

Billing Guidelines for COVID-19 Vaccine Administration Only

December 8, 2021*

To ensure accurate claims payment, please follow the vaccine administration and billing guidelines below for all HAP and HAP Empowered lines of business.

Vaccine Billing Guidelines

Providers cannot bill for vaccines supplied by the government under the CARES Act.

Vaccine Administration Billing Guidelines for Commercial and Medicaid Members You can submit claims for administration of COVID-19 vaccines for Commercial and Medicaid members. Please use the codes below.

Manufacturer and Administration codes		
Pfizer	Moderna	Janssen
• 0001A (1st dose)	• 0011A (1st dose)	• 0031A
• 0002A (2nd dose)	• 0012A (2nd dose)	 0034A (booster)
• 0003A (3rd dose)	• 0013A (3rd dose)	
• 0004A (booster)	• 0064A (booster)	

Vaccine Administration Billing Guidelines for Medicare Advantage Members

For 2020 and 2021 Dates of Service	For 2022 Dates of Service		
We're aligned with CMS guidelines. Per CMS, submit claims for administration of all COVID-19 vaccines for MA members to the CMS Medicare Administrative Contractor (MAC) for payment. Claims will deny if submitted to HAP with direction to bill CMS.	For administration of all COVID-19 vaccines on or after January 1, 2022, submit claims to HAP using the codes outlined in the table above.		
For more information, visit: Medicare Billing for COVID-19 Vaccine Shot Administration CMS)			

*This document is specific to vaccine administration only. For other COVID-19 billing guidelines, visit the COVID-19 provider newsroom at <u>https://www.hap.org/providers/covid19-coronavirus</u> and refer to:

- Updated Billing Guidelines for Outpatient Services For COVID-19 Cost Share Waiver FINAL
- Urgent Care Centers Reimbursement for COVID 19 Vaccine Administration Nov 2021