

Chapter 9A

Immunizations & Vaccinations

Overview

Vaccination is a covered health care service for Minnesotans enrolled in PrimeWest Health or any other publicly funded Minnesota Health Care Programs (MHCP). The Minnesota Department of Human Services (DHS) works with the Minnesota Department of Health (MDH) to administer the Minnesota Vaccines for Children Program (MnVFC), which provides vaccines to children and some adults in Minnesota.

The MnVFC program is an expanded version of the national Vaccines for Children (VFC) program that uses federal funding to provide increased vaccine coverage to Minnesotans. The program supplies vaccine at no cost to participating providers. For more information, please visit the MnVFC program website.

Eligible Providers

The following PrimeWest Health-enrolled health care providers may bill for vaccines:

- Certified family and certified pediatric nurse practitioners
- Certified nurse-midwives
- Child and Teen Checkups providers
- Clinics
- Home health agencies
- Outpatient and inpatient hospitals
- Physicians
- Public health clinics
- Public health nursing clinic providers

All PrimeWest Health-enrolled providers who administer pediatric vaccines are required by state law to be enrolled in the MnVFC program (per MS 256B.0625, subd.39).

Eligible Recipients

Infants, children, and adults enrolled in PrimeWest Health are eligible to receive vaccines through the MnVFC program.

Covered Services

Influenza Vaccines

Influenza (flu) vaccines are available for PrimeWest Health-enrolled recipients 18 years of age and younger through the MnVFC program. For PrimeWest Health-enrolled adults 19 years of age and older, flu vaccine is covered by PrimeWest Health. MnVFC flu vaccines are distributed in the fall and are administered throughout the flu season. Annual vaccine distribution and reimbursement updates from MDH and DHS are released in the fall. The annual supply of flu vaccine, and the timing of its distribution, cannot be guaranteed in any year.

MHCP Influenza Vaccine Coverage for 2007-2008

Influenza vaccine is a covered service for PrimeWest Health recipients. Providers must obtain their flu vaccine supply to be administered to MHCP recipients ages 18 and younger from the MnVFC program. PrimeWest Health reimburses for the administration of MnVFC vaccines. When MnVFC influenza vaccines are not available, refer to MHCP Provider Information Influenza Vaccines.

For flu vaccines administered to MHCP-enrolled adults ages 19 and older, submit claims to PrimeWest Health for the cost of the vaccine and its administration.

Age Range	CPT Code	Description	Coverage and Billing	
			MnVFC (Use SL modifier)	MHCP (Do not use SL modifier)
6-35 months	90655	Influenza virus vaccine, split virus, preservative free, for children 6-35 months of age, for intramuscular use Fluzone	X	
	90657	Influenza virus vaccine, split virus, for children 6-35 months of age, for intramuscular use Fluzone	X	
	90660	Influenza virus vaccine, live, for intranasal use FluMist (2 yrs + effective 11/1/07)	X	
3-18 years	90656	Influenza virus vaccine, split virus, preservative free , for use in individuals 3 years and above, for intramuscular use Fluzone	X	
	90658	Influenza virus vaccine, split virus, for use in individuals 3 years of age and above, for intramuscular use Fluzone and Fluvirin (4 yrs+)		

	90658	Influenza virus vaccine, split virus, for use in individuals 3 years of age and above, for intramuscular use Fluzone, Fluvirin (4 yrs +)		
	90660	Influenza virus vaccine, live, for intranasal use FluMist (2 yrs + effective 11/1/07)	X	
19 years and older	90656	Influenza virus vaccine, split virus, preservative free , for use in individuals 3 years and above, for intramuscular use Fluzone, Fluarix		X
	90658	Influenza virus vaccine, split virus, for use in individuals 3 years of age and above, for intramuscular use Fluzone, Fluvirin		

Additional Information

- For more information on Minnesota’s Influenza Vaccination Plan for the current Season, visit the Minnesota Department Of Health (MDH) website
- For a current list of all vaccines available through MnVFC, refer to the MDH MnVFC program website

Other Vaccines

Administration of vaccines and toxoids to PrimeWest Health enrolled infants, children, and adults is a covered service. All vaccines available through the MnVFC program must be obtained from MDH. Most routine childhood vaccines are available through the MnVFC program.

- For more information about which vaccines are covered by PrimeWest Health (an MHCP PMAP) see the Minnesota Health Care Programs Vaccines and Toxoids Quick Reference
- Refer to the Child and Teen Checkups section in Chapter 9 for immunization requirements and schedules.

Non-Covered Services

- Home health agency providers may not bill for vaccines provided to GAMC recipients.
- School districts may not bill for vaccination as an IEP or IFSP service.

