

Medicare Reimbursement of COVID-19 Vaccines and Antibody Treatment

Effective January 1, 2022, MVP Health Care® (MVP) will reimburse Participating Providers and out-of-network providers for the cost of COVID-19 vaccines and their administration, as well as antibody treatment, to MVP Members enrolled in Medicare Advantage in 2022. Providers should no longer submit claims to Medicare Fee-for-Service.

Claims for all COVID-19 vaccines and antibody treatment administered on or after January 1, 2022 should be submitted to MVP through the usual process. When COVID-19 vaccine doses are provided by the federal government without charge, providers should only bill for the vaccine administration using the published CPT codes listed below. MVP will reimburse providers for administration of the COVID-19 vaccine according to the following approved CPT codes:

CPT Code	Description
0001A	Pfizer-BioNtech Immunization Administration, first dose
0002A	Pfizer-BioNtech Immunization Administration, second dose
0003A	Pfizer-BioNtech Immunization Administration, third dose
0004A	Pfizer-BioNtech Immunization Administration, booster dose
0011A	Moderna Immunization Administration, first dose
0012A	Moderna Immunization Administration, second dose
0013A	Moderna Immunization Administration, third dose
0031A	Janssen (Johnson & Johnson) Immunization Administration, first dose
0034A	Janssen (Johnson & Johnson) Immunization Administration, booster dose
0051A	Pfizer-BioNTech Immunization Administration, preservative free, first dose
0052A	Pfizer-BioNTech Immunization Administration, preservative free, second dose
0053A	Pfizer-BioNTech Immunization Administration, preservative free, third dose
0054A	Pfizer-BioNTech Immunization Administration, preservative free, booster dose

Vaccine codes should not be included on claims when the vaccines are free of charge:

CPT Code	Description
91300	Pfizer-BioNtech vaccine
91301	Moderna vaccine
91303	Janssen (Johnson & Johnson) vaccine
91305	Pfizer-BioNTech, preservative free

Antibody Treatment Codes

CPT Code	Description
M0240	Intravenous infusion or subcutaneous injection, casirivimab and imdevimab includes infusion or injection, and post administration monitoring, subsequent repeat doses
M0241	Intravenous infusion or subcutaneous injection, casirivimab and imdevimab includes infusion or injection, and post administration monitoring in the home or residence, this

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	includes a beneficiary's home that has been made provider-based to the hospital during the COVID-19 public health emergency, subsequent repeat doses
M0243	Intravenous infusion or subcutaneous injection, casirivimab and imdevimab includes infusion or injection, and post administration monitoring
M0244	Intravenous infusion or subcutaneous injection, casirivimab and imdevimab includes infusion or injection, and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the COVID-19 public health emergency
M0245	intravenous infusion, bamlanivimab and etesevimab, includes infusion and post administration monitoring
M0246	Intravenous infusion, bamlanivimab and etesevimab, includes infusion and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the COVID -19 public health emergency
M0247	Intravenous infusion, sotrovimab, includes infusion and post administration monitoring
M0248	Intravenous infusion, sotrovimab, includes infusion and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the COVID -19 public health emergency
M0249	Intravenous infusion, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with COVID -19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, first dose
M0250	Intravenous infusion, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with COVID -19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, second dose
Q0240	Injection, casirivimab and imdevimab, 600 mg
Q0243	Injection, casirivimab and imdevimab, 2400 mg
Q0244	Injection, casirivimab and imdevimab, 1200 mg
Q0245	Injection, bamlanivimab and etesevimab, 2100 mg
Q0247	Injection, sotrovimab, 500 mg
Q0249	Injection, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with COVID -19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, 1 mg

Note: Codes M0249-50 and Q0249 should be used for inpatient only.

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