

DHCS COVID-19 Vaccine Administration Provider FAQs

November 24, 2021

On March 11, 2021, President Joe Biden signed into law H.R. 1319, the American Rescue Plan (ARP) Act of 2021. Section 9811 of the ARP established a new mandatory Medicaid benefit and amended various other sections of the Act. Under these changes to the statute, nearly all Medicaid populations must receive coverage of COVID-19 vaccines and their administration, without cost-sharing.

DHCS has been following [California's COVID-19 vaccination plan](#), which was approved by the California Department of Public Health (CDPH). For further information on the state's vaccination planning efforts please visit <https://covid19.ca.gov/vaccines/>.

California is leveraging its existing immunization framework and emergency response infrastructure to coordinate efforts among state, local, and territorial authorities to administer the vaccine. Throughout this effort, DHCS will share appropriate information with you and our providers, health plan partners, counties, other key stakeholders, and beneficiaries.

Consistent with the approach being taken by Medicare through Medicare Advantage Plans, DHCS will carve out the COVID-19 vaccine from Medi-Cal managed care health plans and will reimburse providers under the Fee-for-Service (FFS) delivery system for both medical and pharmacy claims. This approach will ease program administration, eliminate challenges with out-of-network provider reimbursements, and keep vaccine administration fee rates consistent for providers regardless of delivery system.

Medi-Cal will reimburse the associated COVID-19 vaccine administration fee at the allowable Medicare rate for all claims (medical, outpatient, and pharmacy), based on the number of required doses for full-scope Medi-Cal beneficiaries. As the federal government will pay for the initial vaccines, there is no Medi-Cal provider reimbursement for the COVID-19 vaccine itself. Providers will bill for administration of the COVID-19 vaccine on medical, outpatient, or pharmacy claims, based on current policy.

Additionally, DHCS is seeking federal approval to pay Federally Qualified Health Centers and Rural Health Centers for the vaccine administration fee outside of their current Prospective Payment System or All Inclusive Rate; Tribal 638 clinics have received [federal approval](#) for this payment.

DHCS submitted all federal waiver requests on December 18, 2020 to the federal Centers for Medicare and Medicaid Services (CMS) and has issued [initial policy guidance](#) on COVID-19 vaccine administration and our reimbursement policy. Policy and reimbursement guidance will be updated upon additional CMS guidance and/or approvals of requested waivers.

To address provider inquiries regarding the plan, these Frequently Asked Questions (FAQs) have been developed.

For further information on the state's vaccination planning efforts please visit <https://covid19.ca.gov/vaccines/>.

1. [Who can healthcare providers give the vaccinations to?](#)
2. [What individuals are covered by Medi-Cal to get the vaccine?](#)
3. [Who will be covering the vaccine immunization cost?](#)
4. [Where can individuals get the vaccine?](#)
5. [When can individuals get the vaccine?](#)
6. [Will individuals be able to get transportation to the get their vaccine if needed?](#)
7. [How can homebound individuals get the vaccine?](#)
8. [Is the vaccine safe?](#)
9. [What does Emergency Use Authorization mean for a vaccine?](#)
10. [How will safety be tracked once a COVID-19 vaccine is made available to the public?](#)
11. [How will it work if healthcare providers are not contracted/credentialed with DHCS?](#)
12. [What about Federally Qualified Health Centers \(FQHCs\), Rural Health Clinics, \(RHCs\) and Tribal Clinics?](#)
13. [Will the vaccine administration fee be covered for all patients on Medi-Cal?](#)
14. [Will immunization coverage apply to restricted scope group?](#)
15. [What billing codes should be used?](#)
16. [How will vaccine information be disseminated?](#)
17. [What is the best way to ensure that patients return for their second shot?](#)
18. [Where can healthcare providers enroll to become a vaccinator?](#)
19. [What information should be given to patients upon vaccination?](#)
20. [Where do I find general California guidance on COVID-19?](#)
21. [Which children are eligible for a COVID-19 vaccine?](#)
22. [Where do I find clinical information on the vaccines currently authorized in the United States?](#)
23. [Should I bill for administration of the vaccine with both doses together, or separately for a 2-dose vaccine series?](#)
24. [Will I be reimbursed for the administration of a single dose of a two-dose vaccine series \(initial or final\) if the Medi-Cal beneficiary I am administering to receives the other dose elsewhere? What about a third dose or booster dose?](#)
25. [What is the difference between a third dose and a booster dose?](#)
26. [Who is eligible to receive a booster dose? Which booster should be administered?](#)
27. [When billing for the administration of the COVID-19 vaccine for a Managed Care Plan enrollee, what ID should I list on the claim?](#)
28. [How do I verify a beneficiary's Medi-Cal eligibility if they do not have their BIC card or an SSN?](#)
29. [What if a beneficiary's BIC is lost or stolen?](#)