Billing

Providers must bill according to the following instructions:

- All providers submitting charges must bill for vaccines using CPT codes
- The vaccine administration code should always be billed in addition to the vaccine code
- Providers must use the modifier SL with the vaccine CPT code when billing for administration of vaccines from the MnVFC program
- When billing for the administration of MnVFC vaccines, continue to enter the price of the vaccine at \$0 and use the appropriate administration code.

90465	Administration of the initial vaccine on a single date of service for children under 8 years of age when the physician counsels the patient/family
90466	Administration of each additional vaccine after the initial vaccine on a single date of service for children under 8 years of age
90471	Administration of the first vaccine. PrimeWest Health allows a maximum of 1 unit when billing for code 90471.
90472	More than one vaccine administered on a single date of service. This code will deny if you have not billed 90471 for the initial vaccination. Enter units as the number of single or combination vaccines given (e.g., Pediarix which contains DTaP-Hep B-IPV antigens is billed as one unit).
90473	Administration of intranasal or oral vaccine. Bill administration codes 90472 or 90466 (as appropriate) for administering additional vaccine(s)

Claims will be denied with EOB code 820 (vaccine administration conflict) if:

- 90472 is billed without 90471
- Vaccine CPT codes are billed without administration codes
- Administration codes are billed without vaccine CPT codes

When billing for influenza vaccines, please note:

- Bill preservative-free and preservative containing influenza vaccines using different vaccine codes, even if they are indicated for the same age group.
- Bill the vaccine's administration code in addition to the vaccine code. When giving MnVFC vaccines, bill the code for the vaccine with modifier SL. PrimeWest Health will reimburse providers an administration fee of \$8.50 for each single or combination MnVFC vaccine administered.
- Bill administration code 90473 and vaccine code 90660 for intranasal flu vaccine (FluMist).
- For recipients ages 19 and older, PrimeWest Health pays the fee schedule rate plus an administration fee of \$1.50. Bill the appropriate administration and vaccine codes; do not use the SL modifier.

Providers must obtain the available vaccines for MnVFC-eligible recipients from MDH. PrimeWest Health will reimburse providers only for the administration of MnVFC vaccines. Each single or combination vaccine administered will be reimbursed at \$8.50. PrimeWest Health does not pay for

purchase of vaccines available through MnVFC. For a current list of vaccines available through MnVFC, providers should refer to the Minnesota Department of Health MnVFC program website or call the Immunization Program at: 1-651-201-5503 or 1-800-657-3970. The list of available MnVFC vaccines can be found on the vaccine order form accessible online.

For vaccines not available through MnVFC, payment to providers for vaccine procedure codes is based on the average wholesale price plus a standard administration fee. Vaccination reimbursement rates are updated regularly as wholesale prices change. When billing for a non-MnVFC supplied vaccine, providers should follow the same instructions as billing for MnVFC vaccines, except the SL modifier should not be used.

In addition to the CPT vaccine codes, usual and customary charges for an office visit associated with the vaccination may also be billed. Office visit charges should not be billed if the appointment is solely to administer vaccine(s).

For more information about which CPT codes to use when billing PrimeWest Health for vaccines and toxoids, see the MHCP Vaccines and Toxoids Quick Reference.

MHCP Vaccines and Toxoids Quick Reference

Age groups listed under PrimeWest Health coverage do not indicate guidelines for administration of the vaccine or the availability of the vaccine through MnVFC for the age groups listed.

Refer to the Centers for Disease Control and Prevention VFC Vaccine Resolutions for more information about eligible age groups, recommended vaccine schedules, and recommended dosage information for specific vaccines.

Vaccines listed as unavailable through the Minnesota Vaccines for Children (MnVFC) program are covered by PrimeWest Health.

Use the CPT codes listed here when billing PrimeWest Health for vaccines:

CPT Procedure Code	Description	MHCP Coverage Age Range Limitations	Available through MnVFC
90632	Hepatitis A vaccine, adult dosage, for intramuscular use	19 years of age & older	No
90633	Hepatitis A vaccine, pediatric/adolescent dosage-2 dose schedule, for intramuscular use	18 years of age & younger	Yes
90634	Hepatitis A vaccine, pediatric/adolescent dosage-3dose schedule, for intramuscular use	18 years of age & younger	No
90636	Hepatitis A and hepatitis B	18 years of age &	No

