

# COVID-19 Billing Guidance

UnitedHealthcare Community Plan of New Mexico

UnitedHealthcare Community Plan of New Mexico abides by Healthcare Authority (HCA) standards for billing and payment of COVID-19 claims. The below guidance is provided to assist with the submission of claims.

## Billing Requirements

This section provides guidance on how to bill for COVID-19 vaccine administration, the related procedure and professional service codes, and the reimbursement rates. The billing guidance will apply for any CDC recommended dose. This guidance is applicable when the COVID-19 vaccine is administered in a clinic, pharmacy, or offsite setting.

### Providers who bill on a UB-04 claim form:

Bill the appropriate revenue code, as listed below, and append the associated HCPCS COVID-19 vaccine administration procedure code.

- **Federally Qualified Health Centers (FQHCs):**
  - Revenue code 0529 (Free Standing Clinic)
  - Reimbursement will be made at the encounter rate.
- **IHS and Tribal 638 Facilities:**
  - Revenue code 0519 (Clinic)
  - Reimbursement will be made at the OMB rate.
- **Rural Health Clinics (RHCs) and Hospital Based Rural Health Clinics (HBRHCs):**
  - RHCs should use revenue code 0521 (Free Standing Rural Health Clinic).
  - HBRHCs should use revenue code 0510 (Clinic).
  - Reimbursement will be made at the encounter rate.
- **All others billing on a UB-04 claim form:**
  - Revenue code 0779 (Preventative Care Services)
  - Reimbursement will be made at the fee schedule rate.

### Professional Practitioners and other Providers:

Billing on a CMS-1500 claim form, enter the associated HCPCS COVID-19 vaccine administration procedure code. Reimbursement will be made at the fee schedule rate.

### **Pharmacy Providers:**

The United States Health and Human Service (HHS) authorized qualified pharmacy technicians and state-authorized pharmacy interns acting under the supervision of a qualified pharmacist to administer FDA-authorized or FDA-licensed COVID-19 vaccinations to persons aged three (3) or older. See requirements at: <https://www.medicaid.gov/state-resource-center/downloads/covid-19-vaccine-toolkit.pdf>

For detailed Pharmacy Point of Sale (POS) billing guidance, please see the National Council for Prescription Drug Programs (NCPDP) guidance at the following link: [NCPDP-Emergency-Preparedness-Guidance-COVID-19-Vaccines.pdf](#)

### **For Medical Billing on a CMS-1500 claim form:**

Use the HCPCS COVID-19 vaccine administration procedure code. Reimbursement will be made at the fee schedule rate.

### **For POS Pharmacy Billing:**

This would be billed in a similar way as other vaccine administration.

COVID-19 vaccine must be billed with \$0.01 (one cent) and the following fields need to be filled in:

<b>Field#</b>	<b>NCPDP Field Name</b>	<b>Value</b>
438-E3	Incentive Amount Submitted	Reimbursement based on Medicare methodology
440-E5	Professional Service Code	MA = Medication Administration

Providers submitting claims for the COVID-19 vaccine paid for by the federal government through funding authorized by the Coronavirus Aid, Relief and Economic Security (CARES) act, or paid for by any program supplying Providers with no associated cost (zero cost) COVID-19 vaccine, shall submit claims with either \$0.01 in the Ingredient Cost Submitted field (NCPDP field 409-D9) or the combination of \$0.00 in the Ingredient Cost Submitted field (NCPDP field 409-D9) and a value of "15" in the Basis of Cost Determination field (NCPDP field 423-DN).

When submitting administration claims for a COVID-19 vaccine that requires multiple doses, pharmacies must submit the following information to indicate whether they are submitting an initial/restarter dose or the final dose in the regimen.

#### **Field #**

420-DK [Submission Clarification Code] Value = 02 (for Initial/Restarter Dose)

420-DK [Submission Clarification Code] Value = 06 (for Final Dose)