COVID-19 Billing

Policy and Procedure

Objective:

To provide pharmacies with a guideline for how to appropriately bill COVID-19 vaccines in PioneerRx.

Vaccine Items:

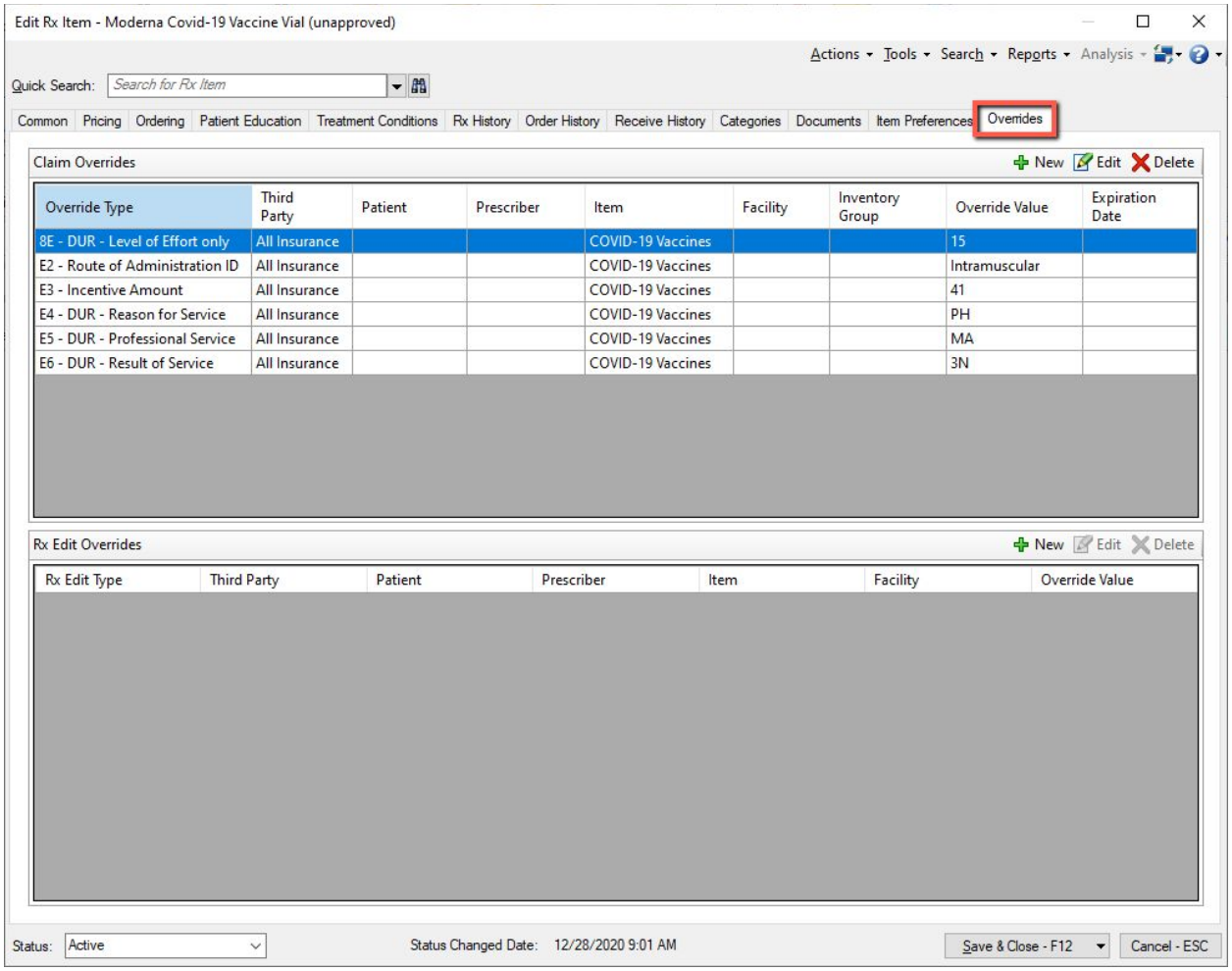
There are presently 5 NDCs that cover the COVID-19 vaccines. However, most plans are using two of them as the preferred NDCs for billing purposes.

1. Moderna - 80777-0273-10
2. Pfizer - 59267-1000-01

Claim Overrides:

In order to make the billing process more efficient, you should add the overrides below to the COVID-19 Vaccine Items.

