

# Vaccine

Reimbursement Policy ID: RPC.0065.7100

Recent review date: 07/2024

Next review date: 06/2026

AmeriHealth Caritas Delaware reimbursement policies and their resulting edits are based on guidelines from established industry sources, such as the Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), state and federal regulatory agencies, and medical specialty professional societies. Reimbursement policies are intended as a general reference and do not constitute a contract or other guarantee of payment. AmeriHealth Caritas Delaware may use reasonable discretion in interpreting and applying its policies to services provided in a particular case and may modify its policies at any time.

In making claim payment determinations, the health plan also uses coding terminology and methodologies based on accepted industry standards, including Current Procedural Terminology (CPT); the Healthcare Common Procedure Coding System (HCPCS); and the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM), and other relevant sources. Other factors that may affect payment include medical record documentation, legislative or regulatory mandates, a provider's contract, a member's eligibility in receiving covered services, submission of clean claims, and other health plan policies, and other relevant factors. These factors may supplement, modify, or in some cases supersede reimbursement policies.

This reimbursement policy applies to all health care services billed on a CMS-1500 form or its electronic equivalent, or when billed on a UB-04 form or its electronic equivalent.

## **Policy Overview**

This policy addresses both children and adult vaccines.

The Vaccines for Children (VFC) program was established in 1993 to serve children defined as "federally vaccine eligible" under section 1928(b)(2), which includes both "uninsured" and "Medicaid eligible" children. States receive federal funding for reduced-price vaccines under this program. All children under the age of 19 who are covered by Medicaid are considered eligible because of their Medicaid status.

# **Exceptions**

N/A

#### **Reimbursement Guidelines**

The Vaccines for Children program include vaccines which are used to prevent the diseases listed below:

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Diphtheria Mumps

Pertussis (whooping cough) Hemophilus influenza type b

Pneumococcal disease Hepatitis A Poliomyelitis Hepatitis B

Rotavirus Human Papillomavirus

Rubella Influenza Tetanus Measles

Varicella Meningococcal disease

COVID-19 Respiratory syncytial virus (RSV)

Monkey pox DENGUE

Providers participating in the VFC program may be reimbursed for vaccine administration only.

#### Immunizations for adults

Reimbursement to providers is available for both the vaccine and the administration components for the following:

Chickenpox (Varicella) Mumps

Diphtheria Whooping Cough (Pertussis)
Flu (influenza) Pneumococcal disease

Hepatitis A Respiratory syncytial virus (RSV)

Hepatitis B
Human Papillomavirus (HPV)
Measles
Meningococcal disease
Hemophilus influenzae type B (hib)

Rubella
Shingles
Tetanus
COVID-19
Monkey pox

### **Definitions**

N/A

#### **Edit Sources**

- I. Current Procedural Terminology (CPT) and associated publications and services.
- II. International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10).
- III. Healthcare Common Procedure Coding System (HCPCS).
- IV. Centers for Medicare and Medicaid Services (CMS).
- V. https://www.amerihealthcaritasde.com/provider/claims-billing/index.aspx
- VI. https://www.cdc.gov/vaccines/index.html
- VII. Delaware Medicaid Fee Schedule(s).

#### **Attachments**

N/A

### **Associated Policies**

N/A

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# **Policy History**

07/2024	Reimbursement Policy Committee Approval
04/2024	Revised preamble
08/2023	Removal of policy implemented by AmeriHealth Caritas Delaware from Policy
	History section
01/2023	Template Revised
	Revised preamble
	Removal of Applicable Claim Types table
	Coding section renamed to Reimbursement Guidelines
	Added Associated Policies section

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