1. Who can healthcare providers give the vaccinations to?

- A. All providers must vaccinate individuals regardless of existing health coverage or the type of coverage. Providers are prohibited from balance billing or otherwise charging vaccine recipients.

2. What individuals are covered by Medi-Cal to get the vaccine?

- A. All full-scope Medi-Cal beneficiaries are covered. All Californians can receive the vaccine at no cost. CMS has requested states to develop State Plan Amendments (SPAs) for limited-benefit groups for vaccine administration coverage for Tuberculosis (TB), Family Planning, Access, Care and Treatment (FPACT), and the COVID-19 Uninsured Group. DHCS is pending CMS' development of the SPA template and will submit once received.

3. Who will be covering the vaccine immunization cost?

- A. The initial supply of COVID-19 immunizations will be federally purchased, meaning DHCS will not provide Medi-Cal reimbursement for the vaccine itself. Please refer to the question below for information on the vaccine administration fee.

4. Where can individuals get the vaccine?

- A. Pharmacies, retail clinics, providers (including those enrolled in managed care plans), and any other sites of care receiving and administering COVID-19 vaccinations.

Additional information can be found on the CDPH website:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/COVID-19Vaccine.aspx>

The “My Turn” website can be used to schedule appointments.

Additional information can be found at: <https://myturn.ca.gov/>

5. When can individuals get the vaccine?

Currently, vaccines can be given to every Californian age 5 years and older.

The “My Turn” website tells Californians if they or their minors qualify to get the COVID vaccine and schedule appointments. Users can submit information about their age or their minors’ age and can sign up to be notified over text or email when it’s their turn to get vaccinated and then schedule appointments.

6. Will individuals be able to get transportation to the get their vaccine if needed?

- A. For Medi-Cal managed care plan members:

Yes. Members can call their managed care plan for assistance with booking a vaccine appointment and arranging transportation to that appointment. Managed care plans assist in coordination of vaccine services and transportation as needed.

The My Turn website has a check box asking if the individual needs transportation to a vaccine appointment. If the individual checks this box, the individual will be notified that they will receive a call to schedule their vaccine appointment.

A customer service representative (representative) from the California COVID-19 Vaccination Services Information Line call center (call center) will contact the individual. If the individual needs transportation and has Medi-Cal, and is enrolled in a managed care plan, the call center representative will schedule their vaccine appointment and connect them to their managed care plan for transportation coordination.

- B. For Medi-Cal Fee-for-Service beneficiaries:

Yes. My Turn books the vaccine appointment (at least 5 business days after the call in order to provide time for transportation arrangement) and then provides the member with contact information to schedule

their Medi-Cal Fee-for-Service transportation. For Non-Medical Transportation (persons who do not need assistance ambulating), Fee-for-Service beneficiaries (or the Call Center) can call any of the providers on the below list of approved Non-Medical Transportation providers, or send an email to DHCSNMT@dhcs.ca.gov.

