

Provider Alert



COVID-19 Vaccine Counseling

In accordance with Medicaid COVID-19 vaccine regulations, Healthfirst will reimburse eligible providers for vaccine counseling rendered to unvaccinated Medicaid and HARP members/ enrollees during dates of service on or after December 1, 2021. For providers located in New York City, this coverage essentially replaces the Vaccine Outreach and Counseling Program (VOCP) Healthfirst launched in collaboration with the New York City Department of Mental Hygiene in the fall of 2021, and which ended on December 31, 2021. If you provided services under the VOCP and have not yet billed for them, please bill in accordance with the requirements of the VOCP.

Please see below for a summary of coverage requirements. For updated coverage criteria for COVID-19 vaccine counseling, visit **health.ny.gov**.

Coverage Requirements

The provider types listed below are eligible to bill for COVID-19 vaccine counseling for up to four pre-decisional counseling visits for each dose recommended by the CDC, including booster doses, up to a total of 12 visits per year. Reimbursement for COVID-19 vaccine counseling is limited to unvaccinated individuals who have neither received an initial/first dose of the COVID-19 vaccine nor have an appointment to receive an initial/first dose of the COVID-19 vaccine but are eligible to receive a COVID-19 vaccine.

- Physicians
- Nurse Practitioners (NPs)
- **■** Licensed Midwives
- Pharmacists
- Ambulatory Billing Article 28 Clinics
- **■** Federally Qualified Health Centers (FQHCs)
- Other qualified rate-based providers

Provider Incentive and Billing Information

Eligible providers, as described above, are qualified to receive **\$25 per counseling episode for each unvaccinated member they counsel** on the importance of the COVID-19 vaccine. Providers must bill with CPT Code 96160, **with modifier ET**, to qualify for reimbursement. Healthfirst suggests the use of ICD-10 Code Z71.89. This code is not to be used when counseling is given during an evaluation and management visit.

Documentation Requirements

Providers are expected to document in the member's medical records the method used to counsel the member, confirmation of the member's vaccination status, whether the member has an appointment scheduled to receive their first dose, and reasons expressed by the patient, parent, or caregiver for vaccine hesitancy. Qualified providers may provide up to four pre-decisional counseling visits for each dose recommended by the CDC, including booster doses, up to a total of 12 visits per year. Members receiving counseling on an initial dose or subsequent dose, including boosters, must not have already received the dose and must not already have an appointment to receive the dose. Content of counseling must include information provided to the member on vaccine safety and efficacy, along with assistance offered to the member on how to get a COVID-19 vaccine.

Questions?

If you have any questions, contact your Network Account Manager, or call Provider Services at **1-888-801-1660**, Monday to Friday, 8:30am-5:30pm. We thank you for your partnership in keeping our members safe and healthy.

Updated August 2022