1. PioneerRx has automatically added the overrides for the two default autocategories listed below. If you need to change them or add customized subsets create the new auto categories and then add claim overrides to the item.
   NOTE: PioneerRx has automatically imported all 5 NDCs into your local server.
   a. Navigate to Item > Rx Item > Quick Search
      i. Pfizer's COVID vaccine can be found by searching for:
         1. By name: Pfizer-Biontech
         2. By NDC: 59267-1000-01, 59267-1000-02, & 59267-1000-03
      ii. Moderna's COVID vaccine can be found by searching for:
         1. By name: Moderna
         2. By NDC: 80777-0273-10 & 80777-0273-99
   b. Select the item you wish to modify, and navigate to the Overrides tab



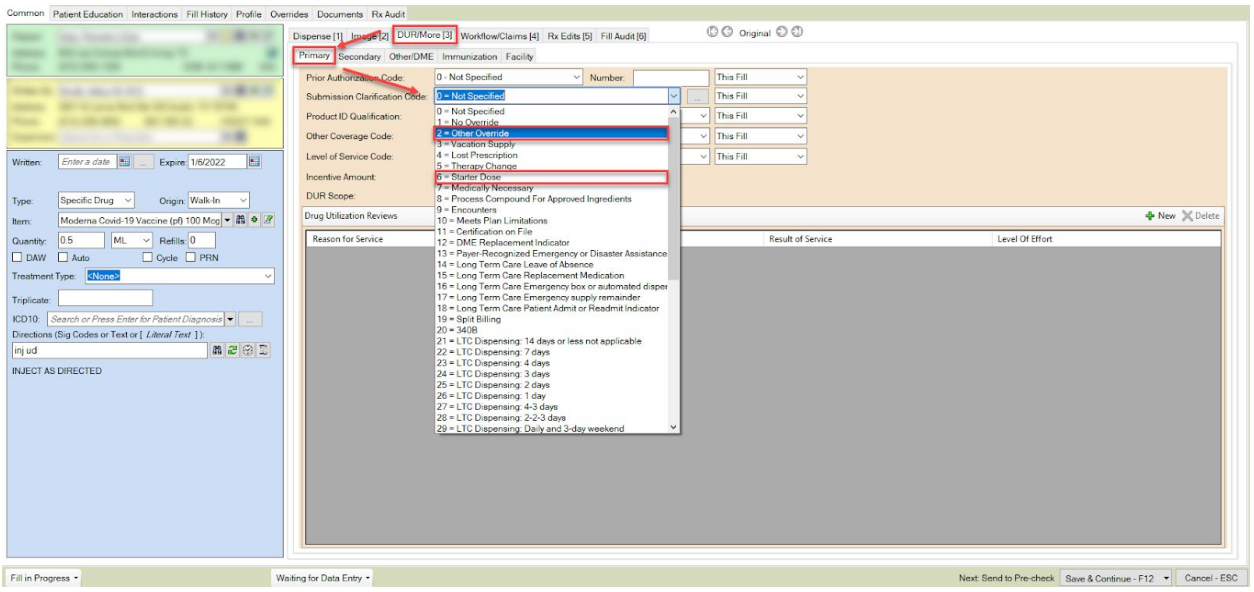
c. From there you'll notice the default overrides listed. You can edit/modify the overrides to change the override value, or add additional ones for different insurances or inventory groups.
NOTE: There may be some cases where the insurance plan requires a different override. When this occurs, it is best to create a one-time override for that specific instance to take priority over the broader override. Avoid deleting the broader override as doing so would remove it from not only that instance but also from your location altogether.

Submission Clarification Codes:

The COVID-19 vaccine requires two submission clarification codes (SCC), one for each dose in the series.

