

Policy: Vaccination Payment Policy	Policy Number: CL-01
Department: Utilization Management, Provider Relations, Pharmacy, Claims	Original Issue Date: 03/21/2024
Approver: UM Committee Date Approved: 03/21/2024	 □ Date Last Reviewed / Revised OR □ Date Last Reviewed / No RevisionsOR X New Policy / N/A
Dependencies: RX-02 Coverage Determination Policy v2	Effective Date: 04/01/2024

I. PURPOSE

Define vaccine coverage and payment guidelines under Mass Advantage plans based on Medicare Part B Vaccine coverage or Medicare Part D Vaccine coverage.

II. POLICY

Medicare Part B: The Medical Benefits Chart, found in Chapter 4 of the Mass Advantage Evidence of Coverage booklet, contains information regarding vaccine covered under Medicare Part B (see excerpted table in IV. REFERENCES). Influenza, pneumococcal, COVID 19, and hepatitis B (for at-risk members only) vaccines are covered under Medicare Part B. Other vaccinations or inoculations are only covered under Medicare Part B if the member is at risk and the administration meets Medicare Part B coverage rules (i.e. is directly related to the treatment of an injury or direct exposure to a disease or condition).

<u>Medicare Part D:</u> Under Medicare Part D, vaccinations or inoculation are included when the administration is reasonable and necessary for the prevention of the illness. Part D covered services are not subject to the Part C organization determination process; instead, they may be subject to Part D coverage determination review, which would be processed by Magellan Rx. Reimbursement requests must be submitted to Mass Advantage, Attn: MPD-1000UR, P.O. Box 64806, St. Paul, MN 55164-0811.

III. PROCEDURES

Part B Vaccine Coverage

Contracted providers who administer Part B covered vaccinations during an office visit should submit on a medical claim 1500 or UB form and will be reimbursed by Mass Advantage medical coverage. Part B covered vaccines are outlined below.

Part D Vaccine Coverage

Contracted providers who administer Part D vaccines must do one of the following:

1. Redirect members to a participating pharmacy for Part B or Part D vaccines or to Mass Advantage if the member needs help finding a participating pharmacy.



- **Please note, vaccines must be administered at the pharmacy and not within medical or "quick" clinics within the pharmacy.
 - 2. For provider who are part of a hospital-owned physician group, and vaccinations are supplied by your in-house pharmacy: You can administer Part D vaccines during the office visit if vaccines are billed by the Part D in-house pharmacy.
 - 3. If Part D covered vaccines are administered in the provider's office:
- A. Require the member to pay upfront. The member is responsible for submitting the claims to Magellan Rx. The provider must provide the appropriate National Drug Code (NDC) number to the member, receipt of payment, and applicable information of Part D claims submission.
- B. If Part D vaccination/inoculation and administration thereof have been paid upfront by the member, do not include them in your Part C claim submission. If the office elects to submit the Part D services as information on the Part C claim, these services must be billed with a GY modifier for claims to appropriately adjudicate patient responsibility.

IV. REFERENCES

Mass Advantage Evidence of Coverage, Chapter 4 Medical Benefit Chart:

What you must pay when Services that are covered for you you get these services Immunizations There is no coinsurance, Covered Medicare Part B services include: copayment, or deductible Pneumonia vaccine for the pneumonia, Flu shots, once each flu season in the fall and winter, with additional influenza, Hepatitis B, and flu shots if medically necessary COVID-19 vaccines. Hepatitis B vaccine if you are at high or intermediate risk of getting Hepatitis B COVID-19 vaccine



Quick Reference for Vaccine Coverage Under Medicare Part B vs. Part D:

Vaccines	Part B	Part D	
Influenza (Flu)	Х		
Pneumonia	Х		
Shingles (Zoster)		Х	
COVID-19	Х		
Tetanus		X	
Tetanus (medically necessary treatment)	Х		
Meningococcal		Х	
Hepatitis A		Х	
Hepatitis B (preventative for at-risk)	Х		
Hepatitis B (preventative for non-at-risk)		Х	
MMR		Х	
TDAP		X	

This list is not exhaustive, for more information please contact Provider Services at 844-918-0114 (HMO) or 844-915-0234 (PPO).

V. VERSION & REVIEW HISTORY:

Version #	Action (Original Issue, Reviewed, Revised)	Date Action Taken	Brief Summary of Revision, if applicable	Individual Taking Action	Effective Date	Date Approved and By Whom
1	Original Issue	03/21/2024	NA	Melissa Heath, RN	04/01/2024	UM Committee 03/21/2024