

**Massachusetts Health Plans Immunization Reimbursement Policies
Summary of Responses 2008**

Question >>>	1. Does your plan reimburse Providers for all the ACIP recommended vaccine products when these are not supplied by MDPH? - Please list all the sections of your plan for which your response <u>does not</u> apply. (Please review your responses as they apply to each of the following vaccines: Hep A - 90634; Tdap - 90715; Varicella- 90716; Flu - 90657 & 90658; FluMist - 90660; MCV4 - 90734; Rotavirus - 90680; HPV - 90649)	2. Does your plan reimburse providers for the <u>actual acquisition cost</u> of vaccines ?	3. Does your plan reimburse for more or less than the private sector published price for of the vaccine products?	4. What is the billing procedure for vaccine products?	5. Does your health plan pay for the administration of vaccines? (CPT codes 90465-8 and 90471-90473)	6. Are immunizations, vaccine products and/or administration included in the deductibles? - Please list the sections of your plan for which your response applies	7. Does the information provided in your responses apply to the subsidized Commonwealth Care Connector plans?
Aetna	Yes	No: The reimbursement rate is updated quarterly and based on a verified, available acquisition price (plus approximately 5%) at the beginning of each quarter. This rate is maintained until the next update.	No: The reimbursement rate is updated quarterly and based on a verified, available acquisition price (plus approximately 5%) at the beginning of each quarter. This rate is maintained until the next update.	The provider submits a claim directly to Aetna including the vaccine and administration CPT codes.	Yes	This varies by plan design.	Do not know the answer to this question.
BCBSMA	BCBSMA determines its reimbursement processing for vaccines based on the Immunization Programs' published State vaccine information/availability - This response applies to all Product lines which provide coverage for vaccines. Effective 10/2007 BCBSMA will reimburse for the varicella vaccine when physicians are unable to obtain free vaccine from the Massachusetts DPH Immunization Program. - When BCBSMA has received notification from the Massachusetts' DPH Immunization Program alerting providers/payers that a vaccine is no longer available 'free from the State' BCBSMA will reimburse physicians for their purchased vaccine product to the extent that the subscriber (members') agreement covers vaccines. [i.e. exception of a Product line with limited benefits for vaccines; Indemnity products in which the benefit is included up to 6 years of age, but not beyond that.]	Blue Cross Blue Shield of Massachusetts reimburses for the average wholesale price of a vaccine product when the vaccine is not one supplied free from the state.	BCBSMA reimbursement is 100% of the AWP.	Physicians would bill according to CPT billing guidelines for the vaccine product.	Yes, Physicians would bill according to CPT billing guidelines for Immunization Administration for Vaccine/toxoids. BCBSMA does reimburse vaccine administration procedures and an E&M service (sick or preventive) when this combination of services is provided to members 0-18 years of age.	Inclusion of immunizations, vaccine products and/or administration in a deductible is dependent on the Plan benefit design. Generally, when these services are considered preventive services by a Plan benefit design they are not included in the deductible in order for a Plan to be compliant with the Minimum Creditable Coverage standards in Massachusetts	"Not applicable". BCBSMA does not offer any of the subsidized Commonwealth Care Connector plans.
BCBSRI ** See comments on the bottom of the table	Yes, except flumist when not state supplied.	We have an allowance based upon AWP	We have an allowance based upon AWP	Report the correct CPT administration code for all vaccines. Report the vaccine supply code for tracking and minor reimbursement (ave \$0.50). If vaccine not MDPH/RI DOH supplied use modifier 22 on vaccine supply code to indicate it was purchased. State supplies MUST be used, if available.	Yes, including for intranasal (even if we do not pay flumist supply when purchased by provider).	Generally not	N/A
BMC HealthNet	Yes	BMC HealthNet Plan pays providers for VFC related vaccines at AWP+5%	The reimbursement for the vaccines listed in Question -1 is greater than the private sector published price.	All vaccine products must be billed to the Plan with the corresponding administration code. If the vaccine product is state supplied, both the initial administration code and the vaccine material must be billed with the "SL" modifier. Otherwise, no "SL" modifier should be used.	Yes	No deductibles apply to MassHealth or Commonwealth Care Plans	Yes

