

MEDICARE PAYMENT *for COVID-19 Vaccination Administration in the Home*

Disclaimer: The contents of this document do not have the force and effect of law and are not meant to bind the public in any way, unless specifically incorporated into a contract. This document is intended only to provide clarity to the public regarding existing requirements under the law.









Effective June 8, 2021, in addition to the current payment amount, Medicare will pay an additional amount of \$35 per dose for administering the Coronavirus disease 2019 (COVID-19) vaccine in the home for certain Medicare patients that have difficulties leaving their homes or are hard-to-reach. This payment also applies when additional doses of the COVID-19 vaccine are administered in the home to certain Medicare patients on or after August 12, 2021.

Medicare will pay the \$35 amount in addition to the standard administration amount (approximately \$40 per COVID-19 vaccine dose), for a total payment of approximately \$75 for a vaccine dose administered in a patient's home. We also geographically adjust the additional amount and administration rate based on where you administer the vaccine.

Examples of Patient Situations for which the Additional Payment Amount Applies¹:

- The patient has a condition that makes them more susceptible to contracting a pandemic disease such as COVID-19.
- The patient is generally unable to leave the home, and if they do leave home it requires a considerable and taxing effort.
- The patient has a disability or faces clinical, socioeconomic, or geographical barriers to getting a COVID-19 vaccine in settings other than their home.
- The patient faces challenges that significantly reduce their ability to get vaccinated outside the home, such as challenges with transportation, communication, or caregiving.

EXAMPLES OF PAYMENT FOR VACCINE ADMINISTRATION IN DIFFERENT LOCATIONS

Location	Payment for vaccine administration	Payment for additional in-home rate	Expected Patient Cost-Sharing
 A private residence	✓	✓	No Charge to Patient
 Temporary lodging (for example, a hotel or motel, campground, hostel, or homeless shelter)	✓	✓	No Charge to Patient
 An apartment in an apartment complex or a unit in an assisted living facility or group home	✓	✓	No Charge to Patient
 A Medicare patient's home that's made provider-based to a hospital during the COVID-19 public health emergency ²	✓	✓	No Charge to Patient
 Communal space of a multi-unit or communal living arrangement ³	✓	✓	No Charge to Patient
 Inpatient Hospital, Medicare skilled nursing facility ⁴ , or Medicaid nursing facility	✓	X	No Charge to Patient
 Outpatient Hospital, Physician Office, or Clinic	✓	X	No Charge to Patient
 Patient Assisted living facility participating in the CDC's Pharmacy Partnership for Long-Term Care Program ⁵ when their residents are vaccinated through this program	✓	✓	No Charge to Patient

¹You must document the patient's clinical status or the barriers they face to getting the vaccine outside the home. More information is available online in the [Provider Toolkit](#).

²In response to the COVID-19 PHE, CMS issued several [1135 waivers \(PDF\)](#) to let hospitals provide services, including administering vaccines, in temporary expansion sites. CMS doesn't pay for preventive vaccine administration under the Outpatient Prospective Payment System (OPPS) or the Physician Fee Schedule (PFS). So, we pay hospitals to administer COVID-19 vaccines at the same rate even in a non-exception off-campus provider-based department (PBD), including a patient's home that is made provider-based to a hospital during the COVID-19 PHE

³Effective August 24, 2021

⁴CMS will continue to exercise [enforcement discretion](#) to allow Medicare-enrolled immunizers working within their scope of practice and applicable state law to bill directly and receive direct reimbursement from the Medicare program for administering COVID-19 vaccines to Medicare Part A Skilled Nursing Facility residents.

