



Division of Medical Services

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**DMS OFFICIAL NOTICE
ON-008-21**

TO: Health Care Providers – All Providers

DATE: August 6, 2021

SUBJECT: Temporary Increase in Arkansas Medicaid COVID-19 Vaccination Administration Rate

I. General Information

Due to the continuing Public Health Emergency (PHE), Arkansas Medicaid, in conjunction with the Office of the Governor of the State of Arkansas, has authorized a temporary increase in the reimbursement rate for administration of COVID-19 vaccines. This temporary increase will be effective for sixty (60) days. The increase applies to both first (1st) and second (2nd) vaccination administration (if Pfizer or Moderna), or a single shot of the Johnson & Johnson vaccination.

The correct procedure codes that must be used to obtain the temporary increase in administration rates are set out in the tables in this Official Notice.

The effective dates for the temporary vaccination administration rate increase are:

Beginning Date: Friday, August 13, 2021
Ending Date: Monday, October 11, 2021

II. Providers

The following Arkansas Medicaid providers will continue to be authorized to administer COVID-19 vaccinations:

- Physicians
- Advanced Practice Registered Nurses (APRN) which include the following:
 - Certified Nurse Practitioner
 - Certified Registered Nurse Anesthetist (CRNA)
 - Certified Nurse Midwife (CNM)
 - Clinical Nurse Specialist
- Federally-Qualified Health Centers (FQHC)
- Rural Health Centers (RHC)
- Pharmacies that are enrolled to provide vaccines
- Arkansas Department of Health (ADH)
- Hospitals (in the outpatient setting)

III. Record Keeping

All providers listed herein should maintain accurate records for auditing purposes.

IV. Payment of Claims

Providers will continue to be allowed to file claims with the temporary administration rate increase for three-hundred and sixty-five (365) days from the DOS (Date of Service). The DOS must be during the above 60-day timeframe, and the DOS must be the date that the provider administers the vaccination.

V. Procedure Codes

Providers must use the following procedure codes for **COVID-19 VACCINE ADMINISTRATION ONLY**. The temporary rate increase as shown below applies **ONLY** during the sixty (60)-day timeframe set out above for administration of COVID-19 vaccinations:

Procedure Code	Description	Manufacturer	Temporary Administration Rate
0001A	IMMUNIZATION ADMINISTRATION BY INTRAMUSCULAR INJECTION OF SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) VACCINE, MRNA-LNP, SPIKE PROTEIN, PRESERVATIVE FREE, 30 MCG/0.3ML DOSAGE, DILUENT RECONSTITUTED; FIRST DOSE	Vaccine Admin (Pfizer)	\$100.00
0002A	IMMUNIZATION ADMINISTRATION BY INTRAMUSCULAR INJECTION OF SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) VACCINE, MRNA-LNP, SPIKE PROTEIN, PRESERVATIVE FREE, 30 MCG/0.3ML DOSAGE, DILUENT RECONSTITUTED; SECOND DOSE	Vaccine Admin (Pfizer)	\$100.00
0011A	IMMUNIZATION ADMINISTRATION BY INTRAMUSCULAR INJECTION OF SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) VACCINE, MRNA-LNP, SPIKE PROTEIN, PRESERVATIVE FREE, 100 MCG/0.5ML DOSAGE; FIRST DOSE	Vaccine Admin (Moderna)	\$100.00
0012A	IMMUNIZATION ADMINISTRATION BY INTRAMUSCULAR INJECTION OF SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) VACCINE, MRNA-LNP, SPIKE PROTEIN, PRESERVATIVE FREE, 100 MCG/0.5ML DOSAGE; SECOND DOSE	Vaccine Admin (Moderna)	\$100.00
0031A	IMMUNIZATION ADMINISTRATION BY INTRAMUSCULAR INJECTION OF SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) VACCINE, DNA, SPIKE PROTEIN, ADENOVIRUS TYPE 26 (AD26) VECTOR, PRESERVATIVE FREE, 5X10 ¹⁰ VIRAL PARTICLES/0.5ML DOSAGE, SINGLE DOSE	Vaccine Admin (Johnson & Johnson)	\$100.00

The procedure codes and rates for the vaccination medication alone will remain the same:

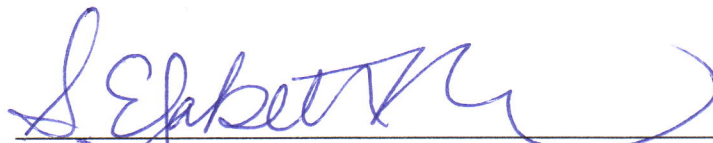
Procedure Code	Description	Manufacturer	Rate
91300	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) VACCINE, MRNA-LNP, SPIKE PROTEIN, PRESERVATIVE FREE, 30 MCG/0.3ML DOSAGE, DILUENT RECONSTITUTED, FOR INTRAMUSCULAR USE	Vaccine Medication (Pfizer)	\$0.01
91301	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) VACCINE, MRNA-LNP, SPIKE PROTEIN, PRESERVATIVE FREE, 100 MCG/0.5ML DOSAGE, FOR INTRAMUSCULAR USE	Vaccine Medication (Moderna)	\$0.01
91303	SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) VACCINE, DNA, SPIKE PROTEIN, ADENOVIRUS TYPE 26 (AD26) VECTOR, PRESERVATIVE FREE, 5X10 ¹⁰ VIRAL PARTICLES/0.5ML DOSAGE, FOR INTRAMUSCULAR USE	Vaccine Medication (Johnson & Johnson)	\$0.01

If you have questions regarding this notice, please contact the Provider Assistance Center at 1-800-457-4454 toll-free or locally at (501) 376-2211.

If you need this material in an alternative format, such as large print, please contact the Office of Rules Promulgation at (501) 396-6428.

Arkansas Medicaid provider manuals (including update transmittals), official notices, notices of rule making, and remittance advice (RA) messages are available for download from the [Division of Medical Services website](#).

Thank you for your participation in the Arkansas Medicaid Program.



Elizabeth Pitman
Director