

## Reimbursement Policy

Subject: Vaccines for Children (VFC) Program

Policy Number: G-05022

Policy Section: Prevention

Last Approval Date: 11/04/2024

Effective Date: 11/04/2024

\*\*\*\* Visit our provider website for the most current version of the reimbursement policies. If you are using a printed version of this policy, please verify the information by going to [providers.anthem.com/oh](http://providers.anthem.com/oh). \*\*\*\*

### Disclaimer

These reimbursement policies serve as a guide to assist you in accurate claims submissions and to outline the basis for reimbursement if Anthem covered the service for the member's benefit plan. The determination that a service, procedure, and/or item is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis as well as to the member's state of residence.

You must follow proper billing and submission guidelines. You are required to use industry-standard, compliant codes on all claim submissions. Services should be billed with Current Procedure Terminology® (CPT) codes, Healthcare Common Procedure Coding System (HCPCS) codes, and/or revenue codes. These codes denote the services and/or procedures performed and, when billed, must be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our reimbursement policies apply to both participating and non-participating professional providers and facilities.

If appropriate coding/billing guidelines or current reimbursement policies are not followed, Anthem may:

- Reject or deny the claim.
- Recover and/or recoup claim payment.

These reimbursement policies may be superseded by mandates in provider, state, federal, or Centers for Medicare & Medicaid Services (CMS) contracts and/or requirements. Anthem strives to minimize delays in policy implementation. If there is a delay, we reserve the right to recoup and/or recover claims payment to the effective date in accordance with the policy. We reserve the right to review and revise these policies when necessary. When there is an update, we will publish the most current policy to the website.

### Policy

Anthem allows reimbursement of the administration fee for vaccines provided by the Vaccines for Children (VFC) Program for eligible members 18 and younger, unless provider, state, federal, or CMS contracts and/or requirements indicate otherwise.

Medicaid providers who participate in the VFC Program and immunize children shall comply with all of the reporting requirements and procedures.

Reimbursement is based on the fee schedule or contracted/negotiated rate of the vaccine administration up to maximum fee limits set by the Centers for Disease Control and Prevention (CDC) and applicable modifiers. Anthem does not reimburse providers for the vaccine serum as it is provided free of charge through the VFC Program.

Anthem will allow reimbursement for vaccines covered under the VFC Program for the administration when billed in the outpatient setting. Multiple procedure discounting will apply for any additional vaccine.

Although providers shall only be reimbursed for the administration of the vaccine, serum code(s) must be included on the claim to meet regulatory and Healthcare Effectiveness Data and Information Set (HEDIS®) reporting requirements that members are receiving the proper immunization(s). Claims submitted without applicable serum, administration codes, and modifiers may be rejected and/or denied.

#### **Reimbursement of office visits**

Vaccine administrations are separately reimbursable expenses from well-child exams or office visits. When the vaccine administration is the only service performed, Anthem does not allow reimbursement for a minimal office visit.

#### **Non-VFC members/vaccines**

For members not eligible or for vaccines not provided under the VFC Program, Anthem reimburses providers for the administration and serum based on the fee schedule or contracted/negotiated rate.

#### **Reimbursement during state supply shortages**

During documented supply shortages within applicable state VFC Programs, Anthem will reimburse providers for serum(s) based on the fee schedule or contracted/negotiated rate and applicable modifiers. Anthem shall develop internal processes and procedures to track state VFC Program and CDC information to monitor vaccine shortages.

<b>Related Coding</b>	
Standard correct coding applies	

<b>Policy History</b>	
11/04/2024	Review approved and effective: updated language to allow reimbursement for vaccines covered under the VFC Program for the administration when billed in the outpatient setting. Multiple procedure discounting will apply for any additional vaccine.
02/01/2023	Initial approval and effective

<b>References and Research Materials</b>	
This policy has been developed through consideration of the following:	
<ul style="list-style-type: none"><li>• CDC § 441.615 Administration fee requirements</li><li>• CMS</li><li>• <i>Social Security Act, Section 1928: Program for Distribution of Pediatric Vaccines</i></li><li>• State contract</li><li>• State Medicaid</li><li>• State VFC Programs</li></ul>	

<b>Definitions</b>	
Minimal Office Visit	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified healthcare professional
General Reimbursement Policy Definitions	

<b>Related Policies and Materials</b>	
Modifier Usage	

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