

May 9, 2025

<Provider Name>  
<Provider Address 1>  
<Provider Address 2>  
<City> <State> zipcode5-zipcode4

Dear Provider:

Considering the ongoing measles outbreak in the United States, this provider communication serves to affirm Medicaid coverage of Measles, Mumps, and Rubella (MMR) vaccine. Immunizations are covered when given according to the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) recommendations. This includes ACIP recommendations based on risk due to health condition, occupation, and travel.

### **Billing and Reimbursement**

Medicaid beneficiaries 18 years and younger are eligible to receive the MMR vaccine through the Vaccines for Children (VFC) program. VFC provides vaccines such as MMR, at no cost to the VFC-enrolled provider/pharmacy. MMR vaccine is a covered service for adults requiring vaccination. Professional and institutional claims for MMR vaccines must include the applicable Current Procedural Terminology code (CPT) for the vaccine product and the vaccine administration. Vaccine administration is separately reimbursable without regard to other services provided on the same day. Please refer to Table 1 for relevant billing and coding information.

Pharmacies participating in the VFC program should bill an administration fee and report \$0.00 for the vaccine ingredient cost for beneficiaries 3-18 years of age with Fee for Service coverage. Pharmacies may be reimbursed for the vaccine ingredient cost and administration for beneficiaries 19 years and older. Medicaid Health Plans should be contacted for individual coverage of the MMR vaccine under the pharmacy benefit.

### **Additional Information for Reimbursement of MMR Vaccine in Specific Settings**

The following providers are reminded of how immunizations are covered under their applicable payment methodology.

- Federally Qualified Health Centers (FQHC)/Rural Health Clinics (RHC): Reimbursement made up to the applicable fee schedule rate outside of the prospective payment system (PPS) methodology.
- Tribal Health Center/Tribal FQHC: Reimbursement for immunizations is bundled in the all-inclusive rate (AIR).
- Local Health Departments: Reimbursement is made up to the applicable fee schedule.
- Nursing Facilities: Reimbursement for any vaccination ordered by the attending physician and administered in the nursing facility is included in the per diem rate. The invoiced purchase cost of the vaccine should be included as an allowable medical supply expense on the facility's cost report.
- Outpatient Hospitals: Reimbursement for vaccines made in accordance with Medicare Addendum B and MDHHS wrap list.

### **Prior Authorization for Non-ACIP Recommended Use of Vaccines**

There may be instances where it is medically necessary for a beneficiary to receive an immunization that falls outside of the Medicaid coverage parameters. This may include situation when the medically necessary indication is not included in ACIP recommendations. In such instances, private stock vaccine may be Medicaid covered on a case-by-case basis via the prior authorization process. Requests for PA as a medical benefit/claim may be submitted to the Program Review Division via Direct Data Entry (DDE) in CHAMPS or in writing via fax to (517)335-0075 and must include a completed Practitioner Special Services Prior-Approval - Request/Authorization Form (MSA-6544-B). Refer to the Pharmacy Chapter for pharmacy benefit/claim PA information. Contact the individual Medicaid Health Plan (MHP) for coverage criteria for services provided to MHP enrollees.

Please refer to Table 2 for scenarios that better illustrate how MMR vaccine is covered for Medicaid beneficiaries.

**Table 1**

<b>CPT</b>	<b>Description</b>
90707	Measles, mumps, and rubella vaccine
90460	Administration of first vaccine or toxoid component with counseling (18 years or younger)
90461	Administration of vaccine or toxoid component with counseling (18 years or younger), each additional vaccine or toxoid component
90471	Administration of vaccine

**Table 2**

<b>Scenario</b>	<b>Vaccine Eligibility Recommendation (Private or VFC Vaccine Used)</b>	<b>Notes</b>
A 13-month-old receives a dose of MMR vaccine.	VFC	Routine ACIP recommendation.
An 8-month-old receives a dose of MMR after an outbreak has been declared in their local jurisdiction.	VFC	Risk-based ACIP recommendation.
An 8-month-old receives a dose of MMR prior to international travel.	VFC	Risk-based ACIP recommendation.

Scenario	Vaccine Eligibility Recommendation (Private or VFC Vaccine Used)	Notes
<p>An 8-month-old receives a dose of MMR after receiving a prior authorization due to medical necessity. In this scenario, vaccination would not be ACIP recommended.</p>	<p>Private</p>	<p>In this scenario, Medicaid coverage may be supported due to medical necessity despite lack of ACIP recommendation (e.g. severe immunodeficiency with local measles cases prior to declaration of an outbreak).</p> <p>Reimbursement will be consistent with vaccine provided to individuals 19 years and older. Please see applicable fee schedule.</p> <p><a href="#">Physicians/Practitioners/ Medical Clinics</a></p> <p>For beneficiaries enrolled in a Medicaid Health Plan, refer to the Health Plan's coverage criteria.</p>
<p>An 8-month-old receives a dose of MMR prior to domestic travel to an area with a declared measles outbreak.</p>	<p>VFC</p>	<p>Risk-based ACIP recommendation.</p> <p>Per MDHHS Division of Immunization, outbreak guidance for Michigan allows providers to make this decision. VFC vaccine may be used.</p>

Scenario	Vaccine Eligibility Recommendation (Private or VFC Vaccine Used)	Notes
A 13-month-old receives a dose of MMR from a provider not enrolled in VFC.	Private	Routine ACIP recommendation.  <b>Reimbursement for vaccine product not available.</b> Medicaid does not pay for immunization costs for any product that is available free of charge for Medicaid beneficiaries. Please refer beneficiaries to VFC-enrolled provider.
A child under the age of 3 seeks a dose of MMR at a pharmacy.	Not applicable	Per MDHHS policy, children under the age of 3 should be referred to their primary care provider for all vaccines regardless of benefit plan.
An unvaccinated 20-year-old receives a dose of MMR.	Private	Catch-up ACIP recommendation.

Providers are encouraged to contact their Local Health Department (LHD) for information about the VFC program and information related to childhood vaccinations.

For more information on measles in Michigan, visit [Michigan.gov/Measles](https://www.michigan.gov/Measles).

For information related to the measles outbreak in Montcalm County, visit [Measles outbreak PR.pdf](#).

For more information related to pharmacy coverage and billing of vaccines, refer to the Pharmacy Chapter of the [Medicaid Provider Manual](#).

For more information on specific billing information refer to [Information Specific to Different Providers](#).

For information on the Vaccines for Children program, please visit [Michigan's VFC website](#).

For more information on the PA process as a medical benefit/claim, contact the Program Review Division at (800)622-0276. The MSA-6544-B PA form can be found at [Medicaid Provider Forms and Other Resources](#)

An electronic version of this document is available at [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders)  
>> Policy, Letters & Forms.

Sincerely,

A handwritten signature in black ink that reads "Meghan E. Groen". The signature is written in a cursive, flowing style.

Meghan E. Groen, Chief Deputy Director  
Health Services