Effective Date: December 15, 2020

**Important Billing Information for COVID-19 Vaccines**

Dear Medicaid Provider,

This notice informs providers that the Ohio Department of Medicaid will reimburse Medicaid participating pharmacies an administration fee through NCPDP claim submission for federally allocated COVID-19 vaccines. These specific instructions apply to Medicaid fee-for-service claims, but the Medicaid managed care plans will also reimburse these claims through NCPDP claim submission.

Pharmacies should bill the vaccines and administration via an electronic NCPDP claim according to the following instructions:

- Submit each vaccine with the specific approved vaccine NDC for an eligible participant.
- Submit claim with a Basis of Cost Determination (423-DN) of “15” (Free product or no associated cost) with an associated Ingredient Cost Submitted (409-D9) value of $0.00.
- Submit claim with the Professional Service Code (440-E5), populated with an “MA” (Medication Administered) to identify that the product was administered.
- Quantity dispensed (442-D7) should be submitted with a value of “1”.
- Days Supply (405-D5) should be submitted with a value of “1”.
- Vaccines must be administered according to authorized labeling for appropriate ages and dosing interval.
- Submit the vaccine administration fee listed below in the Incentive Amount Submitted field (438-E3) on the same claim as the vaccine (i.e., ingredient).

### NCPDP Codes and Allowed Amounts for COVID-19 Vaccine Administration

<table>
<thead>
<tr>
<th>Dose</th>
<th>Submission Clarification Code (420-DK)</th>
<th>Incentive Amount (Administration Fee 438-E3)</th>
<th>Ingredient Cost (409-D9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two-Dose Vaccines</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Dose</td>
<td>02</td>
<td>$16.94</td>
<td>$0.00</td>
</tr>
<tr>
<td>Second Dose</td>
<td>06</td>
<td>$28.39</td>
<td>$0.00</td>
</tr>
<tr>
<td>Single-Dose Vaccines</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single Dose</td>
<td>blank</td>
<td>$28.39</td>
<td>$0.00</td>
</tr>
</tbody>
</table>
The payment rate for COVID-19 vaccine administration is $28.39 to administer single-dose vaccines. For single-dose vaccine administration claims, the Submission Clarification Code (SCC) should remain blank.

The payment rate for a COVID-19 vaccine administration requiring a series of two or more doses is $16.94 for the initial dose, and $28.39 for the administration of the final dose in the series.

For multi-dose vaccines, submit 02 (other override) for the initial dose in the SCC field.

For the second dose, submit 06 (the previous medication was a starter dose and now additional medication is needed to continue treatment) in the SCC field.

Pharmacies must enter the NPI of the prescriber in the Prescribing Practitioner (411-DB). If the prescriber is the pharmacist, the NPI of the pharmacist may be submitted. If the pharmacy is using a pharmacist NPI, the pharmacy must submit a Submission Clarification Code (SCC) of “42”.

Pharmacy providers with questions regarding fee-for-service program vaccine administration may contact the Change Healthcare Pharmacy Help Desk at 1-877-518-1545. Providers may also send inquiries via email to PBA_OHHelpDesk@changehealthcare.com. Pharmacies billing via NCPDP for managed care members should contact the applicable managed care plan.