

# Immunization Administration Procedure Code Changes Effective April 1, 2011

Information posted February 11, 2011

Effective for dates of service on or after April 1, 2011, the following benefit changes will be applied to immunization administration procedure codes for Texas Medicaid and the Children with Special Health Care Needs (CSHCN) Services Program:

- Immunization administration procedure codes 90460 and 90461 will be made benefits.
- Immunization administration procedure codes 90465, 90466, 90467, and 90468 will be discontinued and will no longer be benefits.
- Providers must submit claims for immunization administration procedure codes 90471, 90472, 90473, or 90474 *without* a modifier.
- Providers must submit claims with procedure codes in the appropriate order and in the appropriate quantity.

## Claims Filing

Each vaccine or toxoid and its administration must be submitted on the claim in the following sequence: the vaccine procedure code immediately followed by the applicable immunization administration procedure code(s). All of the immunization administration procedure codes that correspond to a single vaccine or toxoid procedure code must be submitted on the same claim as the vaccine or toxoid procedure code. The following is an example of how to submit claims for immunization administration procedure codes:

Line Item	Procedure/Service	Quantity Billed
1	1st vaccine or toxoid procedure code with 1 component (requires counseling)	1
2	90460 (1st component)	1
3	2nd vaccine or toxoid procedure code with 3 components (requires counseling)	1
4	90460 (1st component)	1
5	90461 (2nd and 3rd components)	2
6	3rd vaccine or toxoid procedure code (no counseling required)	1
7	90471 (1st "without counseling" vaccine or toxoid; injection)	1
8	4th vaccine or toxoid procedure code (no counseling required)	1
9	90474 (2nd "without counseling" vaccine or toxoid; oral/nasal)	1
10	5th vaccine or toxoid procedure code (no counseling required)	1
11	90472 (3rd "without counseling" vaccine or toxoid; injection)	1

**Note:** The term "components" refers to the number of antigens that prevent disease(s) caused by one organism. Combination vaccines are those that contain multiple vaccine components.

Each vaccine or toxoid procedure code must be submitted with the appropriate “administration with counseling” procedure code(s) (procedure codes 90460 and 90461) or the most appropriate “administration without counseling” procedure code (procedure code 90471, 90472, 90473, or 90474). If an “administration with counseling” procedure code is submitted with an “administration without counseling” procedure code for the same vaccine or toxoid, the administration of the vaccine or toxoid will be denied.

## Immunization Administration Without Counseling

Procedure codes 90471, 90472, 90473, and 90474 are a benefit for immunizations administered to the following:

- Clients who are 19 years of age and older
- Clients of any age who do not require counseling

Providers must no longer include modifiers U2 or U3 when submitting claims for procedure codes 90471, 90472, 90473, or 90474. Providers will no longer receive an increased rate for additional state-defined components.

For the initial “without counseling” vaccine or toxoid administration that is submitted on the claim, procedure code 90471 must be submitted if an injection is administered, or procedure code 90473 must be submitted if the administration is oral or nasal. Only one initial “without counseling” procedure code may be reimbursed on the claim. All subsequent “without counseling” vaccine or toxoid administrations must be submitted using procedure code 90472 or 90474 depending on the route of administration.

### Example 1: The first “without counseling” administration is by injection.

Line Item	Procedure/Service	Quantity Billed
6	3rd vaccine or toxoid procedure code (no counseling required)	1
7	90471 (1st vaccine or toxoid; injection without counseling)	1
8	4th vaccine or toxoid procedure code (no counseling required)	1
9	90474 (2nd vaccine or toxoid; oral/nasal without counseling)	1
10	5th vaccine or toxoid procedure code (no counseling required)	1
11	90472 (3rd vaccine or toxoid; injection without counseling)	1

### Example 2: The first “without counseling” administration is oral or nasal.

Line Item	Procedure/Service	Quantity Billed
6	3rd vaccine or toxoid procedure code (no counseling required)	1
7	90473 (1st vaccine or toxoid; oral/nasal without counseling)	1
8	4th vaccine or toxoid procedure code (no counseling required)	1
9	90474 (2nd vaccine or toxoid; oral/nasal without counseling)	1
10	5th vaccine or toxoid procedure code (no counseling required)	1
11	90472 (3rd vaccine or toxoid; injection without counseling)	1

Providers will be notified in a future article when the new rates are set for immunization administration procedure codes 90471, 90472, 90473, and 90474.

## Immunization Administration With Counseling

For dates of service on or after April 1, 2011, procedure codes 90465, 90466, 90467, and 90468 will be discontinued and will no longer be benefits.