1. SCC 02 is reserved for the initial dose
    a. In the SCC field, select "2 = Other Override" as shown in the image below
    b. Reimbursement rates
        i. Commercial = $16.93
        ii. Medicare = $16.93
        iii. Medicaid = $16.93
2. SCC 06 is reserved for the second dose
    a. In the SCC field, select "6 = Starter Dose" as shown in the image below
    b. Reimbursement rates
        i. Commercial = $28.39
        ii. Medicare = $28.39
        iii. Medicaid = $28.39

To add a SCC navigate to the DUR/More tab > Primary > Submission Clarification Code field

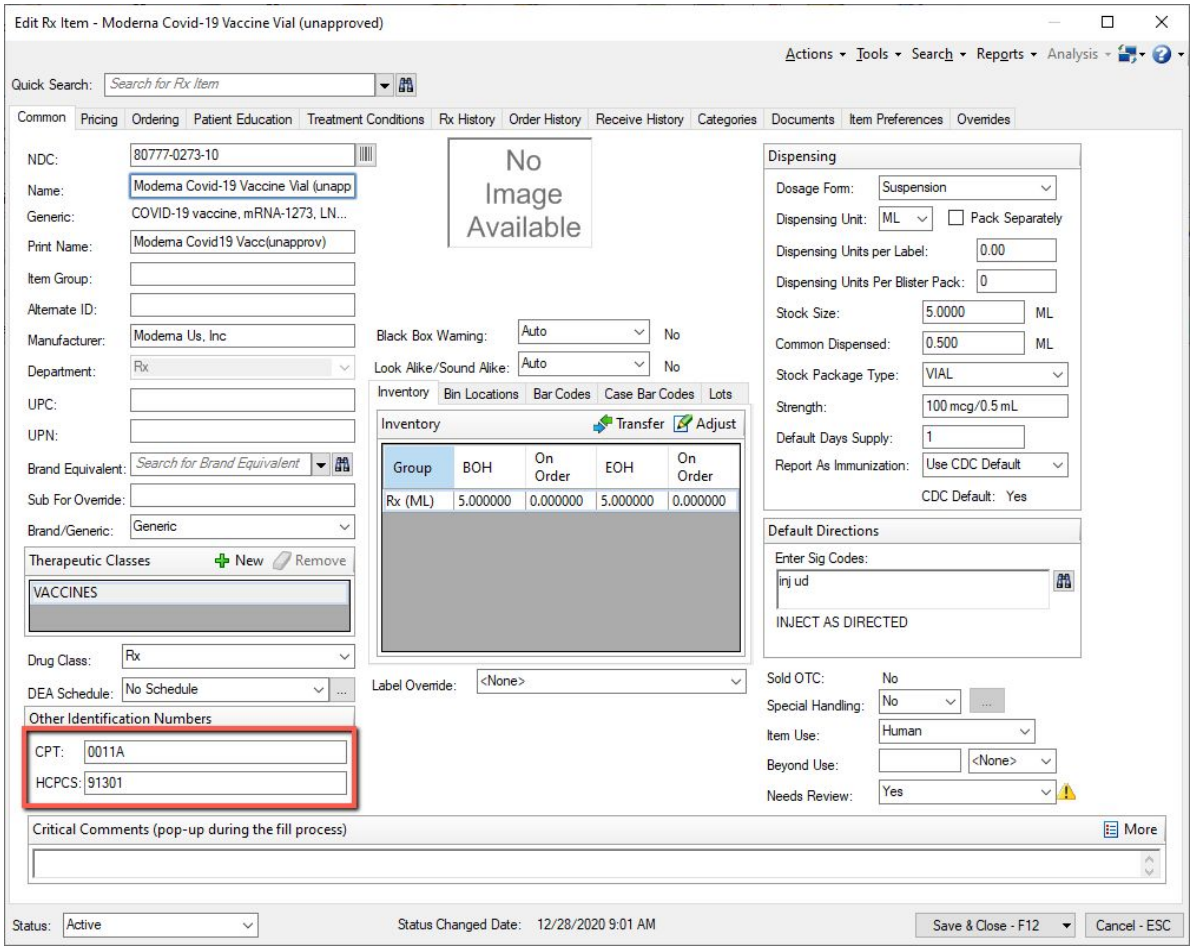


HCPCS and CPT Codes:

The COVID-19 vaccine requires HCPCS and CPT codes specific to the vaccine product and dose.

