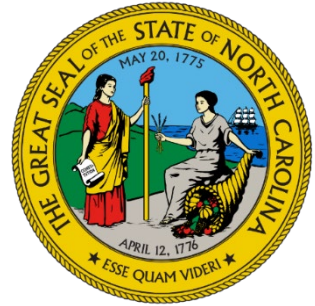


# North Carolina Medicaid Special Bulletin

August 2019



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**Attention:  
All Providers**

## **Influenza Vaccine and Reimbursement Guidelines for 2019-2020 for North Carolina Medicaid and NC Health Choice**

**Attention: All Providers****Influenza Vaccine and Reimbursement Guidelines for 2019-2020 for North Carolina Medicaid and NC Health Choice**

Composition of the trivalent influenza vaccines for the 2019-2020 influenza season is:

- A/Brisbane/02/2018 (H1N1)pdm09-like virus (updated)
- A/Kansas/14/2017 (H3N2)-like virus (updated)
- B/Colorado/06/2017-like (Victoria lineage) virus

Quadrivalent (four-component) vaccines, which protect against a second lineage of B viruses, are recommended to contain the three recommended viruses above plus B/Phuket/3073/2013-like (Yamagata lineage) virus.

For further details on the 2019-2020 influenza vaccine, visit the [Centers for Disease Control \(CDC\) Flu Season web page](#).

**NC Immunization Program/Vaccines for Children (NCIP/VFC)**

Under NC Immunization Program/Vaccines for Children (NCIP/VFC) guidelines, the N.C. Division of Public Health (DPH) Immunization Branch distributes all required childhood vaccines to local health departments, Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), hospitals and private providers.

For the 2019-2020 influenza season, NCIP/VFC influenza vaccine – all quadrivalent – is available at no charge to providers for children 6 months through 18 years of age who are eligible for the VFC program, according to the NCIP coverage criteria. The current NCIP coverage criteria and definitions of VFC categories can be found on [DPH's Immunization Branch web page](#).

For providers interested in enrolling in the VFC program, information can be found on the [CDC information page](#) and the [NC DPH website](#).

Eligible VFC children include Medicaid beneficiaries and NC Health Choice beneficiaries who are American Indian and Alaska Native (AI/AN). These beneficiaries can be identified as AI/AN in one of two ways:

1. They are either identified as MIC-A and MIC-S on their NC Health Choice Identification Cards or,
2. Beneficiaries/parents may self-declare their VFC eligibility status according to NCIP/VFC program policy.

When NC Health Choice beneficiaries self-declare their status as AI/AN, and the provider administers the state-supplied vaccine, the provider must report the CPT vaccine code with \$0.00 and may bill NC Health Choice for the administration costs only. For further details, refer to the June 2012 Medicaid Bulletin article [Billing for Immunizations for American Indian and Alaska Native NC Health Choice Recipients](#).

All other NC Health Choice beneficiaries are considered **insured (not VFC eligible)** and must be administered privately purchased vaccines.

**For VFC/NCIP vaccines administered to VFC-eligible children, providers must report only the vaccine code(s) with \$0.00. Providers may bill DMA for the administration fee for Medicaid and eligible AI/AN NC Health Choice beneficiaries.**

**Providers who administer privately purchased vaccines to VFC eligible beneficiaries will not be reimbursed for the vaccine and cannot bill the beneficiary for that cost. Only the administration fee(s) will be reimbursed.**

Providers must purchase vaccines for children who are **not** VFC-eligible (including all NC Health Choice children who are not AI/AN) and adult patients. For Medicaid-eligible beneficiaries age 19 years and older, purchased vaccine and administration costs may be billed to NC Medicaid, according to the guidelines stated in Tables 2 and 3 below. To determine who is eligible for NCIP influenza and other vaccines, visit [DPH's Immunization Branch web page](#).

