South Carolina DEPARTMENT OF HEALTH AND HUMAN SERVICES Post Office Box 8206

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MEDICAID BULLETIN

TO: Providers Indicated

SUBJECT: Revised Billing Procedures for the Vaccine Assurance for All Children (VAFAC) Program

Effective February 15, 2011, for claims received with a date of service on or after January 1, 2011, the South Carolina Department Health and Human Services (SCDHHS) will implement the following changes to the billing policy for the reimbursement of VAFAC vaccine administration. For accuracy and program compliance, providers are required to include specific information. The appropriate vaccination product(s) Current Procedural Terminology code (CPT) must be included on the claim when filing for reimbursement for the administration of these vaccines.

If you have already submitted a claim for a date of service prior to February 15, 2011 and received payment for the VAFAC vaccine administration using the old administration codes, you do not need to re-file your claim.

Vaccine(s) provided under the VAFAC program in a Federally Qualified Health Center (FQHC) and a Rural Health Clinic (RHC) are excluded from this requirement at this time.

For immunizations covered under the VAFAC program, Medicaid will reimburse for the administration using the codes listed below:

- 90460 Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; first vaccine/toxoid component (one unit per Date of Service)
- 90461 Each additional vaccine/toxoid component (two units per Date of Service)

<u>PLEASE NOTE</u>: CPT advises to bill the above codes based on the number of components. At this time, SCDHHS will continue to use these codes per administration of each vaccine/toxoid and not per component for the VAFAC program.

The administration of VAFAC vaccines is limited to a maximum of three units per date of service regardless of the number of additional vaccines administered. CPT codes 90460 and 90461 are covered codes for recipients under 19 years of age.

The following table is a list of CPT codes that correspond to the different vaccines that are available under the VAFAC program. The administration code and the vaccine code for the administered vaccine must be listed on the claim to receive reimbursement for the vaccine administration. For this code combination, only the administration code will be reimbursable, the vaccine code will display as an informational line item only on the Remittance Advice.

VAFAC vaccine CPT codes

90633	90657	90700	90723	Q2035
90634	90658	90702	90732	Q2036
90645	90660	90707	90733	Q2037
90647	90669	90710	90734	Q2038
90648	90670	90713	90740	Q2039
90649	90680	90714	90743	
90650	90681	90715	90744	
90655	90696	90716	90747	
90656	90698	90718	90748	

^{*}Please refer to CPT for the description of codes listed. The VAFAC vaccine code(s) are for information purposes only and are not reimbursable for SC Medicaid Recipients under the age of 19 years.

Edit Codes associated with VAFAC billing include:

Edit Code 356 - Immunization and administration codes must be included on claim. This edit will occur if the claim is missing the administration code, 90460-90461, or the VAFAC vaccine code(s). If billing for the VAFAC administration, verify that you have both the administration code and the administered VAFAC vaccine listed on the claim.

Edit Code 357 - Maximum of three (3) administration units can be billed per date of service. SCDHHS will only reimburse for a maximum of 3 units total for administration codes (90460-90461) on a single date of service. This edit will look at all claim history to determine how many administrations have been paid.

Edit Code 358 - Secondary administration CPT code not allowed prior to primary code. As part of the medical coding guidelines, a secondary administrative CPT code should not appear on a claim unless the primary administrative CPT code is also present for date of service.

This bulletin affects fee-for-service policy and applies only to those beneficiaries in this service option. For the managed care policy on billing for immunizations, please contact the appropriate managed care organization (MCO). Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangement.

For additional information on this policy update, please refer to the Physicians, Laboratories, and Other Medical Professionals manual located on our website at www.scdhhs.gov. If you have any questions regarding this bulletin, please contact your Program Manager at (803) 898-2660. Thank you for your continued support and participation in the South Carolina Medicaid Program.

/S/ Anthony E. Keck Director

AEK/gwfs

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To sign up for Electronic Funds Transfer of your Medicaid payment, please go to

http://www.dhhs.state.sc.us/dhhsnew/hipaa/index.asp and select "Electronic Funds Transfer (EFT)" for instructions.