Vaccine Name(s)	HCPCS Code	CPT Code
Moderna COVID-19 Vaccine	91301	0011A (First Dose)
Moderna COVID-19 Vaccine	91301	0012A (Second Dose)
Pfizer-BioNTech COVID-19 Vaccine	91300	0001A (First Dose)
Pfizer-BioNTech COVID-19 Vaccine	91300	0002A (Second Dose)

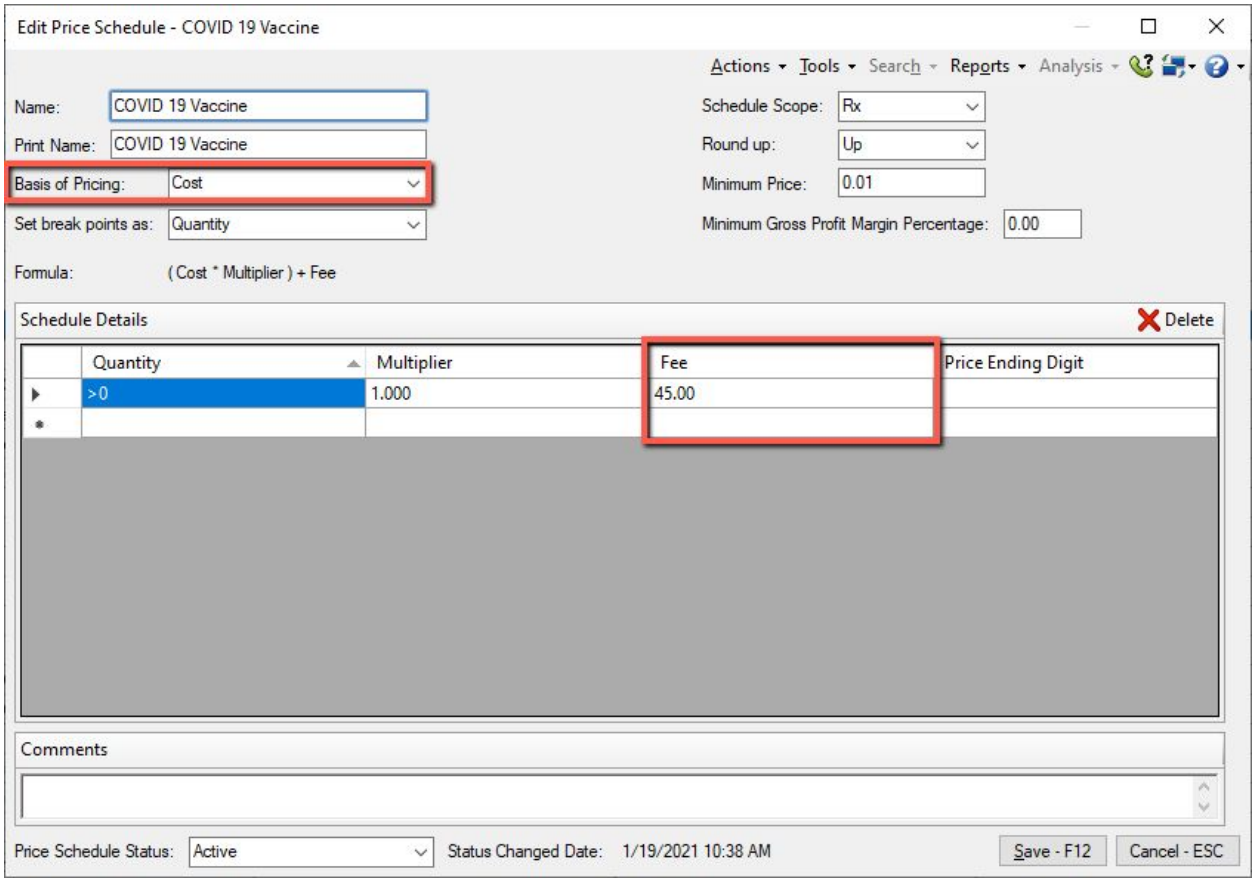
To update the CPT and HCPCS codes, navigate to Edit Rx Item > CPT or HCPCS



