

PHYSICIANS AND PHYSICIAN EXTENDERS:				
COVID-19 VACCINE ADMINISTRATION CODES AND RATES				
Procedure Code	Procedure Code Description	Age	Physician Reimbursement Rate	Physician Extender Reimbursement Rate
0001A	Pfizer-Biontech COVID-19 Vaccine Administration – First Dose	16 yrs. and older	\$16.94	\$13.55
0002A	Pfizer-Biontech COVID-19 Vaccine Administration – Second Dose	16 yrs. and older	\$28.39	\$22.71
0011A	Moderna COVID-19 Vaccine Administration – First Dose	18 yrs. and older	\$16.94	\$13.55
0012A	Moderna COVID-19 Vaccine Administration – Second Dose	18 yrs. and older	\$28.39	\$22.71

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PHARMACY PROVIDERS:					
COVID-19 VACCINE ADMINISTRATION CODES AND RATES					
NDC	Brand Name	Generic Sequence Number (GSN) Name	Age	Dose 1 Admin. Rate	Dose 2 Admin. Rate
59267100001	Pfizer COVID19 Vaccine	COVID-19 VACC, MRNA(PFIZER)/PF (0.3ml/dose)	16 yrs. and older	\$13.55	\$22.71
59267100002	Pfizer COVID19 Vaccine	COVID-19 VACC, MRNA(PFIZER)/PF (0.3ml/dose)	16 yrs. and older	\$13.55	\$22.71
59267100003	Pfizer COVID19 Vaccine	COVID-19 VACC, MRNA(PFIZER)/PF (0.3ml/dose)	16 yrs. and older	\$13.55	\$22.71
80777027310	Moderna COVID19 Vaccine	COVID-19 VACC, MRNA(MODERNA)/PF (0.5ml/dose)	18 yrs. and older	\$13.55	\$22.71
80777027399	Moderna COVID19 Vaccine	COVID-19 VACC, MRNA(MODERNA)/PF (0.5ml/dose)	18 yrs. and older	\$13.55	\$22.71

Administering pharmacists must be identified in the prescriber field using their Florida pharmacist license number (i.e., PSXXXXX).

The following submission clarification codes (SCC) must be entered in the NCPDP field 420-DK:

- Submit a SCC code = 2 to indicate the **first dose** administered.
- Submission Clarification Code = 6 to indicate the **final dose** administered.

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