



VNSNY CHOICE SelectHealth Pharmacy Vaccine Coverage and Billing

For Members 18 years old and younger

Vaccines can be obtained through participating Vaccine for Children (VFC) providers. Licensed pharmacists who obtain additional certification may administer the following vaccines under VFC program: Pneumococcal, zoster, meningococcal, tetanus, diphtheria, and pertussis vaccines when administered to members 18 years old; Influenza vaccines when administered to members 2 -18 years old.

Effective 5/1/2019:

- **CHOICE will cover the pharmacy administration fee only for vaccines listed under the VFC program.**
- Pharmacies must submit a claim with the following NCPDP fields:

Field #	NCPDP field name	Value
438-E3	INCENTIVE AMOUNT SUBMITTED	Must be greater than zero or claim will deny
473-7E	DUR/PPS CODE COUNTER	Must equal 1
44Ø-E5	PROFESSIONAL SERVICE CODE	Must be MA - Medication Administered
4Ø9-D9	INGREDIENT COST SUBMITTED	Must be submitted with 0 (zero)

Members 19 and older

The plan will cover influenza and shingles vaccines for members 19 years old and older, administered at an in-network pharmacy.

- Pharmacies must submit a claim with the following NCPDP fields:

Field #	NCPDP field name	Value
111-AM	SEGMENT IDENTIFICATION	07
455-EM	PRESCRIPTION/SERVICE REFERENCE NUMBER QUALIFIER	For Vaccine Drug and Administration billing, value must be 1
4Ø2-D2	PRESCRIPTION/SERVICE REFERENCE NUMBER	Rx number for the Vaccine and Administration
436-E1	PRODUCT/SERVICE ID QUALIFIER	Ø3 = NDC
4Ø7-D7	PRODUCT/SERVICE ID	NDC of the Vaccine product
111-AM	SEGMENT IDENTIFICATION	11
4Ø9-D9	INGREDIENT COST SUBMITTED	Ingredient cost of product
412-DC	DISPENSING FEE SUBMITTED	
438-E3	INCENTIVE AMOUNT SUBMITTED	Must be greater than zero or claim will deny.
43Ø-DU	GROSS AMOUNT DUE	This must be the sum of Ingredient Cost Submitted (4Ø9-D9), Dispensing Fee Submitted (412-DC), Flat Sales Tax Amount Submitted (481-HA) Percentage Sales Tax Amount Submitted (482-GE), Incentive Amount Submitted (438-E3) Other Amount Claimed (48Ø-H9)
426-DQ	USUAL AND CUSTOMARY CHARGE	U&C must include the Vaccine Administration Fee so lesser than logic works properly
111-AM	SEGMENT IDENTIFICATION	08
473-7E	DUR/PPS CODE COUNTER	Must equal 1
44Ø-E5	PROFESSIONAL SERVICE CODE	Must be MA - Medication Administered

For information on all other vaccines, please contact VNSNY CHOICE Provider Services at 1-866-783-0222, Monday – Friday, 9 am – 5 pm. TTY users should call 711.