

Bulletin Number: MSA 21-42

Distribution: Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs), Tribal Health Centers (THCs), Tribal FQHCs, Medicaid Health Plans (MHPs), Integrated Care Organizations (ICOs)

Issued: October 1, 2021

Subject: COVID-19 Response: Clinic Reimbursement of COVID-19 Vaccine Administration Services Update

Effective: As Indicated

Programs Affected: Medicaid, Healthy Michigan Plan, MICHild, Maternity Outpatient Medical Services (MOMS), Emergency Services Only (ESO), MI Health Link

Note: Implementation of this policy is contingent upon approval of a State Plan Amendment (SPA) by the Centers for Medicare & Medicaid Services (CMS).

This bulletin notifies Michigan Medicaid-enrolled FQHCs, RHCs, Tribal FQHCs, and THCs of information regarding the Medicaid program reimbursement update of COVID-19 vaccine administration services. This policy updates information for clinics previously provided in Bulletin [MSA 20-75](#).

Effective for dates of service on or after December 1, 2020, FQHCs, RHCs, Tribal FQHCs, and THCs may be reimbursed for COVID-19 vaccine administration services when no other eligible qualifying clinic visit is provided on the same date of service. Payment for stand-alone COVID-19 vaccine administration in FQHCs, RHCs, Tribal FQHCs, and THCs will be made through an alternative payment methodology (APM). The APM provides reimbursement for stand-alone COVID-19 vaccine administration services using a cost-based rate, which is greater than the Medicare rate for these services. The APM is intended to be time-limited and will expire at the end of the public health emergency.

All FQHCs, RHCs, Tribal FQHCs and THCs must explicitly agree to accept the APM for COVID-19 vaccine administration reimbursement. Health centers will be contacted via written communication requesting an e-mail response affirmatively accepting the APM. Clinics that fail to respond in agreement of the APM will be excluded from the APM and have COVID-19 vaccine administration services reimbursed as part of the prospective payment system (PPS) and all-inclusive rate (AIR) methodologies. Clinics that accept the APM will be reimbursed for stand-alone COVID-19 administration services at the cost-based rate, and the payment will be excluded from PPS methodology for FQHCs and RHCs and AIR methodology for Tribal FQHCs and THCs.

Clinic Cost Reconciliation

The initial fee-for-service and MHP reimbursement for stand-alone COVID-19 vaccine administration services will be at 100% of Medicare rates for clinics accepting the APM. Annual cost reconciliation will occur to reimburse clinics for the difference between the Medicare rate and the cost-based APM rate. Reimbursement will be provided in the form of a lump-sum gross adjustment.

All reimbursement rates will be reviewed and updated as applicable and are published on the MDHHS website at www.michigan.gov/medicaidproviders >> Billing & Reimbursement >> Provider Specific Information. All other COVID-19 vaccine coverage information described in Bulletin MSA 20-75 remains unchanged.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments to Tyler Wise by e-mail at wiset2@michigan.gov.

Please include "COVID-19 Response: Clinic Reimbursement of COVID-19 Vaccine Administration Services Update" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

Manual Maintenance

Information in this bulletin is time-limited and will not be incorporated into any policy or procedure manuals.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to ProviderSupport@michigan.gov. When you submit questions, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 1-800-292-2550. Atypical Providers may phone toll-free 1-800-979-4662.

Approved



Kate Massey, Director
Medical Services Administration