
CODING AND BILLING FOR IMMUNIZATIONS

ADAPTED FROM THE DOCUMENTATION, CODING AND BILLING GUIDANCE DOCUMENT PART II , VERSION 4
PUBLIC HEALTH NURSING AND PROFESSIONAL DEVELOPMENT UNIT (PHNPDU)

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IMMUNIZATION BILLING REMINDERS

- Services to clients seen only for immunizations services should be coded to Immunization Program.
- If a client presents for services in a program other than immunizations (e.g. CH, FP, MH, etc.) and receives immunizations (required as per Agreement Addenda or recommended), the immunizations should be coded to the program which brought them in that day.
 - ***Remember that immunizations coded to CH, FP and MH programs are subject to sliding fee scale.***
- National Drug Codes (NDCs) should NOT be reported to Medicaid for vaccines. However, Tricare and United Health Care (and potentially others) requires NDC numbers to be included when billing for vaccines. NDC numbers are specific to drugs/medications and do not apply to immunizations/vaccines. These are two different things.

REMINDERS FROM THE IMMUNIZATION BRANCH

- Administer vaccines provided through the North Carolina Immunization Program (NCIP), following all Advisory Committee on Immunization Practices (ACIP) guidelines, charging no third-party for the cost of vaccine. Vaccines received under this agreement must be directly administered to eligible patients and may not be given to non-NCIP health care providers or sold to any other health care provider or to any other person. Incidents of fraud and abuse can result in federal charges and must be reported to the Immunization Branch for investigation per the Fraud and Abuse Policy of the NCIP.
- Charge no administration fees for uninsured or underinsured patients with family incomes below two hundred percent (200%) of the federal poverty level. Third party billing for administration fees are permitted in accordance with the individual's insurance plan.
- Impose no inappropriate condition or cost, such as a well-child visit, as a prerequisite to receiving vaccines. Charge no office fee in addition to the administration fee for an immunization-only or walk-in visit.
- Provide a signed immunization record, at no charge, to the parent, guardian, or patient each time an immunization is given as specified in G.S. 130A-154, and when needed for schools, childcare facilities, colleges/universities, or wherever immunization records are required

IMMUNIZATION RESOURCES FOR UPDATES AND NEW GUIDANCE

- The updated Billing and Coding Guide is available on the DPH website
 - <http://publichealth.nc.gov/lhd/docs/REVISED-03-2017-CodingandBillingGuidanceDocument.pdf>
- Check the Health Check Program Guide and the Medicaid Bulletins for updates to vaccine schedules, immunization tools, billing updates and other updates related to immunizations
 - https://ncdma.s3.amazonaws.com/s3fs-public/Health_Check_Billing_Guide_2016_09.pdf
 - <https://www.cdc.gov/vaccines/schedules/index.html> (2017 Vaccine Schedules)
 - <https://dma.ncdhhs.gov/providers/medicaid-bulletins> (Medicaid Bulletins)
 - http://www.immunize.nc.gov/providers/ncip/pdf/Coverage%20criteria_5_1_17.pdf (NCIP Coverage Criteria-Updated May 2017)

VFC ELIGIBILITY CRITERIA

- *VFC- Vaccines for Children: Children birth through 18 years of age that meet at least one of the following criteria are eligible for VFC vaccine:*
 - Medicaid enrolled - a child who is eligible or enrolled in the Medicaid program.
 - Uninsured - a child who has no medical insurance coverage
 - American Indian or Alaskan Native
 - Underinsured (Can only be served by providers such as LHD/FQHC/RHC). Underinsured include:
 - *Children who have commercial (private) health insurance but the coverage does not include vaccines*
 - *Children whose insurance covers only selected vaccines (VFC-eligible for non-covered vaccines only)*
 - *Children whose insurance caps vaccine coverage at a certain amount - once that coverage amount is reached, these children are categorized as underinsured*

VFC ELIGIBILITY CRITERIA

Note: Underinsured children are eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC), or Rural Health Clinic (RHC), or Local Health Department in North Carolina. (LHD) under an approved deputization agreement.

- *For underinsured children, whose medical home is not with a FQHC, RHC, or LHD, the provider should notify the parent /guardian that the patient is VFC eligible, and could receive VFC vaccines at one of these designated provider types.*
- If the parent/guardian chooses to receive vaccines for their child at their non-deputized medical home, the patient would receive private purchased vaccine, and would be financially responsible for the cost of the purchased vaccine and the associated administration fees.

VFC AND HEALTH CHOICE ELIGIBILITY AND HEALTH CHOICE MODIFIERS

- Children who are covered by North Carolina Health Choice (NCHC) are considered insured, with one exception:
 - NCHC children who are American Indian or Alaskan Native are eligible for VFC vaccines
 - Health Choice will reimburse the vaccine administration fee. NC families may self-declare to be American Indian or Alaska Native – there is no documentation needed.

