north dakota department of human services

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M E M O R A N D U M

To: **Registered Nurses (RN) and Agencies that Employ Registered Nurses**

From: **Maggie D. Anderson, Director, Medical Services Division**

Subject: **North Dakota Medicaid to enroll registered nurses and/or entities who employ registered nurses for the sole purpose of administering vaccines/toxoids.**

Effective September 1, 2012, North Dakota (ND) Medicaid will accept enrollment applications from registered nurses (RNs) and entities that employ registered nurses for the sole purpose of vaccine/toxoid administration. **Effective for Dates of Service September 17, 2012 and after**, RNs and entities who employ RNs can bill North Dakota Medicaid for vaccine administration. The entity and the registered nurse(s) enrolled with ND Medicaid will receive their own provider number and will be required to submit claims via a CMS 1500 to ND Medicaid for reimbursement for the administration of vaccines/toxoids.

For vaccines administered to children:
The registered nurse and/or entity who administers the vaccines/toxoids to North Dakota Medicaid eligible children **must first be enrolled in the Vaccine for Children (VFC) program** through the North Dakota Department of Health. All ND Medicaid recipients age 0-18 must receive vaccine supplied through the VFC program. ND Medicaid will allow/reimburse only the **administration** of the VFC vaccine/toxoids according the Division's guidelines. All applicable ND Medicaid coding and billing guidelines must be adhered to. In addition, the registered nurse and/or entity must follow the VFC Coverage Table guidelines published by the North Department of Health.

North Dakota Medicaid billing VFC vaccine/toxoid guideline:

Immunization Administration for Vaccines/Toxoids

The immunization administration (90471-90474*) of vaccines/toxoids are allowed/reimbursed at the current ND Medicaid fee schedule:
http://www.nd.gov/dhs/services/medicalserv/medicaid/docs/fee-schedules/ma-basic-fee-sched7-01-09.pdf

The immunization administration code(s) (90471-90474) must be billed with a vaccine/toxoid code(s) (90476-90749). The provider must follow CPT® coding guidelines with regard to

reporting *initial* immunization administration and each additional administration. Do not report more than one *initial* immunization administration per date of service (i.e. *per CPT®,* "Do not report 90471 in conjunction with 90473").

ND Medicaid requires that providers report an immunization administration code for each vaccine/toxoid administered and reported. Currently the immunization administration codes MAY NOT be billed with multiple units.

*North Dakota Medicaid does not currently allow/reimburse 90460-90461.

EXAMPLE 1: CHILD (age 0-18)

Correct Coding/billing for VFC vaccines to ND Medicaid	**Incorrect** Coding/billing for VFC vaccines to ND Medicaid
Patient – patient age 12 (child) 90658-SL $0.00 **90471** $__.__ 90713-SL $0.00 **90472** $__.__ 90715-SL $0.00 **90472** $__.__	Patient – patient age 12 (child) 90658-SL $0.00 **90471** $__.__ 90713-SL $0.00 90715-SL $0.00 **90472** $__.__ (UNITS **2**)

EXAMPLE 2: ADULT

Correct Coding/billing for **non**-VFC vaccines to ND Medicaid	**Incorrect** Coding/billing for **non**-VFC vaccines to ND Medicaid
Patient – patient age 46 (adult) 90658 $__.__ **90471** $__.__ 90713 $__.__ **90472** $__.__ 90714 $__.__ **90472** $__.__	Patient – patient age 46 (adult) 90658 $__.__ **90471** $__.__ 90713 $__.__ 90714 $__.__ **90472** $__.__ (UNITS **2**)

Vaccines, Toxoids

Codes 90476-90749 identify the vaccine/toxoid product only. To report the administration of a vaccine/toxoid the vaccine/toxoid product code(s) MUST be submitted **with the appropriate immunization administration code(s) (90471-90474)**.

The vaccine/toxoid product (90476-90749) supplied through the **North Dakota Department of Health (NDDoH) Vaccine for Children (VFC)** program for children 0-18 years is reported with the vaccine/toxoid CPT® code appended with modifier **SL**. ND Medicaid will not allow/reimburse for vaccines/toxoids or the immunization administration when the product is available through the NDDoH VFC Program. An exception will be made to allow/reimburse

vaccine/toxoid ONLY when there is a **national** shortage of a particular vaccine/toxoid and ND Medicaid has been notified of the national shortage by the NDDoH Immunization Program Manager.

The NDDoH can also make available certain vaccines/toxoids for special populations (19 years and older) through the "Other State-Supplied Vaccines**/317 Vaccine**" program (see the current Vaccine Coverage Table). When these products are available ND Medicaid expects providers to use the "Other State-Supplied/317" vaccines/toxoids when NDDoH specified criteria are met. The vaccine/toxoid product supplied through the NDDoH 317 Vaccine program is reported with the vaccine/toxoid CPT® code appended with modifier **SL**. ND Medicaid will **not** allow/reimburse for vaccines/toxoids or the immunization administration when the product is available through the NDDoH "Other State-Supplied/317" program for special populations (19 years and older) who meet NDDoH criteria.

See the current NDDoH Vaccine Coverage Table as of October 1, 2011:
http://www.ndhealth.gov/Immunize/Documents/Providers/Forms/VaccineCoverage102011.pdf

The vaccines/toxoids for adults (19 years and older) which are not available through NDDoH 317 Vaccine program OR the adult does not meet the 317 Vaccine Program criteria **may** be allowed/reimbursed at the current ND Medicaid fee schedule along with the appropriate immunization administration. NOTE: ND Medicaid may or may not allow/reimburse all vaccines/toxoids administered to adults.

NOTE: When ND Medicaid is the secondary payer, the provider must submit the claim with vaccine/toxoid and immunization administration CPT® code(s) according to ND Medicaid guidelines; therefore it is acceptable for providers to change/add the appropriate immunization administration CPT® code(s) on the claim.

Also see:
General Information for Provider Manual - Immunizations
http://www.nd.gov/dhs/services/medicalserv/medicaid/docs/gen-info-providers.pdf

MEDICAID CODING GUIDELINE – Gardasil (HPV vaccine)
http://www.nd.gov/dhs/services/medicalserv/medicaid/docs/cpt/gardasil-hpv-vaccine.pdf

bjk 8/30/12