Link to approved Non-Medical Transportation providers

<https://www.dhcs.ca.gov/services/medi-cal/Documents/List-of-Approved-Nonmedical-Transportation-Providers.pdf>

For Non-Emergency Medical Transportation (for non-ambulatory patients), beneficiaries normally work with their medical provider, who can prescribe Non-Emergency Medical Transportation and put them in touch with a transportation provider to coordinate their ride to and from their appointment. The San Diego DHCS Field Office can also assist by providing a list of Non-Emergency Medical Transportation providers by location. The San Diego Field Office may be reached at (858) 495-3666.

Additional information can be found here: <https://www.dhcs.ca.gov/services/medi-cal/Pages/Transportation.aspx>

7. Can homebound individuals get the vaccine?

A. For Medi-Cal managed care plan members:

Yes. After the managed care plan has connected with a member who requests the in-home vaccination, they are to refer the member to the MyTurn appointment system, and then instruct the member to book their appointment and check the appropriate box for in-home vaccination.

The My Turn website has a check box asking if the individual is homebound and is unable to leave their home due to limited mobility or fragile health and needs a vaccine in their home. If the individual checks this box, the call center representative will contact the individual and then provide the individual's information to the Local Health Department. The Local Health Department will then arrange for a medical team to visit the individual at home to vaccinate the individual and any family members.

B. For Medi-Cal Fee-for-Service beneficiaries:

Yes. The My Turn website has a check box asking if the individual is homebound and is unable to leave their home due to limited mobility or fragile health and need a vaccine in their home. If the individual checks this box, the call center representative will contact the individual and then provide the individual's Information to the Local Health Department. The Local Health Department will then arrange for a medical team to visit the individual at home to vaccinate the individual and any family members.

8. Is the vaccine safe?

- ### **A. COVID-19 vaccines were tested in large clinical trials to make sure they meet safety standards. Many people were recruited to participate in these trials to see how the vaccines offer protection to people of different ages, races, and ethnicities, as well as those with different medical conditions.**

The Food and Drug Administration (FDA) has reviewed the vaccines for their safety and effectiveness before granting Emergency Use Authorization (EUA) for their use. The U.S. Centers for Disease Control (CDC) and its Advisory Committee for Immunizations (ACIP) has also reviewed the safety information of the approved vaccines.

In addition, California formed a [Scientific Safety Review Work Group](#) to independently review the safety and efficacy of the vaccines. Based on all these reviews, the vaccine is considered safe for use in Californians. Please refer to the [CDPH COVID 19 Questions and Answers](#) page for additional details.

FDA and CDC will continue to monitor the safety of COVID-19 vaccines to make sure even very rare side effects are identified. Health care providers are required to report certain adverse events following vaccination to the Vaccine Adverse Event Reporting System (VAERS).

On August 23, 2021, the FDA formally approved the biologics license application (BLA) for Pfizer-BioNTech's COVID-19 vaccine, commercially known as Comirnaty. Comirnaty is currently approved for use in individuals 16 years of age and older.

CDC is also implementing a new smartphone-based tool called v-safe to check in on people's health after they receive a COVID-19 vaccine. When you receive your vaccine, you should also receive a v-safe information sheet telling you how to enroll in v-safe. If you enroll, you will receive regular text messages directing you to surveys where you can report any problems or adverse reactions you have after receiving a COVID-19 vaccine.

Additional information can be found here: <https://covid19.ca.gov/vaccines/>

9. What does Emergency Use Authorization mean for a vaccine?

- A. In certain types of emergencies, such as with the current public health emergency, the FDA can issue an emergency use authorization, or EUA, to provide more timely access to critical medical products that may help during the emergency when there are no adequate, approved, and available alternative options.

Under the EUA authority, the FDA evaluates requests for authorization very quickly using the evidence that is available, carefully balancing the risks and benefits of the product as we know them, in addition to evaluating other criteria. EUAs are in effect until the emergency declaration ends but can be revised or revoked as needs change during the emergency, or as products meet the criteria to become approved, cleared, or licensed by the FDA.

