

Subject:	Monkeypox Vaccine Coverage		
Policy Number:	PO-RE-098v1		
Effective Date:	07/26/2022	Last Approval Date:	04/15/2024

I. Policy Description

This policy outlines the reimbursement guidelines for coverage of the monkeypox vaccination and administration. The information below applies to the following lines of business.

- Child Health Plus
- Small/Individual Group (Commercial Plan)
- Essential Plan
- Medicaid Managed Care
- Medicare PPO
- Integrated Benefits Dual Connection Plan
- Health & Recovery Plan (HARP)
- Medicare Advantage
- Medicaid Advantage Plus/MAP (Complete Care)
- Qualified Health Plan (QHP)
- Managed Long Term Care Partial Capitation Plan (MLTCP – Senior Health Partners)

Reimbursement Guidelines

Provider who administers the Monkeypox vaccine are expected to use conventional administration codes when billing Healthfirst for the administration of the vaccine.

The Centers for Disease Control and Prevention (CDC) provides two no-cost vaccines licensed by the U.S. Food and Drug Administration (FDA):

Vaccine Name	CPT Code	Code Description
JYNNEOS (Imvamune or Imvanex)	90611	Smallpox and Monkeypox vaccine, attenuated vaccinia virus, live, nonreplicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous injection
ACAM2000	90622	Vaccinia (smallpox) virus vaccine, live, lyophilized, 0.3 mL dosage, for percutaneous use



Reimbursement Guidelines

1. Healthfirst will reimburse providers for the administration of the Monkeypox vaccine in accordance with standard reimbursement rates for vaccine administration as outlined in the Provider's contract or Healthfirst's standard fee schedule.

2. Claim for reimbursement will be subject to timely filing requirements, as set forth in the provider contract with Healthfirst and in the Healthfirst Provider Manual. Refer to: Healthfirst Provider Manual Subsection 17.6, "Claims Inquiries, Corrected Claims, Claim Reconsideration, and Appeal Process" in this section.

II. Applicable Codes

Code	Description	Comment
90611	Smallpox and Monkeypox vaccine, attenuated vaccinia virus, live, nonreplicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous injection	
90622	Vaccinia (smallpox) virus vaccine, live, lyophilized, 0.3 mL dosage, for percutaneous use	

III. Definitions

Term	Meaning	
CDC	The Centers for Disease Control and Prevention	
FDA	U.S. Food and Drug Administration	

IV. Related Policies

Policy Number	Policy Description
N/A	N/A

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Procedure codes appearing in Reimbursement Policy documents are included only as a general reference tool for each policy. They may not be all-inclusive.



V. Reference Materials

Mpox Testing Guidance | New York State Department of Health, Wadsworth Center

<u>Mpox (ny.gov)</u>

Smallpox/Monkeypox Vaccine Information Statement | CDC

<u>Use of JYNNEOS (Smallpox and Monkeypox Vaccine, Live, Nonreplicating) for Preexposure</u> Vaccination of Persons at Risk for Occupational Exposure to Orthopoxviruses: <u>Recommendations of the Advisory Committee on Immunization Practices — United States, 2022</u> <u>IMMWR (cdc.gov)</u>

JYNNEOS | FDA

VI. Revision History

Revision Date	Summary of Changes	

Disclaimer

Healthfirst's claim edits follow national industry standards aligned with CMS standards that include, but are not limited to, the National Correct Coding Initiative (NCCI), the National and Local Coverage Determination (NCD/LCD) policies, appropriate modifier usage, global surgery and multiple procedure reduction rules, medically unlikely edits, duplicates, etc. In addition, Healthfirst's coding edits incorporate industry-accepted AMA and CMS CPT, HCPCS and ICD-10 coding principles, National Uniform Billing Editor's revenue coding guidelines, CPT Assistant guidelines, New York State-specific coding, billing, and payment policies, as well as national physician specialty academy guidelines (coding and clinical). Failure to follow proper coding, billing, and/or reimbursement policy guidelines could result in the denial and/or recoupment of the claim payment.

This policy is intended to serve as a resource for providers to use in understanding reimbursement guidelines for professional and institutional claims. This information is accurate and current as of the date of publication. It provides information from industry sources about proper coding practice. However, this document does not represent or guarantee that Healthfirst will cover and/or pay for services outlined. Reimbursement decisions are based on the terms of the applicable evidence of coverage, state and federal requirements or mandates, and the provider's participation agreement. This includes the determination of any amounts that Healthfirst or the member owes the provider.