### **Billing/Reporting Influenza Vaccines for Medicaid Beneficiaries**

The following tables indicate the vaccine codes that may be either reported (with \$0.00 billed) or billed (with the usual and customary charge) for influenza vaccine, depending on the age of the beneficiaries and the formulation of the vaccine. The tables also indicate the administration codes that may be billed, depending on the age of the beneficiaries and the vaccine(s) administered to them.

**Note:** The information in the following tables is **not** detailed billing guidance. Specific information on billing all immunization administration codes for **Health Check beneficiaries** can be found in the [Health Check Billing Guide](#).

*Table 1*

***Influenza Billing Codes for Medicaid Beneficiaries Less Than 19 Years of Age Who Receive VFC Influenza Vaccine. These codes are reported with \$0.00.***

#### Vaccine CPT Codes to Report

| <b>Vaccine CPT Code to Report</b> | <b>NDC covered by VFC Program</b>   | <b>CPT Code Description</b>  |
|-----------------------------------|---|--|
| 90672                             | 66019-0306-10   | Influenza virus vaccine, quadrivalent, live (LAIV4), for intranasal use  |
| 90674                             | 70461-0319-03   | Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, preservative and antibiotic free, for intramuscular use |
| 90685                             | 49281-0519-25   | Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative-free, 0.25 mL dosage, for intramuscular use                          |
| 90686                             | 19515-0906-52<br>33332-0319-01<br>49281-0419-10<br>49281-0419-50<br>58160-0896-52 | Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use                           |
| 90687                             | 49281-0631-15   | Influenza virus vaccine, quadrivalent (IIV4), split virus, NOT preservative free, 0.25 mL dosage, for intramuscular use                      |

|       |               |  |
|-------|---------------|--|
| 90688 | 33332-0419-10 | Influenza virus vaccine, quadrivalent (IIV4), split virus, NOT preservative free, 0.5 mL dosage, for intramuscular use |
|-------|---------------|--|

Administrative CPT Codes to Bill

| Administration CPT Code(s) to Bill | CPT Code Description  |
|------------------------------------|---|
| 90471EP                            | Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); <b>one vaccine</b> (single or combination vaccine/toxoid)   |
| +990472EP (add-on code)*           | Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); <b>each additional vaccine</b> (single and combination vaccine/toxoid) (List separately in addition to code for primary procedure.) |
| 90460EP                            | Immunization administration through 18 years via any route of administration, with counseling by physician or other qualified health care professional.   |
| 90473EP                            | Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid). <i>Do not report 90473 in conjunction with 90471.</i>  |

\* 90472 will only be used if another vaccine is given in addition to the flu vaccine. Providers may bill more than one unit of 90472 as appropriate.

**Table 2**  
***Influenza Billing Codes for Medicaid Beneficiaries 19 to 21 Years of Age***

Use the following codes to bill Medicaid for an influenza vaccine **purchased** and administered to beneficiaries aged **19-21 years**.

**Note:** The VFC/NCIP provides influenza products for recipients aged 6 months through 18 years **only**. The VFC/NCIP will **NOT** provide influenza vaccine for recipients 19 years and older.

Vaccine CPT Codes to Report

| Vaccine CPT Code to Report | CPT Code Description   |
|----------------------------|--|
| 90672                      | Influenza virus vaccine, quadrivalent, live (LAIV4), for intranasal use  |
| 90674                      | Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use          |
| 90682                      | Influenza virus vaccine, quadrivalent (RIV4), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use |
| 90686                      | Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use   |

|       |  |
|-------|--|
| 90688 | Influenza virus vaccine, quadrivalent (IIV4), split virus, NOT preservative free, 0.5 mL dosage, for intramuscular use                     |
| 90756 | Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use |

Administrative CPT Codes to Report

| Administrative CPT Code(s) to Report | CPT Code Description   |
|--------------------------------------|--|
| 90471EP                              | Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); <b>one vaccine</b> (single or combination vaccine/toxoid)   |
| +90472EP (add-on code)*              | Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); <b>each additional vaccine</b> (single and combination vaccine/toxoid) (List separately in addition to code for primary procedure). |
| 90473EP                              | Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid). <i>Do not report 90473 in conjunction with 90471.</i>   |

\* 90472 will only be used if another vaccine is given in addition to the flu vaccine. Providers may bill more than one unit of 90472 as appropriate.