Note: Children whose health insurance covers vaccinations **are not eligible for VFC vaccines**, even when a claim for the cost of the vaccine and its administration would be denied for payment by the insurance carrier because the **plan's deductible had not been met or because the insurance did not cover the total cost of the vaccine**

- The **TJ modifier** needs to on be the immunization administration codes billed for Health Choice

VFC/NCIP GUIDELINES FOR 19 AND OLDER

- Health Check beneficiaries that are 19 & 20 years of age are **not** eligible for VFC vaccines so the physician or advanced practice practitioner must use purchased vaccines for this age group
 - Per the 2016 Health Check Billing Guide the physician or advanced practice practitioners must use purchased vaccines for this age group and bill Medicaid for the cost of the vaccine and the vaccine administration fee
- Once a Medicaid recipient reaches the age of 21 years or older they are no longer eligible for any VFC vaccine doses. They would need to receive purchased doses and they would be responsible for the \$3.00 copay when they receive immunizations
- Adults that are 19 years of age and older that are **Uninsured** are eligible for certain NCIP vaccines. Please refer to the most up to date edition of the NCIP Vaccine Coverage Criteria located on the NCIP website at <http://www.immunize.nc.gov/providers/coveragecriteria.htm>

VFC ELIGIBILITY AND FAMILY PLANNING WAIVER

- Persons covered by the Be Smart Family Planning Program are also considered uninsured and may receive certain state-supplied vaccines, as noted in the NCIP Vaccine Coverage Criteria, for uninsured adults if receiving services at a Local Health Department

BILLING FOR VACCINE ADMINISTRATION CODES AND MODIFIERS ("25")

- Physician or Advanced Practice Practitioners may use modifier 25 with modifier EP or modifier Tj for preventive medicine service codes (99381 - 99397 and additional screening codes 99406-99409 and 96160) when reported in conjunction with immunization administrative services (90460-99474)
- Modifier 25 may be used with other non-preventive medicine E/M services when reported in conjunction with immunization administration when the E/M service is significant and separately identifiable
 - **Exception: If a vaccine is billed with the same date of service as code 99211, NCCI edits do not permit the E/M code to be reimbursed. CMS has stated that an E/M code should not be billed in addition to the administration code(s) when the beneficiary presents for vaccine(s) only.**

BILLING FOR VACCINE ADMINISTRATION CODES

- Effective with date of service July 1, 2011, the ONLY immunization administration codes covered for Medicaid recipients in the Health Check age range, 0 through 20 years of age, are CPT codes 90471 through 90474

BILLING VACCINE ADMINISTRATION CODES AND MODIFIERS ("EP" & "SL")

- The EP modifier should be on all immunization administration codes billed for Medicaid recipients in the Health Check age range, 0 through 20 years of age
- Do not use the EP modifier for Medicaid recipients 21 years of age and older (above the Health Check age range)
- State-Supplied Vaccines administered must be reported or billed, as appropriate, even if administration codes are not being billed.
 - **Attach the "SL" modifier on the vaccine product code when reporting state vaccines for Medicaid cost settlement purposes**

BILLING GUIDANCE FOR VACCINE ADMINISTRATIVE CODES

- All of the units billed for CPT codes 90471EP/TJ, 90472EP/TJ, 90473EP/TJ and 90474EP/TJ must be billed on ONE detail to avoid duplicate audit denials.
 - Administration of one injectable vaccine is billed with CPT code 90471 (one unit) with the **EP** modifier.
 - Additional injectable immunization administrations are billed with CPT code 90472 with the **EP** modifier. The appropriate number of units must be billed for each additional immunization administration CPT procedure code, with the total charge for all units reflected on the detail.
 - Currently, 90474EP cannot be billed with 90473EP because there are no two oral/intranasal vaccines that would be given to a recipient. Only one unit of either 90473EP/TJ or 90474EP/TJ is allowed.

VACCINE ADMINISTRATION FEE AND UNINSURED/UNDERINSURED PATIENTS

- LHD's may charge the patient an out-of-pocket administration fee for VFC vaccines unless the patient is Uninsured or Underinsured **AND** the family income is below 200% of the federal poverty level. If these two conditions apply the patient's vaccine administration fee must be waived.
- If the LHD chooses to charge an out-of-pocket vaccine administration fee the following must be observed:
 - LHD's cannot charge the parent/guardian any amount that exceeds the administration fee cap per vaccine dose above the maximum medical billable rate. *See your current CDC Provider Agreement for the dollar amount.
 - LHD's cannot deny administration of VFC vaccines to a VFC eligible child because the parent/guardian is unable to pay the administration fee.
 - LHD's must waive the administration fee if the VFC eligible child's parent/guardian is unable to pay the administration fee.

