Administration – First Dose (ADM SARSCOV2 100MCG/0.5ML 1ST)	12/18/2020
0012A	\$28.39	Moderna Covid-19 Vaccine Administration – Second Dose (ADM SARSCOV2 100MCG/0.5ML 2ND)	12/18/2020

The modifier "SL" indicates state-supplied vaccine or antibodies. This modifier is to be applied to codes to identify administration of vaccines or antibodies provided at no cost, whether by the Massachusetts Department of Public Health; another federal, state, or local agency; or a vaccine manufacturer. If the providers receive the vaccine from one of these sources at no cost, providers must bill the code for the vaccine itself, with modifier SL, and the codes for administration of the

¹ For AIHs, billing and payment will be incorporated into the existing methodology that utilizes ICD-10 codes and APR-DRGs and will be described in a separate AIH bulletin

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vaccine. MassHealth will pay \$0 for vaccines billed with the modifier SL, and the rates listed above for the administration of the vaccine.

With the exception of community health centers, providers will be paid separately for COVID-19 vaccine administration, even when not the primary purpose for a visit. Providers billing for COVID-19 administration should not append Modifier 25 to the Visit code or Evaluation and Management code. Community health centers will be paid for either an office visit or the COVID-19 vaccine administration, but will not be paid for both an office visit and vaccine administration for the same member on the same date at the same service location, in accordance with 130 CMR 405.421(G): *Immunization or Injection*. MassHealth will continue to evaluate its policy regarding billing for COVID-19 vaccine administration by community health centers in collaboration with the federal Centers for Medicare & Medicaid Services (CMS), and may update this guidance in a future issuance.

For AOHs, MassHealth will be issuing an amendment to the Rate Year 2021 Acute Hospital Request for Applications and Contract (RY21 RFA) to implement these updates.

Pharmacy Billing

NDC Code	Allowable Fee	Description of Code	Effective for Dates of Service On or After
59267100001	\$0.00	Pfizer-Biontech Covid-19 Vaccine (1.8ML in 1 vial)	12/11/2020
59267100001	\$16.94	Pfizer-Biontech Covid-19 Vaccine Administration – First Dose (Single dose 30MCG/0.3ML 1ST)	12/11/2020
59267100001	\$28.39	Pfizer-Biontech Covid-19 Vaccine Administration – Second Dose (Single dose 30MCG/0.3ML 2ND)	12/11/2020
80777027310	\$0.00	Moderna Covid-19 Vaccine (SARSCOV2 VAC 5ML in 1 vial)	12/18/2020
80777027310	\$16.94	Moderna Covid-19 Vaccine Administration – First Dose (Single dose 100MCG/0.5ML 1ST)	12/18/2020
80777027310	\$28.39	Moderna Covid-19 Vaccine Administration – Second Dose (Single dose 100MCG/0.5ML 2ND)	12/18/2020

MassHealth expects to pay the following rates to pharmacy providers for the following codes. These rates will be formally established through the promulgation of emergency regulations by EOHHS.

MassHealth will be issuing a Pharmacy Facts as soon as possible to provide specific billing instructions for pharmacy claiming for vaccine administration.

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Long-Term Care Partnership

The federal government is partnering with CVS and Walgreens to offer on-site COVID-19 vaccination services for residents and employees of nursing facilities. The vaccines will be distributed to CVS and Walgreens who will administer the vaccines and bill MassHealth for the vaccine administration for MassHealth members living or working in those facilities. MassHealth will pay CVS and Walgreens for vaccine administration at the rates listed above.

Payment for COVID-19 Monoclonal Antibody Product Infusion

Effective for dates of service as specifically listed below, providers enrolled in the MassHealth AOH, community health center, and physician programs may bill and receive payment for the administration of monoclonal antibody products at the rates identified below.²

MassHealth expects to pay rates that are consistent with Medicare rates for these services. Specifically, MassHealth expects to pay the following rates to applicable providers for the following codes. These rates will be formally established through the promulgation of emergency regulations by EOHHS.

Code	Allowable Fee	Description of Code	Effective for Dates of Service On or After
Q0239 SL	\$0.00	Injection, bamlanivimab, 700 mg	11/10/2020
M0239	\$309.60	Intravenous infusion, bamlanivimab-xxxx, includes infusion and post administration monitoring	11/10/2020
Q0243 SL	\$0.00	Injection, casirivimab and imdevimab, 2400 mg	11/21/2020
M0243	\$309.60	Intravenous infusion, casirivimab and imdevimab includes infusion and post administration monitoring	11/21/2020

As noted above, the modifier "SL" indicates state-supplied vaccine or antibodies. This modifier is to be applied to codes to identify administration of vaccines or antibodies provided at no cost, whether by the Massachusetts Department of Public Health; another federal, state, or local agency; or a manufacturer. If providers receive the antibodies from one of these sources at no cost, providers must bill the code for the antibodies themselves, with modifier SL, and the codes for intravenous infusion of the antibodies. MassHealth will pay \$0 for antibodies billed with the modifier SL, and the rates listed above for the intravenous infusion of the antibodies.