Additional information can be found here: <https://covid19.ca.gov/vaccines/> and [CDPH COVID-19: Information for Laboratories](#)

10. How will safety be tracked?

- A. After a vaccine is approved for use via Emergency Use Authorization (EUA), scientists and health professionals will continue to carefully monitor its use. The [Vaccine Safety Datalink](#) in the United States, which monitors many immunizations in California, is designed to report a safety problem in near real time so the public can be informed quickly of possible risks. Health care providers are required to report certain adverse events following vaccination to the [Vaccine Adverse Event Reporting System \(VAERS\)](#).

When you receive your vaccine, you will also receive an information sheet telling you how to enroll in a program called [v-safe](#) that allows you to report problems or adverse reactions you have after receiving a COVID-19 vaccine to the Centers for Disease Control (CDC). Additionally, the Food and Drug Administration (FDA) and CDC will continue to carefully monitor the safety of COVID-19 vaccines to make sure that even very rare side effects are identified as early as possible. These are some of the ways that will help detect previously undetected issues related to the vaccines as early as possible.

11. How will it work if healthcare providers are not contracted/credentialed with DHCS?

- A. The vaccine provider must be enrolled in Medi-Cal for purposes of obtaining reimbursement from DHCS for the vaccine administration fee. Medi-Cal providers who administer the vaccine to Medi-Cal beneficiaries will be reimbursed at the Medicare rate for the administration fee.

Additional information can be found here: <https://www.dhcs.ca.gov/provgovpart/Pages/PED.aspx>

12. What about Federally Qualified Health Centers (FQHCs), Rural Health Clinics, (RHCs) and Tribal Clinics?

- A. DHCS will pay the applicable Prospective Payment System (PPS)/All Inclusive Rate (AIR) if the vaccination is administered during an in-person visit that meets the requirements of a billable office visit in the clinic setting. If the vaccine administration does not meet all of the requirements of a billable visit (i.e. only vaccine administration), DHCS is seeking federal approval for the FQHCs and RHCs. Approval has been granted for Tribal 638 clinics to bill Medi-Cal FFS for administering the COVID vaccine and be reimbursed the applicable dosage rate as noted above.

13. Will the vaccine administration fee be covered for all patients on Medi-Cal?

- A. Yes. The vaccine administration fee will be covered for all Medi-Cal beneficiaries who have full-scope Medi-Cal. CMS has requested states to develop SPAs for limited-benefit groups for vaccine administration coverage for TB, FPACT, and the COVID-19 Uninsured Group. DHCS will submit this request pending CMS' development of the SPA template. Those who are dually eligible for both Medicare and Medi-Cal will generally be covered by Medicare.

Payment for the COVID-19 vaccine administration fee will be through the Medi-Cal Fee-for-Service delivery system for all covered populations, including those in Medi-Cal managed care plans.

Medi-Cal will reimburse the associated COVID-19 vaccine administration fee at the allowable Medicare rate for all claims, medical and pharmacy, based on the number of required doses for full-scope Medi-Cal beneficiaries.

For vaccines administered on dates of service prior to and including March 14, 2021, Medi-Cal will reimburse the associated COVID-19 vaccine administration fee at the previously published maximum allowable reimbursement rate for providers based on the number of required doses: The maximum allowable rate for a single-dose vaccine is \$28.39; the maximum for a double-dose vaccine is \$16.94 for the initial dose and \$28.39 for the final dose (\$45.33 total).

For vaccines administered on or after March 15, 2021, Medi-Cal will set the maximum allowable reimbursement of the associated COVID-19 vaccine administration fee at \$40.00 per dose, regardless of vaccine manufacturer.

14. Will immunization coverage apply to restricted scope group?

- A. Yes. All vaccination providers must provide the vaccine regardless of coverage. CMS has requested states to develop SPAs for limited-benefit groups for vaccine administration coverage for TB, FPACT, and the COVID-19 Uninsured Group. Per CMS, we are pending CMS' development of the SPA template and will submit once received.

