

COVID-19 Vaccine Administration Billing Considerations for LHDs

Local Technical Assistance & Training Branch
 Administrative & Financial Support Unit
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Purpose

This document provides billing scenarios to help local health departments make informed decisions about supporting documentation of services for the purposes of billing COVID-19 vaccine administration and related provider services.

For local health departments who are enrolled or participate in multiple insurance networks, potential revenue gain can be a deciding factor in allotting human resources during the COVID-19 vaccine administration events. This document breaks down potential revenue gain using a conservative estimation of 100 1st administration doses and 100 2nd administration doses, as well as the potential income for patients who must see a medical provider face to face or by telehealth in the process of assessing for medical appropriateness of vaccine.

Reimbursement Rates

- Reimbursement of \$16.94 for the administration of the first COVID-19 Vaccine.
- Reimbursement of \$28.39 for the administration of the second COVID-19 Vaccine.
- Reimbursement of \$93.15 for 99202 E/M visit (either in-person or telemedicine)
- Reimbursement of \$132.48 for 99203 E/M visit (either in-person or telemedicine)

Scenario

A local health department administers 100 1st doses of COVID-19 vaccine at \$16.94, total reimbursement is \$1,694.00. It also renders 100 2nd doses of COVID-19 vaccine at \$28.39, total reimbursement is \$2,839.00. This totals \$4,533.00 of lost revenue. (200 is being used as the daily base allocation of the administration fee in this scenario; 4 is being used as the daily base of consultation that results in individual medical order)

COVID-19 Vaccine Administration Projected Revenue Gain				
Rates do not reflect the temporary Medicaid 40% increase due to COVID-19 Public Health Emergency				
COVID-19 Vaccine Administration	Daily	1 Week	1 Month	6 Months
100 1st dose per day	\$1,694.00	\$8,470.00	\$33,880.00	\$203,280.00
100 2nd dose per day	\$2,839.00	\$14,195.00	\$56,780.00	\$340,680.00
Total	\$4,533.00	\$22,665.00	\$90,660.00	\$543,960.00
Estimation for E/M visits/telemedicine resulting from consultation (based on 4 patients/day)	Daily	1 Week	1 Month	6 Months
99202	\$372.60	\$1,863.00	\$7,452.00	\$44,712.00
99203	\$529.92	\$2,649.60	\$10,598.40	\$63,590.40
Total	\$902.52	\$4,512.60	\$18,050.40	\$108,302.40

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Justification

Per the [Consolidated Agreement](#), Funding Stipulations, C.b.3.d:

- d) Make every reasonable effort to collect charges for services through public or private third-party payors, except where prohibited by federal regulations or State law; however, no one shall be refused services solely because of an inability to pay.

Workflow for Billing Flu And COVID-19

FLU Vaccines must be entered into NCIR. To receive payment for flu vaccines and administration fees, you must enter this information into your EHR.

COVID-19 vaccines must be entered into the COVID-19 Vaccine Management System (CVMS). To receive payment for administration fees, you must enter this information into your EHR.

There is no difference in the workflow. Ensuring use of appropriate and accurate forms for the collection of data in CVMS and the EHR will support billing vaccine administration and associated medical services

Please reach out to your Local Technical Assistance & Training Branch consultants for assistance: <https://publichealth.nc.gov/lhd/docs/Joint-InterimAC-NC-Map-12-01-20.pdf>

Your Consultant will

1. Assist in updating policy and procedure (update policy to reflect COVID-19 vaccination and CVMS system)
2. Assist in developing/updating template/forms
3. Assist in workflow management to bill and recoup revenue for COVID-19 vaccine administration.
4. Assist via virtual training with CVMS and proper billing and coding of COVID-19 vaccine administration.
5. Assure awareness of [COVID-19 Vaccination Billing Resources](#) and [COVID-19 Vaccine LHD Toolkit](#).