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HOW TO BILL NEW IMMUNIZATION ADMINISTRATION CPT CODES 90460 AND 90461

On January 1, 2011, new immunization administration CPT codes 90460 and 90461 for those 0 through 18 years of age became effective. Alaska Medicaid will pay for no more than one 90460 claim per day, 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 that may be encountered. If you have any questions, please contact ACS Provider Inquiry at 907.644.6800, option 1, or 800.770.5650, option 1, 1 (toll free, in-state).

IMMUNIZATION BILLING GUIDELINES

Vaccine	ICD9 Code	# of Vaccine Components	Billed Units Allowed
HPV	v04.89	1	1
Influenza	v04.81	1	1
Meningococcal	v03.89	1	1
Pneumococcal	v03.82	1	1
Td	v06.5	2	1
DTaP or Tdap	v06.1	3	1
MMR	v06.4	3	1
DTaP-Hib-IPV	v06.8	5	1
DTaP-HepB-IBV	v06.8	5	1
RV	v04.89	1	1



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IMMUNIZATION BILLING EXAMPLES

Example	Vaccines Administered on Same Date of Service	ICD9 Code	Immunization Code Reported	Billed Units Allowed
Patient A	MMR	v06.4	90460	1
	DTaP or TdaP, and	v06.1	90461	2
	Pneumococcal	v03.82		
Patient B	HPV	v04.89	90460	1
	Influenza, and	v04.81	90461	2
	Meningococcal	v03.89		
Patient C	RV	v04.89	90460	1
	DTaP-Hib-IPV	v06.8	90461	1

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