

# MEDICAL ASSISTANCE BULLETIN

**ISSUE DATE** 

September 14, 2022

**EFFECTIVE DATE** 

August 29, 2022

**NUMBER** 

01-22-42, 08-22-50, 09-22-41, 10-22-15, 31-22-45, 33-22-39

**SUBJECT** 

Adult Vaccine Procedure Code Updates and Additions

BY

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Office of Medical Assistance Programs

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**IMPORTANT REMINDER:** All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMISe<sup>™</sup> to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the revalidation dates. Enrollment (revalidation) applications may be found at: <a href="https://www.dhs.pa.gov/providers/Providers/Pages/PROMISe-Enrollment.aspx">https://www.dhs.pa.gov/providers/Providers/Pages/PROMISe-Enrollment.aspx</a>.

# **PURPOSE:**

The purpose of this bulletin is to notify providers of updates to the Medical Assistance (MA) Program Fee Schedule for adult vaccines.

This bulletin obsoletes MA Bulletin 01-22-15, 08-22-16, 09-22-14, 10-22-06, 31-22-15, 33-22-13, titled "Adult Vaccine Procedure Code Updates and Additions," that was inadvertently issued on August 26, 2022, with an incorrect recommended age range for the shingles vaccine.

(https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20OMAP/MAB2022082603.pdf).

# **SCOPE:**

This bulletin applies to MA enrolled hospital based medical clinics, independent medical/surgical clinics, physicians, certified registered nurse practitioners, physician assistants, and certified nurse midwives who administer immunizations to MA beneficiaries in the MA Program's fee-for-service (FFS) delivery system. Providers rendering services to MA beneficiaries in the managed care delivery system should contact the appropriate managed care organization with any billing questions.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Fee-for-service provider service center: 1-800-537-8862

Visit the Office of Medical Assistance Programs website at:

https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/Contact-Information-for-Providers.aspx.

#### **BACKGROUND/DISCUSSION:**

The Department of Human Services issued MA Bulletin 99-22-05, titled "2022 Healthcare Common Procedure Coding System (HCPCS) Updates, Fee Adjustments and Other Procedure Code Changes" (2022 HCPCS Updates) to announce changes to the MA Program Fee Schedule, effective with dates of service on and after August 29, 2022. The 2022 HCPCS Updates contain a subset of 2022 Current Procedural Terminology (CPT) procedure codes for adult vaccines.

# PROCEDURE:

Providers are to utilize the codes as outlined below and in the attached MA Program Fee Schedule, effective for dates of service on and after August 29, 2022, which identifies the procedure code, national code description, provider type, provider specialty, place of service, MA fee, MA units and limits for providers submitting MA FFS claims.

#### **New CPT Codes for Adult Vaccines**

The MA Program will pay for the administration of each of the vaccines provided to MA beneficiaries using the procedure codes and consistent with the indications for use of each vaccine as approved by the U.S. Food and Drug Administration and current Advisory Committee on Immunization Practices for adult immunization schedules.

CPT Code	Code Description	MA Fee
90587	Dengue vaccine, quadrivalent, live, 3 dose schedule, for	\$10.00
	subcutaneous use	
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL	\$10.00
	dosage, for intramuscular use	
90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL	\$10.00
	dosage, for intramuscular use	
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for	\$10.00
	intramuscular use	
90677	Pneumococcal conjugate vaccine, 20 valent (PCV20), for	\$10.00
	intramuscular use	
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2),	\$10.00
	10 mcg dosage, 3 dose schedule, for intramuscular use	

# **Expanded Ages for Adult Vaccine**

Procedure code 90750 was already on the MA Program Fee Schedule for 50 through 120 years of age prior to the implementation of the 2022 HCPCS Updates. This code has been updated to include the recommended age range and indications for use to individuals 18 through 49 years of age who are immunodeficient or immunocompromised to allow providers to bill for the administration of the vaccine to beneficiaries ages 18 through 120 years of age.

CPT Code	Code Description	MA Fee
90750	Zoster (shingles) vaccine (HZV), recombinant, subunit,	\$10.00
	adjuvanted, for intramuscular use	

NOTE: Provider type 10, specialty 100 (physician assistant) is included because physician assistants can be identified as the rendering provider pursuant to MA Bulletin 01-22-05, 08-22-05, 09-22-04, 10-22-01, 31-22-05, entitled "Billing Procedure Update for Certified Registered Nurse Practitioners and Physician Assistants"

(https://www.dhs.pa.gov/docs/Publications/Documents/FORMS%20AND%20PUBS%20OMAP/MAB2022010701.pdf).

Providers may access the online version of the MA Program Fee Schedule at: <a href="https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/MA-Fee-Schedule.aspx">https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/MA-Fee-Schedule.aspx</a>.

