

# Question and Answer for December 7th, 2021

## Partner Call

### Billing Presentation

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Question: DCYF requires that youth in foster care have a parental consent form signed, or have a provider consultation, and then the Visit Summary can be used to get a court order to get the COVID vaccine. Do you know if providers need to bill correctly under the Emergency Order to get paid? Or can it fall under telehealth or an office visit?

**HCA Answer:** In general, providers need to bill correctly under the Emergency Order or the Medicaid Covid Vaccine Counseling Policy. However, we may not be understanding the nuances of this question. Please email [HCAAH\\_COVID19@hca.wa.gov](mailto:HCAAH_COVID19@hca.wa.gov).

Question: What specific documentation is needed to show that provider checked the patient's vaccination status?

**HCA Answer:** Documentation in the patient record showing one of the methods noted in the policy was used to determine vaccination status (policy excerpt below).

*The provider must check a client's vaccination status in the provider's medical records and the Department of Health WAIS database. Immunization registry checks may be performed within a reasonable timeframe of the vaccine counseling visit to accommodate for data lags. If there is no indication that the patient is vaccinated, or there is indication that the patient is only partially vaccinated, the provider can reach out to the client for a counseling visit. In the event immunization registry checks are infeasible, client attestation to vaccination status is acceptable.*

**OIC Answer:** OIC's emergency order does not address this question. If a provider has concerns regarding the reasonableness of any documentation requirement, they can submit a [complaint](#) to OIC which we can investigate.

Question: For an FQHC, would there be additional payments for this counseling service, or would it roll up into the encounter rate?

**HCA Answer:** COVID-19 counseling codes 99211-99215, 99401, and 99441-99443 are encounter eligible for FQHCs when billed by an encounter eligible provider as outlined in WACs 182-548-1300(1) and 182-549-1300(1). The agency pays for one encounter per day for FQHCs and RHCs unless there are separate visits with separate diagnosis; or the visits are performed by providers with different specialties. Registered nurses and medical assistants are not encounter eligible provider types in the RHC and FQHC setting.

**OIC Answer:** FQHC encounter rates do not apply to private health plans.

Question: Do you think pharmacist will be included in this vaccine counseling service since pharmacist are more accessible than many providers?

**HCA Answer:** HCA is working through potential avenues for including pharmacies in vaccine counseling services. Currently Medicaid does not cover vaccine counseling by pharmacists.

**OIC Answer:** OIC's emergency order does not include coverage of vaccine counseling by pharmacists.

Question: Is reimbursement the same whether it is provided by a Physician, MA, or Nurse?

**HCA Answer:** Please follow AMA CPT® guidelines. The reimbursement rates are set up by code, not provider type. 99211 is the only code available to Nurse or MA in terms of the COVID vaccine policy. This code still requires a servicing provider NPI.

**OIC Answer:** OIC's emergency order does not address reimbursement amounts for the vaccine counseling included in the order. That would be governed by the provider's contract with the insurer.

Question: Does that mean previous submission for 99401 that were denied, and will be retroactively covered as of 12/3/21?

**HCA Answer:** HCA plans to update the policy to make cover claims for 99401 retroactive to 6/22/21 (when the other vaccine counseling codes were originally activated).

**OIC Answer:** Under OIC's emergency order, carriers must begin accepting claims from participating medical providers submitted under the Order by July 1, 2021, for dates of service beginning on June 24, 2021.

Question: Is there a limit of how long you have to counsel before you can bill with these codes?

**HCA Answer:** Please follow AMA CPT® guidelines, timeframes are alluded to in the CPT® code details.

**OIC Answer:** This is not addressed directly in OIC's emergency order. The CPT codes listed in the order may include references to the duration of the counseling. For example, CPT 99401 references sessions lasting roughly 15 minutes.

Question: For an FQHC can we bill a nurse or MA for counseling services? We aren't able to normally bill a 99211.

**HCA Answer:** COVID-19 counseling codes 99211-99215, 99401, and 99441-99443 are encounter eligible for FQHCs when billed by an encounter eligible provider as outlined in WACs 182-548-1300(1) and 182-549-1300(1). The agency pays for one encounter per day for FQHCs and RHCs unless there are separate visits with separate diagnosis; or the visits are performed by providers with different specialties. Registered nurses and medical assistants are not encounter eligible provider types in the RHC and FQHC setting.

