

Washington Vaccine Administration Fee Matrix
FOR NEW CPT VACCINE ADMINISTRATION* CODING WHEN DISEASE COUNSELING PROVIDED**
VACCINE ADMINISTRATION OF STATE-SUPPLIED VACCINE
CPT Changes effective January 1, 2011

OBTAINING REIMBURSEMENT FOR ADMINISTRATION OF STATE-SUPPLIED VACCINE*	VFC-ELIGIBLE CHILDREN								INSURED/ NON-VFC-ELIGIBLE CHILDREN					
	MEDICAID CHILDREN				NON-MEDICAID VFC-ELIGIBLE CHILDREN***				STATE INSURED / SPONSORED (incl SCHIP, CHIP, Basic Hlth)				PRIVATELY INSURED CHILDREN	
	Fee For Service (FFS)		Medicaid Managed Care		"Public" Provider (FOHC, CMHC, LHJ)		"Private" Provider		Fee For Service (FFS)		Managed Care Contracts		Without Disease Counseling	With Disease Counseling
	Without Disease Counseling	With Disease Counseling	Without Disease Counseling	With Disease Counseling	Without Disease Counseling	With Disease Counseling	Without Disease Counseling	With Disease Counseling	Without Disease Counseling	With Disease Counseling	Without Disease Counseling	With Disease Counseling	Without Disease Counseling	With Disease Counseling
Bill Administration Using Administration CPT Code(s)	Admin codes not reimbursed; (instead use vaccine CPT code & -SL modifier)	Admin codes not reimbursed; (instead use vaccine CPT code & -SL modifier)	Admin codes not reimbursed	Admin codes not reimbursed	Continue to bill using CPT admin codes 90471-90474 per vaccine dose	CDC guidance: use new codes; but do not go over \$15.60 per vaccine, regardless of number of components	Continue to bill using CPT admin codes 90471-90474 per vaccine dose	CDC guidance: use new codes; but do not go over \$15.60 per vaccine, regardless of number of components	Admin codes not reimbursed; (instead use vaccine CPT code & -SL modifier)	Admin codes not reimbursed; (instead use vaccine CPT code & -SL modifier)	Admin codes not reimbursed	Admin codes not reimbursed	Continue to bill using CPT codes 90471-90474 per vaccine dose	Use new codes: 90460 (base code) + 90461 for each additional disease vaccine covers***
Maximum Charge to Patient for Administration	\$0.00 (no change)	\$0.00 (no change)	\$0.00 (no change)	\$0.00 (no change)	\$15.60 per dose [†] (no change) <i>(There may also be ofc visit fees)</i>	\$15.60 per dose [†] (no change) <i>(There may also be ofc visit fees)</i>	\$15.60 per dose [†] (no change) <i>(There may also be ofc visit fees)</i>	\$15.60 per dose [†] (no change) <i>(There may also be ofc visit fees)</i>	\$0.00 (no change) <i>(There may also be premiums^{††} & ofc visit fees)</i>	\$0.00 (no change) <i>(There may also be premiums^{††} & ofc visit fees)</i>	\$0.00 (no change) <i>(There may also be premiums^{††} & ofc visit fees)</i>	\$0.00 (no change) <i>(There may also be premiums^{††} & ofc visit fees)</i>	Bill patient as per Plan contract <i>(There may also be premiums^{††} & ofc visit fees)</i>	Bill patient as per Plan contract <i>(There may also be premiums^{††} & ofc visit fees)</i>
Maximum Amount Provider Receives for Administration	Currently \$5.96 per dose [†] (no change)	Currently \$5.96 per dose [†] (no change)	Bill Plan per contract	Bill Plan per contract	\$15.60 per dose [†] (no change)	CDC guidance: use new codes; but do not go over \$15.60 per vaccine, regardless of number of components	\$15.60 per dose [†] (no change)	CDC guidance: use new codes; but do not go over \$15.60 per vaccine, regardless of number of components	Currently \$5.96 per dose [†] (no change)	Currently \$5.96 per dose [†] (no change)	Bill Plan per contract	Bill Plan per contract	Bill Plan per contract	Bill Plan per contract
Vaccine CPT Code(s)	For children, there are currently no changes to the vaccine CPT codes.								For children, there are currently no changes to the vaccine CPT codes.					
Summary Comments	Without CMS changes, new CPT Admin. coding will not be allowed for Medicaid children in Washington State				Without CMS changes, new CPT Admin. coding will not be allowed for VFC-eligible children in Washington State				Not know how or if will impact; any changes would require CMS, MPA & HCA guidance				Not know yet how changes will impact charges	

* Applies only to vaccine administration; does not apply to office visit.

** See table below for examples of using new administration codes per vaccine component; also counseling must be provided by a "qualified health care professional", based on each state's guidance on scope of practice; WA State scope of practice documents for RNs, LPNs, and Certified Health Care Assistants: <http://apps.leg.wa.gov/WAC/default.aspx?cite=246-840-700>; [Health Care Assistants - Washington State Dept of Health](#);

*** NON-MEDICAID VFC-ELIGIBLE: Uninsured, Underinsured, and non-Medicare American Indian/Alaska Native

† Dose = per shot, intranasal, or oral vaccine administration, not per the number of antigens in the dose administered. This applies to VFC administered vaccines only.

†† Premiums for State-sponsored programs are based on the Federal Poverty Level

From recent AAP Guidance on Vaccine Administration Coding Changes

(NOTE: original AAP table was modified to include all ACIP-recommended vaccines, not just examples)

Q. How many **components** are in the common pediatric vaccines and which pediatric immunization administration codes would I report with each?

A. Please see chart below:

Vaccine	# of Vaccine Components	Immunization Administration Code(s) Reported
Hepatitis A	1	90460
Hepatitis B	1	90460
Hib	1	90460
HPV	1	90460
IPV	1	90460
Influenza	1	90460
Meningococcal	1	90460
Pneumococcal	1	90460
Rotavirus	1	90460
Varicella	1	90460
Td	2	90460 & 90461
DTaP or Tdap	3	90460, 90461 & 90461
MMR	3	90460, 90461 & 90461
MMRV	4	90460, 90461, 90461 & 90461
DTaP-Hib-IPV (Pentacel®)	5	90460, 90461, 90461, 90461 & 90461
DTaP-HepB-IPV (Pediarix®)	5	90460, 90461, 90461, 90461 & 90461