

2017-2018 Influenza Season Billing/Coding Updates

All Alliance Lines of Business				
Effective September 1, 2017 through June 30, 2018				
For members linked to your practice, another PCP (no referral needed), or Administrative Members				
Vaccine Name	Dosage	Age Group	CPT Code	CHDP Code
Quadrivalent				
Afluria® (IIV4)	0.5 mL preservative free, split virus	18 years & older	90686	53
	0.5 mL split virus	18 years & older	90688	53
Fluarix® (IIV4)	0.5 mL preservative free, split virus	3 years & older	90686	53
FluLaval® (IIV4)	0.5 mL preservative free, split virus	6 months & older	90686	53
	0.5 mL split virus	6 months & older	90688	53
Fluzone® (IIV4)	0.25 mL preservative free, split virus	6 through 35 months	90685	53
	0.5 mL preservative free, split virus	3 years & older	90686	53
	0.25 mL split virus	6 through 35 months	90687	53
	0.5 mL split virus	3 years & older	90688	53
Fluzone® Intradermal (IIV4-ID)	0.1 mL (single-dose microinjection system)	18 through 64 years	90630	N/A
Flucelvax® (ccIIV4)	0.5 mL antibiotic and preservative free	4 years & older	90674	53
Trivalent				
Afluria® (IIV3)	0.5 mL preservative free, split virus	5 years & older	90656	53
	0.5 mL split virus	5 years & older	90658	53 (VFC) 54 (non-VFC)
Fluad® (IIV3)	0.5 mL (single-dose syringe)	65 years & older	90653	53
Flublok® (RIV3)	0.5 mL preservative and antibiotic free	18 years & older	90673	N/A
Fluvirin® (IIV3)	0.5 mL preservative free, split virus	4 years & older	90656	53
	0.5 mL split virus	4 years & older	90658	53
Fluzone® High-Dose (IIV3-HD)	0.5 mL preservative free, split virus	65 years & older	90662	N/A
VFC Program:				
<p>The Vaccines For Children (VFC) program is a federally funded program that provides vaccines at no cost to eligible children who might not otherwise be vaccinated because of inability to pay. Information on the VFC Program:</p> <ul style="list-style-type: none"> • Only children less than age 19 are eligible for the VFC program • Children are eligible if they are: <ul style="list-style-type: none"> ○ Medicaid eligible OR, ○ Uninsured OR, ○ Underinsured OR, ○ American Indian/Native American • When using VFC stock, append modifier SL to the vaccine code • Modifier SL indicates VFC stock used and only allows reimbursement for the administration of vaccine. <p>Per Medi-Cal Guidelines: "Medi-Cal vaccine injection codes billed for recipients eligible to receive VFC program vaccines will be reimbursed only in documented cases of vaccine shortage, disease epidemic, vaccine delivery problems, or instances when the recipient does not meet the special circumstances required for VFC special-order vaccines. A provider's non-enrollment in the VFC program is not a justified exception." However, the Alliance will make an exception for non VFC providers. How to bill:</p> <ul style="list-style-type: none"> • Do not bill the CPT code with the SL modifier • Document "non-VFC" in box 19 of the CMS claim form or box 80 of the UB-04 claim form, send to CCAH Attention: Sharlene Gianopoulos 				
<p>Claim forms: All CHDP claims, whether using VFC stock or not, must be billed using the PM-160 claim form or the eCHDP electronic claim. All non-CHDP claims must be billed on the UB-04, CMS-1500 or their electronic equivalent.</p>				