² For AIHs, billing and payment will be incorporated into the existing methodology that utilizes ICD-10 codes and APR-DRGs and will be described in a separate AIH bulletin.

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Note that bamlanivimab and casirivimab/imdevimab may be administered only in settings in which health care providers have immediate access to medications to treat a severe infusion reaction, such as anaphylaxis, and the ability to activate the emergency medical system (EMS), as necessary. Review the <u>Fact Sheet for Health Care Providers EUA of Bamlanivimab</u> and <u>Fact Sheet for Health Care Providers: Emergency Use Authorization (EUA) of Casirivimab and Imdevimab</u> regarding the limitations of authorized use.

For AOHs, MassHealth will be issuing an amendment to the RY21 RFA to implement these updates.

Coverage of COVID-19 Laboratory Analysis Codes

MassHealth will cover the following COVID-19 laboratory analysis codes in addition to codes U0002, U0003, U0004, and 87635. MassHealth permits providers enrolled in the MassHealth physician, AOH, community health center, family planning agency, or clinical laboratory programs to bill for these codes, for dates of service as described below.

Code	Allowable Fee	Description of Code	Effective for Dates of Service On or After
87426	\$10.94	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzyme- linked immunosorbent assay [ELISA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative, multiple- step method; severe acute respiratory syndrome coronavirus (e.g., SARS-CoV, SARS-CoV-2 [COVID-19])	8/1/2020
86408	I.C.	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]); screen	8/10/2020
86409	I.C.	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]); titer	8/10/2020
86413	I.C.	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) antibody, quantitative	9/8/2020

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Code	Allowable Fee	Description of Code	Effective for Dates of Service On or After
87636	I.C.	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) and influenza virus types A and B, multiplex amplified probe technique	10/7/2020
87637	I.C.	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), influenza virus types A and B, and respiratory syncytial virus, multiplex amplified probe technique	10/7/2020
87811	I.C.	Infectious agent antigen detection by immunoassay with direct optical (i.e., visual) observation; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])	10/7/2020

Please note that for periods prior to August 1, 2020, infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay) for multiple-step method; severe acute respiratory syndrome coronavirus can be billed using code 87425.

Coverage of Certain COVID-19 Specimen Collection Services and New Laboratory Analysis Codes

As described in <u>All Provider Bulletin 294</u> and in <u>All Provider Bulletin 296</u>, MassHealth has implemented numerous flexibilities to allow providers to separately bill and receive payment for COVID-19 specimen collection services, in addition to the other billable services. Providers billing MassHealth for specimen collection services rendered pursuant to this policy must use codes G2023 or G2024. Specimen collection code G2023 is payable at \$23.46 and G2024 is currently payable at \$25.46. MassHealth permits providers enrolled in the MassHealth physician, acute outpatient hospital, community health center, family planning agency, or clinical laboratory programs to bill for these services.

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As described <u>All Provider Bulletin 296</u>, MassHealth also allows eligible providers to apply modifier "CG" to codes G2023 and G2024, which provides for payments of \$44.27 and \$46.27 respectively. See <u>101 CMR 320.00</u>. This modifier can be applied when, in addition to collecting the specimen, the provider:

- 1. has a qualified ordering clinician present at the specimen collection site available to order medically necessary COVID-19 tests; and
- 2. ensures that the test results (and any initial follow-up counseling, as appropriate) are provided to the member, either directly or through the member's ordering clinician.

This modifier may only be applied to codes G2023 and G2024 when the provider does not separately bill for a medical visit or encounter (e.g., Evaluation & Management code or T code) for the actual specimen collection, or for the ordering or the initial resulting of the COVID-19 test. To clarify, eligible providers may bill MassHealth for modifier CG applied to codes G2023 or G2024, <u>or</u> a non-modified specimen collection code <u>and</u> a medical visit or encounter during which the provider also orders the testing, collects the specimen, or provides the test results (and appropriate initial follow-up counseling) to the member. Providers may continue to separately bill MassHealth for medical visits or encounters unrelated to the COVID-19 testing process and for any visits or encounters for medically necessary follow-up treatment or care beyond the initial resulting.

Providers who have billed for modifier CG applied to codes G2023 or G2024 may also separately bill for COVID-19 laboratory analysis of the specimen billed under codes U0002, U0003, U0004, 87635, 87426, 87636, 87637, and 87811, as appropriate. Codes 87426, 87636, 87637, and 87811 are new COVID-19 laboratory analysis codes that have been added since <u>All Provider Bulletin 296</u>.

