

DATE: June 21, 2024

ALL PLAN LETTER 24-008
SUPERSEDES ALL PLAN LETTERS 18-004 AND 16-009

TO: ALL MEDI-CAL MANAGED CARE PLANS

SUBJECT: IMMUNIZATION REQUIREMENTS

PURPOSE:

The purpose of this All Plan Letter (APL) is to clarify requirements related to the provision of immunization services.

BACKGROUND:

The Centers for Medicare & Medicaid Services (CMS) issued guidance on section 11405 of the Inflation Reduction Act (Pub. L. 117-169)¹ which mandates Medicaid and Children’s Health Insurance Program (CHIP) to cover all approved adult vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) and their administration, without cost sharing beginning October 1, 2023.

Medi-Cal managed care plans (MCPs) are contractually required to cover a wide range of preventive services and screenings in accordance with United States Preventive Services Task Force (USPSTF) grade “A” or “B” recommendations, as well as American Academy of Pediatrics/Bright Futures for MCP Members under the age of 21. USPSTF views immunizations as preventive services and recommends that all immunizations be provided as recommended by ACIP.² The MCP Contract states that Prior Authorization requirements are not to be applied to certain services, including preventive services.³ This is consistent with Medi-Cal Fee for Service (FFS) requirements.⁴

MCP Contracts require the timely provision of recommended immunizations for both children and adults enrolled in the MCP. MCPs must provide childhood immunizations in accordance with the most recent childhood immunization schedule and

¹ State Health Official Letter 23-003 is available at:
<https://www.medicaid.gov/sites/default/files/2023-06/sho23003.pdf>.

² The USPSTF’s Immunization Recommendations can be found at:
<https://www.uspreventiveservicestaskforce.org/BrowseRec/Search?s=immunization>.

³ 2024 Managed Care Boilerplate Contract, Exhibit A, Attachment III, Subsection 2.3.1 (Prior Authorizations and Review Procedures). The Medi-Cal managed care boilerplate contracts are available at: <https://www.dhcs.ca.gov/provgovpart/Pages/MMCDBoilerplateContracts.aspx>.

⁴ State Plan Amendment 13-014 can be found at:
<http://www.dhcs.ca.gov/formsandpubs/laws/Pages/13-014.aspx>.

recommendations published by ACIP⁵ for the Centers for Disease Control and Prevention (CDC). The MCPs' coverage obligation to provide immunizations is based on the ACIP-recommended immunizations included in the Immunizations⁶ and Vaccines for Children (VFC)⁷ sections of the Medi-Cal Provider Manual. These are provided as a medical benefit.

Business and Professions Code (B&P) section 4052(a)(11) authorizes pharmacists to administer immunizations pursuant to a protocol with a prescriber.⁸ A pharmacist may also independently initiate and administer vaccines authorized by the U.S. Food and Drug Administration and listed on the routine immunization schedules recommended by ACIP for persons three years of age and older if the pharmacist meets certain requirements, such as training, basic life support certification, continuing education, and recordkeeping requirements.⁹ In 2016, the Legislature added section 14132.968 to the Welfare and Institutions Code (W&I). This section added pharmacist services to the Medi-Cal schedule of benefits together with authorization for reimbursement for these services, which includes initiating and administering immunizations, as authorized in B&P section 4052.8 and as described in 16 California Code of Regulations (CCR) section 1746.4.

MCPs must provide the specified pharmacist services as a reimbursable Medi-Cal benefit when rendered to a Member in the outpatient pharmacy setting by a pharmacist who is trained and is providing the service in accordance with the Board of Pharmacy protocols. Pharmacist services may be billed to MCPs on a medical claim for MCP Members. MCPs must reimburse pharmacy providers for rendering the specified pharmacist services in accordance with the requirements of B&P and CCR.

Vaccines are available to Medi-Cal members younger than 19 years of age free of charge through the VFC program. Medi-Cal pharmacy providers who are enrolled as VFC providers may administer VFC-funded vaccines to VFC-eligible Medi-Cal members. The vaccines must be administered in accordance with ACIP

⁵ ACIP recommended Immunization Schedules can be found on the CDC's website at: <https://www.cdc.gov/vaccines/schedules/hcp/index.html>.

⁶ The Immunizations section of the Medi-Cal Provider Manual can be found at: https://mcweb.apps.prd.cammiis.medi-cal.ca.gov/assets/49FB210E-E257-445C-84FA-1C39C388291C/immun.pdf?access_token=6UyVkRRfByXTZEWlh8j8QaYyIPyP5ULO.

⁷ The VFC section of the Medi-Cal Provider Manual can be found at: https://mcweb.apps.prd.cammiis.medi-cal.ca.gov/assets/C08C7E98-AA63-4BC8-BA3C-BE8E06ED9A31/vaccine.pdf?access_token=6UyVkRRfByXTZEWlh8j8QaYyIPyP5ULO.

⁸ The B&P is searchable at: <https://leginfo.legislature.ca.gov/faces/home.xhtml>.

⁹ B&P section 4052.8. Also see 16 California Code of Regulations (CCR) section 1746.4. The CCR is searchable at: <https://govt.westlaw.com/calregs/Search/Index>.

recommendations. The ordering pharmacists must be enrolled in Medi-Cal as an ordering, referring, and prescribing (ORP)¹⁰ provider for claim reimbursement.

