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CMCS Informational Bulletin

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SUBJECT: COVID-19 Vaccine Update

This Center for Medicaid and CHIP Services (CMCS) Informational Bulletin provides an update on the status of COVID-19 vaccine availability for adolescents aged 12-15 years, and reminds states of the important role outreach and education can play in ensuring equitable access to a COVID-19 vaccination for those newly able to receive the Pfizer-BioNTech COVID-19 vaccine. Attached is a new fact sheet, *Medicaid, CHIP, and BHP COVID-19 Vaccine Administration Coverage, Cost-Sharing, and Reimbursement*, that summarizes current Medicaid, Children's Health Insurance Program (CHIP), and Basic Health Program (BHP) coverage, cost-sharing, and federal reimbursement for COVID-19 vaccine administration.

Background:

On May 10, 2021, the U.S. Food and Drug Administration (FDA) expanded the emergency use authorization (EUA) for the Pfizer-BioNTech COVID-19 Vaccine to include adolescents aged 12-15 years. This vaccine was previously authorized for administration in individuals aged 16 years and older. On May 12, 2021, the Advisory Committee on Immunization Practices (ACIP) updated its interim recommendation for use of the Pfizer-BioNTech COVID-19 vaccine to include adolescents aged 12-15 years and the Director of the Centers for Disease Control and Prevention (CDC) adopted that recommendation. Both the Moderna and Janssen (Johnson & Johnson) COVID-19 vaccines are currently recommended for those aged 18 years and over who are eligible under the applicable EUA to receive the vaccine. All three COVID-19 vaccines authorized in the United States are safe and effective, and, as outlined in the attached fact sheet *Medicaid, CHIP and BHP COVID-19 Vaccine Administration Coverage, Cost-Sharing, and Reimbursement*, COVID-19 vaccinations are currently covered, with no out-of-pocket costs, for CHIP, BHP, and nearly all Medicaid beneficiaries.

During the period when the initial supply of COVID-19 vaccines is federally purchased, distribution of COVID-19 vaccines for those under age 19 will be through the CDC COVID-19 Vaccination Program, just as it is for adults. In this period, because pediatric COVID-19 vaccines will be distributed outside of the Vaccines for Children (VFC) program, a provider does

¹ CDC has released a number of guidance documents on the COVID-19 Vaccination Program. Guidance can be found here: https://www.cdc.gov/vaccines/covid-19/covid19-vaccination-guidance.html and Provider Requirements and Support can be found here: https://www.cdc.gov/vaccines/covid-19/vaccination-provider-support.html

not need to be enrolled in the VFC program to administer a COVID-19 vaccine to a child under age 19 who is eligible for the VFC program. However, VFC-registered providers must enroll in the CDC COVID-19 Vaccination Program to access and administer COVID-19 vaccine. In addition, the VFC vaccine administration fee schedule does not apply because the COVID-19 vaccine is administered outside of the VFC program. States are encouraged to review their pediatric vaccine administration rates across Medicaid, CHIP, and BHP, and consider aligning reimbursement for COVID-19 vaccinations for children under age 19 with reimbursement for adult COVID-19 vaccinations, if that action has not yet been taken.

To find available COVID-19 vaccinations for adolescents, parents or guardians are encouraged to check local pharmacy websites, check with their child's healthcare provider, or contact their state or local health department. In addition, the <u>Vaccines.gov</u> website can be used to find available vaccination sites if needed.

