



**\*\* Fee-For-Service Pharmacy Provider Notice #252 – COVID-19 Vaccine Updated Fees\*\***

**March 23, 2021**

Please be advised that the Department for Medicaid Services (DMS) has increased the COVID-19 vaccine administration reimbursement in accordance with the Centers for Medicare and Medicaid Services (CMS) and the Biden-Harris Administration order. Any vaccine administered on or after March 15, 2021 will be eligible for this increase. The national average reimbursement rate is now \$40 for each dose given, increased from the previous rates. Pharmacy providers that submitted COVID-19 vaccine claims on or after March 15, 2021 must resubmit in order to receive the updated reimbursement; this change was effective in the Fee-for-Service (FFS) point-of-sale system at 12 PM Eastern on March 19, 2021.

As a reminder DMS is requiring pharmacies to utilize Kentucky Board of Pharmacy approved prescriber protocols to receive reimbursement for COVID-19 immunizations given at the pharmacy. The provider's NPI must be actively enrolled with Kentucky Medicaid; DMS does not currently enroll pharmacists as providers. Therefore, the Pharmacist NPI should not be utilized in the Prescriber ID field. If a pharmacy has already submitted a claim on or after March 15, 2021 you must resubmit in order to receive the updated reimbursement.

Claims that are submitted in accordance with the updated requirements and NCPDP guidance (such as the information below) are payable.

- Professional Service Code = "MA" (Medication Administered)
- Incentive Amount Submitted = \$40 or less; *submitting more than \$40 will result in a denial*
- Gross Amount Due = \$40 (or any other amount)
- Submission Clarification Code '2' (Other Override) and '6' (Starter Dose) or blank
- Prescription Origin Code '5'

Thank you for assisting Kentucky Medicaid members in accessing COVID-19 immunizations coverage by following the above billing guidance. Please contact the Kentucky Magellan Medicaid Administration team at [kyproviders@magellanhealth.com](mailto:kyproviders@magellanhealth.com) for additional information or any questions you may have.

Sincerely,

*Sha Leigh Hammons*

ShaLeigh Hammons, CPhT

Account Manager I

[kyproviders@magellanhealth.com](mailto:kyproviders@magellanhealth.com)

Kentucky Medicaid Fee-for-Service Pharmacy Program's Contact Information		
<b>Clinical Support Center</b>	1-800-477-3071 Sunday – Saturday 24 hours a day	Please contact the Clinical Support Center to request a prior authorization (PA) or to check the status of a request.
<b>Pharmacy Support Center</b>	1-800-432-7005 Sunday – Saturday 24 hours a day	Please contact the Pharmacy Support Center when claims assistance is required. Timely filing, lock-in, and early refill (ER) overrides can be obtained through this Call Center.
<b>Provider Services</b>	1-877-838-5085 Monday – Friday 8:00 a.m. – 4:30 p.m.	Please contact Provider Services if you have questions about enrollment or when updating your license or bank information.
<b>Member Services</b>	1-800-635-2570 Monday – Friday 8:00 a.m. – 5:00 p.m.	Please contact Member Services if you are a member or if you as the provider have questions regarding the member's benefits or eligibility coverage dates.