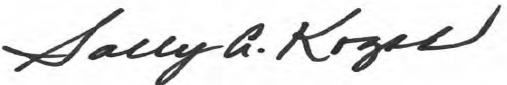


ISSUE DATE September 14, 2022	EFFECTIVE DATE August 29, 2022	NUMBER 01-22-42, 08-22-50, 09-22-41, 10-22-15, 31-22-45, 33-22-39
SUBJECT Adult Vaccine Procedure Code Updates and Additions	BY  Sally A. Kozak, Deputy Secretary Office of Medical Assistance Programs	

IMPORTANT REMINDER: All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years. Providers should log into PROMIS^e™ 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: <https://www.dhs.pa.gov/providers/Providers/Pages/PROMISe-Enrollment.aspx>.

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%20MAP/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 subcutaneous use	\$10.00
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL dosage, for intramuscular use	\$10.00
90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL dosage, for intramuscular use	\$10.00
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use	\$10.00
90677	Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use	\$10.00
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	\$10.00

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, adjuvanted, for intramuscular use	\$10.00

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%20MAP/MAB2022010701.pdf>).

Providers may access the online version of the MA Program Fee Schedule at:

<https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Care%20for%20Providers/MA-Fee-Schedule.aspx>.

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 (https://www.dhs.pa.gov/providers/PROMISE_Guides/Pages/PROMISE-Handbooks.aspx).

RESOURCES:

Advisory Committee on Immunization Practices

<https://www.cdc.gov/vaccines/acip/recommendations.html>

The U.S. Food and Drug Administration – Vaccines Licensed for Use

<https://www.fda.gov/vaccines-blood-biologics/vaccines/vaccines-licensed-use-united-states>

Pennsylvania Department of Human Services Bulletin Search

<https://www.dhs.pa.gov/docs/For-Providers/Pages/Bulletin-Search.aspx>

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 Code	Description	Provider Type	Specialty	Place of Service	MA Fee	MA units	Limits
90587	Dengue vaccine, quadrivalent, live, 3 dose schedule, for subcutaneous use	01	183	22	\$10.00	per administration	once 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						
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL dosage, for intramuscular use	08	082	49	\$10.00	per administration	once per day
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL dosage, for intramuscular use	09	All	11, 12	\$10.00	per administration	once per day
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL dosage, for intramuscular use	10	100	11, 12	\$10.00	per administration	once per day
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL dosage, for intramuscular use	31	All	11, 12	\$10.00	per administration	once per day
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL dosage, for intramuscular use	33	335	11, 12	\$10.00	per administration	once per day
90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL dosage, for intramuscular use	01	183	22	\$10.00	per administration	once per day

90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL dosage, for intramuscular use	08	082	49	\$10.00	per administration	once per day
90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL dosage, for intramuscular use	09	All	11, 12	\$10.00	per administration	once per day
90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL dosage, for intramuscular use	10	100	11, 12	\$10.00	per administration	once per day
90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL dosage, for intramuscular use	31	All	11, 12	\$10.00	per administration	once per day
90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL dosage, for intramuscular use	33	335	11, 12	\$10.00	per administration	once per day
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use	01	183	22	\$10.00	per administration	once per day
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use	08	082	49	\$10.00	per administration	once per day

90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use	09	All	11, 12	\$10.00	per administration	once 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
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90677	Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use	31	All	11, 12	\$10.00	per administration	once per day
90677	Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use	33	335	11, 12	\$10.00	per administration	once per day
90750	Zoster (shingles) vaccine (HZV), recombinant, subunit, adjuvanted, for intramuscular use	01	183	22	\$10.00	per administration	once per day
90750	Zoster (shingles) vaccine (HZV), recombinant, subunit, adjuvanted, for intramuscular use	08	082	49	\$10.00	per administration	once per day
90750	Zoster (shingles) vaccine (HZV), recombinant, subunit, adjuvanted, for intramuscular use	09	All	11, 12	\$10.00	per administration	once per day
90750	Zoster (shingles) vaccine (HZV), recombinant, subunit, adjuvanted, for intramuscular use	10	100	11, 12	\$10.00	per administration	once per day
90750	Zoster (shingles) vaccine (HZV), recombinant, subunit, adjuvanted, for intramuscular use	31	All	11, 12	\$10.00	per administration	once per day
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	01	183	22	\$10.00	per administration	once per day

90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	08	082	49	\$10.00	per administration	once per day
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	09	All	11, 12	\$10.00	per administration	once per day
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	10	100	11, 12	\$10.00	per administration	once per day
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	31	All	11, 12	\$10.00	per administration	once per day
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	33	335	11, 12	\$10.00	per administration	once per day