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Cigna	yes, <i>It applies to all</i>	yes	CHC reimburses providers per the CHC fee schedule.	Standard CPT code submission	yes	Varies by plan, which may or may not include co-payments, or deductibles. <i>For OAP and PPO plans, immunizations subject to deductibles</i>	NA
Fallon	Yes, FCHP does reimburse Providers for all the ACIP recommended vaccine products when these are not supplied by MDPH. This applies to all plans.	Yes, FCHP does reimburse the provider for the acquisition of vaccines based on contracted terms	FCHP reimburses the provider for the acquisition of vaccines based on contracted terms.	The billing procedure for vaccine products is standard CPT codes.	Yes, FCHP does pay for the administration of vaccines.	Immunizations, vaccine products and/or administration are not included in the deductibles for the commercial plans. Part D vaccines are included in the deductible for Medicare Part D. plans.	Yes, the information provided applies to subsidized Commonwealth Care Connector plans.
Great-West Healthcare/One Health Plan - No Response in 2008							
HNE - Health New England, Inc.	Yes, HNE does reimburse Providers for all the ACIP recommended vaccine products when these are not supplied by MDPH (except FluMist, which is not covered in most of the plan designs). This applies to all plans.	No	HNE reimburses the provider for the acquisition of vaccines based on contracted terms.	The billing procedure for vaccine products is standard CPT codes.	Yes, HNE does pay for the administration of vaccines.	This varies by plan design.	HNE does not offer any of the subsidized Commonwealth Care Connector plans.
HPHC	Yes	No	HPHC reimburses non-state supplied vaccines at the HPHC fee schedule rate	Bill both the vaccine code and the appropriate administration code. Any vaccine that is state-supplied should have an SL modifier appended to the vaccine code	Yes	For some HMO plans they are. Addition: "The plan in question is called Buy Direct and is part of the connector package".	Yes – One of the HMO plans sold via the Connector is one of the plans where there are vaccine/immunization deductibles
Mass Health - PCC	Yes Hep A - providers must use the unlisted vaccine code 90749 (not 90634); Tdap - it is for members age 13 and over, but providers must use the unlisted vaccine code 90749 (not 90715); FluMist - Yes, with Prior Approval; MCV4- Yes, for members age 19 and over; Rotavirus - N/A supplied by VFC; HPV - Yes, for women ages 19-26	Yes, if there is no fee set by Health Care Finance and Policy for that vaccine. No, if there is a fee on file, that fee is paid.	Reimbursement is based on DHCFP pricing	The provider should bill the appropriate vaccine administration code if an office visit has not also been claimed. The vaccine code should also be billed if the vaccine is privately purchased. Providers must follow MassHealth billing regulations for submission for a vaccine that is listed for individual consideration. Submit vaccine invoice with the claim. Hep A - providers must use the unlisted vaccine code 90749 (not 90634); Tdap - it is covered code for members age 13 and over but providers must use the unlisted vaccine code 90749 (not 90715);	Yes, if no visit is claimed by the provider for that member on the same day.	No, MassHealth does not have deductibles	Unsure
NHP	NHP provides reimbursement for these products when not supplied by MDPH with the exception of FluMist.	No. NHP will reimburse according to our fee schedule, which is based upon the published price for the vaccine products.	With the release of our updated fee schedule in 4/08, NHP will reimburse providers at or above the published price of the vaccines, based upon the pricing information contained in: Vaccines: VFC/CDC Vaccine Price List.	See NHP Provider manual	Yes	No (deductibles only apply to certain Commonwealth Choice products)	Yes

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Network-Health	Yes <i>Hep A</i> -reimburse for members 2 years of age and older only; <i>varicella</i> - reimburse for members 6 years of age and older only; <i>Flu</i> - only when state supply is exhausted; <i>Flumist</i> - requires Prior Authorization; <i>HPV</i> - available for members between the ages of 18-26, (and under 18 with invoice only if state supply is exhausted). <i>Prior Authorization Required for Out Of Network</i> .	For non state supplied vaccines, we reimburse at the MassHealth published rate. If the supply of state supplied vaccines is exhausted, we'll reimburse at 100% of acquisition costs.	Network Health reimburses the MassHealth Rates, which are lower than the private sector published rates	For non state supplied vaccines: Providers should bill with the vaccine, as well as the administration code. They will be reimbursed at the MassHealth rate. In the absence of a rate, they will be reimbursed at 50% of charges. For state supplied Vaccines: Providers should bill with the vaccine code with the SL modifier. They will be reimbursed for the administration only. If the state supply is exhausted, providers must submit an invoice to be reimbursed for the acquisition cost of the vaccine.	Yes, at the Masshealth Rates.	No	Yes
Tufts	Yes. All products. (Travel vaccines are not covered, however.)	Reimbursement is average sales price (ASP) plus 6%	Reimbursement is average sales price (ASP) plus 6%	Corresponding vaccine and administration codes. Use SL modifier for state-supplied vaccine.	Yes	No for fully insured; may vary for self insured plans	Yes
Unicare	Yes	The Plan will reimburse its allowed amount for vaccine product and for its administration. For consideration of other than the standard allowance, submit the claim with a copy of invoice showing the practice's cost for the vaccine.	Currently we use a discount-off-charge reimbursement. Starting 2/1/08, we are going to a fee schedule that represents prevailing cost acquisition for physician practices. For consideration other than the standard allowance, submit the claim with a copy of invoice showing the practice's cost for the vaccine.	The Plan will reimburse its allowed amount for vaccine product and for its administration. For consideration other than the standard allowance, submit the claim with a copy of invoice showing the practice's cost for the vaccine.	Yes	No, for all Plan options	Not applicable

