

## Coding for Vaccines and Toxoids

To meet the reporting requirements of immunization registries, vaccine distribution programs, and reporting systems, the exact vaccine product administered needs to be reported. Separate codes for a particular vaccine are provided in the American Medical Association's (AMA) CPT when the schedule (number of doses or timing) differs for 2 or more products of the same vaccine type, or when the vaccine is available in more than 1 chemical formulation, dosage, or route of administration. Such is the case with Haemophilus b vaccine, due to the differences in conjugated proteins and administration schedule.

Specific CPT codes are available for combination vaccines. It is inappropriate to code each component of a combination vaccine separately.

If a specific code for a vaccine product is not available, the unlisted procedure code (90749) should be used. A description of the vaccine or toxoid administered must be included on the claim to identify the product administered.

CPT codes (90476–90749) are used to identify the vaccine product only. To report the administration of a vaccine or toxoid, an immunization administration code must also be reported (see below Coding for Immunization Administration).

Commonly used ICD-9 codes are included for each vaccine. However, these are not intended as specific guidance on how to utilize, code, bill, or charge for a product. Health-care providers should make the ultimate decision as to when to use a specific product based on clinical appropriateness for a particular patient, and ICD-9 coding should best describe why a product was administered.

## Coding for Immunization Administration

An immunization administration code must be reported in addition to the vaccine or toxoid product code (see Coding for Vaccines and Toxoids). Each immunization administered must be coupled with an administration code.

There are 2 options when coding for the administration of immunizations. Some payers will require the use of CPT codes to report administration. Other payers, including Medicare, will require the use of the Healthcare Common Procedure Coding System (HCPCS) to report administration of specific vaccines. Correct coding will depend on the requirements of the specific third-party payer being billed. Providers should always verify required coding with the health plan they are billing.

## Coding for Immunization Administration Using the NEW CPT Codes

To more accurately account for the work and practice expenses associated with the administration of multiple-component (combination) vaccines, the AMA has established new CPT codes for the reporting of childhood and adolescent immunization administration. The new codes are based on the number of components in a vaccine. A component refers to all antigens in a vaccine that prevent disease caused by one organism. Beginning January 1, 2011, the new codes are reported per component as follows:

### Primary code (first vaccine component or toxoid component)

**90460** Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health-care professional.

### Add-on code (each additional vaccine component or toxoid component):

**+90461** Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health-care professional.  
This code can only be reported in conjunction with the primary code, and replaces add-on codes 90466 and 90468.

As of January 1, 2011, the physician counseling codes CPT 90465-90468 will no longer be active codes.

CPT 90471-90474 will remain active and should be used when vaccines are administered with or without counseling to patients 19 years of age and older and if no counseling is provided to patients 18 years of age and younger.

For information on billing Medicare for influenza vaccines, see the section below on using HCPCS codes.

## Coding for Immunization Administration Using HCPCS Codes for Medicare Patients

Some payers, including Medicare, require HCPCS code G0008 to report administration of influenza vaccine, G0009 to report administration of pneumococcal vaccine, and G0010 to report administration of hepatitis B vaccine.

Providers should always verify desired coding with the health plan they are billing. For example, Medicare Part B is very specific about the codes they require. Medicare will deny payment for a claim coded with 90471 for administration of influenza vaccine, because G0008 is required for payment. For administration of vaccines other than influenza, pneumococcal, or hepatitis B, providers should use an immunization administration CPT code (in the section above) to report administration when billing Medicare.

For additional information on coding sanofi pasteur products, visit the Reimbursement Information section located on the home page of VaccineShoppe.com.



The vaccines division of sanofi-aventis Group

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# 2011-2012

# Proper Coding

## sanofi pasteur products

Includes NEW vaccine administration codes effective January 1, 2011 and 2011-2012 influenza vaccine coding

Visit the Reimbursement Page on [VaccineShoppe.com](http://VaccineShoppe.com)<sup>®</sup> for additional coding and billing resources for sanofi pasteur products.