**OIC Answer:** Not addressed in OIC's emergency order.

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Question: What is the CR modifier for?

**HCA Answer:** The CR modifier is used for multiple things during the PHE. For this code The CR modifier, along with the ICD 10 diagnosis code Z71.89 help HCA to differentiate when the codes are being used for COVID vaccine counseling. IF this question is about telehealth (audio-only) we are using the CR modifier to denote the service is provided via audio-only.

**OIC Answer:** OIC's emergency order does not require use of particular CR modifiers.

Question: What is being done to enforce reimbursement from insurance - lately we have noticed that Premera has been sending some of our checks for admin fee to the patients as co-signee. We do not understand why.

**OIC Answer:** OIC's emergency order requires payment for vaccine counseling by "participating medical providers." This means providers that have a contract with a carrier/health plan. We think this question may be referring to billing by nonparticipating providers. The provider can submit a complaint to OIC with its question regarding Premera payment practices.

Question: Why Z71.89 and not Z71.85 for counseling?

**HCA Answer:** HCA may add Z71.85 in the future as an additional diagnosis code option for vaccine counseling. The decision was made to continue using Z71.89 since it is already associated in the HCA system with COVID vaccine counseling.

**OIC Answer:** The OIC emergency order directed the use of Z71.89 following consultation with carriers so that we could have consistent coding/billing across all fully insured commercial health plans.

Question: For an FQHC, would we be reimbursed encounter rate for vaccine to homebound clients. Likely it would be by RNs or MAs

**HCA Answer:** COVID-19 counseling codes 99211-99215, 99401, and 99441-99443 are encounter eligible for FQHCs and RHCs when billed by an encounter eligible provider as outlined in WACs 182-548-1300(1) and 182-549-1300(1). The agency pays for one encounter per day for FQHCs and RHCs unless there are separate visits with separate diagnosis; or the visits are performed by providers with different specialties. Registered nurses and medical assistants are not encounter eligible provider types in the RHC and FQHC setting. Please email [HCAAH\\_COVID19@hca.wa.gov](mailto:HCAAH_COVID19@hca.wa.gov).

Question: Vaccine Counseling Billing is an important tool for encouraging folks to start their prime series. Further down the road there will need to be an effort to encourage booster participation to maintain population immunity. Is there any thinking around expanding coverage to include counselling for boosters?

**HCA Answer:** The policy will continue to evolve. HCA and OIC will be meeting to discuss the potential for including boosters.

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Question: Will you have a grace period for the POS10?

**HCA Answer:** HCA is implementing the new POS 10 in the ProviderOne system on 1/1/22. However, HCA is aware that providers may need some time to configure their systems to include the new POS. Providers may begin billing using POS 10 on 1/1/22, but HCA has extended the effective date to 4/4/22.

Question: I am assuming that drive thru vaccine sites cannot be reimbursed even though the patients are counseled?

**HCA Answer:** Even though patients do receive some form of counseling at a drive-thru vaccine site, it is assumed they are driving through the site for the purposes of receiving the vaccine and do not require vaccine counseling on that day to receive the vaccine. Additionally, vaccine counseling requires an established relationship with the patient, which is not as likely at drive-thru site.

**OIC Answer:** Vaccine counseling is reimbursable under OIC emergency order only if all of the conditions listed in the order are met, including that the participating/in-network medical provider has an established relationship with the patient.

Question: I would like to confirm that 99401 is considered a FQHC encounter during this time

**HCA Answer:** 99401 is an FQHC encounter eligible service when billed by an eligible provider.

Question: What's the appropriate coding guideline if patient's first dose is J&J and received Moderna for booster? Should we use 0013A to bill for it?

**HCA Answer:** Use the vaccine administration code that correlates with the vaccine administered on that day. If Moderna is administered as a booster (even though J&J was the first dose), use the Moderna booster administration code 0064A. (0013A is associated with the 3<sup>rd</sup> dose of Moderna, which is different than the low dose booster)

Question: Is there coverage for these codes when with a preventative medicine visit?

**HCA Answer:** If the patient is being seen for a preventative medicine visit and COVID vaccine counseling increases the time of the visit, the provider can use an E/M code in the series that reflects time spent. It is also possible to bill 99401 with modifier 25 on the same day as an EM code, if COVID vaccine counseling is provided.

