IHCP banner page

INDIANA HEALTH COVERAGE PROGRAMS

BR201539

SEPTEMBER 29, 2015

Reminder: IHCP to reimburse pharmacy providers for adult vaccine administration

As announced in Indiana Health Coverage Programs (IHCP) bulletin <u>BT201564</u>, effective October 1, 2015, the IHCP will reimburse IHCPenrolled pharmacy providers for pharmacist-administered vaccines to eligible IHCP members 19 years of age and older. Details regarding the list of covered vaccines, pharmacy requirements, reimbursement information, and claim instructions were outlined in the previously referenced bulletin.



Providers are reminded of the following with regard to this policy:

- IHCP-enrolled pharmacy providers will be reimbursed for the administration of a covered vaccine by a pharmacist employed by the pharmacy provider.
- Pharmacy claims for this service must be submitted through the standard point-of-sale (POS) system or via paper pharmacy claims.
- The pharmacy must submit only its usual-and-customary charge for the service.
- The maximum allowable reimbursement for the administration component of the service will be consistent with reimbursement for vaccines administered by medical providers, which is currently \$17.61 (includes intranasal and oral vaccines, as well as percutaneous, intradermal, subcutaneous, and intramuscular injections).
- Vaccinations for IHCP members who are dually eligible for Medicaid and Medicare must be billed to Medicare.

Additionally, providers are reminded that consistent with existing IHCP policy regarding vaccinations administered by medical providers, pharmacist-administered vaccinations are exempt from member copayments.

Pharmacy providers should refer to the updated *Companion Guide: NCPDP Version D.0 Transaction Payer Sheet* (Payer Sheet) for all required fields and specific billing instructions. The updated Payer Sheet is available via the <u>Pharmacy Services</u> quick link at indianamedicaid.com. (See the *NCPDP D.0 Payer Sheet Effective 10/1/15* in the Quick Link navigation panel on the pharmacy benefit manager home page.) Please direct questions about this article to the OptumRx Clinical and Technical Help Desk by calling toll-free 1-855-577-6317.

MORE IN THIS ISSUE

 IHCP reminds providers of the eligibility criteria for VFC vaccinations

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The Indiana State Department of Health (ISDH) administers the federal Vaccines for Children (VFC) Program. Indiana Health Coverage Programs (IHCP) providers enrolled in the VFC program that administer VFC vaccines to IHCP members **18 years of age and under** may bill the IHCP for the appropriate VFC vaccine administration fee.

VFC-Eligible Children

The goal of the VFC Program is to help raise childhood immunization levels in the United States by supplying healthcare providers with free vaccines to administer to children **18 years of age and under**. Age-eligible children must also meet one or more of the following criteria:

- Enrolled in IHCP
- Uninsured children without health insurance
- Underinsured for example, children with health insurance that does not cover immunizations
- Identified by parent or guardian as American Indian or Alaskan native

Billing IHCP for the VFC Administration Fee

Providers may bill the IHCP for administration of a VFC vaccine if the child is enrolled in IHCP. Providers must bill the appropriate diagnosis code, the procedure code of the specific vaccine administered with a billed amount of \$0.00, and the appropriate vaccine administration code with the SL modifier as shown in Table 1.

Procedure Code	Description
90471 SL	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscu- lar injections); 1 vaccine (single or combination vaccine/toxoid); VFC vaccine administration
90472 SL	Each immunization administration (includes percutaneous, intradermal, subcutaneous, or intra- muscular injections); each additional vaccine (single or combination vaccine/toxoid) (List sepa- rately in addition to code for primary procedure); VFC vaccine administration
90473 SL	Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/ toxoid); VFC vaccine administration
90474 SL	Each immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure); VFC vaccine administration

Table 1 – Procedure codes for billing VFC vaccine administrations

QUESTIONS?

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