Date:

Insurance Carrier Claims Review Dept. and Address or

Insurance Carrier Medical Director

Dear: name of contact person in Claims review dept or the Medical Director

RE: Claim # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am writing regarding the aforementioned claim and (Insurance Carrier Name)’s practice of denying or reducing the payment amount for immunization administration; each additional vaccine (CPT codes 90461, 90472). This practice does not provide adequate payment for the actual total costs of obtaining and administering vaccines.

Correct coding procedure is to identify each additional immunization administration separately in recognition of the additional resources provided.

Immunizations prevent a number of deadly childhood diseases, such as mumps, measles, and certain forms of meningitis, and are arguably the most cost-effective medical service we can provide to our patients. A child receives approximately 28 doses of vaccines between birth and 18 months of age. For example, at their 2 and 4 month preventive medicine visits, infants receive either 4 or 5 separate immunizations. At the time each does is administered, physicians are required to explain the benefits to the patient and the community as well as the possibilities of adverse reactions to vaccines, both of which are mandatory components of the National Childhood Vaccine Injury Act.

If the practice of denying or reducing payment for additional immunization administration continues, physicians who administer multiple vaccines during a single visit will be unfairly penalized by the exponential effect of the reduction. The practice expense resources expended in the provision of each additional vaccine beyond the first are roughly a little over half of the practice expense resources required by the administration of the first vaccine. If there is no appropriate reimbursement for each additional vaccine pediatricians will be unable to provide more than one vaccine during a single visit without serious financial implications.

If my practice is losing money each time more than one vaccine is administered during a single visit, it will become financially untenable for me to immunize my own patients, and, unfortunately, I may have to refer them to public health clinics. This will strain an already overburdened public health and vaccine-delivery infrastructure, and likely cause a reduction in the number of children who receive immunizations and regular preventive care. I am certain you support the goal of increasing the proportion of young children who receive all vaccines that have been recommended for universal administration as a

means of preventing more serious illnesses. Removing the financial obstacle posed by denying or reducing payment for multiple vaccinations will help to reach this goal.

I hope that you will reconsider and provide reimbursement for both the vaccine product and immunization administration. Included is a copy of the original claim that was submitted with a request that you process reimbursement as indicated on the claim. Please call \_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ if you would like to discuss this issue further.

Sincerely,

Enclosure: copy of the claim