Federally Qualified Health Centers and Rural Health Clinics are to refer to the billing instructions in this MA Bulletin and instructions in the MA Program's Provider Handbook and Billing Guides (<a href="https://www.dhs.pa.gov/providers/PROMISe\_Guides/Pages/PROMISe-Handbooks.aspx">https://www.dhs.pa.gov/providers/PROMISe\_Guides/Pages/PROMISe-Handbooks.aspx</a>).

# **RESOURCES:**

Advisory Committee on Immunization Practices <a href="https://www.cdc.gov/vaccines/acip/recommendations.html">https://www.cdc.gov/vaccines/acip/recommendations.html</a>

The U.S. Food and Drug Administration – Vaccines Licensed for Use <a href="https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states">https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states</a>

Pennsylvania Department of Human Services Bulletin Search <a href="https://www.dhs.pa.gov/docs/For-Providers/Pages/Bulletin-Search.aspx">https://www.dhs.pa.gov/docs/For-Providers/Pages/Bulletin-Search.aspx</a>

# **ATTACHMENT:**

Updates to the Medical Assistance Program Fee Schedule for Adult Vaccines – Effective August 29, 2022

# Updates to the Medical Assistance Program Fee Schedule for Adult Vaccines Effective August 29, 2022

Procedure		Provider		Place of	MA		
Code	Description	Type	Specialty	Service	Fee	MA units	Limits
	Dengue vaccine, quadrivalent, live, 3 dose schedule, for	,,				per	once
90587	subcutaneous use	01	183	22	\$10.00	administration	per day
90587	Dengue vaccine, quadrivalent, live, 3 dose schedule, for subcutaneous use	08	082	49	\$10.00	per administration	once per day
90587	Dengue vaccine, quadrivalent, live, 3 dose schedule, for subcutaneous use	09	All	11, 12	\$10.00	per administration	once per day
90587	Dengue vaccine, quadrivalent, live, 3 dose schedule, for subcutaneous use	10	100	11, 12	\$10.00	per administration	once per day
90587	Dengue vaccine, quadrivalent, live, 3 dose schedule, for subcutaneous use	31	All	11, 12	\$10.00	per administration	once per day
90587	Dengue vaccine, quadrivalent, live, 3 dose schedule, for subcutaneous use	33	335	11,12	\$10.00	per administration	once per day
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL	01	183	22	\$10.00	per administration	once per day

	dosage, for intramuscular use						
	Tick-borne encephalitis						
	virus vaccine,						
	inactivated; 0.25 mL dosage, for					per	once
90626	intramuscular use	08	082	49	\$10.00	administration	per day
00020	Tick-borne encephalitis	00	002	10	Ψ10.00	daminotration	por day
	virus vaccine,						
	inactivated; 0.25 mL						
	dosage, for					per	once
90626	intramuscular use	09	All	11, 12	\$10.00	administration	per day
	Tick-borne encephalitis						
	virus vaccine,						
	inactivated; 0.25 mL						
00000	dosage, for	40	400	44.40	<b>#40.00</b>	per	once
90626	intramuscular use	10	100	11, 12	\$10.00	administration	per day
	Tick-borne encephalitis						
	virus vaccine, inactivated; 0.25 mL						
	dosage, for					per	once
90626	intramuscular use	31	All	11, 12	\$10.00	administration	per day
00020	Tick-borne encephalitis	0.	7 (11	11, 12	Ψ10.00	daminotration	por day
	virus vaccine,						
	inactivated; 0.25 mL						
	dosage, for					per	once
90626	intramuscular use	33	335	11, 12	\$10.00	administration	per day
	Tick-borne encephalitis						
	virus vaccine,						
	inactivated; 0.5 mL						
00007	dosage, for	0.4	400	00	<b>#</b> 40.00	per	once
90627	intramuscular use	01	183	22	\$10.00	administration	per day

	Tick-borne encephalitis						
	virus vaccine,						
	inactivated; 0.5 mL						
00007	dosage, for	00	000	40	<b>#</b> 40.00	per	once
90627	intramuscular use	80	082	49	\$10.00	administration	per day
	Tick-borne encephalitis						
	virus vaccine, inactivated; 0.5 mL						
	dosage, for					ner	once
90627	intramuscular use	09	All	11, 12	\$10.00	per administration	per day
30021	Tick-borne encephalitis	03	All	11, 12	ψ10.00	administration	perday
	virus vaccine,						
	inactivated; 0.5 mL						
	dosage, for					per	once
90627	intramuscular use	10	100	11, 12	\$10.00	administration	per day
	Tick-borne encephalitis			,			
	virus vaccine,						
	inactivated; 0.5 mL						
	dosage, for					per	once
90627	intramuscular use	31	All	11, 12	\$10.00	administration	per day
	Tick-borne encephalitis						
	virus vaccine,						
	inactivated; 0.5 mL						
	dosage, for					per	once
90627	intramuscular use	33	335	11, 12	\$10.00	administration	per day
	Pneumococcal conjugate						
	vaccine, 15 valent						
	(PCV15), for					per	once
90671	intramuscular use	01	183	22	\$10.00	administration	per day
	Pneumococcal conjugate						
	vaccine, 15 valent						
00074	(PCV15), for	00	000	40	<b>#40.00</b>	per	once
90671	intramuscular use	80	082	49	\$10.00	administration	per day