State Medicaid and CHIP programs can play a significant role in current and upcoming rollouts of COVID-19 vaccinations to children and adolescents as they currently cover nearly 40 percent of the nation's children, including an estimated 16 million adolescents. Included in this informational bulletin are some strategies and partnerships states can consider employing to increase awareness of COVID-19 vaccine availability. States should refer to the *Coverage and Reimbursement of COVID-19 Vaccines, Vaccine Administration, and Cost-Sharing under Medicaid, the Children's Health Insurance Program, and Basic Health Program toolkit (also referred to as the Medicaid COVID-19 vaccine toolkit) for more information.*

Outreach and Education:

Outreach and education will be critical to ensuring that parents or guardians of children and adolescents enrolled in Medicaid and CHIP, and Medicaid and CHIP providers, are aware when COVID-19 vaccines become available to children in various age groups. Education and outreach are also critical to ensuring that beneficiaries understand where they can receive a COVID-19 vaccination, that the Pfizer-BioNTech vaccine is administered as a two dose series with the doses spaced 21 days apart, and how to obtain additional information. The CDC has added COVID-19 vaccination information for parents and guardians to reflect the expanded availability of the Pfizer-BioNTech COVID-19 vaccine to adolescents ages 12 and over.

CMS encourages states to update their current strategies for conducting COVID-19 vaccine education and outreach to include schools, pediatric primary care provider networks, and managed care organizations. In general, states are encouraged to coordinate with their state and local health departments and to partner with other stakeholders to promote coordinated outreach and messaging on COVID-19 vaccine information and availability. States should also assess the provider types that can administer vaccinations in the state and consider whether there should be expansions of providers. Also, to help promote COVID-19 vaccination for adolescents with disabilities and chronic conditions and prioritize those who are at greatest risk for severe disease,

states are also encouraged to develop and implement plans for proactive outreach to those with the <u>highest risk underlying conditions</u> as identified by CDC.²

Additionally, working closely with health plans is a key strategy to increase vaccine uptake since about 70 percent of Medicaid beneficiaries and 79 percent of children covered by CHIP are enrolled in a comprehensive managed care plan. States should work directly with their managed care plans to conduct targeted outreach to families with adolescents and children as COVID-19 vaccines become available.

States should review COVID-19 immunization messaging to ensure it encompasses the new recommendation for adolescents, and consider coordinating with local and state chapters of healthcare professional organizations, faith groups, community-based groups, tribes and tribal organizations, schools, and other groups that engage with adolescents and their families to share updated messaging. States may use Medicaid and CHIP administrative matching funds for beneficiary and provider education and outreach. Allowable outreach activities can be matched at the 50 percent federal financial participation (FFP) rate under Medicaid, per 42 CFR 433.15(b)(7), and at the applicable E-FMAP rate under CHIP, subject to the 10 percent limit on administrative expenditures, per 42 CFR 457.618. Examples of outreach activities eligible for administrative match include:

- developing and/or disseminating materials to inform Medicaid and CHIP eligible adolescents and their families about the availability of Medicaid and CHIP services such as COVID-19 vaccine administration;
- distributing literature about the benefits and availability of the COVID-19 vaccine to Medicaid- and CHIP-eligible adolescents and their families; and
- participating in or coordinating provider trainings with enrolled Medicaid and CHIP
 providers regarding the benefits of Medicaid and CHIP covered services such as COVID19 vaccine administration and how to assist adolescents and their families in accessing
 such services.

Because many children and adolescents have missed care due to the COVID-19 public health emergency, states are also encouraged to emphasize the importance of catching-up on routine preventive care, including well-child visits, screenings, and recommended pediatric immunizations. For adolescents receiving the COVID-19 vaccine at their medical home, the COVID-19 vaccine can be administered during the same visit as routine vaccines; if vaccines are not coadministered together during the visit, providers should take the opportunity to schedule follow-up visits to catch up on this missed care.³

² Pursuant to federal disability rights laws, some adolescents with disabilities may need reasonable accommodations to mitigate accessibility barriers and ensure effective communications. See guidance from the HHS Office for Civil Rights (OCR), at https://www.hhs.gov/sites/default/files/federal-legal-standards-prohibiting-disability-discrimination-covid-19-vaccination.pdf and https://www.hhs.gov/sites/default/files/disability-access-vaccine-distribution.pdf for details.

³ Note that providers who participate in the CDC COVID-19 Vaccination Program are not permitted to require that a beneficiary receive additional services in order to receive a COVID-19 vaccination. See https://www.cdc.gov/vaccines/covid-19/vaccination-provider-support.html.

