

## Billing for Immunization (IZ) Services

### How immunization services are billed depends upon:

- Payer coding requirements
- Vaccine for Children (VFC) program
  - Eligible children include:
    - Children enrolled in Medicaid or a Medicaid MCO
    - Un-insured
    - Underinsured
    - American Indian or Alaska Native
- VFC vaccines administered to an un-insured or under-insured child
- Vaccine purchased by the HD (*child or adult*)
- Vaccine funding - Section 317 grant program  
<https://www.317coalition.org/learn-more>
- Adult Medicaid/MCO patient
- Travel vaccines
- Ability to pay/sliding fee scale
- Vaccine(s) included on the current non-chargeable list

#### FY17 Non-chargeable List for IZ Services

○ Immunization Record Review
○ Emergency Preparedness – Screening for and administration of immunizations for traditional and other emergency responders during a local or state public health emergency event

### Insurance Coverage

Medicaid MCO and Commercial payers are not obligated to reimburse for immunization services unless the LHD has a contract with the payer or the patient has out-of-network benefits.

If the patient has out-of-network benefits that cover immunization services the patient will most likely have a higher out-of-pocket expense, such as a deductible and/or copay.

Most immunizations are considered preventative services and would be covered in full if the patient receives services from an in-network provider.

**Commercial Payers:**

- Assign the appropriate vaccine code.
- Assign the appropriate vaccine administration code(s) 90471-90474 (With additional vaccine codes to cover the new COVID-19 vaccines).
  - Or when appropriate use the pediatric administration code(s) **90460-90461** - information can be found:  
<https://downloads.aap.org/AAP/PDF/Coding%20Preventive%20Care.pdf>
- Do not bill a 99211 if the patient visits the clinic solely to receive an immunization.
- Follow CPT guidelines that injections should be coded with the vaccine and administration codes not 99211.

**Medicaid and Medicaid MCOs**

- Maryland Medicaid does not recognize the vaccine administration codes 90471-90474
- Use code 99211(nurse visit) instead of the vaccine administration codes 90471-90474 when administering vaccines to adult patients unless the provider sees the patient and a higher EM level is appropriately coded.
- Vaccine for Children (VFC) vaccines are billed to Medicaid/MCOs using a **SE modifier** appended to the vaccine code.
- If the provider is in-network with the Medicaid MCO the provider will be reimbursed \$23.28 for each VFC vaccine administered.

**A complete list of vaccine and vaccine administration codes are included in this manual.**