



# Alabama Medicaid Pharmacist

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A Service of Alabama Medicaid

## PDL Update

Effective April 1, 2021, the Alabama Medicaid Agency will update the Preferred Drug List (PDL) to reflect the recent Pharmacy and Therapeutics (P&T) Committee recommendations as well as quarterly updates. The updates are listed below:

PDL Additions
No additions
PDL Deletions
Omnitrope—Growth Hormone Agents
Pimecrolimus Cream—Skin and Mucous Membrane Agents- Miscellaneous

Inside This Issue	
PDL Update	Page 1
COVID-19 Vaccination Information	Page 2—3
COVID-19 Updates	Page 4
April 1st PDL Updates	Page 5



Please fax all prior authorization and override requests *directly* to Health Information Designs at 800-748-0116. If you have questions, please call 800-748-0130 to speak with a call center representative.

Health Information Designs (HID)  
 Medicaid Pharmacy Administrative Services  
 PO Box 3210  
 Auburn, AL 36832-3210



## Reimbursement Increase for COVID-19 Vaccine Administration

Information in this ALERT is in coordination with the Provider ALERTs published December 1, 2020, December 29, 2020, and January 11, 2021.

Effective March 15, 2021, and continuing only during that time as described by the American Rescue Plan Act of 2021 that provides for increased FMAP for administration of the COVID-19 Vaccine , unless ended sooner by the Alabama Medicaid Agency in a subsequent ALERT, Medicaid will increase reimbursement for the following procedure codes for administration of the **Pfizer** COVID-19 vaccine for recipients 16 years of age and older:

Administration CPT code	Short Description	Medicaid Rate
0001A	1st dose, 30mcg/0.3mL	\$40.00
0002A	2nd dose, 30mcg/0.3mL	\$40.00

Effective March 15, 2021, and continuing only during that time as described by the American Rescue Plan Act of 2021 that provides for increased FMAP for administration of the COVID-19 Vaccine , unless ended sooner by the Alabama Medicaid Agency in a subsequent ALERT, Medicaid will increase reimbursement for the following procedure codes for administration of the **Moderna** COVID-19 vaccine for recipients 16 years of age and older:

Administration CPT code	Short Description	Medicaid Rate
0011A	1st dose, 100mcg/0.5mL	\$40.00
0012A	2nd dose, 100mcg/0.5mL	\$40.00

Providers may resubmit claims for date of service on or after March 15, 2021 which were reimbursed at the lower rate. Medicaid enrolled providers should not bill for the vaccine if using federally allocated vaccines. Providers must follow state and federal laws and regulations regarding administration of vaccines. Providers with billing questions should contact the Gainwell Technology Provider Assistance Center at 1-800-688-7989.

To receive, administer, and report COVID-19 vaccines, healthcare providers must enroll in the ADPH's ImmPRINT COVID-19 Vaccination Program. Follow the steps in the [ImmPrint Registration Roadmap](#) to enroll.

Resources for providers related to COVID-19 vaccines:

- [COVID-19 Vaccination Provider Support](#)
- [CDC Clinical Resources for COVID-19 Vaccine](#)
- [CDC COVID-19 Vaccination Recommendations](#)

For provider information regarding COVID-19 vaccinations from Alabama Medicaid, please visit: [https://medicaid.alabama.gov/content/7.0\\_Providers/7.11\\_COVID-19\\_Vaccine\\_Providers.aspx](https://medicaid.alabama.gov/content/7.0_Providers/7.11_COVID-19_Vaccine_Providers.aspx)

## New Coverage for Administration of COVID-19 Vaccine (for Non-Pharmacy Providers)

Information in this ALERT is in coordination with the Provider ALERTs published December 1, 2020, January 11, 2021, and March 18 2021.

Effective for dates of service on or after February 27, 2021, Medicaid covers the following procedure code for administration of the Janssen COVID-19 vaccine for recipients 18 years of age and older:

### NCPDP Codes and Allowed Amounts for COVID-19 Vaccine Administration

Administration CPT Code	Short Description	Medicaid Rate
0031A	ADM SARSCOV2 VAC AD26 .5mL	\$28.39

Effective for dates of service on or after March 15, 2021, and continuing only during that time as described by the American Rescue Plan Act of 2021 that provides for increased FMAP for administration of the COVID-19 Vaccine, unless ended sooner by the Alabama Medicaid Agency in subsequent ALERT, the Medicaid rate for procedure code 0031A is \$40.00

Medicaid enrolled providers should not bill for the vaccine if using federally allocated vaccine.

To participate in the administration of COVID-19 vaccine, Alabama providers must enroll in the Alabama Department of Public Health's (ADPH) ImmPRINT COVID-19 Vaccination Program. Follow the steps in the [ImmPRINT Registration Roadmap](#) to enroll.

Providers must follow state and federal laws and regulations regarding administration of the vaccine.

State and federal standing order guidelines for products granted Emergency Use Authorization (EUA) must be followed. Standing order guidelines can be found at the links below.

- Janssen Approval for EUA: <https://www.fda.gov/media/146303/download>
- COVID-19 Vaccines and Monoclonal Antibodies from CMS: <https://www.cms.gov/medicare/medicare-part-b-drug-average-sales-price/covid-19-vaccines-and-mono-clonal-antibodies>
- COVID-19 Vaccination Support: <https://www.alabamapublichealth.gov/immunization/covid-vaccine-administration.html>

Providers with billing questions should contact the Gainwell Technology Provider Assistance Center at 1-800-688-7989.

