




**State of Louisiana**  
Louisiana Department of Health  
Bureau of Health Services Financing

**MEMORANDUM**

**DATE:** August 25, 2020

**TO:** All Louisiana Medicaid Prescribing Providers and Pharmacists

**FROM:** Ruth Johnson, Medicaid Executive Director 

**SUBJECT:** Louisiana Medicaid Pharmacy Adult Vaccine Coverage Policy Update

Effective September 15, 2020, the Louisiana Medicaid Fee for Service (FFS) Pharmacy Program and Managed Care Organizations (MCOs) will update the adult vaccine policy. The adult vaccine coverage applies to pharmacy claims submitted to FFS and Louisiana Medicaid MCOs (Aetna, AmeriHealth Caritas, Healthy Blue, Louisiana Healthcare Connections, and United Healthcare).

Louisiana Medicaid FFS Pharmacy Program and MCOs cover select adult vaccines for beneficiaries over age 18. The covered vaccines are recommended by the Advisory Committee on Immunization Practices. Adult vaccines are reimbursed when administered by a pharmacist with the "Authority to Administer" authorized by the Louisiana Board of Pharmacy.

**Pharmacist Requirements**

Vaccine reimbursement includes reimbursement for the ingredient cost and administration fee. For adult vaccine reimbursement, the pharmacist shall:

- be registered with the Louisiana Board of Pharmacy with the "Authority to Administer" vaccines.
- be registered as a Louisiana Medicaid provider.
- inform the individual that the administration of an immunization or vaccine is not to be construed as being in lieu of an annual preventive visit with the individual's primary care or family physician.
- access the Louisiana Immunization Network for Kids (LINKS) prior to immunization administration, if possible, to verify appropriate utilization

according to the Advisory Committee on Immunization Practices (ACIP) to prevent duplication, unnecessary doses, inappropriate age, etc.

- report each immunization to the Louisiana Department of Health, Office of Public Health's LINKS at the time of the immunization or as soon as reasonably possible, thereafter.
- report all adverse events observed or which are reported to the pharmacist to the Vaccine Adverse Events Reporting System, or its successor program; and further, the pharmacist shall refer the patient with an adverse event to appropriate medical care.
- request the name of a patient's primary care provider prior to the administering of any immunization. The pharmacist shall notify the primary care provider, by written or electronic communication, as soon as reasonably possible that the immunization was administered.

### **Adult Vaccine Billing**

Louisiana Medicaid enrolled pharmacies will be reimbursed for the ingredient cost and administration fee when billing adult vaccines administered by a pharmacist. The FFS administration fee for adult vaccines is \$15.22 for the first injection, then \$9.13 for each additional injection with the same date of service. The FFS administration fee for a nasal vaccine is \$10.80.

All 340B pharmacies carved-in to Medicaid may bill vaccines and the administration fee for adults (19 years and older) at Point of Sale as a pharmacy benefit. Claim level indicators should not be included as vaccines are not 340B or rebate eligible.

There will be no copay assessed on adult vaccine claims. Third party billing policy will apply and Medicaid will be the payer of last resort.

Pharmacy claims for vaccines will bypass FFS Point of Sale edits for the four prescription monthly limit and pharmacy Lock-In.

Influenza vaccine coverage for the current Influenza Season 2020-2021, will begin on September 15, 2020.

The following chart lists select adult vaccines administered by a pharmacist and payable as a FFS and MCO pharmacy claim.

<b>Adult Vaccines</b>	<b>Brand Name Examples</b>	<b>Age Limit</b>
Hepatitis A Adult	Vaqta®, Havrix®	≥ 19 years
Hepatitis A-Hepatitis B Adult	Twinrix®	≥ 19 years
Hepatitis B Adult	Heplisav-B®, Engerix-B®	≥ 19 years
HPV-Human Papillomavirus 9 Valent	Gardasil® 9	19-45 years
Influenza Vaccine	Various Brands	*
Measles, Mumps, & Rubella	M-M-R®II	≥ 19 years
Meningococcal Conjugate (Groups A, C, Y and W-135)	Menveo®, Menactra®	≥ 19 years
MENB – Meningococcal Group B	Trumenba®, Bexsero®	≥ 19 years
Pneumococcal- 13-valent	Prevnar 13™	≥ 19 years
Pneumococcal Polysaccharide (23 Valent)	Pneumovax®23	≥ 19 years
Tetanus and Diphtheria Toxoids	TDVAX®	≥ 19 years
Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis	Adacel®, Boostrix®	≥ 19 years
Varicella	Varivax®	≥ 19 years
Zoster Vaccine Recombinant, Adjuvanted	Shingrix®	≥ 50 years
Zoster Vaccine Live	Zostavax®	≥ 60 years

\*Age limits and age ranges for influenza vaccines are based on prescribing information.

If you have questions about the content of this memo, you may contact the FFS pharmacy help desk by phone at (800) 437-9101.

If you have questions about pharmacy claims billing, you may contact the appropriate plan at their pharmacy help desk listed in the chart below.

<b>Healthcare Provider</b>	<b>Pharmacy Help Desk</b>	<b>Pharmacy Help Desk Phone Number</b>
Aetna	CVS Health	(855) 364-2977
AmeriHealth Caritas	PerformRx	(800) 684-5502
Fee for Service	DXC Technology	(800) 648-0790
Healthy Blue	CVS	(833) 236-6194
Louisiana Healthcare Connections	CVS Caremark	(800) 311-0543
UnitedHealthcare	Optum Rx	(866) 328-3108

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Please forward this notice to other providers to assist with notification. Your continued cooperation and support of the Louisiana Medicaid Program efforts to coordinate care and improve health are greatly appreciated.

RJ/MBW/GJS

c: Healthy Louisiana Plans  
Melwyn B. Wendt  
DXC Technology