

**INFORMATIONAL LETTER NO. 2190-MC-FFS**

**DATE:** November 25, 2020

**TO:** Iowa Medicaid Pharmacy Providers

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS)

**FROM:** Iowa Department of Human Services (DHS), Iowa Medicaid Enterprise (IME)

**RE:** Pharmacist Administered Vaccines

**EFFECTIVE:** June 1, 2021

**\*\*NOTE: Upcoming COVID-19 vaccine guidance will be issued separately.\*\***

Effective June 1, 2021, Medicaid enrolled pharmacists may order and administer vaccines in compliance with the Iowa Board of Pharmacy [Immunizations Statewide Protocol](#)<sup>1</sup>.

**General Information:**

- All billing and reimbursement of vaccines, regardless of provider type, is through the Healthcare Common Procedure Coding System (HCPCS) to ensure consistency among providers as well as a coordinated Medicaid immunization record for the member. Claims submitted under Pharmacy Point of Sale (POS) will deny.
- Vaccine administration is billed as an 837P electronic transaction (or medical claims billing). Providers should go through their electronic clearing house for detailed billing instructions, [see electronic billing tips and FAQ](#)<sup>2</sup> for additional information.
- In addition to other required fields, vaccines administered in a pharmacy require the National Provider Identifier (NPI) of the referring/ordering provider (when applicable), rendering provider and billing provider.
  - The referring/ordering provider NPI would be either the pharmacist or other provider requesting the vaccine.

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<sup>1</sup> <https://pharmacy.iowa.gov/misc/statewide-protocols>

<sup>2</sup> <https://dhs.iowa.gov/ime/providers/claims-and-billing/electronic-billing>

- When a pharmacist is linked to a pharmacy, the pharmacist NPI = rendering provider ID# and the pharmacy NPI = billing provider.
- When pharmacist is NOT linked to a pharmacy, the pharmacist NPI = rendering provider ID# and the pharmacist NPI = billing provider.
- See NPI billing references in chart below.

CMS 1500 Form Locator		837P		Notes
Item #	Title	Loop ID	Segment/Data Element	
17. b.	Referring Provider NPI#	2420E	NM1	Titled Referring Provider Identifier, Supervising Provider Identifier, and Ordering Provider Identifier in the 837P.
24J. Lower Portion	Rendering Provider NPI#	2310B	NM1	
		2420A	NM1	Titled Rendering Provider Identifier in the 837P.
33a.	Billing Provider NPI#	2010AA	NM1	Titled Billing Provider Identifier in the 837P.

- Vaccine drug orders must be kept on file at the pharmacy.
- Medicaid covers vaccines as recommended by the Advisory Committee on Immunization Practices (ACIP) including the frequency.
- Pharmacies will only be able to bill for Medicaid non-dual eligible enrollees. Dual eligible enrollees will continue to access immunization services through Medicare.
- Prior to ordering and administration of a vaccine, the pharmacist must verify [Medicaid eligibility](#)<sup>3</sup>, [vaccine coverage](#)<sup>4</sup>, and review the statewide immunization registry (IRIS).
- Refer to the [Physician Services Provider Manual](#)<sup>5</sup> for immunization instructions.
- Within thirty (30) calendar days following administration of any vaccine, the pharmacist shall report such administration to the patient's primary health care provider, primary physician, and IRIS.

**Enrollment:**

- Pharmacy
  - Pharmacies submitting vaccine claims must be Medicaid enrolled.
  - Pharmacies providing vaccine services to children age 18 and under must enroll in the [Vaccines for Children \(VFC\) Program](#)<sup>6</sup> through the Iowa Department of Public Health.
- Pharmacist

<sup>3</sup> <https://dhs.iowa.gov/ime/providers/tools-trainings-and-services/provider-tools/ELVS>

<sup>4</sup> <https://dhs.iowa.gov/ime/providers/csrp/fee-schedule/agreement>

<sup>5</sup> <https://dhs.iowa.gov/sites/default/files/Phys.pdf?022420201514>

<sup>6</sup> <https://idph.iowa.gov/immmtb/immunization/vfc>

- A pharmacist who orders and administers the vaccine must be Medicaid enrolled. See [IL 2153-MC-FFS](#)<sup>7</sup>.

### **Billing Instructions:**

- Billing of immunizations involves two separate items, the vaccine code itself and the code for the service of vaccine administration.
- For reimbursement to process correctly it is important to list all the vaccine codes on claim before the administration codes.
- Both the vaccine and vaccine administration codes must be billed on the same claim.
- Vaccines provided to adults:
  - Reimbursement will be for both the vaccine and the administration of the vaccine.
- Vaccines provided to children under VFC:
  - The vaccine code must be billed at zero dollars.
  - Reimbursement will be made only for the appropriate vaccine administration code.
  - For specialized guidance for children under Hawki, see [IL 2061-MC-FFS](#)<sup>8</sup>.
- If the provider uses all federal-supplied vaccine and must use private stock, the provider can bill with modifier U8 to receive reimbursement. See [IL 2018-MC-FFS](#)<sup>9</sup>.

