

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT202334    APRIL 25, 2023

## Third-dose administration of Moderna COVID-19 vaccine covered for ages 6 months through 5 years

Effective immediately, retroactive to dates of service (DOS) on and after June 17, 2022, the Indiana Health Coverage Programs (IHCP) will reimburse IHCP-enrolled providers for the third-dose administration of Moderna coronavirus disease 2019 (COVID-19) vaccine for members ages 6 months through 5 years who are moderately to severely immunocompromised (see [Coronavirus \(COVID-19\) Update: FDA Authorizes Moderna and Pfizer-BioNTech COVID-19 Vaccines for Children Down to 6 Months of Age](#) at fda.gov).

The Current Procedural Terminology (CPT<sup>®1</sup>) Editorial Panel has approved a new vaccine administration code: 0113A – *Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 25 mcg/0.25 ml dosage; third dose*. This code is to be reported with the previously established Moderna vaccine CPT code 91311 – *Severe acute respiratory syndrome coronavirus 2 (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 25 mcg/0.25 mL dosage, for intramuscular use for pediatric patients aged 6 months through 5 years*.



The claim-processing system has been updated to include coverage for CPT code 0113A as indicated in [Table 1](#). For claims affected by this change, providers can resubmit the claims within 90 days from the date of this publication for managed care claims, or 180 days from the date of publication for fee-for service (FFS) claims, to satisfy timely filing requirements. Providers should include a copy of this bulletin (first page) when submitting claims beyond the standard filing limit.

As established in previous *IHCP Bulletins*, Emergency Medical Services (EMS) providers ([BT2020129](#)), pharmacy providers ([BT2020127](#), [BT202102](#)), and federally qualified health center (FQHC) and rural health clinic (RHC) providers ([BT202112](#)) are allowed to bill for COVID-19 vaccine administration. In addition, Family Supports Waiver (FSW) and Community Integration and Habilitation (CIH) Waiver providers ([BT202129](#)) are allowed to bill COVID-19 vaccine and administration codes, with modifier U7 appended.

COVID-19 vaccinations can be administered to all eligible IHCP members meeting vaccine Emergency Use Authorization (EUA) criteria and Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) age and dosing interval recommendations. Any additional requirements or limitations specified by the Indiana Department of Health (IDOH), CDC, or *Health and Human Services (HHS) Public Readiness and Emergency Preparedness (PREP) Act* must also be met.

<sup>1</sup>CPT copyright 2023 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.

COVID-19 vaccination reimbursement is carved out of managed care benefits. Professional claims for managed care and FFS members should be submitted to the FFS claim-processing vendor, Gainwell Technologies. Pharmacy claims for managed care and FFS members should be submitted to the FFS pharmacy benefit manager, Optum Rx.

COVID-19 vaccines are to be supplied free of charge, without copay, to all IHCP members, including members in limited benefit categories, such as Emergency Services Only (ESO). COVID-19 vaccination claims for IHCP members who are dually eligible for both Medicare and Medicaid must be billed to the member’s Medicare plan provider. Prior authorization is not required.

The new code will be reflected in the next regular update to the Professional Fee Schedule and the Outpatient Fee Schedule, accessible from the [IHCP Fee Schedules](#) page at in.gov/medicaid/providers.

Updates will be made to the following code tables, accessible from the [Code Sets](#) page at in.gov/medicaid/providers:

- *Revenue Codes With Special Procedure Code Linkages*
- *Physician-Administered Drugs Carved Out of Managed Care and Reimbursable Outside the Inpatient Diagnosis-Related Group (DRG)*
- *Transportation Services Codes*

*Table 1 – Newly covered procedure code and reimbursement for Moderna vaccine administration, effective for DOS on or after June 17, 2022*

Procedure code	Description	Program coverage	Reimbursement notes
0113A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 25 mcg/0.25 ml dosage; third dose	Covered for all programs that serve this age group, including limited-benefit programs	Max Fee: \$37.21 (effective for DOS June 17, 2022, through Dec. 31, 2022) Max Fee: \$38.95 (effective for DOS on or after Jan. 1, 2023) Covered for members ages 6 months through 5 years Linked to revenue code 636

**QUESTIONS?**

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

**COPIES OF THIS PUBLICATION**

If you need additional copies of this publication, please download them from the [IHCP Bulletins](#) page of the IHCP provider website at in.gov/medicaid/providers.

**SIGN UP FOR IHCP EMAIL NOTIFICATIONS**

To receive email notices of IHCP publications, subscribe by clicking the blue subscription envelope or sign up from the [IHCP provider website](#) at in.gov/medicaid/providers.

