



# An important message regarding Humana's COVID-19 response: FAQs for COVID-19 vaccines during the public health emergency 05/11/2023

We received many questions from providers regarding COVID-19 vaccines during the public health emergency (PHE). This document highlights the most frequently asked.

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### **1. Did the vaccines require preauthorization?**

No.

### **2. Did Humana members receive the vaccine with no out-of-pocket costs?**

Yes. For Humana members, all U.S. Food and Drug Administration (FDA)-authorized COVID-19 vaccines were covered at no additional cost during the PHE. Coverage applied no matter where the Humana-covered patient received the vaccine, including at both in-network and out-of-network providers. It also covered instances in which two initial vaccine doses were required as well as booster shots that were recommended, according to Centers for Disease Control and Prevention (CDC) guidelines. Claims for COVID-19 vaccine administration rendered during the PHE should be submitted, as outlined below, based on the member's benefit plan.

Please refer to [Humana's COVID-19 Vaccine claims payment policy](#) for further information.

### 3. How did Humana handle claims for the vaccines?

The federal government coordinated with the states to supply all vaccine products to providers. It was not necessary for a provider to submit a vaccine product code for a state-supplied vaccine. Humana did not reimburse for a state-supplied vaccine product; however, the administration of a state-supplied vaccine was reimbursable. Administration claims for vaccines rendered during the PHE should be submitted to Humana using the administration codes listed below. The cost share for a vaccine's administration was waived.

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 would be provided through the Original Medicare program. This included charges for the vaccine and its administration. All claims for administering the COVID-19 vaccine to Humana MA members during 2020 and 2021 should be submitted to the Medicare Administrative Contractors (MAC). Humana will deny any vaccine product or administration claims received for MA members for dates of service in 2020 and 2021. Claims for administering the COVID-19 vaccine to Humana MA members for dates of service beginning Jan. 1, 2022, should be submitted to Humana.

Please refer to [Humana's COVID-19 Vaccine claims payment policy](#) for further information.

### 4. What if the patient did not have their Original Medicare card or did not know their Medicare Beneficiary Identifier (MBI) number?

If your patient did not have their Original Medicare card or did not know their MBI number, you could use the MBI look-up tool in your [MAC's secure portal \(PDF\)](#). You must have your patient's first and last name, date of birth and Social Security number. Even if your patients are enrolled in MA plans, you can look up their MBIs.

### 5. What codes were reported for the COVID-19 vaccines?

Providers should have reported charges for the vaccine product and its administration for vaccines rendered during the PHE, according to the Current Procedural Terminology (CPT®) coding standards established by the American Medical Association (AMA). Providers should have reported the code appropriate for the manufacturer-specific vaccine and dose administered. The AMA created the codes listed in the chart below for reporting the COVID-19 vaccine during the PHE. See the [AMA's website](#) for more information on COVID-19 vaccine coding.

Manufacturer	Vaccine product code	Administration code
<b>Pfizer (Purple Cap)</b>	91300	First dose: 0001A Second dose: 0002A Third dose: 0003A Booster dose: 0004A
<b>Pfizer (Gray Cap)</b>	91305	First dose: 0051A Second dose: 0052A Third dose: 0053A Booster dose: 0054A
<b>Pfizer (Orange Cap)</b>	91307	First dose: 0071A Second dose: 0072A Third dose: 0073A Booster dose: 0074A
<b>Pfizer (Maroon Cap)</b>	91308	First dose: 0081A Second dose: 0082A Third dose: 0083A
<b>Pfizer (Gray Cap)</b>	91312	Single dose: 0121A Additional dose: 0124A

<b>Pfizer (Orange Cap)</b>	91315	Single dose: 0141A Additional dose: 0145A
<b>Pfizer (Maroon Cap)</b>	91317	First dose: 0171A Second dose: 0172A Third dose: 0173A Additional dose: 0174A
<b>Moderna (Red Cap)</b>	91301	First dose: 0011A Second dose: 0012A Third dose: 0013A
<b>Moderna (Red Cap)</b>	91306	Booster dose: 0064A
<b>Moderna (Dark Blue Cap; Purple Border)</b>	91309	First dose: 0091A Second dose: 0092A Third dose: 0093A
<b>Moderna (Dark Blue Cap; Purple Border)</b>	91309	Booster dose: 0094A
<b>Moderna (Dark Blue Cap; Magenta Border)</b>	91311	First dose: 0111A Second dose: 0112A Third dose: 0113A
<b>Moderna (Dark Blue Cap; Gray Border)</b>	91313	Additional dose: 0134A
<b>Moderna (Dark Blue Cap; Gray Border)</b>	91314	First dose: 0141A Second dose: 0142A Additional dose: 0144A
<b>Moderna (Dark Pink Cap; Yellow Border)</b>	91316	Additional dose: 0164A
<b>Janssen</b>	91303	Single dose: 0031A Booster dose: 0034A
<b>Novavax</b>	91304	First dose: 0041A Second dose: 0042A Booster dose: 0044A

When a revenue code was required on your claim form, report the vaccine product code with revenue code 0636 and the administration code with revenue code 0771. Please refer to [Humana's COVID-19 Vaccine claims payment policy](#) for further information.

#### 6. Did Humana reimburse an additional amount for administering the COVID-19 vaccine in a patient's home?

Humana did 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 were satisfied. The code used to report at-home administration of the COVID-19 vaccine during the PHE was HCPCS code M0201. When applicable, providers could report HCPCS code M0201 in addition to the appropriate codes for the manufacturer-specific vaccine and dose administered. Please refer to [Humana's COVID-19 Vaccine claims payment policy](#) for further information.

As noted above for MA members, CMS determined that coverage for COVID-19 vaccines administered to MA plan members during 2020 and 2021 would be provided through the Original Medicare program. Please refer to CMS guidance on [Medicare Payment for COVID-19 Vaccination Administration in the Home](#) and send any applicable claims

to the MACs for administering the COVID-19 vaccine to Humana MA members during 2020 and 2021. Claims for administering the COVID-19 vaccine to Humana MA members for dates of service beginning Jan. 1, 2022, should be submitted to Humana.

Medicaid plans will continue to follow state requirements for COVID-19 vaccines.

#### **7. How do I bill for state-supplied vaccine products?**

Providers should only bill the administration code when submitting a claim for a state-supplied COVID-19 vaccine. However, Humana recognizes that some billing systems require a charge for a vaccine product code to be reported. In such circumstances, Humana recommends the provider report a charge amount of \$0.01. In addition, Humana does not require a modifier SL, but it will allow the use of modifier SL to identify state-supplied vaccine product codes.

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

Humana reimburses for the COVID-19 vaccine administered during the PHE separately from the inpatient admission's diagnosis-related group rate. Providers should bill for administering the vaccine to a hospital inpatient using the applicable CPT code on a separate type of bill 12x claim.

#### **9. Did Humana accept a roster bill to report administering the COVID-19 vaccine to multiple patients at a time?**

No, Humana did not accept roster bills during the PHE to report administration of the COVID-19 vaccine.

For the latest information about COVID-19 vaccines, [visit the CDC website](#). For additional resources, please visit the [CMS COVID-19 vaccine policies and guidance website](#).