**OIC Answer:** Under OIC's emergency order, vaccine counseling can be billed in addition to the preventive visit, as long as the conditions listed in the emergency order are met.

Question: Will the CR Modifier AND the FQ Modifier be required as of 1/1/22?

**HCA Answer:** If the CR modifier was being used to denote that the services were rendered via an audio-only modality, the modifier will change from CR to FQ on 1/1/22 (grace period until beginning of April). For all other non-audio-only visits the CR modifier will still be required.

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Question: Are we able to bill a vaccine counseling code 99401 with a vaccine admin on the same day? Would we bill modifier 25 on the 99401? Also, can we bill 99211 with a vaccine admin on the same encounter?

**HCA Answer:** Yes, you can bill vaccine counseling code 99401 and a vaccine administration code on the same day. Yes, you can bill 99211 on the same encounter with a vaccine administration code. If the patient is being seen for a preventative medicine visit and COVID vaccine counseling increases the time of the visit, the provider can use an E/M code in the series that reflects time spent. It is also possible to bill 99401 with modifier 25 on the same day as an EM code, if COVID vaccine counseling is provided.

**OIC Answer:** Yes, a vaccine counseling code can be billed on the same day as a vaccine administration code is billed.

Question: If patient presents for an office visit and Covid vaccine counseling is performed, do you count the time spent in counseling towards total time of the EM? Or do you bill the EM + 99401?

**HCA Answer:** In this context, a provider could count the time spent in counseling toward the total time of the E/M. Use the E/M that best reflects the time spent on the visit. It is also possible to bill 99401 with modifier 25 on the same day as an EM code, if COVID vaccine counseling is provided.

**OIC Answer:** OIC's order does not address this issue specifically. Please contact the carrier for their policy.

Question: How does billing for counseling differ for independent RHC by both provider and MA?

**HCA Answer:** HCA is clarifying, you may also email [HCAAH\\_COVID19@hca.wa.gov](mailto:HCAAH_COVID19@hca.wa.gov)

Question: Are there any specifics for a dental provider trying to get reimburse for the vaccine counseling and giving the vaccine? Like pharmacies?

**HCA Answer:** HCA is working through potential avenues for including dentists in vaccine counseling services, however dental providers are not included at this time.

**OIC Answer:** OIC's emergency order includes participating "medical" providers and does not encompass dental providers at this time.

Question: The Place of service "10" in the 2022 CPT book is "unassigned." Is that the correct POS to use for patients at home?

**HCA Answer:** Use POS 01 for services provided in the patient's home. POS 10 is for telehealth visits provided to a patient in their home.

Question: Are those codes with the CR modifier only apply to Medicaid? Do they only apply to Medicaid I mean, thank you!

**HCA Answer:** Yes, the CR modifier is specific to WA Medicaid to help differentiate the use of the codes in the context of COVID.

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Question: We are having an issue with the HCA reimbursing the Covid Vaccine when performed at a well child visit, even if billing it separate from the EPSDT visit. Any insight of how to bill this?

**HCA Answer:** This might be worth some additional discussion to make sure we are not missing the nuance of the question. In general, HCA reimburses for administration of the vaccine, but not the vaccine itself. Please email [HCAAH\\_COVID19@hca.wa.gov](mailto:HCAAH_COVID19@hca.wa.gov) with additional information.

Question: Can Urgent Care Providers / Nurses submit counseling for COVID vaccination?

**HCA Answer:** Billing for COVID vaccine counseling requires an established relationship with a patient per the policy and Emergency Order 21-02. Please email [HCAAH\\_COVID19@hca.wa.gov](mailto:HCAAH_COVID19@hca.wa.gov) with follow-up questions related to urgent care and COVID vaccine counseling.

**OIC Answer:** Medical providers must meet all of the conditions listed in OIC Emergency Order 21-02 in order to bill for vaccine counseling. These include, among others, that the provider is a participating (in-network) provider that has an established relationship with the patient.

Question: Do the new place of service and modifier only apply to vaccine counseling? or will these be across the board for all Telehealth services?

**HCA Answer:** The new place of service modifier applies across the board for all telehealth visits.

Question: Does HCA follow Ins Comm regarding carrier not required to include payment for facility fee if at provider-based clinic?