15. What billing codes should be used?

- A. DHCS is using the American Medical Association Current Procedural Terminology or CPT® codes for reporting of immunizations for COVID-19 for the medical and outpatient claim types. These CPT® codes are unique for each COVID-19 vaccine and dose.

Vaccine Name and Dosage	Vaccine Code/Description	CPT® Vaccine Administration Code
Pfizer-BioNTech (30 mcg/0.3 mL)	91300	0001A (1st dose) 0002A (2nd dose) 0003A (3rd dose) 0004A (Booster)
Pfizer-BioNTech (10 mcg/0.2 mL)	91307	0071A (1st dose) 0072A (2nd dose)
Moderna (100 mcg/0.5 mL)	91301	0011A (1st dose) 0012A (2nd dose) 0013A (3rd dose)
Moderna booster (50 mcg/0.25 mL)	91306	0064A (Booster)
Janssen (5x10 ¹⁰ viral particles/0.5 mL)	91303	0031A (Single Dose) 0034A (Booster)

Additional information can be found here: <https://www.ama-assn.org/find-covid-19-vaccine-codes>

[For the pharmacy claim type, DHCS is using a combination of a National Drug Code \(NDC\) and Submission Clarification Code \(SCC\) on electronic claims or an NDC and a Fill Number on paper claims to uniquely identify both the vaccine and dose being administered.](#)

[The most current direction regarding eligible populations and Medi-Cal billing guidelines are available for each currently approved vaccine here:](#)

- https://files.medi-cal.ca.gov/pubsdoco/Pfizer_BioNTech_COVID19_Vaccine.aspx
- https://files.medi-cal.ca.gov/pubsdoco/Moderna_COVID19_Vaccine.aspx
- https://files.medi-cal.ca.gov/pubsdoco/Janssen_COVID19_Vaccine.aspx

[Additional Medi-Cal billing information can be found at the COVID-19 Medi-Cal Response page: https://files.medi-cal.ca.gov/pubsdoco/COVID19_response.aspx](https://files.medi-cal.ca.gov/pubsdoco/COVID19_response.aspx)

16. How will vaccine information be disseminated?

A. DHCS will communicate updated immunization information to providers, stakeholders, health plans, county partners, and the community through strategies, such as:

- Developing written guidance for health plans, including All Plan Letters, as it relates to immunization distribution and reimbursement rates
- Provider notices/bulletins on the [Medi-Cal website](#)

General information can be found here: covid19.ca.gov

17. What is the best way to ensure that patients return for their second shot? What about a third dose or booster shot?

A. Providers are encouraged to explain the health benefits and outcomes associated with supplementary shot administration. Before the patient leaves the office after their first dose, ensure they schedule an appointment for their second dose, and if applicable, third dose or booster dose.

18. Where can healthcare providers enroll to become a vaccinator?

A. Pharmacies, retail clinics, providers, and any other sites of care must sign an agreement with the U.S. government to receive no- cost free supplies of the COVID-19 vaccine(s).

Under the agreement, all providers must vaccinate individuals regardless of existing health coverage or the type of coverage. Providers are prohibited from balance billing or otherwise charging vaccine recipients.

More information is available below for providers interested in becoming part of the vaccine network:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/COVIDVaccineEnrollment.aspx#>

19. What information should be given to patients upon vaccination?

A. Before receiving the vaccine, patients must be provided with an Emergency Use Authorization fact sheet about the vaccine. After receiving the vaccine, patients must receive a vaccination card that identifies the brand of vaccine administered and the date their second vaccination (if applicable) is due.

Patients 16 years of age and older receiving the two-dose regimen of the FDA-approved Comirnaty do not need to receive an EUA fact sheet about the vaccine. Patients or guardians of patients who are 5 through 15 years of age, or individuals receiving a third dose or booster shot, should still receive the EUA fact sheet since the FDA-approval does not cover these populations.