## COVID-19 Vaccine Information for Pharmacy Billing

Alabama Medicaid will allow reimbursement to pharmacies for a vaccine administration fee to Medicaid providers who utilize federally-allocated COVID-19 vaccines. For claims effective March 15, 2021 and after, the reimbursement rate for the administration fee is \$40.00 per dose, and will continue only during that time as described by the American Rescue Plan Act of 2021 that provides for increased FMAP for administration of the COVID-19 Vaccine unless ended sooner by the Alabama Medicaid Agency in a subsequent ALERT.

- Pharmacies will bill vaccines through an electronic NCPDP claim.
  - Submit \$0.00 or \$0.01 for vaccine provided at no cost from the federal government.
  - Submit each vaccine with the specific approved vaccine NDC for an eligible recipient.
  - Submit the administration fee in the Incentive Amount Submitted field (NCPDP Field 438-E3) on the same claim as the vaccine (i.e., ingredient).
  - For claims on/after March 15, 2021, the administration fee is \$40.00 per dose.
  - Vaccines must be administered according to approved labeling for appropriate ages and dosing interval.

### NCPDP Codes and Allowed Amounts for COVID-19 Vaccine Administration

	Submission Clarification Code (440-E5)	Incentive Amount (Administration Fee 438-E3)	Ingredient Cost (409—D9)
<b>Two-Dose Vaccines</b>			
First Dose	Not needed/blank	\$40.00	\$0.00 or \$0.01
Second Dose	Not needed/blank	\$40.00	\$0.00 or \$0.01
<b>Single-Dose Vaccines</b>			
Single Dose	Not needed/blank	\$40.00	\$0.00 or \$0.01

- To participate in the administration of COVID-19 vaccine, Alabama providers must enroll in the Alabama Department of Public Health’s (ADPH) ImmPRINT COVID-19 Vaccination Program. Follow the steps in the ImmPRINT Registration Roadmap to enroll.
- Pharmacies must follow state and federal laws and regulations regarding administration of vaccines.
- State and federal standing order guidelines for products granted Emergency Use Authorization (EUA) must be followed. Standing order guidelines can be found at the links below.
  - Moderna: [https://www.alabamapublichealth.gov/immunization/assets/covid19\\_moderna\\_standingorders.pdf](https://www.alabamapublichealth.gov/immunization/assets/covid19_moderna_standingorders.pdf)
  - Pfizer/BioNTech: [https://www.alabamapublichealth.gov/immunization/assets/covid19\\_pfizervaccine\\_standingorders.pdf](https://www.alabamapublichealth.gov/immunization/assets/covid19_pfizervaccine_standingorders.pdf)
- Pharmacy providers with questions regarding vaccine administration may call the Alabama Medicaid Pharmacy Program at (334) 242-5050.

## April 1st Pharmacy Changes

**To: Pharmacies, Physicians, Physicians Assistants, Nurse Practitioners, Oral Surgeons, Optometrists, Dentists, FQHCs, RHCs, Mental Health Service Providers and Nursing Homes**

**Effective April 1, 2021, the Alabama Medicaid Agency will:**

1. **Require a Prior Authorization (PA) for pimecrolimus cream (generic Elidel cream). Brand Elidel cream will remain preferred.**
2. **Require Elidel cream to be billed with a Dispense as Written (DAW) Code of 9: DAW Code of 9 indicates the following: Substitution Allowed by Prescriber but Plan Requests Brand. This value is used when the prescriber has indicated, in a manner specified by prevailing law, that generic substitution is permitted, but the Plan requests the brand product to be dispensed.**
3. **Update the PDL to reflect the quarterly updates. The updates are listed below:**

PDL Additions
No additions
PDL Deletions
Omnitrope—Growth Hormone Agents
Pimecrolimus Cream—Skin and Mucous Membrane Agents-Miscellaneous

For additional PDL and coverage information, visit our drug look-up site at <https://www.medicaid.alabamaservices.org/ALPortal/NDC%20Look%20Up/tabId/39/Default.aspx>.

The Prior Authorization (PA) request form and criteria booklet should be utilized by the prescriber or the dispensing pharmacy when requesting a PA. The PA request form can be completed and submitted electronically on the Agency's website at [https://medicaid.alabama.gov/content/9.0 Resources/9.4 Forms Library/9.4.13 Pharmacy Forms.aspx](https://medicaid.alabama.gov/content/9.0%20Resources/9.4%20Forms%20Library/9.4.13%20Pharmacy%20Forms.aspx). Providers requesting Pas by mail or fax should send requests to:

**Health Information Designs (HID)**  
**Medicaid Pharmacy Administrative Services**  
**P.O.Box 3210**  
**Auburn, AL 36832-3210**  
**Fax: 1-800-748-0116**  
**Phone: 1-800-748-0130**

Incomplete PA requests or those failing to meet Medicaid criteria will be denied. If the prescriber believes medical justification should be considered, the prescriber must document this on the form or submit a written letter of medical justification along with the PA form to HID. Additional information may be requested. Staff physicians will review this information. Policy questions concerning provider notice should be directed to the Pharmacy Program at (334) 242-5050. Questions regarding PA procedures should be directed to the HID help desk at 1-800-748-0130.