**Table 3**  
**Influenza Billing Codes for Medicaid Beneficiaries 21 Years of Age and Older**

Use the following codes to **bill** Medicaid for an *injectable* influenza vaccine **purchased** and administered to beneficiaries **21 years of age and older**.

**Note:** The VFC/NCIP provided influenza products for VFC-age (6 months through 18 years of age) beneficiaries **only**. The VFC/NCIP will **not** provide influenza vaccine for beneficiaries 19 years and older.

Vaccine CPT Code to Report

| Vaccine CPT Code to Report | CPT Code Description   |
|----------------------------|--|
| 90653                      | Influenza vaccine, inactivated (IIV), subunit, adjuvanted, for intramuscular use   |
| 90662                      | Influenza virus vaccine (IIV), split virus, preservative free, enhanced immunogenicity via increased antigen content, for intramuscular use                          |
| 90672                      | Influenza virus vaccine, quadrivalent, live (LAIV4), for intranasal use  |
| 90674                      | influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, preservative and antibiotic free, 0.5mL dosage, for intramuscular use           |
| 90682                      | Influenza virus vaccine, quadrivalent (RIV4), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use |

|       |   |
|-------|---|
| 90686 | Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use                          |
| 90688 | Influenza virus vaccine, quadrivalent (IIV4), split virus, NOT preservative free, 0.5 mL dosage, for intramuscular use                      |
| 90756 | Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use: |

Administrative CPT Code(s) to Bill

| Administrative CPT Code(s) to Bill | CPT Code Description  |
|------------------------------------|---|
| 90471                              | Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); <b>one vaccine</b> (single or combination vaccine/toxoid)  |
| +90472 (add-on code)*              | Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); <b>each additional vaccine</b> (single and combination vaccine/toxoid) (List separately in addition to code for primary procedure) |
| 90473EP                            | Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid). <i>Do not report 90473 in conjunction with 90471.</i>  |

\* 90472 will only be used if another vaccine is given in addition to the flu vaccine. Providers may bill more than one unit of 90472 as appropriate.

For beneficiaries 21 years or older receiving an influenza vaccine, an evaluation and management (E/M) code cannot be reimbursed to any provider on the same day that injection administration fee codes (e.g., 90471 or 90471 and +90472) are reimbursed, unless the provider bills an E/M code for a separately identifiable service by appending modifier 25 to the E/M code.

**Billing/Reporting Influenza Vaccines for NC Health Choice Beneficiaries**

The following table indicates the vaccine codes that may be either reported (with \$0.00) or billed (with the usual and customary charge) for influenza vaccine, depending on an NC Health Choice beneficiary’s VFC eligibility (that is, if the beneficiary is AI/AN) and the formulation of the vaccine. The table also indicates the administration codes that may be billed.

**Table 4**  
***Influenza Billing Codes for NC Health Choice Beneficiaries 6 Years through 18 Years of Age Who Receive VFC Vaccine (MIC-A and MIC-S Eligibility Categories or Beneficiaries in Other Categories who Self-Declare AI/AN Status) or Purchased Vaccine (All Other NC Health Choice Eligibility Categories)***

## Vaccine CPT Code to Report

| Vaccine CPT Code to Report | CPT Code Description   |
|----------------------------|--|
| 90672                      | Influenza virus vaccine, quadrivalent, live (LAIV4), for intranasal use  |
| 90674                      | Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use          |
| 90682                      | Influenza virus vaccine, quadrivalent (RIV4), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use |
| 90686                      | Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use   |
| 90688                      | Influenza virus vaccine, quadrivalent (IIV4), split virus, NOT preservative free, 0.5 mL dosage, for intramuscular use   |
| 90756                      | Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use:                          |

