



October 18, 2021 (Updated February 28, 2022)

Web Announcement 2612

## Attention All Providers: COVID-19 Home Vaccine Administration Code and Administration Codes for Third Dose of Vaccine

The Centers for Medicare & Medicaid Services (CMS) has released a new vaccine administration code for administration of a COVID vaccine in a recipient's home and two new vaccine administration codes for the third dose of the Pfizer and Moderna vaccines.

- The U.S. Food and Drug Administration (FDA) issued an emergency use authorization (EUA) for procedure code M0201 (COVID-19 vaccine administration inside a patient's home; reported only once per individual home per date of service when only COVID-19 vaccine administration is performed in the patient's home) effective with dates of service on or after June 8, 2021. Prior authorization (PA) is not required.
- The FDA issued the EUA for procedure codes 0003A (Pfizer immunization administration by intramuscular injection of severe acute respiratory syndrome - 3rd dose) and 0013A (Moderna immunization administration by intramuscular injection of severe acute respiratory syndrome - 3rd dose) effective with dates of service on or after August 12, 2021. PA is not required.

The following provider types may bill codes M0201, 0003A and 0013A:

Provider Type	Provider Type Description
12	Hospital, Outpatient
17 specialty 166	Special Clinics: Family Planning
17 specialty 174	Special Clinics: Public Health Clinic
17 specialty 179	Special Clinics: School Based Health Centers (SBHC)
17 specialty 180*	Special Clinics: Rural Health Clinic
17 specialty 181*	Special Clinics: Federally Qualified Health Center (FQHC)
17 specialty 195	Special Clinics: Community Health Clinic, State Health Division
17 specialty 198	Special Clinics: Human Immunodeficiency Virus (HIV)
20	Physician, M.D., Osteopath, D.O.
22	Dentist
24	Advanced Practice Registered Nurse (APRN)
32 specialty 249	Community Paramedicine
47*	Indian Health Services (IHS) and Tribal Clinics
60	School Health Services
74	Nurse Midwife
77	Physician's Assistant

\*PT 17 specialties 180 and 181 and PT 47 providers must bill the vaccine administration codes with modifier Q2. The claim will pay according to the established encounter rate and the vaccine administration code will pay at \$0 as the service is included in the encounter reimbursement.

Claims for the above codes with the effective dates of service indicated above **through October 19, 2021**, that suspended or denied with error code 4801 (No billing rule for procedure) will be automatically reprocessed. **A future remittance advice will notify providers when the claims are reprocessed.**

When claims are reprocessed or released for adjudication, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.