When billed as a pharmacy benefit to Medi-Cal Rx, the Department of Health Care Services (DHCS) will reimburse pharmacy providers for the professional services associated with the administration of the vaccines and the professional dispensing fee when administered in accordance with ACIP recommendations. This reimbursement for pharmacy administration of VFC-funded vaccines is new as of August 30, 2024, retroactive to January 1, 2023, and will be paid for MCP Members under Medi-Cal Rx using National Council for Prescription Drug Programs standards. Starting August 30, 2024, retroactive to January 1, 2023, pharmacies also have the option of submitting a medical claim to the Member's MCP for the Vaccine Administration Fee in lieu of submitting a pharmacy claim to Medi-Cal Rx for this fee. However, the initiation fee (consultation and assessment of need for vaccination) billed under pharmacist services¹¹ as a medical benefit will be billed to MCPs for MCP Members.

MCP Contracts also include requirements that allow all MCP Members to access local health departments (LHDs) for immunizations and for MCPs to reimburse LHDs for the administration fee for immunizations administered to MCP Members, excluding immunizations for which the MCP Member is already up to date.

POLICY:

MCPs must ensure timely provision of immunizations to Members in accordance with the most recent schedule and recommendations published by ACIP, regardless of a Member's age, sex, or medical condition, including pregnancy.

MCPs must require their Network Providers to document each Member's need for ACIP-recommended immunizations as part of all regular health visits, including, but not limited to the following types of Encounters:

- Illness, care management, or follow-up appointments
- Initial Health Appointments (IHAs)
- Pharmacy services
- Prenatal and postpartum care
- Pre-travel visits
- Sports, school, or work physicals

¹⁰ ORP Frequently Asked Questions can be found at: <https://mcweb.apps.prd.cammis.medi-cal.ca.gov/faq/orp-faqs>.

¹¹ The Pharmacist Services section of the Medi-Cal Provider Manual can be found at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/A7121167-6D74-4E71-A62C-FF248C861B5A/pharmserv.pdf?access_token=6UyVkkRRfByXTZEWIh8j8QaYyIPyP5ULO.

- Visits to an LHD
- Well patient checkups

As ACIP-recommended immunizations are viewed as preventive services, these services must not be subject to Prior Authorization. In instances where the Medi-Cal Provider Manual outlines immunization criteria that is less restrictive than ACIP criteria, MCPs must provide the immunization in accordance with the less restrictive Medi-Cal Provider Manual criteria.

MCPs must ensure that initiating and administering immunizations as a pharmacist service¹² are a reimbursable Medi-Cal benefit when rendered to an MCP Member in the outpatient pharmacy setting by a pharmacist who is trained and operating under a Board of Pharmacy protocol. The rendering pharmacist must be enrolled as an ORP Medi-Cal provider.¹³

Health and Safety Code (H&S) section 120440¹⁴ requires that all California health care providers submit patient vaccination records to local health departments operating countywide or regional immunization information and reminder systems and the State Department of Public Health, as soon as possible. 16 CCR section 1746.4 (e) requires pharmacists to report the administration of any vaccine, within 14 days, to the appropriate immunization registry designated by the immunization branch of the California Department of Public Health which is represented by the California Immunization Registry (CAIR). Effective January 1, 2023, Assembly Bill 1797 amended H&S section 120440 to require all California healthcare providers who administer vaccines to enter immunization information for each patient in the immunization registry and allows the information to be used to support assessment of health disparities in immunization coverage. MCP Contracts require that MCPs ensure that Member-specific immunization information is reported to an immunization registry(ies) established in the MCPs' service areas as part of the Statewide Immunization Information System. Reports must be made within 14 calendar days, and in accordance with state and federal laws. Although Providers are obligated under the state law to report the immunization data to the registry, since MCPs have oversight of their contracting Providers, it is the responsibility of the MCPs to ensure compliance. MCPs are not responsible for oversight of Providers who are not in their Network.

MCPs must review their contractually required policies and procedures (P&Ps) to determine if amendments are needed to comply with this APL. If the requirements

¹² B&P section 4052.8, 16 CCR section 1746.4, and W&I section 14132.968.

¹³ See APL 22-013 for more information regarding provider enrollment. APLs are searchable at: <https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx>.

¹⁴ The H&S is searchable at: <https://leginfo.legislature.ca.gov/faces/home.xhtml>.

contained in this APL, including any updates or revisions to this APL, necessitate a change in an MCP's contractually required P&Ps, the MCP must submit its updated P&Ps to the Managed Care Operations Division (MCPD) Oversight SharePoint Submission Portal¹⁵ within 90 days of the release of this APL. If an MCP determines that no changes to its P&Ps are necessary, the MCP must attach an attestation to the Portal within 90 days of the release of this APL, stating that the MCP's P&Ps have been reviewed and no changes are necessary. The attestation must include the title of this APL as well as the applicable APL release date in the subject line.

MCPs are responsible for ensuring that their Subcontractors and Network Providers comply with all applicable state and federal laws and regulations, Contract requirements, and other DHCS guidance, including APLs and Policy Letters.¹⁶ These requirements must be communicated by each MCP to all Subcontractors and Network Providers. DHCS may impose Corrective Action Plans (CAP), as well as administrative and/or monetary sanctions for non-compliance. For additional information regarding administrative and monetary sanctions, see APL 23-012 and any subsequent iterations on this topic. Any failure to meet the requirements of this APL may result in a CAP and subsequent sanctions.

If you have any questions regarding this APL, please contact your MCPD Contract Manager.

Sincerely,

Original Signed by Dana Durham

Dana Durham, Chief
Managed Care Quality and Monitoring Division

¹⁵ The MCPD Oversight SharePoint Submission Portal can be found at:
<https://cadhcs.sharepoint.com/sites/MCPD-MCPSubmissionPortal/SitePages/Contract%20Oversight.aspx>.

¹⁶ For more information on Subcontractors and Network Providers, including the definition and applicable requirements, see APL 19-001 and any subsequent APLs on this topic.