## Administrative CPT Code(s) to Bill

| Administrative CPT Code(s) to Bill | CPT Code Description  |
|------------------------------------|---|
| 90471TJ                            | Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); <b>one vaccine</b> (single or combination vaccine/toxoid)   |
| +90472TJ (add-on code)*            | Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); <b>each additional vaccine</b> (single and combination vaccine/toxoid) (List separately in addition to code for primary procedure). |
| 90460TJ                            | Immunization administration through 18 years via any route of administration, with counseling by physician or other qualified health care professional.   |
| 90473TJ                            | Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid). <i>Do not report 90473 in conjunction with 90471.</i>  |

\* 90472 will only be used if another vaccine is given in addition to the flu vaccine. Providers may bill more than one unit of 90472 as appropriate

## Notes

- The EP modifier should **not** be billed on NC Health Choice claims. The TJ modifier should be used.
- There is no co-pay for office visits and wellness checks.

## Immunization Billing for Medicaid and NC Health Choice Beneficiaries from FQHCs and RHCs

- ***For beneficiaries 0 through 20 years of age***

If vaccines are provided through the NCIP/VFC, the center/clinic shall report the CPT vaccine codes (with \$0.00 billed) under Physician Services NPI and may bill for the administration codes (CPT procedure codes 90471EP through 90472EP OR 90460EP). This billing is appropriate when only vaccines are provided at the visit, or if vaccines were provided in conjunction with a wellness check. If a core visit was billed, CPT vaccine codes shall be reported (with \$0.00 billed) under Physician Services NPI and an administration code shall not be billed.

If **purchased vaccines (non-VFC eligible)** were administered, the center/clinic may bill the CPT vaccine codes (with their usual and customary charge) under the Physician Services NPI for the vaccines administered and may bill for the administration codes (with the usual and customary charge). This billing is appropriate if only vaccines were given at the visit or if vaccines were given in conjunction with a wellness check. If a core visit was billed, CPT vaccine codes shall be reported (with \$0.00 billed) under the Physician Services NPI provider number and the administration codes shall not be billed. For detailed billing guidance, refer to the [Health Check Billing Guide](#).

**Note:** When billing for NC Health Choice beneficiaries, refer to the detailed billing guidance above including Table 4 and the Core Visit policy in [DHB's Provider Library web page](#).

- ***For beneficiaries 21 years of age and older***

When purchased vaccines are administered, CPT vaccine codes may be billed (with the usual and customary charge) and administration codes may be billed (with the usual and customary charge) under the Physician Services NPI. This is applicable when vaccine administration was the only service provided that visit. When a core visit is billed, the CPT vaccine code shall be reported (with \$0.00 billed) under the Physician Services NPI and an immunization administration code may not be billed.

For influenza vaccine and administration fee rates, refer to the [Physician's Drug Program fee schedule](#) and [Physician Services Fee Schedule](#).

## Immunization Billing for Medicaid Beneficiaries from Immunizing Pharmacies

- ***For beneficiaries 19 years of age and older***

Effective Jan. 1, 2016, NC Medicaid will reimburse pharmacies for covered vaccines, including influenza vaccines, as permitted by G.S. 90-85.15B (see below) when administered to NC Medicaid beneficiaries 19 years of age and older by an immunizing pharmacist.



**Table 5**  
**Billing Codes to be used by Pharmacist for NC Medicaid**  
**Beneficiaries 19 Years of Age or Older**

| Vaccine CPT Code to Report | CPT Code Description   |
|----------------------------|--|
| 90653CG                    | Influenza vaccine, inactivated (IIV), subunit, adjuvanted, for intramuscular use   |
| 90662CG                    | Influenza virus vaccine (IIV), split virus, preservative free, enhanced immunogenicity via increased antigen content, for intramuscular use                          |
| 90672CG                    | Influenza virus vaccine, quadrivalent, live (LAIV4), for intranasal use  |
| 90674CG                    | influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, preservative and antibiotic free, 0.5mL dosage, for intramuscular use           |
| 90682CG                    | Influenza virus vaccine, quadrivalent (RIV4), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use |
| 90686CG                    | Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use   |
| 90688CG                    | Influenza virus vaccine, quadrivalent (IIV4), split virus, NOT preservative free, 0.5 mL dosage, for intramuscular use   |
| 90756CG                    | Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use:                          |

\*The CG modifier must be appended to every vaccine and vaccine administration CPT code used to bill vaccines by pharmacists. The CG modifier identifies a Pharmacy Provider in NCTracks for vaccine claims billing purposes.