Patients receiving the Moderna or Janssen COVID-19 vaccines should receive the EUA fact sheet.

For more information providers can email COVIDCallCenter@cdph.ca.gov or call (833) 502-1245, Monday through Friday, from 9 a.m. to 5 p.m.

20. Where do I find general California guidance on COVID-19?

- A. There are two California websites that offer general guidance on COVID-19. These are the California Coronavirus Response website and the California Department of Public Health website. Check both websites frequently, as resources are regularly updated and added. Below are the web addresses of each.
- The California Coronavirus Response website is: covid19.ca.gov.
 - The California Department of Public Health website is: cdph.ca.gov/COVID19
 - The Centers for Disease Control website is: <https://www.cdc.gov/vaccines/covid-19/hcp/faq.html>

21. Which children are eligible for a COVID-19 vaccine?

- A. The Pfizer-BioNTech COVID-19 vaccine has FDA approval for ages 16 years and above, and Emergency Use Authorization (EUA) approval for ages 5 through 15 years.

The Pfizer-BioNTech COVID-19 vaccine for children 5 through 11 years of age is administered as a two-dose series, 3 weeks apart, but is a lower dose (10 micrograms) than that used for individuals 12 years of age and older (30 micrograms).

Additional information can be found here: <https://covid19.ca.gov/vaccines/> and <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/index.html>

22. Where do I find clinical information on the vaccines currently authorized in the United States?

- A. Additional clinical information can be found at :<https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html>

23. Should I bill for administration of the vaccine with both doses together, or separately for a 2-dose vaccine series? What about a third dose or booster dose?

- A. Dose administrations may be billed separately, or together on the same claim, whichever fits the provider's billing preferences and practices. Providers are reminded to check the Medi-Cal Provider Manual to ensure claims remain timely.

24. Will I be reimbursed for the administration of a single dose of a two-dose vaccine series (initial or final) if the Medi-Cal beneficiary I am administering to receives the other dose elsewhere? What about a third dose or booster dose?

- A. There is no requirement for the same provider to administer each dose. Each dose is separately reimbursable. However, for mRNA vaccines, the manufacturer of the doses administered to a Medi-Cal beneficiary should, if possible, remain consistent between the first and second dose (and between the first, second, and third dose for moderately and severely immunocompromised people aged ≥ 18 years) regardless of the administering provider. A booster dose of any of the

available COVID-19 vaccines may be administered as a heterologous booster dose following completion of primary vaccination series with a different available COVID-19 vaccine.

25. What is the difference between a third dose and a booster dose?

A third dose of a COVID-19 vaccine is administered for individuals with weakened immune systems at least 28 days after the second dose of an mRNA vaccine, to help protect these individuals who may not have had a strong enough response to the first two doses.

A booster dose, designed to help individuals maintain their immunity for longer, is administered at least 2 months after the individual receives the Johnson & Johnson's Janssen (J&J/Janssen) COVID-19 vaccine or at least 6 months after completing the initial series of the Pfizer-BioNTech or Moderna COVID-19 vaccines.

Moderately and severely immunocompromised people aged ≥ 18 years who completed an mRNA COVID-19 vaccine primary series and received an additional mRNA vaccine dose (i.e., a third dose) may receive a single COVID-19 booster dose (Pfizer-BioNTech, Moderna, or Janssen) at least 6 months after completing their third mRNA vaccine dose. In such situations, people who are moderately and severely immunocompromised may receive a total of four COVID-19 vaccine doses.

26. Who is eligible to receive a booster dose? Which booster should be administered?

For individuals who received a Pfizer-BioNTech or Moderna COVID-19 vaccine the FDA has authorized, and the CDC recommends, that

- Individuals age 50 and older, or those age 18 and older and that live in a long-term care setting, *should* receive a booster shot of any of the three FDA-approved COVID-19 vaccines at least six months after completing their Pfizer-BioNTech or Moderna primary vaccine series.
- Individuals age 18 and older *may* receive a booster shot of any of the three FDA-approved COVID-19 vaccines at least six months after completing their Pfizer-BioNTech or Moderna primary vaccine series.