To allow time for billing transition, IME and MCOs will allow pharmacy administered vaccines to be billed through the current pharmacy Point of Sale (POS) process or medical claims billing through June 30, 2021. **Effective July 1, 2021 all vaccines must be submitted through HCPCS medical claims billing.**

**Fee Schedule:** The [Iowa Medicaid fee schedule](#)<sup>10</sup> is available to verify reimbursement rates on specific CPT codes.

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<sup>7</sup> [https://dhs.iowa.gov/sites/default/files/2153-MC-FFS\\_Pharmacist\\_Provider\\_Type-Clarification.pdf?080520201333](https://dhs.iowa.gov/sites/default/files/2153-MC-FFS_Pharmacist_Provider_Type-Clarification.pdf?080520201333)

<sup>8</sup> [https://dhs.iowa.gov/sites/default/files/2061-MC-FFS\\_Vaccinations\\_for\\_Medicaid\\_Children\\_and\\_Hawki\\_members.pdf?111020201644](https://dhs.iowa.gov/sites/default/files/2061-MC-FFS_Vaccinations_for_Medicaid_Children_and_Hawki_members.pdf?111020201644)

<sup>9</sup> [https://dhs.iowa.gov/sites/default/files/2018-MC-FFS\\_Pediatric\\_Flu\\_Vaccine\\_Provided\\_By\\_VFC.pdf?111020201923](https://dhs.iowa.gov/sites/default/files/2018-MC-FFS_Pediatric_Flu_Vaccine_Provided_By_VFC.pdf?111020201923)

<sup>10</sup> <https://dhs.iowa.gov/ime/providers/csrp/fee-schedule>

**Billing Codes:**

**NOTE:** The following codes are being provided in advance of the effective date of this billing change for informational purposes. Codes may change between this Informational Letter release date and the June 1, 2021, effective date and will be updated in future Informational Letters sent to all providers.

**Administration Codes:** The following codes in the table below should be used for the actual administration of the vaccines by a pharmacist.

Procedure Code	Procedure Description
90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); one vaccine (single or combination vaccine or toxoid)
90472	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine or toxoid) (List separately in addition to code for primary procedure)
90473	Immunization administration by intranasal or oral route; one vaccine (single or combination vaccine or toxoid)
90474	Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine or toxoid) (List separately in addition to code for primary procedure)
90460	Immunization administration through 18 years of age by any route of administration, with counseling by physician or other qualified health care professional; first or only component of each vaccine or toxoid administered
90461	Immunization administration through 18 years of age by any route of administration, with counseling by physician or other qualified health care professional; each additional vaccine or toxoid component administered (List separately in addition to code for primary procedure)

**Vaccine Codes:** The following procedure codes in the table below should be billed for select influenza for ages 2 and over, pneumococcal and meningococcal vaccines for age 18 and over: and zoster for age 50 and over. For a complete list of covered vaccine and administration, codes see the [Physician Fee Schedule](#)<sup>11</sup>.

Procedure Code	Procedure Description
90620	Meningococcal recombinant protein and outer membrane vesicle vaccine, Serogroup B, 2 dose schedule, for intramuscular use
90621	Meningococcal recombinant lipoprotein vaccine, Serogroup B, 2 or 3 dose schedule, for intramuscular use
90653	Influenza virus vaccine (IIV), preservative free, for use in individuals 65 years of age and above, for intramuscular use
90656	Influenza virus vaccine, split virus, preservative free, for use in individuals 3 years of age and above, for intramuscular use
90670	Pneumococcal conjugate vaccine, 13-valent, for intramuscular use
90672	Influenza virus vaccine, quadrivalent, live, for intranasal use in individuals 2 years

<sup>11</sup> <https://dhs.iowa.gov/ime/providers/csrp/fee-schedule>

Procedure Code	Procedure Description
	of age through 49
90673	Influenza virus vaccine, trivalent, derived from recombinant DNA, preservative free, for intramuscular use for 18 years of age and older
90674	Influenza virus vaccine; quadrivalent, derived from cell cultures, subunit, preservative and antibiotic free, for intramuscular use
90682	Influenza virus vaccine, quadrivalent, (RIV4), derived from recombinant DNA, preservative and antibiotic free for intramuscular use
90686	Influenza virus vaccine, quadrivalent, split virus, preservative free, when administered to individuals 3 years of age and older, for intramuscular use
90688	Influenza virus vaccine, quadrivalent, split virus, when administered to individuals 3 years of age and older, with preservative, for intramuscular use
90714	Tetanus and diphtheria toxoids (Td) adsorbed, preservative free, for use in individuals seven years or older, for intramuscular use
90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), for use in individuals 7 years or older, for intramuscular use
90732	Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage, for use in individuals 2 years of age or older, for subcutaneous or intramuscular use
90733	Meningococcal polysaccharide vaccine (any group(s)), for subcutaneous use, age 2 years of age and older
90734	Meningococcal conjugate vaccine, Serogroups A,C,Y and W-135 (trivalent), for intramuscular use, age 11 through 55
90736	Zoster (shingles) Vaccine, live, for subcutaneous injection, age 50 and older
90750	Zoster (shingles) Vaccine, age 50 and older for intramuscular use
90756	Influenza virus vaccine, quadrivalent, antibiotic free, for intramuscular use

If you have questions, please contact the Iowa Medicaid Provider Services Unit at 1-800-338-7909, Monday – Friday, from 7:30 a.m. to 4:30 p.m., or by email at [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us).