**Number 233, October 9, 2024**



COVID-19 Vaccination Reimbursement Update

[All Provider Bulletin 395](https://www.mass.gov/doc/all-provider-bulletin-395-coverage-and-reimbursement-policy-for-mpox-and-covid-19-vaccinations-0/download) describes reimbursement changes for COVID-19 vaccination. Effective October 1, 2024, the Executive Office of Health and Human Services is updating the rates for COVID-19 vaccination in 101 CMR 446.00: *Public Health Emergency Payment Rates for Certain Community Health Care Providers*.

For claims billed through POPS, MassHealth will pay per the drug-pricing methodology in 101 CMR 331.00. Pharmacies may also continue to bill for administration of COVID-19 vaccines through POPS. Instead of paying a dispensing fee, MassHealth will pay pharmacies an administration fee. Effective October 1, 2024, the administration fee will be equal to 100% of the corresponding Medicare Part B payment rate for administration, without geographic adjustment.

Based on this change, beginning October 1, 2024, the administration rate for COVID-19 vaccination will be $40.00.

# COVID-19 Vaccination and Treatment for MassHealth Limited Members or Health Safety Net Patients

As noted in All Provider Bulletin 395, effective October 1, 2024, MassHealth Limited will no longer pay for COVID-19 vaccination. Health Safety Net (HSN) providers administering COVID-19 vaccines to HSN patients (including for MassHealth Limited members as of October 1, 2024) should submit claims for such services to the HSN.

Treatments for COVID-19, including prescription drugs such as Paxlovid® (nirmatrelvir and ritonavir) and Lagevrio® (molnupiravir), are considered emergency services as defined in 130 CMR 450.105(F) for purposes of MassHealth Limited, and will continue to be payable by MassHealth to any participating provider qualified to provide such services.

**Guidance on Dispensing COVID-19 Over-the-Counter Antigen Test Kits**

Pharmacy Facts [#177](https://www.mass.gov/doc/pharmacy-facts-177-january-14-2022-0/download), [#201](https://www.mass.gov/doc/pharmacy-facts-201-may-15-2023-0/download), and [#206](https://www.mass.gov/doc/pharmacy-facts-206-july-26-2023-0/download) provide information on MassHealth coverage of COVID-19 over-the-counter (OTC) antigen test kits. These products are available via standing order at pharmacies and are covered by MassHealth at no cost to the member, within quantity limits. Prior authorization (PA) is required for more than two tests per 28 days. If additional tests above the quantity limit of two tests per month are needed, a prescriber may submit a PA request for consideration of medical necessity.

MassHealth is implementing new documentation requirements for pharmacies dispensing COVID-19 OTC antigen test kits to members via standing order. This requirement applies to members enrolled in MassHealth fee-for-service, the Primary Care Clinician (PCC) Plan, Primary Care Accountable Care

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Organizations (PCACO), managed care organizations (MCO), and Accountable Care Partnership Plans (ACPP), and Health Safety Net (HSN) patients.

**Updated MassHealth COVID-19 OTC Antigen Test Kit Policy for Coverage**

* Up to two tests per month may be prescribed by a Medicaid-enrolled practitioner or requested by a member or caregiver and provided via standing order without PA.
* If additional tests above the quantity limit of two tests per month are needed, a prescriber may submit a PA request for consideration of medical necessity.
* Pharmacies dispensing tests based on member or caregiver request via standing order must retain documentation that includes all of the following:
	+ Member consent;
	+ Modality of request (in pharmacy or by phone); and
	+ Date and time of request.

**Additional MassHealth COVID-19 OTC Antigen Test Kit Guidance**

* It is inappropriate to submit claims for COVID-19 OTC antigen test kits without specific member or caregiver request on date-of-service or Medicaid-enrolled practitioner prescription.
* MassHealth is the payer of last resort. Providers should take reasonable measures necessary to ensure that all available options for coverage, including free at-home COVID-19 tests from any other entity or third-party insurance, are used before submitting claims to the Medicaid program.
	+ Pharmacies should notify patients that U.S. households are eligible to order four free COVID-19 tests at [COVIDTests.gov](https://aspr.hhs.gov/covid-19/test/Pages/default.aspx).
* All claims inconsistent with this guidance are subject to audit and recovery.