

Nirav R. Shah, M.D., M.P.H. Commissioner Sue Kelly Executive Deputy Commissioner

Attention Providers:

NYS MEDICAID FFS PROGRAM PHARMACISTS AS IMMUNIZERS MENINGOCOCCAL VACCINE

Effective October 29, 2013, the administration of meningococcal vaccine to Medicaid FFS beneficiaries 18 years of age or older, by qualified pharmacists employed by, or under contract with, Medicaid enrolled pharmacies is reimbursable under NYS Medicaid pursuant to a patient-specific order or a non-patient specific order. Administration of vaccines must be conducted pursuant to NYS Education Law and regulations.

The following conditions apply:

- Only Medicaid enrolled pharmacies that employ or contract with NYS certified pharmacists to administer vaccines will receive reimbursement for immunization services and products. Pharmacy interns cannot administer immunizations in New York State.
- Services must be provided and documented in accordance to NYS Department of Education laws and regulations. Visit http://www.op.nysed.gov/prof/pharm/pharmimmunizations.htm for additional information.
- Pharmacies will only be able to bill for <u>Medicaid fee-for-service non-dual enrollees</u>. Medicaid managed care and Family Health Plus enrollees will continue to access immunization services through their health plans. Dual eligible enrollees will continue to access immunization services through Medicare.
- Reimbursement will be based on a patient specific order or non-patient specific order. These orders
 must be kept on file at the pharmacy. The ordering prescriber's NPI is required on the claim for the
 claim to be paid.
- Consistent with Medicaid immunization policy, pharmacies will bill the administration and cost of the
 vaccine using the following procedure codes. Please note that NDCs are not to be used for billing the
 vaccine product. Reimbursement for the product will be made at no more than the actual acquisition
 cost to the pharmacy. Amount paid for administration will be \$13.23. No dispensing fee or enrollee copayment applies. Pharmacies will bill with a quantity of "1" and a day supply of "1".

Procedure Code	Procedure Description
90733	Meningococcal polysaccharide vaccine (any groups), for
	subcutaneous use, 2 years of age and older
90734	Meningococcal conjugate vaccine, serogroups A,C,Y and W-135
	(tetravalent), for intramuscular use, ages 11 through 55
90471	Administration of vaccine

Reminder: Vaccines for individuals under the age of 19 are provided free of charge by the Vaccines for Children (VFC) program. Medicaid will <u>not</u> reimburse providers for vaccines for individuals under the age of 19 when available through the VFC program. For administration of vaccines supplied by VFC, providers are required to bill vaccine administration code **90460**. For VFC enrollment information, go to: http://www.health.ny.gov/prevention/immunization/vaccines for children.htm

Questions regarding Medicaid pharmacy reimbursement of immunizations may be directed to the Medicaid Pharmacy Program at 518 486-3209 or PPNO@health.state.ny.us.