For individuals who received the J&J/Janssen COVID-19 vaccine, the FDA has authorized, and the CDC recommends, that individuals age 18 and older *should* receive a booster with any of the three FDA-approved COVID-19 vaccines at least two months after their original J&J/Janssen vaccine.

Moderately and severely immunocompromised people aged ≥ 18 years who completed an mRNA COVID-19 vaccine primary series and received an additional mRNA vaccine dose (i.e., a third dose) may receive a single COVID-19 booster dose (Pfizer-BioNTech, Moderna, or Janssen) at least 6 months after completing their third mRNA vaccine dose. In such situations, people who are moderately and severely immunocompromised may receive a total of four COVID-19 vaccine doses.

Eligible individuals may choose which vaccine they receive as a booster dose. Some people may have a preference for the vaccine type that they originally received, and others may prefer to get a different booster. CDC's recommendations now allow for this type of mix and match dosing for booster shots.

A single booster dose of any of the available COVID-19 vaccines may be administered as a heterologous booster dose following completion of primary vaccination with a different available COVID-19 vaccine. The eligible population(s) and dosing interval for a heterologous booster dose are the same as those authorized for a booster dose of the vaccine used for primary vaccination.

- For example, J&J/Janssen COVID-19 Vaccine recipients 18 years of age and older may receive a single booster dose of J&J/Janssen COVID-19 Vaccine, Moderna COVID-19 Vaccine (half dose) or Pfizer-BioNTech COVID-19 Vaccine at least two months after receiving their J&J/Janssen COVID-19 Vaccine primary vaccination.
- In another example, Moderna COVID-19 Vaccine and Pfizer-BioNTech COVID-19 vaccine recipients falling into one of the authorized categories for boosters (see above) may receive a booster dose of Moderna COVID-19 Vaccine (half dose), Pfizer-BioNTech COVID-19 Vaccine or J&J/Janssen COVID-19 Vaccine at least six months after completing their primary vaccination.

27. When billing for the administration of the COVID-19 vaccine for a Managed Care Plan enrollee, what ID should I list on the claim?

- A. Because claims for the administration of the COVID-19 vaccine(s) are submitted to Medi-Cal fee-for-service fiscal intermediary for processing, providers must use the ID listed on a patient's Beneficiary Identification Card (BIC). A Managed Care Plan ID is not recognized in the Medi-Cal fee-for-service system, so providers who bill using this ID may experience denials.

28. How do I verify a beneficiary's Medi-Cal eligibility if they do not have their BIC card?

- A. The patient should contact the county welfare office for BIC replacement. The county welfare office can also provide the beneficiary with their BIC, over the phone, to facilitate the immediate rendering of services, if needed.

29. What if a beneficiary's BIC is lost or stolen?

- A. The patient should contact their county welfare office for BIC replacement.

Additional Resources:

<https://www.cdc.gov/vaccines/covid-19/hcp/answering-questions.html>

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>

https://www.cdc.gov/vaccines/imz-managers/downloads/COVID-19-Vaccination-Program-Interim_Playbook.pdf

<https://www.cdc.gov/vaccines/covid-19/index.html>

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/COVID-19Vaccine.aspx>

https://files.medi-cal.ca.gov/pubsdoco/COVID19_response.aspx

<https://eziz.org/assets/docs/COVID19/CalVax-ProviderLogin.pdf>

<https://www.cdc.gov/vaccines/covid-19/hcp/faq.html>

<https://eziz.org/assets/other/IMM-1295.pdf>

<https://www.hhs.gov/sites/default/files/provider-covid-vaccine-factsheet.pdf>

<https://www.hhs.gov/sites/default/files/provider-covid-vaccine-factsheet-spanish.pdf>

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Johnson--Johnson-COVID-19-Vaccine-Updates.aspx>