COMMON VFC ADMINISTRATION, ELIGIBILITY AND BILLING QUESTIONS

- **Who determines underinsured status of a patient? The patient, parent or the provider?**
 - Providers should work closely with their patients to determine the level of vaccine coverage provided by their insurance policy. Providers should work closely with insurance companies to determine if they are in network providers and the vaccination coverage provided per policy.
- **If a patient has insurance and it covers a portion of the vaccine cost, are they considered underinsured?**
 - No. If a patient's insurance covers vaccine, they are considered insured, even if that coverage is less than the cost of the vaccine. The patient must receive vaccine from your private supply.
- **If the insurance pays for females to get HPV but not males, are the males considered "underinsured?"**
 - Yes. If a male patients' insurance will not cover the cost of HPV, they would be considered underinsured for HPV only. **If** you have the authority to administer vaccine to underinsured patients, you may administer a dose of state-supplied HPV in this circumstance, but the patient must receive vaccine from your private supply for all other vaccines that the insurance covers. If you are not authorized to administer vaccines to underinsured patients then you should refer the client to an authorized agency (such as LHDs, FQHCs and RHCs) for HPV vaccine

COMMON VFC ADMINISTRATION, ELIGIBILITY AND BILLING QUESTIONS

- **When do we screen for VFC eligibility?**

The CDC Provider agreement states that providers will screen patients and document eligibility status **at each** immunization encounter for VFC eligibility. Eligibility screening and documentation must take place at each immunization visit prior to immunization administration. Providers that administer VFC vaccines to ineligible children will be required to replaced the doses with private vaccine.

- **Is a child who has both Medicaid and an additional insurance plan in force eligible for VFC vaccines?**

Children from birth through 18 years who are covered by both Medicaid's Health Check and another insurance plan (for example, BC/BS, Prudential, etc.) simultaneously (on the same date of service) are considered Medicaid-eligible, and therefore, are eligible for VFC vaccines. The CDC says that providers must offer the family a choice of what is the most cost effective for them: either 1) provide VFC vaccine and bill Medicaid (admin fee only), or 2) provide purchased vaccine and bill the insurance plan (for both the vaccine and the admin fee). The provider should honor the family's request.

COMMON VFC ADMINISTRATION, ELIGIBILITY AND BILLING QUESTIONS

We have a family that has a new insurance company that does not allow us to be in their network of providers, but the family would like to remain with us for continuity of care. Can the child automatically be considered underinsured and receive VFC vaccines?

No- Because VFC eligibility status must be determined at each immunization encounter, the provider needs to evaluate whether vaccines are covered by the plan to determine if the patient is underinsured, and is therefore eligible for VFC vaccine at a *Federally Qualified Health Center (FQHC)*, *Rural Health Clinic (RHC)*, or *Local Health Department (LHD)*.

If the insurance plan will cover the cost of vaccines at an in-network provider, patients should be referred to in-network providers who accept their insurance. These patients are not considered un-insured or underinsured for the VFC program.

COMMON VFC ADMINISTRATION, ELIGIBILITY AND BILLING QUESTIONS

Where can providers find detailed information about billing Medicaid for immunization-related services?

- For complete billing guidance for Medicaid-eligible children you can refer to the most current **N.C. Health Check Program Guide** which can be found on the NC DMA web site under the Health Check Section:
https://ncdma.s3.amazonaws.com/s3fs-public/Health_Check_Program_Guide_2016_10.pdf
- Details on billing procedures for all Health Check services, including details such as vaccine CPT® codes and ICD-10® (diagnosis) codes are included in the billing guide. You can also find Medicaid Bulletins and other important information on this site: <https://www2.ncdhhs.gov/DMA/healthcheck/index.htm>

Are we limited in what we may charge an insurance company for the administration of vaccine?

- Questions about commercial insurance plans and administration reimbursement charges should be addressed with the insurance carrier directly.

Who can providers contact if we have questions?

- The CSRA Call Center is dedicated to assisting with inquiries regarding enrollment, claim status, recipient eligibility, and other information needed by providers to support their service to NC DHHS recipients. The contact number is **800-688-6696**. For eligibility related questions, please contact the NCIR Helpdesk at 1-877-873-6247.

COMMON VFC ADMINISTRATION, ELIGIBILITY AND BILLING QUESTIONS

- **What about 19 & 20-year-old patients that are on Medicaid (NC Health Check)**

Individuals of this age on Medicaid are **NOT** eligible for VFC vaccines. Because these two age groups are not eligible for VFC vaccine, Medicaid will cover the cost of the vaccine and the vaccine administration fee. Per the 2016 Health Check Billing Guide providers must use privately purchased vaccines and bill Medicaid for the cost of the vaccine and the vaccine administration fee. Once the individual turns 21 years of age they fall under Adult Medicaid. Please contact your DMA Managed Care Consultant, for your Region, if you have any questions:

- <http://dma.ncdhhs.gov/document/regional-managed-care-consultant>

IMMUNIZATION CONTACTS

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N.C. Division of Public Health – Immunization Branch – Field Services Unit (Revised 1/29/2016)

LINKS TO IMMUNIZATION REGIONAL CONTACTS

- Regional Program Consultant's Map
 - http://immunize.nc.gov/providers/ncip/pdf/ric_map_201701.pdf
- Regional Nurse Consultant's Map
 - http://immunize.nc.gov/providers/ncip/pdf/rin_map_201601.pdf