For more information on specific recommendations to improve education, outreach, and COVID-19 vaccination rates, please see section VIII of the <u>Medicaid COVID-19 vaccine toolkit</u>. CMCS is available to provide technical assistance to states on COVID-19-vaccine-related issues. If you have any questions, please contact your state lead.



Medicaid, CHIP and BHP COVID-19 Vaccine Administration Coverage, Cost-Sharing and Reimbursement

Current Medicaid, Children's Health Insurance Program (CHIP) and Basic Health Program (BHP) Requirements for COVID-19 Vaccine Administration¹

This table summarizes current Medicaid, CHIP, and BHP coverage, costsharing, and federal reimbursement for COVID-19 vaccine administration²

Population	Is Coverage of COVID-19 Vaccine Administration Mandatory?	Is Cost-Sharing for COVID-19 Vaccine Administration Allowed?	What Percentage of State Payments for COVID-19 Vaccine Administration are Matched by the Federal Government?
Beneficiaries with Medicaid Full Coverage/Full Benefit Packages (Adults and Children)	/	×	100%
Medicaid Limited Benefit Group Enrollees	3	X	100%
Children's Health Insurance Program (CHIP) Enrollees	\	X	100%
Basic Health Program (BHP) Enrollees	4	X	There is no specific federal funding earmarked for vaccine administration under a BHP because funding is based on a fixed payment formula.

- On May 10, 2021, FDA expanded the emergency use authorization (EUA) for the Pfizer-BioNTech COVID-19 Vaccine to include adolescents aged 12-15 years. On May 12, 2021, the Advisory Committee on Immunization Practices updated its recommendation for use of the Pfizer-BioNTech COVID-19 vaccine to include adolescents aged 12-15 years.
- Both the Moderna and Janssen (Johnson&Johnson) COVID-19 vaccines are currently authorized and recommended for those aged 18 years and older.
- Distribution of all COVID-19 vaccines will be through the CDC COVID-19 Vaccination Program.
- Adolescents aged 12-15 years can be registered for COVID-19 vaccines through their health care provider, or state or local health department. Vaccines.gov can also help locate available vaccination sites.
- COVID-19 vaccinations are currently covered with no out-of-pocket cost to CHIP, BHP, and nearly all Medicaid beneficiaries.
- All three COVID-19 vaccines authorized in the United States are safe and effective.
 Additional information on COVID-19 vaccinations is available at CDC.gov.
- A provider will need to be enrolled in the CDC COVID-19 Vaccination Program to administer COVID-19 vaccines. Because COVID-19 vaccine distribution is currently outside of the Vaccines for Children (VFC) program, a provider does not need to be enrolled in the VFC program to administer a COVID-19 vaccine to an eligible child. It is expected that additional COVID-19 vaccines for adolescents will become available in 2021.
- States should refer to the Coverage and Reimbursement of COVID-19 Vaccines, Vaccine Administration, and Cost-Sharing under Medicaid, the Children's Health Insurance Program, and Basic Health Program toolkit for more information.

¹ The Medicaid and CHIP coverage and cost-sharing requirements summarized in this chart generally apply beginning on the date of enactment of the American Rescue Plan Act of 2021 (ARP) (March 11, 2021) and ending on the last day of the first calendar quarter that begins one year after the last day of the COVID-19 emergency period described in section 1135(g)(1) (B) of the Social Security Act (Act). The period of 100% federal matching funds for Medicaid and CHIP state expenditures on COVID-19 vaccines and their administration begins April 1, 2021 and ends on the last day of the first quarter that begins one year after the last day of the COVID-19 emergency period described in section 1135(g)(1)(B) of the Act.

² The table is meant to be a general reference tool, and states should contact CMS for technical assistance to discuss their program.

³ With certain limited exceptions.

 $^{^{4}}$ The ARP COVID-19 provisions at issue here do not apply to BHP, but coverage is mandatory.