



Louisiana Medicaid



Addition of Immunization Administration Codes 90465-90468, 90473-90474

Policy and Claim Recycles

Since the initial notice concerning the implementation of additional immunization administration codes was published, work has been completed to change the system logic to accommodate billing changes. In an effort to assist providers with resubmitting claims for correct payment, we have taken steps to systematically recycle claims related to this implementation. The key elements of this implementation follow:

- Effective with dates of service October 1, 2007 forward, initial programming was completed to allow billing of these additional immunization administration codes on incoming claims.
- These CPT codes include 90465-90468, 90473, and 90474. These codes must be billed appropriately for claims payment. Please refer to the Current Procedural Terminology (CPT) coding book for additional instruction on using these codes.
- Fall 2007 annual provider workshops included information concerning the correct usage of these additional administration codes. These training materials are located on the LA Medicaid web site, www.lamedicaid.com, link -> Training, links -> 2007 Training Materials for KIDMED and Professional services.
- On November 6, 2007, the initial recycle of denied claims related to the implementation of these codes occurred. When this recycle occurred, some claims denied as duplicate claims, because the recycled claims processed at the same time as claims that were resubmitted by providers.
- Claims that were billed with incorrect administration codes were not recycled. Providers were required to resubmit these claims using correct administration codes for the vaccines administered.
- Policy and system changes were made to allow providers to "split bill" initial administration code/detail line and "each additional" administration code(s)/detail lines. As long as the initial administration claim has been previously paid, the "each additional" administration code claim(s) should process correctly.
- LA Medicaid policy requires providers to bill administration codes and detail lines that accompany these codes in correct sequence (i.e., initial administration code followed by detail line, and "each additional" administration code(s) followed by detail lines). However, since providers are allowed to bill private payers without code sequencing, claims will not deny if billed out of sequence SO LONG AS all components are present and billed with correct administration codes AND the initial administration code/detail processes with or prior to the "each additional" administration code(s)/detail.
- Claim denials that were billed out of sequence WILL NOT be recycled since these claims submissions did not follow existing LA Medicaid policy. Providers are responsible for resubmitting any denials that fall within this category.
- A second systematic claims recycle will occur in June 2008. This recycle will include claims with dates of service between January 1, 2006 and September 30, 2007 that were billed with immunization administration codes 90465-90468 and 90473-90474, and denied for errors 210, 232, 234, and 299.
- An additional claims recycle will occur after the recycle of the January 2006 through September 2007 claims have been processed (see previous bullet). This recycle will include claims that denied as duplicates in the original recycle of November 6, 2007.
- When these recycles are complete, providers should reconcile their accounts to determine if they need to resubmit any claims or voids in order to rectify any other outstanding issues with their immunization claims. For claims beyond the one year timely filing period, contact your Provider Relations Field Representative to coordinate receipt of these claims by September 30, 2008 for processing.
- Please contact Unisys Provider Relations at (800)473-2783 or (225)924-5040 should you have questions.