



Vaccines billing reminder

BlueCross BlueShield of Western New York members can obtain vaccinations at their doctor’s office. As an alternative to going to the doctor’s office, members may wish to get flu, pneumococcal or shingles vaccines at their local pharmacy. Selecting a pharmacy to use for vaccines is the same as for other prescriptions. The pharmacy will have to be a participating, in-network provider. If you need help finding a network pharmacy, visit www.bcbswny.com/stateplans or call Member Services at **1-866-231-0847**.

There are special considerations for members less than 19 years of age. Due to a federal regulation, Medicaid beneficiaries in this age group must obtain vaccines from a Vaccines for Children (VFC)-enrolled physician’s office or pharmacy. In New York State, there are currently a very limited number of VFC-enrolled pharmacies. Therefore, it is recommended that members less than 19 years old, check with their doctor first to obtain vaccinations.

Below is the summary of the plan’s coverage of vaccines:

	Medical benefit	Pharmacy benefit		
Covered vaccines	All vaccines recommended by the Centers for Disease Control and Prevention (CDC)	Influenza (flu) Pneumococcal Shingles		
Where to obtain vaccinations	For members 19 years of age or older: Flu, pneumococcal and shingles vaccines can be obtained either from a doctor’s office or from a network pharmacy that offers vaccinations. All other vaccines can be provided by the doctor’s office.			
	For members under 19 years old: Vaccines for Medicaid members under 19 years of age are provided free of charge by the Vaccines for Children (VFC) program. Patients can receive vaccines from providers enrolled in the VFC program (mostly medical providers). Flu, pneumococcal and shingles vaccines can be obtained from a network pharmacy that is enrolled in the VFC program.			
Special billing instructions for pharmacies	Claims processing information for PBM processed claims:			
	Primary RxBIN:	020107	Primary RxPCN: QN Primary RxGroup: WK2A	
	Field #	NCPDP field name	Submission criteria	
	455-EM	Prescription/Service Reference Number Qualifier	1=Rx Billing	
	436-E1	Product/Service ID Qualifier	03 – National Drug Code	
	407-D7	Product/Service ID	NDC should be submitted	
	473-7E	DUR/PPS Code Counter	1=Rx Billing	
	440-E5	Professional Service Code	MA	If dispensing <u>and</u> administering the vaccine to the member
			Blank	If dispensing vaccine without administration
	438-E3	Incentive Amount Submitted	Provider’s Vaccine Administration Fee to include administration and all supplies necessary for injection and administration	
409-D9	Ingredient Cost Submitted	Vaccine drug acquisition cost: VFC vaccines (Vaccine claims for patient less than 19 years old) = \$0.01 Non-VFC vaccines (Vaccine claims for patient 19 years old or older) = “acquisition cost”		
426-DQ	Usual and Customary Charge (U&C)	Amount submitted should include the cost for the vaccine PLUS provider’s vaccine administration fee		