



INFORMATIONAL LETTER NO. 2510-MC

DATE: October 10, 2023

TO: All Iowa Medicaid Providers

APPLIES TO: Managed Care (MC)

FROM: Iowa Department of Health and Human Services (HHS), Iowa Medicaid

RE: Reimbursement for Pharmacy Point-of-Care Testing -Influenza and Streptococcus A

EFFECTIVE: Immediately

The 89th General Assembly in 2022 passed Senate File 296 which amended Iowa Code 155A.46 (Iowa Pharmacy Practice Act) to permit:

e. A pharmacist may, pursuant to statewide protocols developed by the board in consultation with the department of public health and consistent with subsection 2, order and administer the following to patients ages six years and older:

(1) Point-of-care testing and treatment for influenza, streptococcus A and COVID-19 as defined in section 686D.2 at the point of interaction between a pharmacist and a patient.

Each protocol developed by the Board of Pharmacy has qualifications that must be met by the pharmacist, including specific Accreditation Council for Pharmacy Education (ACPE)-approved ongoing continuing education (CE) related to the specific area of the protocol for each license renewal period. Each pharmacist is required to comply with the requirements and report license renewals and CE as required under the Board of Pharmacy rules.

Additionally, each Board of Pharmacy point-of-care testing and treatment protocol has patient notification requirements, including timelines, to ensure coordination of care with the patient's primary care provider. In cases where there is not a primary care provider, the pharmacist should provide a record to the patient.

[Please see the Iowa Board of Pharmacy Statewide Protocols webpage¹.](#)

¹ <https://pharmacy.iowa.gov/misc/statewide-protocols>

Medicaid Provider Enrollment Requirements for Point-of-Care Testing - Influenza and Streptococcus A

Pharmacists Newly Enrolling as a Medicaid Provider

Complete the following steps:

1. Complete entire Section B (pages 11-13) of the [Iowa Medicaid Universal Provider Enrollment Application Form 470-0254](#)².
2. Submit all qualifying documentation indicated in Section B for what you are enrolling.
3. Mail or email completed form pursuant to page 13 or fax to Iowa Medicaid, Attn: Provider Enrollment at 515-725-1155.
4. After enrolling with Iowa Medicaid as a provider, the pharmacist must also credential with each MC Plan.

Currently Enrolled Medicaid Pharmacists Adding on the Point-of-Care Testing

Complete the following steps:

1. Using Section B of the [Iowa Medicaid Universal Provider Enrollment Application Form 470-0254](#)³ as a change request, please write **Add-On** at the top of the form.
2. Complete the following boxes:
 - a. Provider or DBA Name (box 17)
 - b. Tax ID (box 18a)
 - c. National Provider Identifier (NPI) (box 23a)
 - d. Authorized Pharmacist (box 29) – steps d and e
 - i. Submit the qualifying documentation within those steps.
 - e. Complete page 13 for complete submission.
3. Mail or email completed form pursuant to page 13 or fax to Iowa Medicaid, Attn: Provider Enrollment at 515-725-1155.

Streptococcus A and Influenza specific ACPE-approved ongoing CE will be verified for both Streptococcus A and Influenza protocols. If the CE requirement is not met, claim submission will be denied.

² <https://hhs.iowa.gov/sites/default/files/470-0254.pdf>

³ <https://hhs.iowa.gov/sites/default/files/470-0254.pdf>

Medical Claim Submission

Pharmacists will submit a claim for these test services in accordance with medical benefits policies and procedures rather than point-of-sale, using electronic claim submission standards per each MC Plan.

The claim(s) for the prescribed medication(s) resulting from the point-of-care test in pursuant with the respective protocol will be submitted through the pharmacy benefit.

Implementation of the point-of-care testing and treatment only applies to members who are currently enrolled with a MC Plan. Fee-for-Service (FFS) Members will be added to reimbursement processes in the future, communication will be forthcoming.

The following table lists the Current Procedural Terminology (CPT) codes for point-of-care testing and billing.

Point-of-Care Testing and Treatment Billing Codes	
Code	Definition
87804	Infectious agent antigen detection by immunoassay with direct optical (i.e., visual) observation; Influenza
87880	Infectious agent antigen detection by immunoassay with direct optical (i.e., visual) observation; Streptococcus, group A
99202	Office or other outpatient visit for the evaluation and management of a new patient. When using time for code selection, 15-29 minutes of total time is spent on the date of the encounter
99203	Office or other outpatient visit for the evaluation and management of a new patient. When using time for code selection, 30-44 minutes of total time is spent on the date of the encounter
99211	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional, typically 5 minutes
99212	Office or other outpatient visit for the evaluation and management of an established patient. When using time for code selection, 10-19 minutes of total time is spent on the date of the encounter
99213	Office or other outpatient visit for the evaluation and management of an established patient. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.

Point-of-Care Testing and Treatment Billing Codes	
99214	Office or other outpatient visit for the evaluation and management of an established patient. When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter
99215	Office or other outpatient visit for the evaluation and management of an established patient. When using time for code selection, 40-54 minutes of total time is spent on the date of the encounter
99441	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment: 5-10 minutes of medical discussion
99442	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment: 11-20 minutes of medical discussion
99443	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment: 21-30 minutes of medical discussion
G2012	Brief communication technology-based service, e.g., virtual check-in, by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment: 5-10 minutes of medical discussion

If you have questions, please contact Iowa Medicaid Provider Services or the appropriate MCO:

Iowa Medicaid Provider Services:

- Phone: 1-800-338-7909
- Email: imeproviderservices@dhs.state.ia.us

Amerigroup Iowa, Inc.:

- Phone: 1-800-454-3730
- Email: ProvidersolutionsIA@amerigroup.com
- Website: <https://providers.amerigroup.com/ia>

Iowa Total Care:

- Phone: 1-833-404-1061
- Email: providerrelations@iowatotalcare.com
- Website: <https://www.iowatotalcare.com>

Molina Healthcare of Iowa:

- Phone: 1-844-236-1464
- Email: iaproviderrelations@molinahealthcare.com
- Website: <https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx>
- Provider portal: <https://www.availity.com/molinahealthcare>