



## Department of Medicaid

John R. Kasich, Governor

John B. McCarthy, Director

### Medicaid Transmittal Letter (MTL) No. 3336-16-01

DATE: February 22, 2016

TO: Eligible Medicaid Providers  
Chief Executive Officers, Managed Care Plans  
Other Interested Parties

FROM: John B. McCarthy, Medicaid Director

SUBJECT: Modifications to Administrative Rules 5160-4-12 and 5160-4-13

Changes have been made in two administrative rules governing vaccines, drugs, and other substances that are administered by practitioners through injection or infusion.

Rule 5160-4-12, "Immunizations, injections and infusions (including trigger-point injections), and provider-administered pharmaceuticals," sets forth general provisions for coverage of and payment for injections and pharmaceuticals administered by medical practitioners. This rule has been rescinded and replaced by a new rule of the same number and tagline.

*Changes:*

- Terminology is updated. The words *reimburse* and *reimbursement* are replaced by *pay* and *payment*. Incorrect or missing references and unnecessary statements are cleaned up.
- Medicaid rule numbers are modified to comport with the new agency designation in the Ohio Administrative Code.
- The supplemental fee for VFC vaccines is discontinued. Administration of a vaccine or toxoid, including a VFC vaccine, should now be reported on a claim with either (1) the most appropriate administration procedure code or (2) the procedure code representing the least complex evaluation and management (E&M) service rendered to an established patient.
- Coverage is established for the nine-valent human papilloma virus (HPV) vaccine.
- A provision concerning the coverage of immune globulin is condensed and streamlined.
- The existing static maximum payment amount for medroxyprogesterone acetate (MPA) is removed. Payment for MPA will instead be determined by the method set forth in paragraph (E) of the rule, to which maximum allowable cost (MAC) is added as a reference source.

Rule 5160-4-13, "Relocated provisions concerning injections and provider-administered pharmaceuticals," is a placeholder that simply cites rule 5160-4-12; it serves to ensure that existing references to rule 5160-4-13 remain functional until they can be updated. This rule has been amended.

*Changes:*

- The word *reimbursement* is replaced by *payment*.
- A referenced Medicaid rule number is modified to comport with the new agency designation in the Ohio Administrative Code.

These changes took effect for dates of service beginning November 1, 2015.

**Additional Information**

Information about the services and programs of the Ohio Department of Medicaid (ODM) may be accessed through the main ODM web page, <http://www.medicaid.ohio.gov>.

Questions pertaining to this letter should be directed to the Ohio Department of Medicaid:

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