PAYMENT GUIDELINE Guideline No: GL-025

Payment Guideline: Vaccine Consultation Fee – CT Plans

Read First

IMPORTANT INFORMATION CONCERNING WELLFLEET PAYMENT GUIDELINES

This Payment Guideline serves as notice to health care providers of Wellfleet's payment practices. Health providers are advised to consult their own network provider agreement for determining specific payment policies.

Wellfleet may use reasonable discretion in applying these Payment Guidelines to health care services provided to its enrollees. This Payment Guideline does not address all the issues related to reimbursement for health care services. Other factors impacting reimbursement may supplement, modify or, in some cases, supersede this Payment Guideline. These factors may include, but are not limited to, other Payment Guidelines, legislative mandates, the type of provider arrangement and the terms of that agreement, and/or the member's benefit coverage document.

Wellfleet may modify this Payment Guideline at any time to comply with changes in national standards, changes in best practices, or other factors that may impact this payment Guideline. Should this Payment Guideline be revised, Wellfleet shall publish a new version of this Payment Guideline. Wellfleet encourages providers to keep current with any CPT or HCPCS updates as well as industry standards related to the services described in this Payment Guideline.

Providers are responsible for submission of accurate claims. Wellfleet reserves the right to request supporting documentation for claims submitted, including provider records.

Applicable
Plans

Student Health Insurance (for policies issued or renewing after May 2019)
Fully Insured
Only applies to policies issued in the following states: CT
Excluding Wellfleet Global
Self-Funded
Excluding policies issued by the following schools: N/A
Student Sports
Fully Insured; for policies issued by the following carriers:
AIG
Axis



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	☐ Wellfleet Insurance ☐ Self-Funded ☐ Excluding policies issued by the following schools: N/A ☐ Fully Insured Student Accident; for policies issued by the following carriers: ☐ AIG ☐ Axis ☐ Wellfleet Insurance
Purpose	The purpose of this guideline is to provide direction on processing/paying Vaccine Consultation Fees if submitted by a pharmacy for a member with a plan sitused in Connecticut.
Scope	Pharmacies may submit a Vaccine Consultation Fee claim for a total reimbursement of \$50 for a 20-minute consultation between the individual and a health care provider authorized to administer the immunizations to the individual.
Guidelines	Using a standard HCFA form, pharmacies may submit CPT code 90460, Immunization administration up to and including 18 years of age, via any route of administration, with counseling by physician or other qualified health care professional.
	Currently, CPT Code 90460 is the only code with the consultation description, and therefore will be accepted for all Wellfleet members.
	Vaccine Consultation Fee will be paid as an in-network fee, regardless of whether the pharmacy is listed on the plan's network to a maximum of \$50.



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Change History

Version	Effective Date	Next Review Date
1.0	1/1/2022	1/1/2023
2.0	1/1/2023	1/1/2024
3.0	1/1/2024	12/1/2024



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(INTERNAL USE ONLY)

Authorization Log

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Original Effective Date

Review Log

VERSION	DATE REVIEWED	REVIEWER NAME/TITLE	SIGNATURE	NEXT REVIEW DATE
1.0	1/1/2022	Raeven Fuller, Clinical Project Supervisor	Raeven Fuller	1/1/2023
2.0	1/1/2023	Raeven Fuller, Clinical Project Supervisor	Raeven Fuller	1/1/2024
3.0	12/27/2023	Raeven Fuller, Clinical Project Supervisor	Raeven Fuller	12/1/24