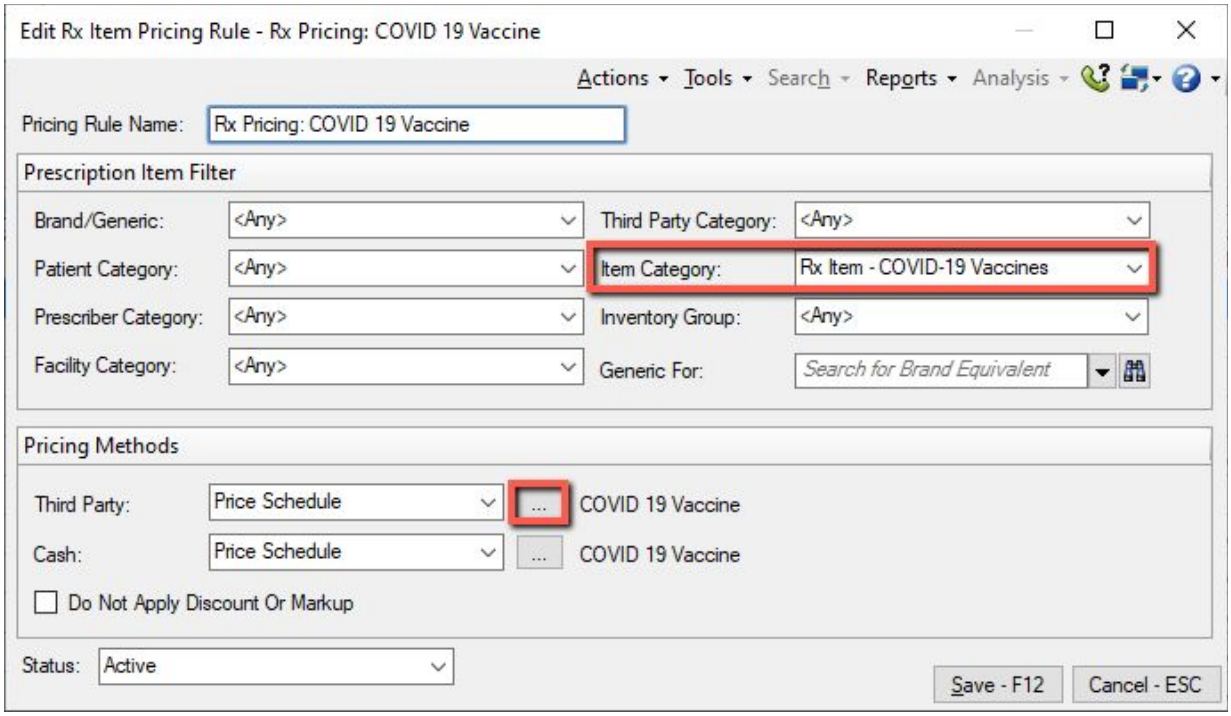
Pricing Rules:

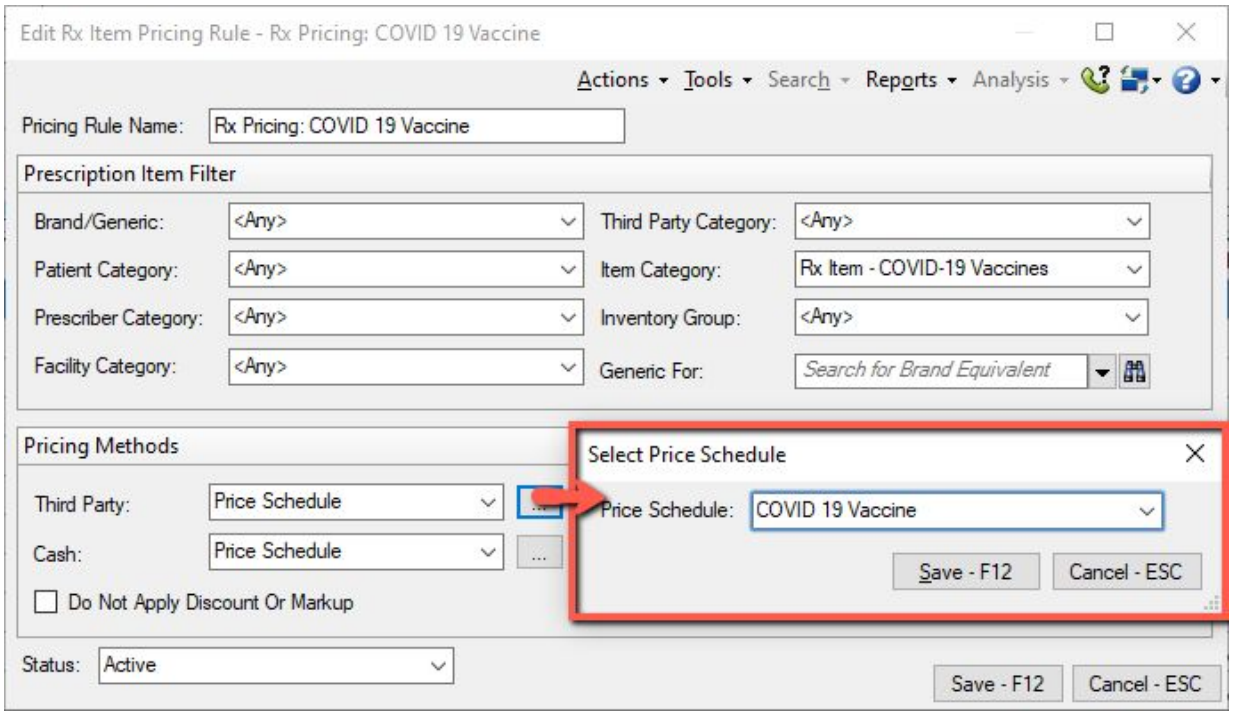
Commercial plans have been reimbursing administration fees for COVID-19 vaccines based on the dispensing fee. To avoid losing out on the administration fee and to prevent base limited claims, use a pricing rule to set your dispensing fee to >$28.39.

