

Affected Programs: BadgerCare Plus, Medicaid

To: Family Planning Clinics, Federally Qualified Health Centers, HealthCheck Providers, Home Health Agencies, Nurse Midwives, Nurse Practitioners, Nursing Homes, Pharmacies, Physician Assistants, Physician Clinics, Physicians, Rural Health Clinics, HMOs and Other Managed Care Programs

New Reimbursement Policies for Immunizations Given to BadgerCare Plus and Medicaid Members

This *ForwardHealth Update* describes new reimbursement policies for immunizations given to BadgerCare Plus and Medicaid members.

Effective for dates of service (DOS) on and after October 1, 2008, ForwardHealth has changed the reimbursement policies for immunizations. These policies apply to Medicaid, the BadgerCare Plus Standard Plan, the BadgerCare Plus Benchmark Plan, and the BadgerCare Plus Core Plan.

Reimbursement for Vaccines Provided to Children

Most vaccines provided to members 18 years of age or younger are available through the federal Vaccines for Children (VFC) Program at no cost to the provider. If a vaccine is available through the VFC Program, providers are required to use vaccines from VFC supply for members 18 years of age or younger. ForwardHealth reimburses only the administration fee for vaccines supplied by the VFC Program.

For vaccines that are not supplied by the VFC Program, providers may use a vaccine from a private stock. In these cases, ForwardHealth reimburses for the vaccine and the administration fee.

Vaccines for Children Program

The federal VFC Program was created to provide vaccines to eligible children through enrolled public and private providers. The VFC Program is part of a national approach to improving immunization services and immunization levels.

Any child 18 years of age or younger who meets at least one of the following criteria is eligible for the VFC Program:

- Eligible for Medicaid or BadgerCare Plus.
- American Indian or Alaska Native, as defined by the Indian Health Services Act.
- Uninsured.
- Underinsured. (These children have health insurance, but the benefit plan does not cover immunizations. Children in this category may only receive immunizations from a federally qualified health center or rural health clinic; they cannot receive immunizations from a private health care provider using a VFC-supplied vaccine.)

Refer to the Attachment of this *ForwardHealth Update* for a list of procedure codes for vaccines currently covered by the VFC Program.

For More Information

Providers may also refer to the VFC Web site at dhs.wisconsin.gov/immunization/vfc.htm for a complete list of vaccines available through the VFC Program.

Reimbursement for Vaccines Provided to Adults

For vaccines from a provider's private stock that are administered to members 19 years of age or older, ForwardHealth reimburses for the vaccine and the administration, except when the member resides in a nursing home.

Nursing home providers are reminded that influenza vaccines and pneumonia vaccines are separately reimbursable for nursing home residents. The administration is considered part of the nursing home daily rate, so providers are only reimbursed for the vaccine.

Claim Submission

Providers are required to indicate the procedure code of the actual vaccine administered, not the administration code, on claims for all immunizations. Reimbursement for both the vaccine, when appropriate, and the administration are included in the reimbursement for the vaccine procedure code, so providers should not separately bill the administration code. Providers are required to indicate their usual and customary charge for the service with the procedure code.

In the past, certain providers may have used the "U1" modifier on claims for vaccines administered to adult members to obtain reimbursement for both the vaccine and the administration. The "U1" modifier is no longer required to obtain reimbursement for both the vaccine and the administration.

Sample Reimbursement Scenario

A mother and her 10-year-old child are both Standard Plan members and they both receive an influenza virus vaccine at a physician's office. The influenza virus

vaccine is available through the VFC Program. The child's vaccine is obtained from the provider's VFC supply. The mother's vaccine is obtained from the provider's private stock.

To submit a claim for the child's vaccine, indicate *Current Procedural Terminology* (CPT) procedure code 90658 (Influenza virus vaccine, split virus, when administered to individuals 3 years of age and older, for intramuscular use) with the usual and customary charge. ForwardHealth will reimburse for the administration fee only.

To submit a claim for the mother's vaccine, indicate procedure code 90658 with the usual and customary charge. ForwardHealth will reimburse for the vaccine and the administration fee.

Submitting Claim Adjustments for Certain Immunization Procedure Codes

Providers may submit adjustments to claims for certain immunization procedure codes administered to members 19 years of age or older to receive reimbursement for both the vaccine and the administration fee. Adjustments may be submitted for claims with DOS within the 365-day timely filing deadline. The following conditions must be met:

- The procedure code indicates a vaccine covered by the VFC Program, the provider used a vaccine from his or her private stock, and the procedure code is allowable for members 19 years of age or older.
- The provider was only reimbursed for the administration fee and not reimbursed for the vaccine.

Refer to the Attachment of this *Update* for a list of CPT procedure codes for vaccines that are currently available through the VFC Program. The table indicates which vaccines are allowable for members 19 years of age or older when supplied from a provider's private stock.

ForwardHealth must receive all adjustment requests within 365 days of the DOS. Claims and claim adjustment requests for immunization procedure codes that are beyond the 365-day timely filing deadline may be submitted to Timely Filing Appeals.

