



## NYRx, Medicaid Pharmacy Program Vaccine Billing Guidance

**Effective October 24, 2024, NYRx will now accept vaccine claims billed with a National Drug Code (NDC).** Consistent with Medicaid immunization policy, pharmacies will be reimbursed both the administration fee and, when applicable, acquisition cost of the vaccine using the appropriate NDC in one claim submission. Please note, previous billing guidance utilizing procedure codes pursuant to the [Pharmacists as Immunizers Fact Sheet](#) will be made available temporarily.

### **Billing for Immunizations of Members 19 Years of Age and Older:**

Reimbursement for the cost of the vaccine for individuals 19 years of age and older will be made at no more than the **actual** acquisition cost to the pharmacy. No dispensing fee or enrollee co-payment applies. Pharmacies will bill with the volumetric quantity of vaccine administered in Field 442-E7 (Quantity Dispensed) and a day supply of "1" in field 405-D5 (Day Supply).

### **Billing for Immunizations for Members younger than 19 Years of Age\*:**

There is no reimbursement for the cost of the vaccine for individuals younger than 19 years of age. Vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) for individuals **younger than 19 years of age** are provided to Medicaid members free of charge by the Vaccines for Children (VFC) program. The pharmacy would submit the appropriate vaccine NDC with a cost of \$0.00 in field 409-D9 (Ingredient Cost Submitted). No dispensing fee or enrollee co-payment applies. Pharmacies will bill with the volumetric quantity of vaccine administered in Field 442-E7 (Quantity Dispensed) and a day supply of "1" in field 405-D5 (Day Supply).

- VFC Providers administering VFC-eligible vaccines\*\* must enter value "15 – Free product or no associated cost" into NCPDP field 423-DN (Basis of Cost Determination).
- Non-VFC providers may utilize any other applicable value in this field.

\*Vaccines billed with Basis of Cost Determination code '15' for members greater than or equal to 19 years of age will be denied for edit 02357, returning NCPDP response message "66: Patient Age Exceeds Maximum."

\*\*Only VFC-eligible vaccines may be billed with Basis of Cost Determination code '15.' Ineligible vaccines will be denied for claim edit 02358, returning NCPDP response message "818: Medication Administration Not Covered, Plan Benefit Exclusion."

There is a limited exception for non-VFC enrolled pharmacies to bill the COVID-19 vaccine through December 31, 2024, for this age group.

**National Council for Prescription Drug Programs (NCPDP) fields for NDC claim submission:**

**Table A**

NCPDP D.0. Claim Segment Field	Value
436-E1 (Product/Service ID Qualifier)	Enter the value "03" which qualifies the code submitted in field 407-D7 (Product/Service ID) as an NDC
407-D7 (Product/Service ID)	Enter an applicable NDC found on the <a href="#">Medicaid Pharmacy List of Reimbursable Drugs</a>

Please see the [NYS Medicaid Pharmacy Manual Policy Guidelines](#) document for further guidance on origin code and serial number values that must be submitted on the claim for "pharmacy dispensing" when applicable for non-patient specific orders.

NCPDP D.0 Companion guide can be found [here](#).

**Vaccine Reimbursement & Administration Fee:**

**Please note, the administration fee is automatically applied to claims.** The total reimbursement amount returned in NCPDP field 509-F9 (Total Amount Paid) will include the administration fee in addition to reimbursement of the vaccine, when applicable. Please see Table B for applicable administration fees.

**Table B**

Vaccine Type	Administration Fee*
Immunization administration through 18 years of age via any route of administration	\$25.10
Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); one vaccine (single or combination vaccine/toxoid)	\$13.36

Vaccine Type	Administration Fee*
Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid)	\$13.36
Immunization administration of seasonal influenza intranasal vaccine for ages 19 years and older	\$8.66
Immunization administration by intramuscular (IM) injection of SARS-CoV-2 (COVID-19) vaccine, single dose	\$13.36

\*[https://health.ny.gov/health\\_care/medicaid/program/phar\\_immun\\_fact.htm](https://health.ny.gov/health_care/medicaid/program/phar_immun_fact.htm) is the resource for this information.

**Provider Reminders:**

- the NPI of the ordering or Standing Order authorizing prescriber is in field 411-DB (Prescriber ID), and
- the appropriate other coverage or responsible party is billed for Medicaid members with other coverage, and
- all claims adhere to all laws, regulations, and Medicaid Policies.

**Billing Instructions for MMC:**

NYRx should be billed for any vaccine administered to eligible members by a pharmacy provider. For non-pharmacy providers, individual MMC plans should be contacted for their specific reimbursement and billing guidance. Plan information can be found by visiting the following [website](#).

**Questions and Additional Information:**

- Additional information on influenza is available on the NYS DOH web page, titled [What You Should Know About the Flu](#).
- NYRx billing and claim questions should be directed to the eMedNY Call Center at (800) 343-9000.
- NYRx Pharmacy coverage and policy questions should be directed to the Medicaid Pharmacy Policy Unit by telephone at (518) 486-3209 or by email at [NYRx@health.ny.gov](mailto:NYRx@health.ny.gov).
- New York State Education Department Office of the Professions [Frequently Asked Questions \(FAQ\) webpage](#) for Administration of Immunizations.
- [New York State Department of Health Press Releases webpage](#) for vaccine-related announcements.