1. PioneerRx has automatically added a price schedule as well as a basic pricing rule for items in the COVID-19 Vaccines autocategory. The COVID 19 Vaccine price schedule will be used to apply the schedule to the Rx Pricing: COVID 19 Vaccine pricing rule. Changes can be made to these, if needed.
    a. Navigate to Item > Price Schedule > COVID 19 Vaccine
        i. Basis of Pricing should be set to either Cost or Quantity
        ii. Fee should be set to an amount > $28.39



b. Navigate to Item > Rx Pricing > Rx Pricing: COVID 19 Vaccine
   i. Select the item filters you wish to apply (at a minimum include the COVID-19 Vaccines item category)
c. Then set your third party and cash pricing methods to the appropriate price schedule

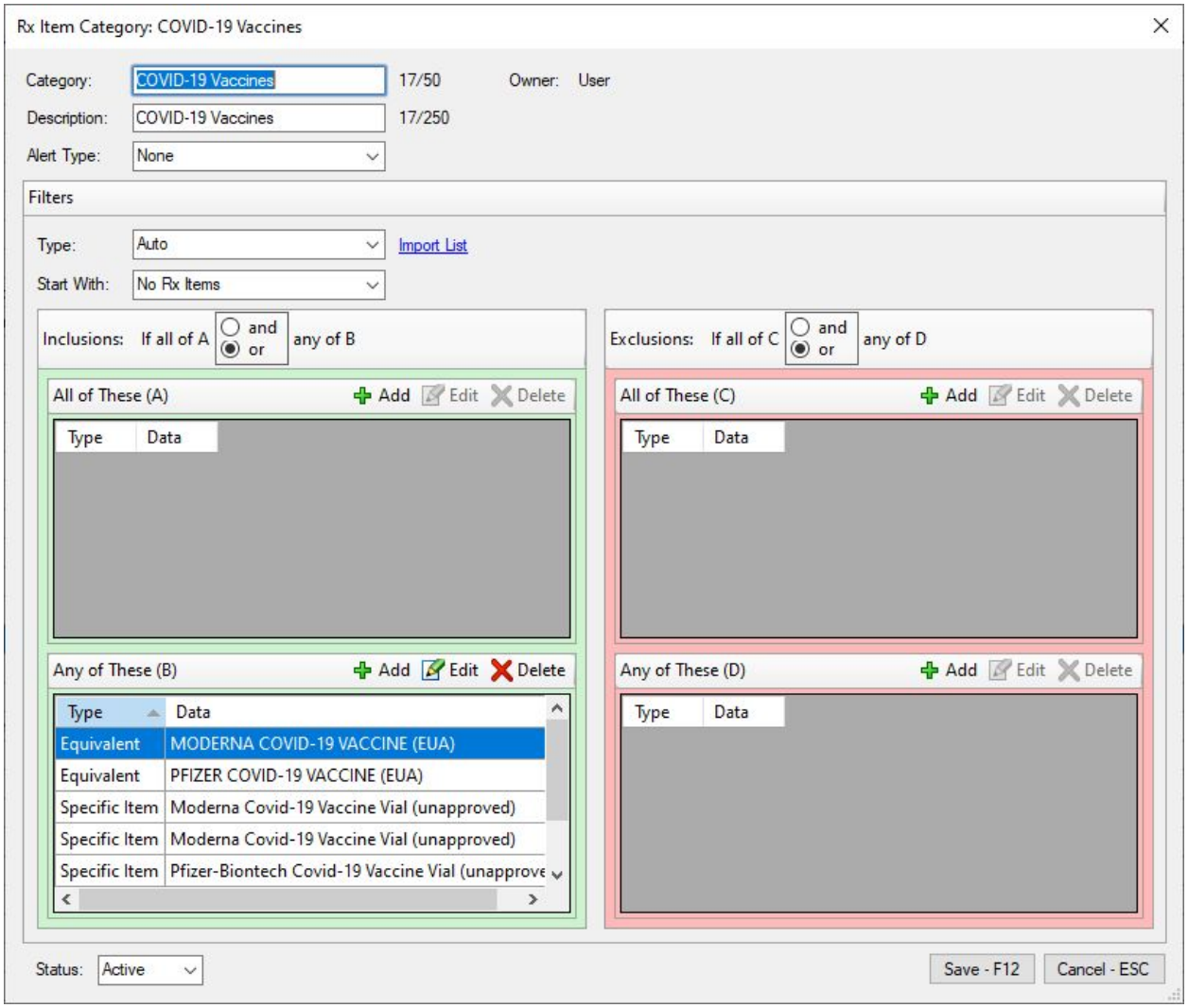




Autocategories:

It is recommended that a pharmacy create autocategories for COVID-19 vaccines.

1. PioneerRx has created two autocategories for COVID-19.
    a. **COVID-19 Vaccines** contains both Pfizer-BioNTech and the Moderna vaccine. This can be used for the pricing rules.
        i. To create a different COVID-19 Vaccine category, navigate to System > Category > Rx Item > New



        ii. Use the "Any of These" box to add items to the category. Preferred options in this would be:
            1. Equivalent - selects items of the same ingredient/strength)

2. Equivalent NDC - selects items by NDC of the same ingredient/strength
3. Specific Item - selects a specific item by name
4. Specific NDC - selects a specific item by NDC

b. **All Insurance** is a third party category that includes all insurances. This will be used for the Claim Overrides as a default.
    i. If your pharmacy wishes to create subsets of third party categories for the claim overrides, navigate to System > Category > Third Party > New
        1. Modify your category to include any third party combination you want.

Prescribers:

