



- [Home](#)
- [SF STAT!](#)
- [Current Articles](#)
- [CURRENT ISSUE](#)
- [Online Newspapers](#)
- [WEEKLY NEWSLETTERS](#)
- [Media Kit](#)
- [Calendar](#)
- [Business Directory](#)
- [Video Interviews](#)
- [Contact](#)

Select Page

CMS Expands Medicare Payments for At-Home COVID-19 Vaccinations

Part of Biden-Harris Administration Vaccine Outreach, CMS Boosts Vaccine Access in Smaller Group Homes, Assisted Living Facilities, and Other Group Living Situations

As part of the Biden-Harris Administration's ongoing commitment to increasing access to vaccinations and improving health equity, CMS is expanding opportunities for people to receive COVID-19 vaccinations in their home. To ensure Medicare beneficiaries who have difficulty leaving their homes or are otherwise hard-to-reach can receive the vaccination,

health care providers can now receive additional payments for administering vaccines to multiple residents in one home setting or communal setting of a home.

This announcement aims to further boost the administration of COVID-19 vaccination – including second and third doses – in smaller group homes, assisted living facilities, and other group living situations by allowing vaccine providers to receive the increased payment up to 5 times when fewer than 10 Medicare beneficiaries get the vaccine on the same day in the same home or communal setting. This policy will help ensure that at-risk patients in smaller settings have the same opportunities as others to receive the vaccination.

“We are doing everything we can to remove barriers to vaccinations, including ensuring appropriate payment levels for vaccine providers to connect with more people in their communities who are unable to receive the vaccine in a traditional setting,” said CMS Administrator Chiquita Brooks-LaSure. “We’ve seen the difference that vaccinations have in communities, and we are calling on providers to join us as we continue to increase vaccination rates across the country. Today’s actions ensure that everyone has the ability to be vaccinated against COVID-19, including older adults with mobility or transportation challenges and other at-risk individuals.”

While many Medicare beneficiaries are able to receive a COVID-19 vaccine at a retail pharmacy or from a health care provider, some people have great difficulty leaving their homes or cannot easily access vaccination in these settings. These individuals are often at-risk patients who could require complex care if they contracted COVID-19 and needed to be hospitalized. To better serve this group, Medicare previously increased the total payment amount for at-home vaccination from approximately \$40 to approximately \$75 per vaccine dose, in certain circumstances.

Delivering COVID-19 vaccination to access-challenged and hard-to-reach individuals poses some unique challenges, such as ensuring appropriate vaccine storage temperatures, handling, and administration. Along with the CDC [guidance](#), this announcement helps vaccine providers meet these challenges and successfully administer vaccinations.

The additional payment amount also accounts for the clinical time needed to monitor a beneficiary after the vaccine is administered, as well as the upfront costs associated with administering the vaccine safely and appropriately in a beneficiary's home. The payment rate for administering each dose of a COVID-19 vaccine, as well as the additional in-home payment amount, is geographically adjusted based on where the service is furnished.

How to Find a COVID-19 Vaccine:

As states and the federal government continue to break down barriers – like where vaccines can be administered – resources for connecting communities to vaccination options remain key. Unvaccinated individuals and those looking to assist friends and family can:

1. Visit [vaccines.gov](https://www.vaccines.gov) (English) or [vacunas.gov](https://www.vacunas.gov) (Spanish) to search for vaccines nearby
2. Text GETVAX (438829) for English or VACUNA (822862) for Spanish for near-instant access to details on three vaccine sites in the local area
3. Call the National COVID-19 Vaccination Assistance Hotline at 1-800-232-0233 (TTY: 1-888-720-7489) for assistance in English and Spanish

Coverage of COVID-19 Vaccines:

The federal government is providing the COVID-19 vaccine free of charge or with no cost-sharing for Medicare beneficiaries. As a condition of receiving free COVID-19 vaccines from the federal government, vaccine providers cannot charge patients

any amount for administering the vaccine.

Because no patient can be billed for COVID-19 vaccinations, CMS and its partners have provided a variety of information online for providers vaccinating all Americans regardless of their insurance status:

- **Original Medicare and Medicare Advantage:**Beneficiaries with Medicare pay nothing for COVID-19 vaccines or their administration, and there is no applicable copayment, coinsurance or deductible.
- **Medicaid and the Children's Health Insurance Program (CHIP):**State Medicaid and CHIP agencies must cover COVID-19 vaccine administration with no cost sharing for nearly all beneficiaries during the COVID-19 Public Health Emergency (PHE) and (generally) for over a year after it ends. For the very limited number of Medicaid beneficiaries who are not eligible for this coverage (and do not receive it through other coverage they might have), providers may submit claims for reimbursement for administering the COVID-19 vaccine to underinsured individuals through the COVID-19 Coverage Assistance Fund, administered by the Health Resources and Services Administration (HRSA), as discussed below. Under the American Rescue Plan Act of 2021 (ARP), signed by President Biden on March 11, 2021, the federal matching percentage for state Medicaid and CHIP expenditures on COVID-19 vaccine administration is currently 100% (as of April 1, 2021), and will remain 100% for more than a year after the COVID-19 PHE ends. The ARP also expands coverage of COVID-19 vaccine administration under Medicaid and CHIP to additional eligibility groups. CMS recently updated the [Medicaid vaccine toolkit](#) to reflect the enactment of the ARP.
- **Private Plans:**The vaccine is free for people enrolled in most private health plans. The COVID-19 vaccines and the administration are covered without cost sharing for most

enrollees, and such coverage must be provided both in-network and out-of-network during the PHE. Current regulations provide that out-of-network rates must be reasonable as compared to prevailing market rates, and the rules reference using the Medicare payment rates as a potential guideline for insurance companies. In light of CMS's action, CMS expects health insurance issuers and group health plans to continue to ensure their rates are reasonable when compared to prevailing market rates. Under the conditions of participation in the CDC COVID-19 Vaccination Program, providers cannot charge plan enrollees any administration fee or cost sharing, regardless of whether the COVID-19 vaccine is administered in-network or out-of-network.

For individuals who are underinsured, vaccine providers may submit claims for reimbursement for administering the COVID-19 vaccine through the [COVID-19 Coverage Assistance Fund](#) administered by HRSA after the claim to the individual's health plan for payment has been denied or only partially paid.

For individuals who are uninsured, vaccine providers may submit claims for reimbursement for administering the COVID-19 vaccine to individuals without insurance through the Provider Relief Fund, administered by HRSA. See information on the [COVID-19 Claims Reimbursement to Health Care Providers and Facilities for Testing, Treatment, and Vaccine Administration for the Uninsured Program](#).

More information on Medicare payment for COVID-19 vaccine administration – including a list of billing codes, payment allowances and effective dates – is available on the [Medicare COVID-19 Vaccine Shot Payment](#) webpage.

More information regarding the CDC COVID-19 Vaccination Program Provider Requirements and how the COVID-19 vaccine is provided through that program at no cost to recipients is

available on the [CDC COVID-19 Vaccination Program Provider Requirements and Support](#) webpage.

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