Do you have questions on coverage and payment for sanofi pasteur products?  
Contact the sanofi pasteur Reimbursement Support Service (RSS)  
Call **1-800-VACCINE (1-800-822-2463)** and choose the prompt for the RSS.



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NOTE: Vaccine Administration CPT<sup>®a</sup> codes have changed effective January 1, 2011. For a detailed description of how to use these codes, please see the back of this brochure.

Sanofi Pasteur Product Coding

Product	Product Description	NDC Number	Product CPT Code Distinctions	Product Code	Administration CPT Code without Counseling through 18 Years of Age <sup>b</sup> , and All Patients Over 18 Years of Age	Administration CPT Code with Counseling through 18 Years of Age	Typical ICD-9-CM Code(s)
ActHIB <sup>®</sup>	Haemophilus b Conjugate Vaccine (Tetanus Toxoid Conjugate)	49281-0545-05		90648	90471/90472	90460 - 1 unit	V03.81
Adacel <sup>®</sup>	Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis Vaccine Adsorbed	49281-0400-10 49281-0400-15	7 years of age and older <sup>c</sup>	90715	90471/90472	90460 - 1 unit 90461 - 2 units	V06.1 <sup>d</sup>
DAPTACEL <sup>®</sup>	Diphtheria and Tetanus Toxoids and Acellular Pertussis Vaccine Adsorbed	49281-0286-10	Younger than 7 years of age	90700	90471/90472	90460 - 1 unit 90461 - 2 units	V06.1
DECAVAC <sup>®</sup>	Tetanus and Diphtheria Toxoids Adsorbed	49281-0291-10 49281-0291-83	7 years of age and older	90714	90471/90472	90460 - 1 unit 90461 - 1 unit	V06.5 <sup>d</sup>
Diphtheria and Tetanus	Diphtheria and Tetanus Toxoids Adsorbed USP (For Pediatric Use)	49281-0278-10	Younger than 7 years of age	90702	90471/90472	90460 - 1 unit 90461 - 1 unit	V06.5
Fluzone <sup>®</sup>	Influenza Virus Vaccine, No Preservative: Pediatric Dose	49281-0111-25 <sup>e</sup>	6-35 months of age No Preservative	90655	90471/90472 G0008 (Medicare)	90460 - 1 unit	V04.81 <sup>f,g</sup>
Fluzone	Influenza Virus Vaccine, No Preservative	49281-0011-50 <sup>e</sup> 49281-0011-10 <sup>e</sup>	3 years of age and older No Preservative	90656	90471/90472 G0008 (Medicare)	90460 - 1 unit	V04.81 <sup>f,g</sup> V06.6 <sup>f,g</sup>
Fluzone	Influenza Virus Vaccine	49281-0388-15 <sup>e</sup>	6-35 months of age	90657	90471/90472 G0008 (Medicare)	90460 - 1 unit	V04.81 <sup>f,g</sup>
Fluzone	Influenza Virus Vaccine	49281-0388-15 <sup>e</sup>	3 years of age and older	90658 Q2038 (Medicare as of 1/3/11)	90471/90472 G0008 (Medicare)	90460 - 1 unit	V04.81 <sup>f,g</sup> V06.6 <sup>f,g</sup>
Fluzone High-Dose	Influenza Virus Vaccine	49281-0389-65 <sup>e</sup>		90662	90471/90472 G0008 (Medicare)	N/A due to age indication	V04.81 <sup>f,g</sup> V06.6 <sup>f,g</sup>
Fluzone Intradermal	Influenza Virus Vaccine	49281-0703-55		90654	90471/90472	90460 - 1 unit	V04.81 <sup>f,g</sup> V06.6 <sup>f,g</sup>
Imogam <sup>®</sup> Rabies-HT	Rabies Immune Globulin (Human) USP, Heat Treated	49281-0190-10 49281-0190-20		90376 <sup>h</sup>	96372	96372	V01.5 V04.5
IMOVAX <sup>®</sup> RABIES	Rabies Vaccine	49281-0250-10 49281-0250-51		90675	90471/90472	90460 - 1 unit	V01.5 V04.5
IPOL <sup>®</sup>	Poliovirus Vaccine Inactivated	49281-0860-10 49281-0860-55		90713	90471/90472	90460 - 1 unit	V04.0
Menactra <sup>®</sup>	Meningococcal (Groups A, C, Y and W-135) Polysaccharide Diphtheria Toxoid Conjugate Vaccine	49281-0589-05 49281-0589-15		90734	90471/90472	90460 - 1 unit	V03.89 V01.84
Menomune <sup>®</sup> -A/C/Y/W-135	Meningococcal Polysaccharide Vaccine, Groups A, C, Y and W-135 Combined	49281-0489-01		90733	90471/90472	90460 - 1 unit	V03.89 V01.84
Pentacel <sup>®</sup>	Diphtheria and Tetanus Toxoids and Acellular Pertussis Adsorbed, Inactivated Poliovirus and Haemophilus b Conjugate (Tetanus Toxoid Conjugate) Vaccine	49281-0510-05		90698	90471/90472	90460 - 1 unit 90461 - 4 units	V06.3 <sup>i</sup> V03.81 <sup>i</sup>
Tetanus Toxoid Adsorbed	Tetanus Toxoid Adsorbed USP	49281-0820-10		90703	90471/90472	90460 - 1 unit	V03.73 <sup>d</sup>
TheraCys <sup>®</sup>	BCG Live (Intravesical)	49281-0880-01		J9031 (Medicare) 90586	51720	51720	depends on type and location of cancer
Tripedia <sup>®</sup>	Diphtheria and Tetanus Toxoids and Acellular Pertussis Vaccine Adsorbed	49281-0298-10	Younger than 7 years of age	90700	90471/90472	90460 - 1 unit 90461 - 2 units	V06.1
TUBERSOL <sup>®</sup>	Tuberculin Purified Protein Derivative (Mantoux)	49281-0752-21 49281-0752-22		86580			011.9 V74.1
TYPHIM Vi <sup>®</sup>	Typhoid Vi Polysaccharide Vaccine	49281-0790-51 49281-0790-20		90691	90471/90472	90460 - 1 unit	V03.1
YF-VAX <sup>®</sup>	Yellow Fever Vaccine	49281-0915-01 49281-0915-05		90717	90471/90472	90460 - 1 unit	V04.4

