



Santa Clara  
Family Health Plan  
*The Spirit of Care*

**To:** Santa Clara Family Health Plan Providers and Delegates  
**From:** Jennifer Clements, Director of Provider Services  
**Date:** October 21, 2014  
**Subject:** **Influenza Vaccine Rates for the 2014-2015 Season**

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Dear Providers and Network Partners,

Attached please find the 2014-2015 flu vaccine schedule for your information and applicable provider distribution.

Medi-Cal	Healthy Kids
<p><b><u>CHDP Free Vaccine-Vaccine available at no cost from CA Vaccines for Children Program (877) 243-8832</u></b></p> <p><b>Ages:</b> 6 months to 18 years  <b>Vaccine Code:</b> CHDP code 53 billed as an electronic PM 160 claim submission.  <b>Payment:</b> \$9.92</p> <p><b><u>FluMist Nasal Spray</u></b>  Covered without prior authorization.  <b>Vaccine Code:</b> CHDP code 71 billed as an electronic PM 160 claim submission.  <b>Payment:</b> \$9.92</p> <p><b><u>CHDP-Privately Purchased Vaccines:</u></b>  <b>Ages:</b> 6 months to 35 months  <b>Vaccine Code:</b> CHDP code 80 –Influenza (Inactivated) Preservative Free billed as an electronic PM 160 claim submission  <b>Payment:</b> \$20.63 (administrative fee included)</p> <p><b>Ages:</b> 36 months to 20 years  <b>Vaccine Code:</b> CHDP code 54 billed as an electronic PM 160 claim submission.  <b>Payment:</b> \$15.17 (administrative fee included)</p> <p><b><u>Privately Purchased Vaccines</u></b>  <b>Ages:</b> 21 and over  <b><u>Preservative Free Flu Vaccine:</u></b>  <b>Vaccine Code:</b> CPT code 90656 on a CMS 1500 claim form.  <b>Payment:</b> \$18.59 (administrative fee included)</p> <p><b><u>Regular Flu Vaccine:</u></b>  Vaccine Code: CPT code 90658 on a CMS 1500 claim form.  Payment: \$21.74 (administrative fee included) (\$16.85)</p> <p><b><u>FluMist Nasal Spray</u></b>  Covered without prior authorization.  <b>Code:</b> CPT code 90660 on a CMS 1500 claim form.  <b>Payment:</b> \$25.86 (administrative fee included) (\$24.63)</p>	<p><b><u>Privately Purchased Vaccines</u></b></p> <p><b>Ages:</b> 6 months to 35 months  <b><u>Preservative Free Flu Vaccine:</u></b>  <b>Vaccine Code:</b> 90655 on a CMS 1500 claim form  <b>Payment:</b> \$32.18 (administrative fee included)</p> <p><b><u>Regular Flu Vaccine</u></b>  <b>Vaccine Code:</b> 90657 on a CMS 1500 claim form.  <b>Payment:</b> \$32.18 (administrative fee included)</p> <p><b>Ages:</b> 3 to 19 years  <b><u>Preservative Free Flu Vaccine:</u></b>  <b>Vaccine Code:</b> 90656 on a CMS 1500 claim form.  <b>Payment:</b> \$32.18 (administrative fee included).</p> <p><b><u>Regular Flu Vaccine</u></b>  <b>Vaccine Code:</b> 90658 on a CMS 1500 claim form.  <b>Payment:</b> \$32.18 (administrative fee included)</p> <p><b><u>FluMist Nasal Spray</u></b>  Covered without prior authorization.  <b>Code:</b> CPT 90660 on a CMS 1500 claim form.  <b>Payment:</b> \$29.70 (administrative fee included)</p>