



Vaccine Administration National Fee Schedule: July 2026 Quarterly Update

Related Change Request (CR) Information	
Number: 14470	Release Date: April 20, 2026
Effective Date: July 1, 2026	Implementation Date: July 6, 2026
Transmittal Number: R13733CP	
Title: National Fee Schedule for Vaccine Administration Quarterly Update - July 2026	

Affected Providers

- Physicians
- Suppliers
- Other providers billing Medicare Administrative Contractors (MACs) for services

Action Needed

Make sure your billing staff knows about coding updates for TOFIDENCE® (tocilizumab-bavi) for intravenous administration in hospitalized adults with COVID-19.

Key Updates

CMS approved TOFIDENCE (tocilizumab-bavi), a biosimilar to ACTEMRA® (tocilizumab), for intravenous administration in hospitalized adults with COVID-19 who get systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation.

FDA approved TOFIDENCE on July 22, 2024. Effective July 1, 2026, we established HCPCS code Q0234 to describe TOFIDENCE to treat COVID-19 and the associated HCPCS administrative codes M0231 and M0232.

- Q0234: Injection, tocilizumab-bavi, for hospitalized adult patients with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, 1 mg
- M0231: Intravenous infusion, tocilizumab-bavi, for hospitalized adult patients with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, first dose
- M0232: Intravenous infusion, tocilizumab-bavi, for hospitalized adult patients with covid-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, second dose

Note: You could bill by reporting a not otherwise classified (NOC) COVID-19 monoclonal antibody product HCPCS code and associated administrative codes (Q0235, M0235, and M0236). Refer to [CR 14195](#) for more information on NOC COVID-19 monoclonal antibody product HCPCS codes.

MACs don't apply patient coinsurance or deductibles for Medicare Part B vaccine administration HCPCS codes and CPT codes listed on the Monoclonal Antibody Product Administration Fee Schedule.

Background

Under section 1861(s)(10) of the [Social Security Act](#), Part B covers both the vaccine and its administration for specified preventive vaccines, such as influenza, pneumococcal, COVID-19, and hepatitis B.

We continue to cover and pay:

- COVID-19 monoclonal antibody products for post-exposure prophylaxis or treatment of COVID-19 under the Part B preventive vaccine benefit through the end of the CY in which the Secretary ends the current Emergency Use Authorization (EUA) for COVID-19 drugs and biologicals
- Monoclonal antibodies used for pre-exposure prophylaxis of COVID-19 under the Part B preventive vaccine benefit even after the EUA declaration for drugs and biological products is terminated so long as after the EUA declaration ends, such products have market authorization and meet applicable coverage requirements

Refer to [COVID-19 vaccine pricing](#) for relevant codes for COVID-19 monoclonal antibody products and their administration.

More Information

We issued CR 14470 to your MAC as the official instruction for this change. For more information, find your [MAC's website](#).

Document History

Date of Change	Description
April 21, 2026	Initial article released.

View the [Medicare Learning Network® Content Disclaimer and Department of Health & Human Services Disclosure](#). The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health & Human Services (HHS).