Vaccinations

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Disclaimer

Highmark Health Options' medical claims payment and prior-authorization policy is a reference resource regarding payment and coverage for the services described. This policy does not constitute medical advice and is not intended to govern and/or otherwise influence medical necessity decisions.

Policy Scope

Purpose
This policy outlines the intentions, guidelines, and provider reimbursement methodologies for the Vaccination for Children Program and adults. This policy also references EPSDT as it applies to vaccinations.

Vaccination Guidance

Vaccination Recommendations by Age outlined by the CDC:

Age Group	Link
Birth through 18	https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html
19 years or older	https://www.cdc.gov/vaccines/schedules/hcp/imz/adult.html

Missed Dosage

If a member has a vaccine that requires a booster but misses the booster, it is recommended that providers consult with CDC for guidance.

Reimbursement Guidance

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- For a vaccine to be eligible for reimbursement, vaccine must meet CDC guidelines (https://www.cdc.gov/vaccines/).
- Reimbursement for the administration fees is paid on the vaccine line of claim. There must be an administration line on claim for each vaccine line billed.
- HHO's participating providers enrolled in the VFC program must get VFC vaccines from Delaware Medicaid and Delaware Healthy Children Program (DHCP) free of charge.
- HHO will pay its providers the Regional Maximum VFC vaccination administration fee for Medicaid and DHCP, however it will not cover the costs of or associated with obtaining the free VFC vaccines.
- If the only service provided during the encounter is vaccine administration, the provider may not bill for an office visit. An office visit can only be billed if a separate, identifiable service is performed during the same visit.
- The appropriate National Drug Code (NDC) must be billed with the vaccine.

- For additional Early and Periodic Screening, Diagnostic and Treatment (EPSDT) vaccination guidance, please refer to: https://www.highmarkhealthoptions.com/content/dam/digital-marketing/en/highmark/highmarkhealthoptions/providers/medical-payment-policies/EPSDT%20Reimbursement01032023.pdf
- For COVID vaccine guidance please refer to: https://www.highmarkhealthoptions.com/content/dam/digital-marketing/en/highmark/highmarkhealthoptions/providers/COVID-19-provider-resources/hho_ee-0305-2022_covid-19_vaccine_info_09122022.pdf

Provider Requirements

- Highmark Health Options requires Primary Care Physicians who are treating pediatric patients to be enrolled in the Vaccine for Children (VFC) program.
- HHO requires participating PCPs to enroll with Department of Public Health (DPH) to receive vaccines covered by the Vaccines for Children (VFC) program free of charge for both VFC eligible (Medicaid) children (funded by VFC) and Delaware Healthy Children Program (DHCP) children to use the free vaccine for its child member.
- Providers must report all immunizations to the DPH Immunization Registry.

Billing Guidance

Vaccination Administration
- Administration Code (*See Universal Administration Codes table in appendix*)
- CPT procedure Code for the specific vaccine being administered (*See Associated Procedure Code table in appendix*)
- ICD-10 Diagnosis Code Z23 needs to include a pointer for this diagnosis code when being billed with the appropriate procedure code for the administration code

Modifiers

- **SL** – The SL modifier should be used only for members age birth through 18. Once member reaches the age of 19, they are no longer eligible for VFC and at this point, cost of vaccine should be paid to provider, so SL is not needed.

Code Appendix

Universal Administration Codes

Code	Description	VFC	Adult
90460	Pediatric IA codes (90460, 90461) are reported only when both of the following requirements are met: 1.The patient must be 18 years or younger 2. The physician or other QHP must perform face-to-face vaccine counseling associated with the administration NOTE: The clinical staff can do the actual administration of the vaccine. Used to report the first or only component in a single vaccine given during an encounter. You can report **90460** more than once during a single office encounter.	x	
90461	Each additional vaccine or toxoid component administered (List separately in addition to code for primary procedure.)	x	
90471	Provider gives face-to-face counseling for members over the age of 18 or a member under 18 who did not have counseling just administration of vaccination	x	x
90472	Each additional vaccine (single or combination vaccine/ toxoid) (List separately to code for primary procedure.)	x	x
90473	IA (includes intranasal or oral administration); one vaccine (single or combination vaccine/toxoid). Do not report **90473** in conjunction with **90471**.	x	x

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Vaccine Codes:

Vaccine	Scheduling	Age Category	VFC	RX Benefit	Medical Benefit	CPT Codes
Flu	age = 6 months	6 months - 3 years	x			90653, 90654, 90655, 90656, 90657, 90658, 90660, 90661, 90662, 90664, 90666, 90667, 90668, 90672, 90673, 90674, 90682, 90685, 90686, 90687, 90688, 90689, 90694, 90756
	Annual	4-18 years	x	x		
	Annual	19+		x	x	
Pneumonia		<19	x			90670, 90671, 90677, 90732
	4 dose series	19+		x	x	
Varicella	age = 12+	<19	x			90716
	2 dose series	19+		x	x	
Shingrix	age = 50+	19-50			x	90750
		50-59		x	x	
	2 dose series	60+		x	x	
BCG (TB)	age = 0-12 months	<19			x	90585
	1 dose for select people	19+			x	
DPT, DPPT, DPTHepB, DT	age= 11+	<19	x			90696, 90697, 90698, 90700, 90702, 90714, 90715, 90723
	5 dose series	19+			x	
Haemophilis B (Hib)	3 or 4 dose series	<19	x			90647, 90648
		19+			x	
Hepatitis A	Hep A-2 dose series	<19	x			90632, 90633, 90636
		19+			x	
Hepatitis B	Hep B-3 dose series	<19	x			90636, 90740,90744, 90746, 90748
		19+			x	
HPV	age= 9+	<19	x			90649, 90650, 90651
	2 or 3 dose series	19+			x	

MMR, MMR+Varicella	MMR-2 dose series	<19	x			
		19+			x	90707, 90710
Meningococcal	3 dose series	<19	x			90619, 90620, 90621, 90644, 90733, 90734
		19+			x	
Polio	4 dose series	<19	x			
		19+			x	90713
Rabies	4 dose series- after exposure	<19			x	
		19+			x	90675, 90676
Rotovirus	2 or 3 dose series	<19	x			
		19+			x	90680, 90681

References:

1.) Delaware, T. S. O. (n.d.). *Vaccine for Children (VFC) Program - Delaware Health and Social Services - State of Delaware*. Retrieved October 6, 2022, from

https://dhss.delaware.gov/dph/dpc/immunize-vfc.html

2.) *VFC: Vaccines for Children Program | CDC*. (n.d.). Retrieved October 6, 2022, from

https://www.cdc.gov/vaccines/programs/vfc/index.html

Policy Update History

10/24/2022	Approval

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