For dates of service on or after April 1, 2011, procedure codes 90460 and 90461 will be benefits for clients who are 18 years of age and younger when rendered by the provider types included in the following table:

Program	Valid Provider Types and Places of Service
Texas Medicaid	<p>Nurse practitioner (NP), clinical nurse specialist (CNS), physician assistant (PA), physician, pharmacist, certified nurse midwife (CNM), Comprehensive Care Program (CCP), comprehensive health center (CHC), family planning clinic, and pharmacy providers for services rendered in the office setting.</p> <p>NP, CNS, PA, physician, CNM, and CCP providers for services rendered in the home setting.</p> <p>NP, CNS, PA, physician, CNM, and CHC providers for services rendered in the outpatient hospital setting.</p> <p>CNM and birthing center providers for services rendered in the birthing center setting.</p> <p>NP, CNS, PA, physician, CNM, CCP, CHC, and family planning clinic providers for services rendered in the “other location” setting.</p> <p>Federally qualified healthcare center (FQHC) and THSteps medical providers for services rendered in the office, home, outpatient hospital, or “other location” setting.</p>
CSHCN Services Program	<p>Advanced practice registered nurse (APRN) and physician providers for services rendered in the office, home, or “other location” setting.</p> <p>Physician providers for services rendered in the outpatient hospital setting.</p> <p><b>Note:</b> For the purpose of this article, “advanced practice registered nurse (APRN) providers” includes nurse practitioner (NP) and clinical nurse specialist (CNS) providers only.</p>

Providers must submit claims for immunization administration procedure codes 90460 or 90461 based on the number of components per vaccine. Providers must specify the number of components per vaccine by billing 90460 and 90461 as defined by the procedure code descriptions:

- Procedure code 90460 is submitted for the administration of the 1st component.
- Procedure code 90461 is submitted for the administration of each additional component identified in the vaccine.

Procedure code 90461 will be denied if procedure code 90460 has not been submitted on the same claim for the same vaccine or toxoid.

The necessary counseling that is conducted by a physician or other qualified health-care professional must be documented in the client’s medical record.

The following table contains the number of recognized components for each vaccine or toxoid listed:

<b>Procedure Code</b>	<b>Number of Components**</b>	<b>Administration Procedure Codes (With Counseling)</b>
90632*	1	90460 submit quantity of 1
90633*	1	90460 submit quantity of 1
90636	2	90460 submit quantity of 1 90461 submit quantity of 1 Total components = 2
90645	1	90460 submit quantity of 1
90646	1	90460 submit quantity of 1
90647	1	90460 submit quantity of 1
90648*	1	90460 submit quantity of 1
90649*	1	90460 submit quantity of 1
90650	1	90460 submit quantity of 1
90654	1	90460 submit quantity of 1
90655*	1	90460 submit quantity of 1
90656*	1	90460 submit quantity of 1
90657*	1	90460 submit quantity of 1
90658*	1	90460 submit quantity of 1
90660*	1	90460 submit quantity of 1
90669*	1	90460 submit quantity of 1
90680*	1	90460 submit quantity of 1
90681	1	90460 submit quantity of 1
90696	4	90460 submit quantity of 1 90461 submit quantity of 3 Total components = 4

<b>Procedure Code</b>	<b>Number of Components**</b>	<b>Administration Procedure Codes (With Counseling)</b>
90698*	5	90460 submit quantity of 1 90461 submit quantity of 4 Total components = 5
90700*	3	90460 submit quantity of 1 90461 submit quantity of 2 Total components = 3
90702*	2	90460 submit quantity of 1 90641 submit quantity of 1 Total components = 2
90703	1	90460 submit quantity of 1
90704	1	90460 submit quantity of 1
90705	1	90460 submit quantity of 1
90706	1	90460 submit quantity of 1
90707*	3	90460 submit quantity of 1 90461 submit quantity of 2 Total components = 3
90710*	4	90460 submit quantity of 1 90461 submit quantity of 3 Total components = 4
90713*	1	90460 submit quantity of 1
90714*	2	90460 submit quantity of 1 90461 submit quantity of 1 Total components = 2
90715*	3	90460 submit quantity of 1 90461 submit quantity of 2 Total components = 3
90716*	1	90460 submit quantity of 1
90718	2	90460 submit quantity of 1 90461 submit quantity of 1

Procedure Code	Number of Components**	Administration Procedure Codes (With Counseling)
		Total components = 2
90721	4	90460 submit quantity of 1 90461 submit quantity of 3 Total components = 4
90723*	5	90460 submit quantity of 1 90461 submit quantity of 4 Total components = 5
90732*	1	90460 submit quantity of 1
90733	1	90460 submit quantity of 1
90734*	1	90460 submit quantity of 1
90740*	1	90460 submit quantity of 1
90743	1	90460 submit quantity of 1
90744*	1	90460 submit quantity of 1
90746*	1	90460 submit quantity of 1
90747	1	90460 submit quantity of 1
90748*	2	90460 submit quantity of 1 90461 submit quantity of 1 Total components = 2
90749	1	90460 submit quantity of 1
<b>Note: The procedure codes indicated with an asterisk (*) are distributed through Texas Vaccines For Children (TVFC).</b>		

Providers will be notified in a future article when the rates are set for immunization administration procedure codes 90460 and 90461.

Providers may refer to the 2010 *Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook*, subsection 6.3.29, "Immunization Guidelines and Administration" and the 2010 *CSHCN Services Program Provider Manual* section 30.2.23, "Immunizations (Vaccines and Toxoids), on page 30-76, for more information about immunizations and administration.

## **Claims Filing for Dates of Service from January 1, 2011, through March 31, 2011**

Providers may refer to the article titled "[Update to 'Immunization Administration Procedure Codes Following 2011 HCPCS Update](#)," that was published on February 11, 2011, on the TMHP website at [www.tmhp.com](http://www.tmhp.com), for more information about submitting immunization administration procedure codes.

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.