**HCA Answer:** Yes, when the facility is providing administrative and clinical support services for a client receiving services via telemedicine from a provider associated with that facility/clinic. To receive payment for the originating site facility fee when the client is at home, providers must use HCPCS code Q3014 and modifier CR. Do not bill using HCPCS code G0463 for the same date of service. This policy is effective as of 3/1/20. See the COVID- 19 fee schedule.

\*HCA-contracted MCOs will also follow this policy.

Question: If we are a dental clinic and not in network with medical insurance companies. Will we receive reimbursement? Or no since we are dental and not in network with medical/Medicare plans?

**HCA Answer:** Currently dental providers are not set up to submit claims for COVID vaccine counseling or vaccine administration. The policy will continue to evolve, please feel free to send thoughts and feedback.

**OIC Answer:** OIC's emergency order includes participating "medical" providers and does not encompass dental providers at this time.

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Question: You are saying that RN's and MA's can now bill for 99211. We have not allowed MA's to bill 99211. I want to be sure that I understood this correctly. MA's can bill 99211 and provide vaccine counseling?

**HCA Answer:** Please see the AMA CPT® code description for 99211 for further explanation regarding the use of the code. Billing still requires a servicing NPI on the claim. Also, the answer depends on whether the question is coming from an FQHC or elsewhere. Please email [HCAAH\\_COVID19@hca.wa.gov](mailto:HCAAH_COVID19@hca.wa.gov) if additional questions.

Question: Should we also then have Provider detail in their note dates of Vaccination?

**HCA Answer:** Billing for vaccine counseling is not contingent upon vaccine administration. However, it is always helpful to document dates of vaccination if they are available to the provider.

**OIC Answer:** Payment for vaccine counseling is not contingent upon a vaccine being administered to a patient.

Question: So, the counseling would also count if the patient had the 1st vaccine but is now hesitant about getting the 2nd?

**HCA and OIC Answer:** Yes, COVID counseling can be used for clients vaccinated and partially vaccinated.

Question: Is this information specific to WA State, or does it transfer across state lines (excluding the WA Medicaid info)?

**HCA and OIC Answer:** This information is specific to WA state and does not transfer across state lines.

Question: Does the FQ modifier replace the CR modifier?

**HCA Answer:** Only for Telehealth.

Question: What is the reimbursement rate for 99401?

**HCA Answer:** The rate for 99401 will vary because of fee schedule enhancements that are in place.

**OIC Answer:** the reimbursement rates are governed by the provider's contract with a carrier.

Question: We are a group BH providers. Should our RNs and MAs should be enrolled in Medicaid as billing providers to bill for COVID-19?

**HCA Answer:** This is a good question, but use of the code 99211 still requires an eligible servicing provider NPI for the overall practice in which the RNs and/or MAs work.

Question: Does one use the E/m code (99211-15) plus the counseling code (99401)?

**HCA Answer:** If a provider is seeing a patient for another reason and adds vaccine counseling, the provider can choose the E/M code that reflects the amount of time spent

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with the patient overall. It is also possible to bill 99401 with modifier 25 on the same day as an EM code, if COVID vaccine counseling is provided.

**OIC Answer:** If a provider is seeing a patient for another reason and adds vaccine counseling, please use the appropriate code included in Emergency Order 21-02.

Question: To clarify, 99401 needs modifier CR for an office visit and then modifier CR and GT for telehealth?

**HCA Answer:** For Telehealth visits, please use codes 99441-99443 and include the CR modifier. 99401 would be used in an office setting.

Question: Has the Medicaid COVID fee schedule been updated with the 99401 reimbursement amounts regarding the vaccine counseling?

**HCA Answer:** 99401 has various reimbursement rates because of rate enhancements that are in place. One set rate will not be added to the COVID fee schedule but will reference other fee schedules.

Question: Effective date for POS 10 is 01/01/22 BUT implementation date says 04/04/22 on the Medicare MLN.

**HCA Answer:** HCA is implementing the new POS 10 in the ProviderOne system on 1/1/22. However, HCA is aware that providers may need some time to configure their systems to include the new POS. Providers may begin billing using POS 10 on 1/1/22, but HCA has extended the effective date to 4/4/22.

