An important message regarding CarePlus' COVID-19 response: FAQs for COVID-19 vaccines post-public health emergency 05/11/2023

Based on current COVID-19 trends, the Department of Health and Human Services (HHS) has planned for the federal public health emergency (PHE) for COVID-19, to expire on May 11, 2023. In support of the PHE ending, CarePlus has been updating its COVID-19 policies accordingly, including those related to COVID-19 vaccines. This document summarizes CarePlus' standard coverage and reimbursement for COVID-19 vaccines. This document summarizes CarePlus' coverage and reimbursement for COVID-19 vaccines post-PHE. As more developments are made on the COVID-19 vaccines, please check this page regularly for new information.

For information on coverage and reimbursement during the PHE, see the archived version of this FAQ available here.

Note: These FAQs are a guideline only and do not constitute medical advice, guarantee of payment, plan pre-authorization, an explanation of benefits or a contract. They do not govern whether a procedure is covered under a specific member plan or policy, nor are they intended to address every claim situation. Claims may be affected by other factors, such as: state and federal laws and regulations, provider contract terms and our professional judgment.

Table of Contents

1. What vaccines are available for COVID-19? Who is eligible to receive the vaccine? How many doses will a patient need to be fully vaccinated?

For the latest information and guidance about COVID-19 vaccines regarding availability, eligibility, booster shots and more, please visit Centers for Disease Control and Prevention (CDC) website.

2. Will the vaccines require pre-authorization?

No.

3. Will the vaccines require referral?

No.

4. Will CarePlus members receive the vaccine with no out-of-pocket costs?

MA members are not responsible for paying copays, deductibles or coinsurance for COVID-19 vaccines. This applies whether the CarePlus patient receives the vaccine at either an in-network or out-of-network provider.

5. How is CarePlus handling claims for the vaccines?

For Medicare-Advantage (MA) members, the Centers for Medicare & Medicaid Services (CMS) determined that coverage for COVID-19 vaccines administered to MA plan members during 2020 and 2021 will be provided through the Original Medicare program. This includes charges for the vaccine and its administration. All claims for administering the COVID-19 vaccine to CarePlus members during 2020 and 2021 should be submitted to the Medicare Administrative Contractors. CarePlus will deny any vaccine product or administration claims received for CarePlus members for dates of service in 2020 and 2021. Claims for administering the COVID-19 vaccine to CarePlus members for dates of service beginning Jan. 1, 2022 should be submitted to CarePlus.

6. What codes are reported for the COVID-19 vaccine?

Providers should report charges for the vaccine product and its administration according to the Current Procedural Terminology (CPT®) coding standards established by the American Medical Association (AMA). Providers should report the code appropriate for the manufacturer-specific vaccine and dose administered. See the AMA's website for more information on COVID-19 vaccine coding.

When a revenue code is also required on your claim form, report the vaccine product code with revenue code 0636 and the administration code with revenue code 0771.

7. Does CarePlus reimburse an additional amount for administering the COVID-19 vaccine in a patient's home?

CarePlus will allow additional reimbursement for administering the COVID-19 vaccine in a patient's home, when all conditions established by CMS for this add-on payment are satisfied. The code used to report at-home administration of the COVID-19 vaccine is HCPCS code M0201. When applicable, providers may report HCPCS code M0201 in addition to the appropriate codes for the manufacturer-specific vaccine and dose administered.

8. How should I bill for COVID-19 vaccines provided to hospital inpatients?

CarePlus reimburses for the COVID-19 vaccine separately from the inpatient admission's Diagnosis-Related Group (DRG) rate. Providers should bill for administering the vaccine to a hospital inpatient using the applicable CPT code on a separate type of bill (TOB) 12x claim.

9. Does CarePlus accept a roster bill to report administering the COVID-19 vaccine to multiple patients at a time?

No, CarePlus does not accept roster bills to report administration of the COVID-19 vaccine.

10. How can I become a COVID-19 vaccinator?

Learn how you can become a COVID-19 vaccinator in the United States, by visiting www.cdc.gov/vaccines/covid-19/provider-enrollment.html.

11. What guidance can I provide if a patient is concerned with becoming a victim of a COVID-19 vaccine fraud scheme?

A warning from the FBI in December 2020 provides information on potential indicators of COVID-19 vaccine-related fraud, and tips on how to avoid it. View the FBI's warning here. It is important to remind patients to confirm the vaccinator is a safe and reputable source to avoid becoming a victim of fraud.

If you are concerned your patient is a victim of a scam or attempted fraud involving COVID-19, you can guide them to:

1. Contact the member services number on the back of their CarePlus member ID card for help
2. File a complaint with the National Center for Disaster Fraud or call their hotline at 866-720-5721
3. Report it to the FBI's Internet Crime Complaint Center
4. Contact your local FBI field office or submit a tip online at tips.fbi.gov

For the latest information about COVID-19 vaccines, visit the CDC's website.
For additional resources, please visit the CMS COVID-19 vaccine policies and guidance website.