It is recommended that the pharmacy set up any of the pharmacists (or other providers) that will be administering the vaccine as prescribers ahead of time. This will prevent pharmacies from having to add themselves during the data entry process, and will also prevent pharmacies from using a supervising physician inappropriately.
NOTE: Make sure your state does not prohibit a pharmacist from ordering a COVID-19 vaccine. If for some reason it is prohibited, make sure you use a supervising physician as the prescriber.

HRSA COVID-19 Uninsured Program:

Under the Health Resources & Services Administration (HRSA) COVID-19 Uninsured Program, health care providers can receive claim reimbursement for COVID-19 vaccine administration to uninsured individuals.

Information to get started can be found at the HRSA COVID-19 Claims Reimbursement website.

Account Set Up

1. Sign up for an Optum ID account
    a. If you already have an Optum ID, sign into your account to access the COVID-19 Uninsured Program Portal
    b. If not, you will need to sign up for one
2. Validate your facility's Taxpayer Identification Number (TIN) (may take up to 2 business days)
3. Set up Optum Pay Automated Clearing House (ACH) (can take 7-10 business days)
    NOTE: Direct deposit / ACH via Optum Pay is required for reimbursement.

a. If provider already has direct deposit account with Optum Pay, they do not need to create a new one
b. Go to Optum.com/optumpay to enroll

4. Add Provider Roster (verification can take 5-7 business days)

NOTE: The tracker on the program portal will indicate if you need to take this step.

Patient Roster and Temporary Member IDs

5. Add the Patient Roster and complete attestations

NOTE: Patient information can be submitted one patient at a time or through uploading a batch file.

a. Export a batch file - Most of the data needed for the batch file can be exported from the Rx Transaction Search in PioneerRx once the vaccine has been entered.