Question: How is the 3rd dose of Pfizer (listed on the CPT code 0003A vs. booster code 0004A)? My understanding is that a patient gets 2 doses and then a booster.

**HCA Answer:** Some patients were counseled to receive a 3<sup>rd</sup> dose of the vaccine prior to the more general booster guidelines. CMS assigned a vaccine administration code in that context. For most average-risk patients, the booster dose follows 3 months after the first 2 doses. Please see [CMS Site](#) for more information.

Question: Is POS 10 ONLY for the covid vaccine counseling billing?

**HCA Answer:** No, POS 10 will be used in general.

Question: Could you please confirm the amount we can or should be billing for vaccinations and/or vaccine counseling? We thought we were supposed to bill \$40 for vaccination administration but are hearing of variability in the community.

**HCA Answer:** Vaccine administration for WA Medicaid follows Medicare policy. See [CMS Site](#).

Question: Are the Managed Care plans aware and configuring the claims system for the new POS 10 and will they be ready by 1/1/2022?

**HCA Answer:** HCA is implementing the new POS 10 in the ProviderOne system on 1/1/22. However, HCA is aware that providers may need some time to configure their systems to

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include the new POS. Providers may begin billing using POS 10 on 1/1/22, but HCA has extended the effective date to 4/4/22.

Question: Meaning you don't do the 99401 with the preventative but instead do a E&M code such as 99212?

**HCA Answer:** Providers can choose the most appropriate code to use depending on context. If COVID vaccine counseling adds time to an existing visit, providers can determine the appropriate level of service based on the level of medical decision-making or total time for E/M services performed. It is also possible to bill 99401 on the same day as an EM code if COVID vaccine counseling is provided.

Question: Not healthcare auth related, but more for OIC. Having major issues as a naturopathic physician being able to get covered for covid-19 vaccines that are being denied by various insurance companies

**OIC Answer:** Please submit a [complaint](#) to OIC so that we can investigate the specific denials.

Question: What about for FQHCs for MA/RN billing for covid counseling.

**HCA Answer:** COVID-19 counseling codes 99211-99215, 99401, and 99441-99443 are encounter eligible for FQHCs and RHCs when billed by an encounter eligible provider as outlined in WACs 182-548-1300(1) and 182-549-1300(1). The agency pays for one encounter per day for FQHCs and RHCs unless there are separate visits with separate diagnosis; or the visits are performed by providers with different specialties. Registered nurses and medical assistants are not encounter eligible provider types in the RHC and FQHC setting.

Question: Any advice appreciated for challenging these cases.

**HCA Answer:** Please send more information to [HCAAH\\_COVID19@hca.wa.gov](mailto:HCAAH_COVID19@hca.wa.gov).

Question: RN's bill 99211 for in person visits now. Is WAH allowing RN's and MA's can now use this for telemedicine?

**HCA Answer:** In the context of the COVID counseling vaccine policy, yes.

Question: Regarding telehealth and telemedicine billing, will POS 10 be replacing POS 12 for audio-only services effective 01/01/2022?

**HCA Answer:** POS 10 should be used if the client is at home when they received care via HIPAA compliant audio-visual or audio-only modality.

Question: When billing would you bill the 99211 plus the 99401 or the 99211 only?

**HCA Answer:** If COVID vaccine counseling adds time to an existing visit, providers can determine the appropriate level of service based on the level of medical decision-making or total time for E/M services performed. It is also possible to bill 99401 with modifier 25 on the same day as an EM code, if COVID vaccine counseling is provided.

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Question: Urgent Care Providers, FP and IM share the same tax ID under a 3-year rule for established patients. So can urgent care providers submit counseling codes.

**HCA Answer:** HCA is clarifying. You may also email [HCAAH\\_COVID19@hca.wa.gov](mailto:HCAAH_COVID19@hca.wa.gov)

**OIC Answer:** Medical providers must meet all of the conditions listed in OIC Emergency Order 21-02 in order to bill for vaccine counseling. These include, among others, that the provider is a participating (in-network) provider that has an established relationship with the patient.

Question: Are the vaccination counseling codes discussed only for the COVID vaccine, or all vaccines? All ages?

**OIC and HCA Answer:** This policy is specific to COVID Vaccine Counseling and is not age specific.

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