

New Reimbursement Rates for Vaccines for Children (VFC) and Adult or Non-VFC Vaccines

Effective March 1, 2020

We want to help ensure that you're aware of the reimbursement your office is eligible to receive for administering vaccines to UnitedHealthcare Community Plan members, ages 18 and younger, as part of the New York State VFC program, as well as the reimbursement you may receive for adult or non-VFC vaccines.

New VFC Reimbursement Rates

Starting **March 1, 2020**, we'll be reducing reimbursement for VFC immunization administration from **\$22.00** to **\$17.85**, in accordance with New York State reimbursement guidelines.

VFC Reimbursement Billing Guidelines

To be reimbursed for VFC vaccines, **your claim must include two codes**: One code to indicate that you administered a vaccine(s) and the other code to identify which vaccine antigen(s) was/were administered. Additional billing guidelines are as follows:

- For administration of vaccines supplied by VFC, including influenza and pneumococcal administration, you're required to bill vaccine administration CPT® code 90460. Reimbursement for code 90460 will be \$17.85, effective March 1, 2020.
- You must continue to bill the specific vaccine code with the "SL" modifier on the claim (payment for "SL" will be \$0.00). If an administration code is billed without the vaccine code with "SL" modifier, the claim will be denied.
- For reimbursement purposes, the administration of the components of a combination vaccine will continue to be considered as one vaccine administration. More than one vaccine administration is reimbursable under code 90460 on a single date of service.

Code 90460 is defined as: Immunization administration through 18 years of age by any route of administration with counseling by a physician or other qualified health care professional, and the first or only component of each vaccine or toxoid administered.

Please note that every vaccine administered has one first component, and many vaccines have second and subsequent components (e.g., MMR, DTaP and DTaP/IPV). By adding the "SL" modifier, you're informing us that you received the vaccine at no cost through the VFC program.

If your office provides multiple vaccines to the same UnitedHealthcare Community Plan member during one visit, please bill the administration code on **one** line with the number of units equal to the number of vaccines provided.

Enrolling in VFC

If your office is not currently enrolled in the VFC program, you can enroll at health.ny.gov/prevention > Immunizations > Vaccines for Children Program > How to Enroll.

Adult and Non-VFC Vaccines

In addition to the new VFC reimbursement rates, there will be new rates for adult and non-VFC vaccine administrations, starting March 1, 2020.

For administration of vaccines to members ages 19 and over, including influenza and pneumococcal administration, as well as children's vaccines not covered by VFC, you're required to bill under the following CPT codes:

CPT Code	Description	New Reimbursement Rate
90471	Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); one vaccine (single or combination vaccine/toxoid)	\$13.23
90472	Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid). List separately, in addition to code, for primary procedure.	\$2.00
90473	Immunization administration by intranasal or oral route; one vaccine (single or combination vaccine/toxoid)	\$8.57
90474	Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid). List separately, in addition to code, for primary procedure.	\$2.00

We're Here to Help

We appreciate the care you provide to our members and your continued participation with UnitedHealthcare Community Plan. If you have questions, please call Provider Services at **866-362-3368**. Thank you.

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If you do not want to receive future faxes from us, please notify us by calling us at 866-464-4404 and use ID 7768 or faxing us at 855-729-2830. Failure to comply with your request within 30 days is unlawful.

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