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Mutual News Bulletin December 2020

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COVID-19 Vaccine Information

Thank you for the excellent care you provide for our members. With the recent FDA approval of a COVID-19 vaccine, we wanted to provide you with important information, including:

- Becoming an Ohio COVD-19 vaccine provider
- COVID-19 vaccine and administration cost coverage
- Clinical codes for the COVID-19 vaccines and administration

A <u>COVID-19 Vaccine Provider FAQ</u> has been created and is available at MedMutual.com/Provider. It will be updated regularly as more vaccine information becomes available.

Becoming an Ohio COVID-19 Vaccine Provider

According to the Ohio Department of Health (ODH), to be eligible to enroll in the COVID-19 Vaccine Program, you must be credentialed/licensed in the state of Ohio through the Ohio Board of Pharmacy, and must have a valid Terminal Distributor of Dangerous Drugs (TDDD) license.

Contact Us

Visit **MedMutual.com/Provider** to log in to the Provider Portal.

If you have questions, please contact your provider contracting representative:

Central/SE Ohio (Columbus Office)

1-800-235-4026

NE Ohio/Pennsylvania (Cleveland Office)

1-800-625-2583

NW Ohio/NE Indiana (Toledo Office)

1-888-258-3482

SW Ohio/SE Indiana/Kentucky (Cincinnati/Dayton Office)

1-800-589-2583

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To enroll as a vaccine provider:

- 1. Complete, sign and submit the Centers for Disease Control and Prevention (CDC) and Ohio COVID-19 Vaccination Program Provider Agreements available at ohid.ohio.gov
- 2. Meet program standards for vaccine storage and handling
- 3. Review and be familiar with the CDC's training components of COVID-19 vaccine administration, which you can find at cdc.gov/vaccines/covid-19/hcp/prepare.html

For more information on enrolling to be a vaccine provider, go to <a href="https://doi.org/out/square/noises/covid-19-provider-enrollment/ohio-covid-19-provider-enrollment/ohio

COVID-19 Vaccine and Administration Cost Coverage

COVID-19 vaccines are paid for through funding authorized by the Coronavirus Aid, Relief, and Economic Security (CARES) Act. Providers must administer COVID-19 vaccines regardless of the vaccine recipient's ability to pay COVID-19 vaccine administration fees or whether the recipient has health insurance coverage. Providers may NOT seek any reimbursement, including through balance billing, from the vaccine recipient.

COVID-19 Vaccine Administration Coverage		
Commercial and Individual Plan Members	Medical Mutual will cover COVID-19 vaccine	
	administration, regardless of the number of doses,	
	under both medical and pharmacy benefits at no cost	
	sharing for members.	
Commercial – Grandfathered and	Medical Mutual will cover the cost of the administration	
Non-grandfathered Plan Members	of the vaccine(s) at no cost sharing for members.	
Medicare Advantage and Medicare	Both the vaccines and its administration are paid for by	
Supplement Plan Members	Original Medicare at least through 2021.	

If you administer the vaccine to a Medicare Advantage or Medicare Supplement plan member, you should submit claims to Original Medicare through your Medicare Administrative Contractor (MAC) for 2020 and 2021. If you do not know who your MAC is, you can find out on the Centers for Medicare and Medicaid Services (CMS) website at cms.gov/Medicare/Medicare-Contracting/Medicare-Administrative-Contractors/Who-are-the-MACs#MapsandLists.

Clinical Codes for the COVID-19 Vaccine(s) and Administration

The clinical codes for the COVID-19 vaccines and administration are:

- Pfizer 91300 Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use
 - 0001A Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/ 0.3mL dosage, diluent reconstituted; first dose

- 0002A Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/ 0.3mL dosage, diluent reconstituted; second dose
- Moderna 91301 Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use
 - 0011A Immunization administration by intramuscular injection of Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/ 0.5mL dosage; first dose
 - 0012A Immunization administration by intramuscular injection of Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (COVID-19) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/ 0.5mL dosage; second dose

COVID-19 Vaccine Additional Information

For additional information on the COVID-19 vaccine, go to

- The CDC website at cdc.gov/vaccines/covid-19/index.html
- The CMS COVID-19 vaccine toolkits at cms.gov/covidvax-provider
- The ODH COVID-19 vaccine providers site at <u>odh.ohio.gov/wps/portal/gov/odh/know-our-programs/covid-19-vaccine-provider/covid-19-vaccine-provider</u>

National Drug Code (NDC) Rejection Update

In the October 2019 Mutual News Bulletin, we announced the expansion of our use of front-end validation edits for all HIPAA-mandated transactions to meet compliance requirements. To minimize the impact on our providers, we initially accepted and processed claims with compliance errors, and provided warnings on the summary and detail report and response files sent back to clearinghouses and providers. This was done to help you understand the compliance errors and correct them for future claim submissions.

Beginning July 2020, we began to phase in the use of pre-adjudication rejection edits. This meant claims that failed certain compliance requirements were rejected upfront and returned to the submitter for correction and resubmission. On Nov. 24, 2020, we began applying pre-adjudication rejection edits to NDC code errors, which caused claims with NDC code errors to be rejected in their entirety. The rejections were based on either inaccurate conversion of the 10-digit NDC code to the 11-digit NDC 5-4-2 format, or the NDC code had not been converted from 10 to 11 digits.

Due to concerns raised by some providers, on Dec. 9, 2020, we reverted back to accepting and processing claims with NDC code errors and issuing compliance warnings. We apologize for not communicating the use of pre-adjudication rejection edits for NDC code errors prior to implementation, and for any disruption this may have caused.

The use of pre-adjudication rejection edits for NDC code errors may be reimplemented at a future date. We will monitor conformance and communicate any planned changes prior to reinstituting this pre-adjudication edit. Please resubmit the claims that were rejected using the NDC 5-4-2 format as published by the Food and Drug Administration Federal Drug Listing Branch.

For any questions, please contact edisupport@medmutual.com or your Provider Contracting Representative.