



MEMORANDUM

TO: EPH Providers

FROM: El Paso Health

DATE: 04/10/2023

RE: COVID-19 Vaccine Counseling Procedure Code G0315 Now a Benefit

Effective for dates of service on or after December 2, 2021, COVID-19 vaccine counseling procedure code G0315 is a benefit of Medicaid for individuals birth through 20 years of age.

Procedure code G0315 will be limited to once per day for the same provider, as well as three per rolling year for any provider. Procedure code G0315 cannot be billed on the same day, by the same provider, for the same client, as any of the following COVID-19 vaccine administration procedure codes:

Procedure Codes							
0001A	0002A	0003A	0004A	0011A	0012A	0013A	0031A
0034A	0041A	0042A	0044A	0051A	0052A	0053A	0054A
0064A	0071A	0072A	0073A	0074A	0081A	0082A	0083A
0091A	0092A	0093A	0094A	0111A	0112A	0113A	0124A
0134A	0144A	0154A	0164A	0173A			

Procedure code G0315 is a Medicaid benefit for the following providers and places of service:

Place of Service	Provider Type
Office	Physician Assistant (PA), Nurse Practitioner (NP), Clinical Nurse Specialist (CNS), Physician, Pharmacist, Certified Nurse Midwife (CNM), Comprehensive Care Program (CCP) Provider, Nephrology (hemodialysis, Renal Dialysis), Pharmacy



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Home	PA, NP, CNS, Physician, CCP Provider
Outpatient Hospitals	Hospitals, Nephrology (Hemodialysis, Renal Dialysis), Renal Dialysis Facility
Other Locations	PA, NP, CNS, Physician, CCP Provider

Procedure code G0315 is a THSteps Program benefit for the following providers and places of service:

Place of Service	Provider Type
Office	Texas Health Steps Medical
Home	Texas Health Steps Medical
Outpatient Hospitals	Texas Health Steps Medical
Other Locations	Texas Health Steps Medical

EPH will reprocess affected claims submitted with this procedure code and date of service on or after December 2, 2021. Providers are not required to appeal the claims unless they are denied for additional reasons after the claims reprocessing is complete. Providers may bill retroactively for COVID-19 vaccine counseling for individuals birth through 20 years of age. The 95-day filing deadline for any claims that were not submitted prior to this notification will be waived

If you have any questions regarding this communication please contact our Provider Relations team at 915-532-3778 or email us at ProviderRelationsDG@elpasohealth.com

References:

Providers in MCO networks interested in enrolling as a COVID-19 vaccinator should visit www.dshs.texas.gov/coronavirus/immunize/provider-information.aspx for more information.