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United	An immunization is considered covered if it is FDA approved, has explicit ACIP recommendations, and does not fall under an exclusion in the Certificate of Coverage.	Depending upon terms of each provider agreement, United uses industry standard sources to set immunization fees. These industry sources include Thomson Micromedex Red Book Average Wholesale Price (AWP) and Centers for Medicare and Medicaid Services (CMS) Drug Pricing at the medical procedure code (meaning CPT/HCPCS code) level as fee schedule benchmarks for immunization pricing. Effective April 2008, United added RJ Health Systems International LLC as a fee source for immunizations. If an industry standard source is not available for certain immunizations, they are paid at the default percent of billed charge stipulated in each provider's participating agreement until such time as industry standard source associated with the provider agreement publishes a fee.	Prices are determined by United industry standard sources used to set immunization fees, including Thomson Micromedex Red Book AWP CMS Drug Pricing at the medical procedure code level. Effective April 2008, United added RJ Health Systems International LLC as an alternative fee source for immunizations. Excise Tax - The National Childhood Vaccine Injury Act of 1986 created the National Vaccine Injury Compensation Program (VICP) to ensure an adequate supply of vaccines, stabilize vaccine costs, and to compensate individuals injured by certain vaccines. The VICP Trust Fund is funded by a per dose standard excise tax on certain vaccines. The drug manufacturer pays the excise tax to the federal government on doses sold of each vaccine covered by the tax. The codes impacted by VICP are reflected in Red Book AWP pricing and other fee sources as the additional cost becomes included in data submitted to manufacturers and are available to be included in industry source fee calculations	The fee schedule allowance for the amount of vaccine delivered to the patient follows correct coding guidelines. The volume of vaccine specified by each CPT/HCPCS level service code descriptor determines the number of units of vaccine delivered to the patient, which are reported on the provider claim. The payment allowance is determined by the units of service reported on the claim multiplied by the fee per unit.	If the only reason for the visit is immunization, then in addition to the immunization CPT/HCPCS code(s), United reimburses separately for vaccine administration CPT codes when these codes are submitted along with vaccine codes. United pays immunization administration codes at amounts determined by the CMS RVUs and other applicable RBRVS fee schedule factors set in the provider's fee schedule. Office visit codes are paid during the same office visit as the immunization administration if, under the rules of correct coding, the office visit code is accompanied by modifier 25 to indicate that the visit is for a significant, separately identifiable evaluation and management service by the same physician on the same day as the immunization.	Any co-payment, deductible or coinsurance that the customer is responsible to pay under the customer's benefit contract will be subtracted from the listed amount in determining the amount to be paid.	We do not have a Connector Plan

Comments

** [BCBSRI is an out of state plan](#)

Only small portion of its members receive medical care in Massachusetts. BCBSRI policies reflect the immunization funding and distribution in Rhode Island and its resident's vaccine eligibility.

The following vaccines Hep A – 90634; Tdap - 90715; Varicella- 90716; Flu - 90657 & 90658; MCV4 - 90734; Rotavirus - 90680; HPV - 90649 Are Covered by BCBSRI

Billing statements apply only to providers that bill BCBSRI directly and not through BCBSMA.

BCBSRI expects providers to use state supplied vaccines to the extent they are available.

If the provider supplies the vaccine because the state will not, the provider may append modifier 22 to the vaccine CPT code and the allowance will result in payment for administration and supply.

The vaccination allowance is built into the vaccine code.

For state supplied vaccines please report the vaccine supply code without the 22 modifier so that the vaccine type can be tracked. In all cases report the appropriate vaccine administration code

FluMist (Updated 2-5-07)

Generally non-covered, but in years of vaccine shortage it has been covered. It is also routinely covered using 90660 and the allowance is the administration amount.

Modifier 22 will not allow additional payment unless a shortage has been declared.