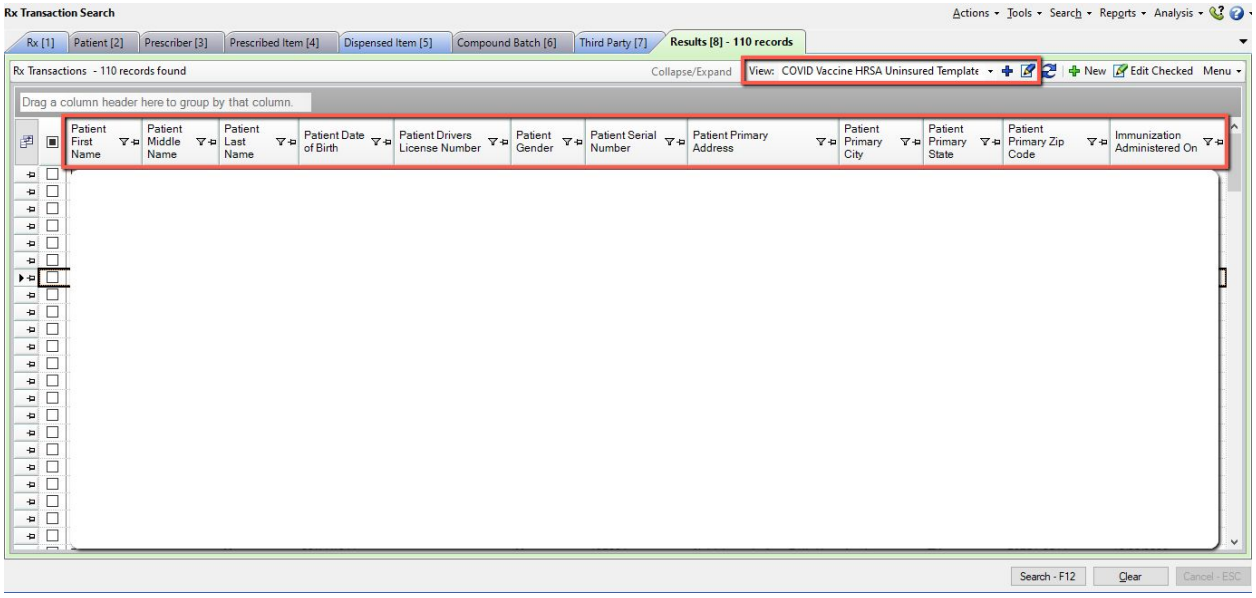
Pro Tip: When entering vaccines for patients, use your loyalty program that is used by default for your uninsured patients as the Primary Third Party to easily search for these patients.

i. Navigate to Rx Transaction Search > Enter Search Criteria > Search - F12
ii. Organize the search results grid to show fields needed for the Patient Roster

NOTE: Some fields may need to be added manually or reformatted after exporting from PioneerRx including Billing TIN Number, ID Type, and Service Type.

iii. Save the layout for future use by selecting Create New Display Layout

NOTE: Going forward, you can select your new display layout from the View field to easily organize the grid to reflect the chosen layout. The layout can be edited by making the changes and then selecting Edit Current Display Layout.



iv. Navigate to Menu > Export to Excel
    1. In Excel, add any additional required fields and make sure all formatting match the Patient Roster File Format Specifications
v. Upload the batch file as a CSV file (Sample CSV).
vi. Submit patient program attestations
    1. Check for health care coverage eligibility and confirm that patient was uninsured at the time the services were provided
vii. Receive temporary member IDs in the program portal for each individual patient (usually within 24 hours)

NOTE: A temporary member ID will not be issued if active coverage is identified. If coverage information is outdated or not applicable, the provider may request reconsideration of eligibility.

Submit Eligible Claims for Reimbursement

6. Submit claims using an 837 EDI transaction set
    a. Use the temporary member IDs

    NOTE: Temporary member ID will be valid for 120 from date of service and claims but be submitted with date of service within the validity period.

    b. Payer ID: 95964

    NOTE: This payer ID is specifically for this program; DO NOT USE ANOTHER PAYER ID.

    c. Payer name: COVID19 HRSA Uninsured Testing and Treatment Fund

Receive Payment Electronically

7. Login to Optum Pay
8. Select the TIN associated with the claims
9. Select View Payments

NOTE: Eligible claims are typically processed and paid within 30 business days.