Submitting Timely Filing Appeals Requests for Certain Immunization Procedure Codes

Claims and adjustments to claims for immunizations that are beyond the 365-day timely filing deadline must be submitted to timely filing appeals and meet the following conditions:

- The claim has a DOS on and after October 1, 2008.
- The procedure code indicates a vaccine covered by the VFC Program, the provider used a vaccine from his or her private stock, and the procedure code is allowable for members 19 years of age or older.
- The provider was only reimbursed for the administration fee and not reimbursed for the vaccine.

Timely filing appeals requests for this issue must be received by ForwardHealth on or before August 31, 2010. When completing the Timely Filing Appeals Request, F-13047 (10/08), providers should check the “ForwardHealth Reconsideration” box and write in the comment section at the bottom of the form, “To obtain reimbursement for the full cost of a vaccine provided to an adult member (per *Update* 2010-25).” Providers do not need to indicate the claim number or payer claim control number, the Remittance Advice (RA) number, the 835 Health Care Claim Payment/Advice transaction number, or the check issue date on the form. Providers may complete a single Timely Filing Appeals Request to serve as the cover sheet for all claims or adjustments to claims that are beyond the 365-day timely filing deadline.

Providers should refer to the Claims section and Timely Filing Appeals chapter of their Online Handbook for more information about timely filing appeals.

Information Regarding Managed Care Organizations

This *Update* contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *ForwardHealth Update* is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at www.forwardhealth.wi.gov/.

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ATTACHMENT

Procedure Codes for Vaccines Available Through the Vaccines for Children Program

The following table lists *Current Procedural Terminology* procedure codes for vaccines currently available through the Vaccines for Children Program. This list is subject to change. Procedure codes followed by a “†” symbol indicate that a provider may be reimbursed for both the vaccine and the administration for members ages 19 and over when the provider uses a vaccine from his or her private stock.

Procedure Code	Description
90632 [†]	Hepatitis A vaccine, adult dosage, for intramuscular use
90633	Hepatitis A vaccine, pediatric/adolescent dosage-2 dose schedule, for intramuscular use
90636 [†]	Hepatitis A and Hepatitis B vaccine (HepA-HepB), adult dosage, for intramuscular use
90645	Hemophilus influenza B vaccine (Hib), HbOC conjugate (4 dose schedule), for intramuscular use
90647	Hemophilus influenza B vaccine (Hib), PRP-OMP conjugate (3 dose schedule), for intramuscular use
90648	Hemophilus influenza B vaccine (Hib), PRP-T conjugate (4 dose schedule), for intramuscular use
90649 [†]	Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18 (quadrivalent), 3 dose schedule, for intramuscular use
90650 [†]	Human Papilloma virus (HPV) vaccine, types 16, 18, bivalent, 3 dose schedule, for intramuscular use
90655	Influenza virus vaccine, split virus, preservative free, when administered to children 6-35 months of age, for intramuscular use
90656 [†]	Influenza virus vaccine, split virus, preservative free, when administered to individuals 3 years and older, for intramuscular use
90657	Influenza virus vaccine, split virus, when administered to children 6-35 months of age, for intramuscular use
90658 [†]	Influenza virus vaccine, split virus, when administered to individuals 3 years of age or older, for intramuscular use
90660 [†]	Influenza virus vaccine, live, for intranasal use
90670	Pneumococcal conjugate vaccine, 13 valent, for intramuscular use
90680	Rotavirus vaccine, pentavalent, 3 dose schedule, live, for oral use
90681	Rotavirus vaccine, human, attenuated, 2 dose schedule, live, for oral use
90696	Diphtheria, tetanus toxoids, acellular pertussis vaccine and poliovirus vaccine, inactivated (DTaP-IPV), when administered to children 4 through 6 years of age, for intramuscular use
90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine, haemophilus influenza Type B, and poliovirus vaccine, inactivated (DTaP-Hib-IPV), for intramuscular use
90700	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP), when administered to individuals younger than 7 years, for intramuscular use
90707 [†]	Measles, mumps and rubella virus vaccine (MMR), live, for subcutaneous use

Procedure Code	Description
90713	Poliovirus vaccine, inactivated (IPV), for subcutaneous or intramuscular use
90714 [†]	Tetanus and diphtheria toxoids (Td) adsorbed, preservative free, when administered to individuals 7 years or older, for intramuscular use
90715 [†]	Tetanus, diphtheria toxoids and acellular pertussis vaccine [Tdap], when administered to individuals 7 years or older, for intramuscular use
90716 [†]	Varicella virus vaccine, live, for subcutaneous use
90723	Diphtheria, tetanus toxoids, acellular pertussis vaccine, Hepatitis B, and poliovirus vaccine, inactivated (DtaP-HepB-IPV), for intramuscular use
90734 [†]	Meningococcal conjugate vaccine, serogroups A, C, Y and W-135 (tetravalent), for intramuscular use
90744	Hepatitis B vaccine, pediatric/adolescent dosage (3 dose schedule), for intramuscular use
90746 [†]	Hepatitis B vaccine, adult dosage, for intramuscular use
90748	Hepatitis B and Hemophilus influenza b vaccine (HepB-Hib), for intramuscular use

[†] Providers may be reimbursed for both the vaccine and the administration fee when using the provider's private stock vaccine for administration to members ages 19 and over.