



State of Louisiana
Louisiana Department of Health
Bureau of Health Services Financing

MEMORANDUM

DATE: March 5, 2021

TO: All Louisiana Medicaid Prescribing Providers and Pharmacists

FROM: Tara A. LeBlanc,
Interim Medicaid Executive Director

A handwritten signature in black ink that reads "Tara A. LeBlanc".

SUBJECT: Louisiana Medicaid Pharmacy Johnson & Johnson (Janssen) COVID-19
Vaccine Coverage

Effective February 27, 2021, in response to the COVID-19 pandemic and Public Health Emergency (PHE), the Louisiana Medicaid Fee for Service (FFS) Pharmacy Program added coverage for the administration of the Johnson & Johnson (Janssen) COVID-19 vaccine. This is in addition to the Pfizer and Moderna COVID-19 vaccine coverage. The COVID-19 vaccine coverage applies to pharmacy claims submitted to FFS Medicaid and Louisiana Medicaid MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and UnitedHealthcare). This provider notice contains information for billing pharmacy claims only, medical billing directives will be released separately.

Age Requirements

According to current prescribing information, the Johnson & Johnson (Janssen) and Moderna COVID-19 vaccine will be covered for recipients 18 years of age and older and 16 years of age and older for the Pfizer product.

Pharmacist Requirements

For COVID-19 vaccine administration reimbursement, the pharmacist shall:

- Be registered with the Louisiana Board of Pharmacy with the "Authority to Administer" vaccines.
- Be registered as a Louisiana Medicaid provider.
- Report certain data elements to the CDC for each COVID-19 dose administered within 24 hours of administration, as a vaccination provider.

- Inform the individual that the administration of an immunization or vaccine is not to be construed as being in lieu of an annual preventive visit with the individual's primary care or family physician.
- Access Louisiana Immunization Network Kids Statewide (LINKS) prior to immunization administration to verify appropriate utilization according to Advisory Committee on Immunization Practices (ACIP) to prevent duplication, unnecessary doses, inappropriate age, etc., if possible.
- Report each immunization to the Louisiana Department of Health, Office of Public Health's LINKS at the time of the immunization or as soon as reasonably practicable, thereafter.
- Report all adverse events observed or which are reported to the pharmacist to the Vaccine Adverse Events Reporting System, or its successor program; and further, the pharmacist shall refer the patient with an adverse event to appropriate medical care.
- Request the name of a patient's primary care provider prior to the administering of any immunization. The pharmacist shall notify the primary care provider, by written or electronic communication, as soon as reasonably possible that the immunization was administered.
- Ensure that pharmacy technicians and/or state-authorized pharmacy interns administering COVID-19 vaccines meet PREP Act qualifications. The qualified pharmacy technicians and/or state-authorized pharmacy interns act under the supervision of a qualified pharmacist. The supervising qualified pharmacist of qualified pharmacy technicians and/or state-authorized interns must comply with CDC, state, and federal requirements for COVID-19 vaccine administration.

COVID-19 Vaccine Billing

The following fields will be required as part of the Point of Sale (POS) claim:

NCPDP Field Number	NCPDP Field Name	Value	Comment
407-D7	Product/Service ID	11 Digit NDC	Vaccine NDC
409-D9	Ingredient Cost	\$0.00 or \$0.01	Bill a value of \$0.00 with a Basis of Cost Determination of 15 or if field cannot accept a zero value, then bill \$0.01 with a Basis of Cost Determination of 1.
420-DK	Submission Clarification Code	Initial Dose=2 and Final Dose=6	Use this field for two dose vaccines only. Do not use this field for single dose COVID-19 vaccine.
423-DN	Basis of Cost Determination	15 or 1	A value of "15" (free product or no associated cost) for the COVID-19 vaccine or if ingredient cost field

			cannot accept \$0.00, then a value of "1" with an ingredient cost of \$0.01.
411-DB	Prescriber ID	Prescriber/Pharmacist Medicaid Number or NPI	Enter the Prescriber's LA Medicaid Issued Number or NPI OR in the Absence of a Prescription, the Vaccinating Pharmacist's LA Medicaid Issued Number or NPI
419-DJ	Prescription Origin Code	5	Pharmacy
438-E3	Incentive Amount Submitted	Administration Fee	Amount Charged for Vaccine Administration
473-7E	DUR/PPS Code Counter	1	Number of Occurrences
440-E5	Professional Service Code	MA	Medication Administration
442-E7	Quantity Dispensed	Value dependent on vaccine dose	Examples: Johnson & Johnson (Janssen)=0.5, Pfizer=0.3, and Moderna=0.5
444-E9	Provider ID	Pharmacist Medicaid Number or NPI	The Vaccinating Pharmacist's LA Medicaid Issued Number or NPI
465-EY	Provider ID Qualifier	05 07	NPI State Issued

COVID-19 Vaccine Reimbursement

The federal government covers the cost of the COVID-19 vaccine. Therefore, Louisiana Medicaid will reimburse enrolled pharmacies for the administration fee only for COVID-19 vaccines. The FFS administration fee for a single dose vaccine, such as Johnson & Johnson (Janssen) COVID-19 vaccine is \$26.68. The FFS administration fee for a two dose series COVID-19 vaccine is \$15.92 for the first injection, then \$26.68 for the second injection. No dispensing fee shall be reimbursed, only the administration fee. Currently, the vaccine administration for Johnson & Johnson (Janssen), Pfizer, and Moderna COVID-19 are covered by the Louisiana Medicaid pharmacy program. After administration of the first dose, the second dose of the COVID-19 vaccine may be filled as early as day 17 for the Pfizer product and day 24 for the Moderna product. Additional vaccines will be covered as they receive Emergency Use Authorization (EUA).

Pharmacy claims for COVID-19 vaccines will bypass FFS Point of Sale edits for the four prescription monthly limit and pharmacy Lock-In.

COVID-19 Vaccine Copay

There will be no copay assessed on COVID-19 vaccine claims. Third party billing policy will apply and Medicaid will be the payer of last resort.

If you have questions about the content of this memo, you may contact the FFS pharmacy help desk by phone at (800) 437-9101.

If you have questions about pharmacy claims billing, you may contact the appropriate health plan at their pharmacy help desk listed in the chart below.

Health Plan	Pharmacy Help Desk	Pharmacy Help Desk Phone Number
Aetna	CVS Health	(855) 364-2977
AmeriHealth Caritas	PerformRx	(800) 684-5502
Fee for Service	Gainwell Technologies	(800) 648-0790
Healthy Blue	CVS	(833) 236-6194
Louisiana Healthcare Connections	CVS Caremark	(800) 311-0543
UnitedHealthcare	Optum Rx	(866) 328-3108

Please forward this notice to other providers to assist with notification. Your continued cooperation and support of the Louisiana Medicaid Program efforts to coordinate care and improve health are greatly appreciated.

TL/MBW/GJS

c: Healthy Louisiana Plans
Melwyn B. Wendt
Gainwell Technologies