Note that correct coding and billing will depend on the requirements of the third party payer being billed. It is always best that the provider check with the payer they are billing for specific requirements.

<sup>a</sup> CPT = Current Procedural Terminology is a registered trademark of the American Medical Association.

<sup>b</sup> Counseling must be done by a health-care professional as defined by your state, regardless of who administers the vaccine.

<sup>c</sup> Products associated with a CPT may not have an indication that is the same as the age range in the CPT description. Refer to the product's Prescribing Information for age indications. Adacel vaccine is indicated for persons 11-64 years of age.

<sup>d</sup> When tetanus products are given as treatment for woundcare, use a primary ICD-9 code which describes the patient's condition.

<sup>e</sup> NDC numbers supplied for influenza virus vaccine are the 2011-2012 formulation. Note that although NDC numbers will change in future years, the product CPT and Administration CPT codes remain consistent.

<sup>f</sup> When influenza vaccine is given to a high-risk patient, consider a secondary ICD-9 code describing the high-risk condition.

<sup>g</sup> The Centers for Medicare and Medicaid Services (CMS) requests the use of V06.6 as the diagnosis when a Medicare beneficiary receives influenza and pneumococcal vaccines at the same visit. Bill V06.6 with the CPT codes for both products and their administration. If only influenza vaccine is administered, use V04.81 for the product and its administration.

<sup>h</sup> Coding for Imogam rabies immune globulin is based on the units administered. Dosage is 9 IU per pound of patient weight, and a billable unit is equal to 150 IU of product. Refer to Reimbursement Information on VaccineShoppe.com<sup>®</sup> for further assistance.

<sup>i</sup> It may be necessary to report multiple ICD-9 codes to reflect all the diseases for which the vaccine is indicated.