

RON DESANTIS GOVERNOR

SIMONE MARSTILLER SECRETARY

September 14, 2022

Statewide Medicaid Managed Care (SMMC) Policy Transmittal: 2022-07

Applicable to the 2018-2023 SMMC contract benefits for:

- Managed Medical Assistance (MMA) and MMA Specialty
- Long-Term Care (LTC)
- Dental

Re: Update to PT 2021-31: COVID-19 Monoclonal Antibody COVID-19 Infusion PT 2021-33: COVID-19 State of Emergency: Vaccine Administration

The Agency for Health Care Administration remains committed to ensuring Medicaid recipients receive medically necessary care to prevent and treat the 2019 novel coronavirus (COVID-19). The managed care plan must make payments for COVID-19 vaccine administration and Monoclonal Antibody COVID-19 infusions to qualified providers. The purpose of this policy transmittal is to reiterate previously outlined policy, and provide current payment information for COVID-19 vaccine administration and Monoclonal Antibody COVID-19 outlined policy.

The managed care plan must cover COVID-19 vaccines and monoclonal antibodies to treat COVID-19 that have received <u>Emergency Use Authorization (EUA)</u>,or approval from the Food and Drug Administration (FDA). **COVID-19 vaccines, administration fees and monoclonal antibodies must be provided in accordance with the EUA and <u>CMS guidelines</u>. Payments must be made according to the schedule on the Centers for Medicare and Medicaid Services (<u>CMS) website</u> for COVID-19 vaccines and monoclonal antibodies. The managed care plan must cover all billing codes for COVID-19 vaccines, monoclonal antibodies, and their administration, beginning on and after the effective dates listed by CMS, except for those codes indicating home administration. Florida Medicaid fee-for-service (FFS) does not reimburse for home administration.**

The managed care plan must complete all necessary system programming for claims processing of COVID-19 vaccines, vaccine administration and monoclonal antibody codes by October 14, 2022, and reprocess applicable claims paid on and after their effective dates within thirty (30) days of the pricing system update. The Fee Schedule Lookup Tool is available on the <u>Medicaid Fiscal Agent website</u>, for use by providers, health plans, and other stakeholders. The Fee Schedule Look-up Tool allows the user to enter a HCPCS/CPT code to determine the reimbursement rate for a specific date of service.

If you have questions or concerns, please contact your contract manager.

Sincerely,

on Wallace

Tom Wallace

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Deputy Secretary for Medicaid

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