	Pneumococcal conjugate vaccine, 15 valent (PCV15), for					per	once
90671	intramuscular use	09	All	11, 12	\$10.00	administration	per day
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use	10	100	11, 12	\$10.00	per administration	once per day
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use	31	All	11, 12	\$10.00	per administration	once per day
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use	33	335	11, 12	\$10.00	per administration	once per day
90677	Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use	01	183	22	\$10.00	per administration	once per day
90677	Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use	08	082	49	\$10.00	per administration	once per day
	Pneumococcal conjugate vaccine, 20 valent (PCV20), for					per	once
90677	intramuscular use	09	All	11, 12	\$10.00	administration	per day
	Pneumococcal conjugate vaccine, 20 valent (PCV20), for					per	once
90677	intramuscular use	10	100	11, 12	\$10.00	administration	per day

	Pneumococcal conjugate						
	vaccine, 20 valent						
00077	(PCV20), for	0.4		44.40	<b>A</b> 40.00	per	once
90677	intramuscular use	31	All	11, 12	\$10.00	administration	per day
	Pneumococcal conjugate						
	vaccine, 20 valent						
00677	(PCV20), for	22	225	11 10	¢10.00	per	once
90677	intramuscular use	33	335	11, 12	\$10.00	administration	per day
	Zoster (shingles) vaccine (HZV), recombinant,						
	subunit, adjuvanted, for					per	once
90750	intramuscular use	01	183	22	\$10.00	administration	per day
30730	Zoster (shingles) vaccine	01	100		ψ10.00	administration	perday
	(HZV), recombinant,						
	subunit, adjuvanted, for					per	once
90750	intramuscular use	08	082	49	\$10.00	administration	per day
	Zoster (shingles) vaccine						,
	(HZV), recombinant,						
	subunit, adjuvanted, for					per	once
90750	intramuscular use	09	All	11, 12	\$10.00	administration	per day
	Zoster (shingles) vaccine						
	(HZV), recombinant,						
	subunit, adjuvanted, for					per	once
90750	intramuscular use	10	100	11, 12	\$10.00	administration	per day
	Zoster (shingles) vaccine						
	(HZV), recombinant,						
00750	subunit, adjuvanted, for	24	A II	44 40	<b>#</b> 40.00	per	once
90750	intramuscular use	31	All	11, 12	\$10.00	administration	per day
	Hepatitis B vaccine (HepB), 3-antigen (S,						
	Pre-S1, Pre-S2), 10 mcg						
	dosage, 3 dose						
	schedule, for					per	once
90759	intramuscular use	01	183	22	\$10.00	administration	per day

	Hepatitis B vaccine (HepB), 3-antigen (S,						
	Pre-S1, Pre-S2), 10 mcg						
	dosage, 3 dose schedule, for					per	once
90759	intramuscular use	08	082	49	\$10.00	administration	per day
33.33	Hepatitis B vaccine				<b>V.0.00</b>		p o : G.a.y
	(HepB), 3-antigen (S,						
	Pre-S1, Pre-S2), 10 mcg						
	dosage, 3 dose					nor	0000
90759	schedule, for intramuscular use	09	All	11, 12	\$10.00	per administration	once per day
90739	Hepatitis B vaccine	03	All	11, 12	Ψ10.00	administration	per day
	(HepB), 3-antigen (S,						
	Pre-S1, Pre-S2), 10 mcg						
	dosage, 3 dose						
	schedule, for					per	once
90759	intramuscular use	10	100	11, 12	\$10.00	administration	per day
	Hepatitis B vaccine						
	(HepB), 3-antigen (S,						
	Pre-S1, Pre-S2), 10 mcg dosage, 3 dose						
	schedule, for					per	once
90759	intramuscular use	31	All	11, 12	\$10.00	administration	per day
	Hepatitis B vaccine						
	(HepB), 3-antigen (S,						
	Pre-S1, Pre-S2), 10 mcg						
	dosage, 3 dose						
00750	schedule, for	00	005	44.40	040.00	per	once
90759	intramuscular use	33	335	11, 12	\$10.00	administration	per day