**Billing Codes to be used by Pharmacists for NC Medicaid**  
**Beneficiaries 19 Years of Age and Older**

| CPT Code(s)            | CPT Code Description  |
|------------------------|---|
| 90471CG                | Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); <b>one vaccine</b> (single or combination vaccine/toxoid)  |
| 90472CG (add-on code)* | Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); <b>each additional vaccine.</b> (Separately list the add-on code(s) for each additional single vaccine and/or combination vaccine/toxoid administered, in addition to the primary procedure) |
| 90473CG                | Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid). <i>Do not report 90473 in conjunction with 90471.</i>  |

The CG modifier must be appended to every vaccine and vaccine administration CPT code used to bill vaccines by pharmacists. The CG modifier identifies a Pharmacy Provider in NCTracks for vaccine claims billing purposes.

\*Providers may bill more than one unit of 90472 as appropriate.

Detailed information about the regulations regarding pharmacist immunization can be found at [Pharmacist Administrated Vaccine and Reimbursement Guidelines](#) published in the October 2016 Medicaid Bulletin.

### **NDC's Change Each Year for Influenza Vaccines**

Providers are required to use appropriate NDCs that correspond to the vaccine used for administration and corresponding CPT code. Note that not all products and NDCs under their respective CPT codes will be covered.

Influenza vaccines are licensed each year with new NDCs, so it is important to report the correct code for the products you are using to avoid having claims deny with edit 00996 (Mismatched NDC) which will require the claim to be resubmitted with the correct NDC. Below are the influenza vaccine procedure (CPT) codes and corresponding NDCs that should be used for the 2019-2020 influenza season:

#### ***CPT and NDC codes for the 2019-2020 Influenza Vaccine Products***

| <b>CPT Codes</b> | <b>NDC codes</b>   |
|------------------|--|
| 90653            | Fluad: 70461-0019-03, 70461-0019-04  |
| 90662            | Fluzone High-Dose: 49281-0405-65, 49281-0405-88  |
| 90672            | FluMist Quadrivalent: 66019-0306-01, 66019-0306-10   |
| 90674            | Flucelvax Quadrivalent: 70461-0319-03, 70461-0319-04   |
| 90682            | Flublok Quadrivalent: 49281-0719-10, 49281-0719-88   |
| 90685            | Fluzone Quadrivalent: 49281-0519-00, 49281-0519-25;<br>Afluria Quadrivalent: 33332-0219-20, 33332-0219-21  |
| 90686            | Afluria Quadrivalent: 33332-0319-01, 33332-0319-02<br>Fluarix Quadrivalent: 58160-0896-41, 58160-0896-52<br>FluLaval Quadrivalent: 19515-0906-41, 19515-0906-52<br>Fluzone Quadrivalent syringe: 49281-0419-50, 49281-0419-88<br>Fluzone Quadrivalent vial: 49281-0419-10, 49281-0419-58 |
| 90687            | Fluzone Quadrivalent: 49281-0631-15, 49281-0631-78   |
| 90688            | Afluria Quadrivalent: 33332-0419-10, 33332-0419-11<br>FluLaval Quadrivalent: 19515-0897-01, 19515-0897-11<br>Fluzone Quadrivalent: 49281-0631-15, 49281-0631-78  |
| 90756            | Flucelvax Quadrivalent: 70461-0419-10, 70461-0419-11   |

**GDIT, (800) 688-6696**