



IMMUNIZATIONS – ADULTS PROFESSIONAL SERVICES/RHC/FQHC

Effective with date of service October 1, 2007, Louisiana Medicaid reimburses select CPT procedure codes specific to immunizations for influenza, pneumococcal, and human papillomavirus diseases (current codes: 90471, 90472, 90473, 90474, 90649, 90656, 90658, 90660, and 90732) as outlined by the *Current Procedural Terminology* (CPT) manual and delivered to adult recipients (age 21 and older) using the following guidelines:

- Providers should follow the recommendations (including age) of the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practice (ACIP) for these vaccines as identified in the current *Recommended Adult Immunization Schedule*. Providers are responsible for obtaining current copies of the schedule as the schedule is updated frequently. The current *Recommended Adult Immunization Schedule* can be found at <u>www.cdc.gov/vaccines</u>, following the link for 'Immunization Schedules'.
- Usual and customary charges should be used for the billed charges for all claim lines. Louisiana Medicaid reimburses for the vaccine administration as well as for the specific vaccine(s) administered, as identified in this policy. A fee schedule for Adult Immunizations is available at www.lamedicaid.com follow the Fee Schedules link.
- RHC/FQHC providers should enter the appropriate immunization administration code(s) as well as the vaccine procedure code(s) as encounter detail lines when submitting claims for these services. When billing a RHC/FQHC encounter, minimum requirements as identified in RHC/FQHC program policy must be met.

• Billing For a Single/First Administration:

Providers should bill the appropriate CPT immunization administration code 90471 or 90473 for the first vaccine administration. The next line on the claim form must contain the specific CPT code for the vaccine that was administered.

• Do not report CPT codes 90471 **and** 90473 on the same date of service for the same recipient.

• Billing for Multiple Administrations:

When administering more than one immunization on the same date of service, providers should bill as described above for the first administration. The appropriate procedure code(s) for additional immunization administrations (90472 and/or 90474) should then be listed with the appropriate number of units for the additional vaccine(s). The specific CPT code(s) for the additional vaccine(s) administered should be listed on subsequent line(s) following the appropriate administration code. The number of units listed for each administration code.

• Appropriate Use of CPT E/M Codes with Immunization Administrations:

If a significant, separately identifiable medically necessary E/M service is performed, an appropriate Evaluation and Management (E/M) code may be reported in addition to the vaccine and the immunization administration codes. This must be reflected in the medical record documentation.