	vaccine (HepA-HepB), adult dosage, for intramuscular use	older	
90645	Hemophilus influenza b vaccine (Hib), HbOC conjugate (4 dose schedule), for intramuscular use		Yes
90647	Hemophilus influenza b vaccine (Hib), PRP-OMP conjugate (3 dose schedule), for intramuscular use		Yes
90648	Hemophilus influenza b vaccine (Hib), PRP-T conjugate (4 dose schedule), for intramuscular use		Yes
90649	Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18 (quadrivalent), 3 dose schedule, for intramuscular use	Females 9–26 years of age	Yes
90655	Influenza virus vaccine, split virus, preservative free, for children 6-35 months of age, for intramuscular use	3 years of age & younger	Yes
90656	Influenza virus vaccine, split virus, preservative free, for use in individuals 3 years and above, for intramuscular use	3–18 years of age	Yes
90656	Influenza virus vaccine, split virus, preservative free, for use in individuals 3 years and above, for intramuscular use	19 years of age & older	No
90657	Influenza virus vaccine, split virus, for children 6-35 months of age, for intramuscular use	3 years of age & younger	Yes
90658	Influenza virus vaccine, split virus, for use in individuals 3 years of age and above, for intramuscular use	3–18 years of age	Yes
90658	Influenza virus vaccine, split virus, for use in individuals 3 years of age and above, for intramuscular use	19 years of age & older	No

90660	Influenza virus vaccine, live, for intranasal use	5–18 years of age	Yes
90660	Influenza virus vaccine, live, for intranasal use	19–49 years of age	No
90669	Pneumococcal conjugate vaccine, polyvalent, for children under five years old, for intramuscular use (Pevnar)	4 years of age & younger	Yes
90680	Rotavirus vaccine, pentavalent, 3 dose schedule, live, for oral use	Under 1 year of age	Yes
90681	Rotavirus vaccine, human, attenuated, 2 dose schedule, live, for oral use	Under 1 year of age	Yes
90696	Diphtheria, tetanus toxoids, acellular pertussis and poliovirus vaccine (DTaP - IPV), when administered to children 4 years through 6 years of age, for intramuscular use	Under 7 years of age	Yes
90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine, haemophilus influenza type B, and poliovirus vaccine (DTaP-HIB-IPV), for intramuscular use	Under 5 years of age	Yes
90700	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP), for use in individuals younger than 7 years, for intramuscular use	Under 7 years of age	Yes
90702	Diphtheria and tetanus toxoids (DT) adsorbed for use in individuals younger than 7 years, for intramuscular use	Under 7 years of age	Yes
90707	Measles, mumps, and rubella virus vaccine (MMR) live, for subcutaneous use		Yes
90710	Measles, mumps, rubella, and varicella virus vaccine (MMRV) live, for subcutaneous use	12 years of age & younger	Yes
90713	Poliovirus vaccine, inactivated, (IPV), for subcutaneous or		Yes

	intramuscular use		
90714	Tetanus and diphtheria toxoids (Td) adsorbed, preservative free, for use in individuals 7 years or older, for intramuscular use	7 years of age & older	Yes
90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), for use in individuals 7 years or older, for intramuscular use	10 years of age & older	Yes
90716	Varicella virus vaccine, live, for subcutaneous use		Yes
90718	Tetanus and diphtheria toxoids (Td) adsorbed for use in individuals 7 years or older, for intramuscular use	7 years of age & older	Yes
90721	Diphtheria, tetanus toxoids, and acellular pertussis vaccine and Hemophilus influenza B vaccine (DtaP-Hib), for intramuscular use	Under 7 years of age	Yes
90723	Diphtheria, tetanus toxoids, acellular pertussis vaccine Hepatitis B, and poliovirus vaccine, inactivated (DtaP-HepB-IPV), for intramuscular use	Under 7 years of age	Yes
90732	Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage, for use in individuals 2 years or older, for subcutaneous or intramuscular use	2 years of age & older	No
90733	Meningococcal polysaccharide vaccine (any group(s)) for subcutaneous use		No
90734	Meningococcal conjugate vaccine, serogroups A, C, Y and W-135 (tetravalent), for intramuscular use	11-18 years of age	Yes
90736	Zoster (shingles) vaccine, live, for subcutaneous use	60 years of age and older	No

90734	Meningococcal conjugate vaccine, serogroups A, C, Y and W-135 (tetavalent), for intramuscular use	19 years of age & older	No
90744	Hepatitis B vaccine, pediatric/adolescent dosage, for intramuscular use	18 years of age & younger	Yes
90746	Hepatitis B vaccine, adult dosage, for intramuscular use	19 years of age & older	Yes
90748	Hepatitis B and Hemophilus influenza b vaccine (HepB-Hib), for intramuscular use		Yes

Legal References

[MS 256B.0625, subd.39](#)