

How to Bill Immunization Administration

CPT Codes 90460 and 90461

Alaska Medicaid covers only one 90460 claim per day for members 18 years of age and younger, regardless of the number of injections given. Additionally, a multi-component vaccine, such as MMR, is considered one vaccine, and qualifies as a single 90460 injection only (unless a separate injection has already been billed as a 90460 that same day, in which case the MMR could qualify for a single unit of 90461).

Alaska Medicaid immunization billing guidelines and examples are provided below. These examples do not include all vaccines/situations you may encounter. If you have any questions, please contact Provider Inquiry at 907.644.6800, option 1, 1, or toll-free in Alaska at 800.770.5650, option 1, 1, 1.

Immunization Billing Guidelines

Vaccine	ICD-9 Code	ICD-10 Code	# of Vaccine Components	Billed Units Allowed
HPV	V04.89	Z23	1	1
Influenza	V04.81	Z23	1	1
Meningococcal	V03.89	Z23	1	1
Pneumococcal	V03.82	Z23	1	1
Td	V06.5	Z23	2	1
DTaP or Tdap	V06.1	Z23	3	1
MMR	V06.4	Z23	3	1
DTaP-Hib-IPV	V06.8	Z23	5	1
DTaP-HepB-IBV	V06.8	Z23	5	1
RV	V04.89	Z23	1	1

Immunization Billing Examples

Example	Vaccines Administered on Same Date of Service	ICD-9 Code	ICD-10 Code	Immunization Code Reported	Billed Units Allowed
Patient A	MMR	V06.4	Z23	90460	1
	DTaP or Tdap, and	V06.1	Z23	90461	2
	Pneumococcal	V03.82	Z23		
Patient B	HPV	V04.89	Z23	90460	1
	Influenza, and	V04.81	Z23	90461	2
	Meningococcal	V03.89	Z23		
Patient C	RV	V04.89	Z23	90460	1
	DTaP-Hib-IPV	V06.8	Z23	90461	1

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