



Alaska Medical Assistance
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Remittance Advice (RA) Message

Title: **Vaccine Coverage Changes**

Issue Date: 03/17/2014

Run Length: 8 weeks, *replaced after 2 weeks*

Provider Type(s): 008, 010, 021, 033, 034, 055

Message: In accordance with 7 AAC 110.405(d)(15), Alaska Medicaid provides reimbursement for vaccine products for recipients under age 19 unless the vaccine is available for free to the provider through the Division of Public Health.

Effective April 1, 2014, the following vaccines will be available for free through the Division of Public Health and will no longer be covered by Alaska Medicaid: Influenza, Rotavirus, Hepatitis B, and Haemophilus Influenzae Type B. The affected codes are 90655, 90657, 90680, 90681, and 90748.

For a complete list of vaccines available through the state supplied vaccine program and eligibility requirements please visit <http://www.epi.hss.state.ak.us/id/iz/vaxpacket> and select Alaska Vaccine Distribution Handbook.

Questions? Please contact the Provider Inquiry Unit at 907.644.6800, option 1, or toll-free in Alaska at 800.770.5650, option 1, 1.