Reimbursement for Vaccine Administration: 0-18 Years of Age

Magnolia Health Plan will provide reimbursement for the administration of vaccines administered under the EPSDT program. To be eligible for reimbursement, both the vaccine product CPT code and vaccine administration CPT code must be billed on the claim using the instructions below. Please note, vaccines for members less than 19 years of age should be obtained from the Vaccines for Children (VFC) program.

Vaccine Administration Billing Instructions:

• Code the primary vaccine administration code (CPT 90460, 90471, or 90473), the diagnosis code and the EP modifier.
  o CPT 90460 should be used to indicate face-to-face counseling was associated with the vaccine administration. CPT 90460 may be billed with more than one unit.
  o CPT 90471 and CPT 90473 should be used when there is no face-to-face counseling associated with the vaccine administration. CPT 90471 and CPT 90473 must be billed with a unit value of “1.”

• Code the vaccine product code with the applicable diagnosis code and the EP modifier.

• Code the applicable add-on vaccine administration code (CPT 90472 or 90474) with the appropriate number of units, the diagnosis code and the EP modifier.
  o CPT 90472 or CPT 90474 must be coded if more than one non-counseled vaccine was administered.
  o CPT 90460 may be used in conjunction with the add-on vaccine administration codes CPT 90472 and CPT 90474 to indicate that first vaccine administered was counseled and the additional vaccines administered were non-counseled.

• Each vaccine administration code should be listed only one time per claim. If multiple vaccine product codes correspond to the same vaccine administration code, the vaccine administration code is listed once with the appropriate number of units indicated.

• The vaccine administration code should be billed with the appropriate charges as outlined in the Mississippi Division of Medicaid Administrative Code.

• The vaccine product code should be billed with $0.00 charges.

• The primary vaccine administration code must precede the add-on vaccine administration code on the claim.

• The vaccine product code must immediately follow the corresponding vaccine administration code on the claim.

• Use the appropriate vaccine diagnosis code with the vaccine administration code when the vaccine is administered outside of the Health Check visit.

• Diagnosis code V20.2 may be reported with a vaccine administration code ONLY when vaccines are administered during the Health Check visit.
• Code the EPSDT preventive visit (9938x or 9939x) with the EP and the 25 modifiers when vaccines are administered during the preventive health visit.

• Code the EPSDT interperiodic visits (99201-99203 or 99212-99214) with the EP and the 25 modifiers when vaccines are administered during the interperiodic health visit.

Claim Example: Appropriately Coded Vaccine Administration Claim

<table>
<thead>
<tr>
<th>Date(s) of Service From - To</th>
<th>Place of Service</th>
<th>EMG</th>
<th>Procedures, Services, or Supplies CPT/HCPCS</th>
<th>Modifier</th>
<th>Diagnosis Pointer</th>
<th>$ Charges</th>
<th>Days or Units</th>
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</thead>
<tbody>
<tr>
<td>10/12/2013 - 10/12/2013</td>
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<td>EP</td>
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<tr>
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<td>90700</td>
<td>EP</td>
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<tr>
<td>10/12/2013 - 10/12/2013</td>
<td>N</td>
<td>9938x or 9939x</td>
<td>EP, 25</td>
<td>4</td>
<td></td>
<td>$67.38</td>
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</tr>
</tbody>
</table>

Note: Preventative visit may be coded with the diagnosis code v20.2, v20.31, v20.2 or v70.3.

Claim Example: Inappropriately Coded Vaccine Administration Claim

<table>
<thead>
<tr>
<th>Date(s) of Service From - To</th>
<th>Place of Service</th>
<th>EMG</th>
<th>Procedures, Services, or Supplies CPT/HCPCS</th>
<th>Modifier</th>
<th>Diagnosis Pointer</th>
<th>$ Charges</th>
<th>Days or Units</th>
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<td>EP</td>
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<td>N</td>
<td>9938x or 9939x</td>
<td>EP, 25</td>
<td>4</td>
<td></td>
<td>$67.38</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: This vaccine administration claim example is incorrect for the following reasons:
1. Vaccine administration code CPT 90460 does not precede all vaccines on the claim.
2. Vaccine administration code CPT 90460 is billed with $0.00 charges. The vaccine administration code should be billed with the applicable allowed amount.
3. Vaccine product codes CPT 90744 and 90700 are billed with charges. Charges for vaccine administration should be appended to the vaccine administration code.
Additional Information
For more information regarding coverage, coding, billing, and reimbursement of Magnolia Health Plan covered benefits, please access the Magnolia Health Plan web portal at the following link
http://www.magnoliahealthplan.com/for-providers/provider-resources/.

Contact Us
If you have any questions, please contact Provider Services toll free at 1-866-912-6285 from 8am to 5pm, Monday through Friday.