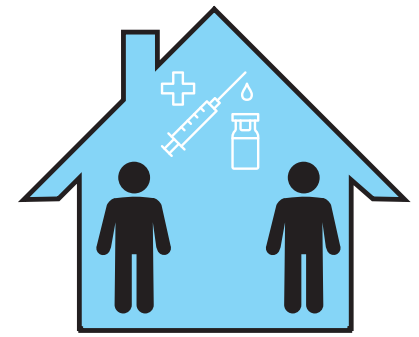
⁵Effective, August 24, 2021, an assisted living facility participating in the [CDC's Pharmacy Partnership for Long-Term Care Program](#) may qualify as a patient's home for the additional in-home payment if the facility meets all other criteria for the additional in-home payment.

What Other Restrictions Apply?

Medicare only pays the additional amount for administering the COVID-19 vaccine in the home if the sole purpose of the visit is to administer a COVID-19 vaccine. Medicare doesn't pay the additional amount if you provide another Medicare service in the same home on the same date. In those situations, Medicare pays approximately \$40 per dose for administering the COVID-19 vaccine.

If you administer the COVID-19 vaccine to more than 1 Medicare patient in a single home on the same day, Medicare pays:

- Approximately \$40 to administer each dose of the COVID-19 vaccine, including additional doses administered on or after August 12, 2021
- For dates of service between June 8, 2021 and August 24, 2021, Medicare pays the additional payment amount of approximately \$35 only once per date of service in that home regardless of how many Medicare patients receive the vaccine
- Effective on August 24, 2021, Medicare pays the additional payment amount (approximately \$35 per dose administered), for up to a maximum of 5 vaccine administration services per home unit or communal space within a single group living location; but only when fewer than 10 Medicare patients receive a COVID-19 vaccine dose on the same day at the same group living location.



MEDICARE PAYS
(2 x \$35) + (2 x \$40) = \$150

For example, if you administer a COVID-19 vaccine on the same date between June 8, 2021 and August 24, 2021 to 2 Medicare patients in the same home, Medicare pays approximately \$115 (\$35 for the in-home vaccine administration rate plus 2 x \$40 for each dose of the COVID-19 vaccine). Effective August 24, 2021, if you administer a dose of the COVID-19 vaccine on the same date to 2 Medicare patients in the same home, Medicare pays approximately \$150 (2 x \$35 for the in-home vaccine administration, plus 2 x \$40 for each dose of the COVID-19 vaccine). More examples can be found online in the [Provider Toolkit](#).

Billing for the Additional Payment for Administering the Vaccine in the Patient's Home

Coding

- **DO** use the appropriate Current Procedural Terminology (CPT) code for the product and dose-specific COVID-19 vaccine administration
- **DO** use the Healthcare Common Procedure Coding System (HCPCS) Level II code M0201 for the additional payment rate for administering the COVID-19 vaccine in the home



Billing

- **DO** bill for the additional in-home payment amount if the sole purpose of the visit is to administer a COVID-19 vaccine.
- **DO** bill for the additional payment amount, for dates of service on or after August 24, 2021, once for each Medicare patient vaccinated in a single home unit or communal space and up to a maximum of 5 times if fewer than 10 Medicare patients are vaccinated on the same day in the same group living location.
- **DON'T** bill for the additional amount more than once for dates of service between June 8, 2021, and August 24, 2021 if you administer the COVID-19 vaccine to more than 1 Medicare patient in a single home on the same day

Roster Billing

- If you submit roster bills for administering the COVID-19 vaccine in the home, you must submit 2 roster bills:
 - A roster bill containing the appropriate CPT code for the product and dose-specific COVID-19 vaccine administration
 - A second roster bill containing the HCPCS Level II code (M0201) for the additional in-home payment amount
- You may submit a single set of roster bills (one containing M0201 and another containing the appropriate CPT code) for multiple Medicare patients who get the COVID-19 vaccine in their individual units of a multi-unit living arrangement. Effective August 24, 2021, when fewer than 10 Medicare patients are vaccinated on the same date at the same group living setting, you may submit a roster bill for M0201 for up to a maximum of 5 Medicare patients in the same home, including for multiple Medicare patients vaccinated in a communal space of the multi-unit living arrangement.

