



MVP Medicaid Pharmacy Billing for COVID-19 Testing

Billing is not yet live, please check back when it is available.

Network Participation

The below tests and specimen collection are covered in full when administered at a pharmacy in the participating pharmacy network.

For network pharmacies wishing to provide COVID-19 testing services for MVP Health Care members, details regarding network participation, including claims submission requirements, were sent to Caremark-participating New York pharmacies on 07/21/2020. For a pharmacy that is a chain pharmacy or a member of a PSAO (Pharmacy Services Administrative Organization), your chain headquarters or PSAO would have received the notification. Please contact them for additional information. If you are an independent pharmacy and have not received this information, contact Caremark at **1-866-488-4708**.

Claim Submission Information

Please use the information below to properly submit COVID-19 Testing claims through the pharmacy.

For COVID-19 Specimen Collection Only

Example NDC/UPC codes that may be used to cover all generic specimen collection only

- CVS Caremark UPC: 60004-0417-80
- NCPDP NDC: 99999-0992-11

Submit the following:

Field Number	NCPDP Field Name	Required Value for Processing
440-E5	DUR/PPS Segment Professional Service Code Field	MA (Medication Administration)
409-D9	Pricing Segment Ingredient Cost Submitted	> \$0.00
438-E3	Pricing Segment Incentive Amount Submitted Field	≥ \$0.01 (Submit Administration Fee)
426-DQ	Pricing Segment Usual and Customary Charge	≥ \$ in Incentive Amount Submitted
436-E1	Product/Service ID Qualifier	Enter "03", NDC
407-D7	Product/Service ID	Example UPC for specimen testing: 60004-0417-80
442-E7	Quantity Dispensed	1
405-D5	Day Supply	1
473-7E	DUR/PPS Code Counter	1



For Clinical Laboratory Improvement Amendments (CLIA) waived COVID-19 testing
 Example NDC/UPC codes eligible for reimbursement and are not limited to the following below.
 Only NDC's associated with the U.S FDA Emergency-Use- Authorization will be accepted.

- Abbott ID NOW COVID-19 In Vitro Kit; NDC: 11877-0011-26
- Sofia2 SARS Antigen FIA In Vitro Kit; NDC: 14613-0339-08

Submit the following:

Field Number	NCPDP Field Name	Required Value for Processing
439-E4	DUR/PPS Segment Reason for Service Code	PP (Plan Protocol)
440-E5	DUR/PPS Segment Professional Service Code	PT (Perform laboratory test)
441-E6	DUR/PPS Segment Result of Service Code	00 (Not Specified)
438-E3	Pricing Segment Incentive Amount Submitted Field	≥ \$0.01 (Submit Administration Fee)
436-E1	Product/Service ID Qualifier	Enter "03", NDC
407-D7	Product/Service ID	Enter an allowable NDC for the NY CLIA-Waived COVID-19 testing
442-E7	Quantity Dispensed	1
405-D5	Day Supply	1
473-7E	DUR/PPS Code Counter	1

If you have any questions, please call the Pharmacy Help Desk at **1-800-364-6331**.