These flexibilities apply to dates of service beginning May 22, 2020, for the duration of the state of emergency in the Commonwealth declared on March 10, 2020. Providers billing MassHealth for the services described in this bulletin must comply in all respects with all other applicable laws, regulations, subregulatory guidance, and contracts.

Payment for High Throughput Testing

MassHealth expects that, effective January 1, 2021, it will change the payment methodology of high throughput COVID-19 testing by reducing the base rate and making an additional add-on payment for timely testing, consistent with changes in Medicare reimbursement. This change will lower the base payment amount for COVID-19 diagnostic tests run on high-throughput technology from \$100 to \$75 for codes U0003 and U0004. MassHealth believes this more accurately reflects the resources needed to perform those tests.

MassHealth recognizes the importance of timely test results to limit exposure and prevent new infections. Thus, starting January 1, 2021, MassHealth will make an additional \$25 add-on payment via code U0005 to laboratories for a COVID-19 diagnostic test run on high throughput technology if the laboratory both: a) completes the test in two calendar days or fewer, and b) completes the majority of their COVID-19 diagnostic tests that use high throughput technology in two calendar days or fewer for all of their patients (not just their MassHealth patients) in the previous month.

Providers that complete a majority of COVID-19 diagnostic tests run on high throughput technology within two days (and who complete testing for the MassHealth patient in question within two days)

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will be paid \$100 per test by MassHealth, while providers that do not meet this threshold will receive \$75 per test.

Providers will need to retain all records necessary to demonstrate compliance with the requirements in this bulletin for billing code U0005. In particular, in the event of an audit, providers will need to retain all records that demonstrate compliance with the timeframes outlined in this ruling, including all MassHealth and non-MassHealth records, and produce these records to EOHHS upon request, as permitted or required by law.

These updates to the payment methodology will be reflected in emergency amendments to <u>101 CMR</u> <u>320.00</u>: *Clinical Laboratory Services*.

Payment for COVID-19 Vaccine Administration for Uninsured Individuals

Providers are responsible for checking the Eligibility Verification System (EVS) for MassHealth eligibility and other sources to determine whether a patient is insured. Providers should bill the federal COVID-19 Uninsured Program portal for uninsured patients as defined by the Health Resources and Services Administration (HRSA). Individuals with MassHealth Limited and Health Safety Net patients without other coverage (MassHealth Limited is <u>not</u> considered coverage for purposes of this paragraph) are considered uninsured for purposes of COVID-19 vaccination. Providers should submit their claims for COVID-19 vaccine administration to the HRSA Portal for Uninsured Individuals at <u>https://coviduninsuredclaim.linkhealth.com/</u>.

Payment for Testing and Treatment for Uninsured Individuals

As previously noted, providers are responsible for checking the EVS for MassHealth eligibility and other sources to determine whether a patient is insured. Providers should bill the federal COVID-19 Uninsured Program portal for uninsured patients as defined by HRSA. COVID-19 testing and treatment services provided to an individual who is a Health Safety Net patient only and who does not have any coverage (including MassHealth Limited), should be billed to the federal portal. Likewise, COVID-19 testing and treatment services provided to an individual in the Children's Medical Security Plan only and who does not have any coverage (including MassHealth Limited) should be billed to the federal portal.

Payment for Testing and Treatment for Individuals Covered by MassHealth Limited

As described in <u>All Provider Bulletin 292</u>, COVID-19 testing and treatment services are considered emergency services as defined in 130 CMR 450.105(F) for purposes of MassHealth Limited, and are payable by MassHealth to any participating provider qualified to provide such services. However, COVID-19 vaccination is not considered a COVID-19 testing and treatment service, and is therefore not payable by MassHealth for individuals with MassHealth Limited. As noted above, providers should therefore submit their claims for COVID-19 vaccine administration to the HRSA Portal for individuals with MassHealth Limited at <u>https://coviduninsuredclaim.linkhealth.com/</u>.

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Additional COVID-19 Vaccines, Testing, and Treatments

MassHealth will add new codes as additional COVID-19 vaccines, testing, and treatments come to market and will publish the new codes and associated rates in the form of an administrative bulletin. EOHHS may list and price these codes according to the rate methodology used in setting rates when Medicare fees are available. When Medicare fees are not available, EOHHS may apply individual consideration (I.C.) payment for these codes until appropriate rates can be developed.

Authorizing Additional Provider Types to Administer Vaccines or Antibody Product Infusion

MassHealth is considering authorizing additional provider types to administer the COVID-19 vaccines or antibody product infusion. Additional guidance will be issued to describe any changes.

MassHealth Website

This bulletin is available on the MassHealth Provider Bulletins web page.

To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to <u>join-masshealth-provider-pubs@listserv.state.ma.us</u>. No text in the body or subject line is needed.

Questions

If you have questions about the information in this bulletin, please contact the MassHealth Customer Service Center at (800) 841-2900, email your inquiry to providersupport@mahealth.net, or fax your inquiry to (617) 988-8974.