Reporting Diagnosis Codes for Immunization Administration

Childhood Immunizations may be administered either during an EPSDT screening visit, or outside of an EPSDT screening visit (i.e. flu clinic visit, office visit, clinic visit, or nurse visit). Please refer to Medical Assistance bulletin 31-09-05 2009 Recommended Childhood and Adolescent Immunization Schedules and/or the Recommended Childhood and Adolescent Immunization Schedules published yearly by the Advisory Committee on Immunization Practices www.cdc.gov/vaccines/recs/acip.

When reporting the administration of preventative pediatric immunizations, the appropriate CPT code is required and the appropriate diagnosis code(s) is required to be reported. The diagnosis code must be one or more of the following:

V03.0 – V06.9 Need for prophylactic vaccination against bacterial, viral, and other communicable diseases

Please note: The appropriate “diagnosis pointer” must be used when reporting any procedure code.

Please refer to the appropriate billing guide for your provider type if you need additional clarification when billing for immunization / vaccine administrations.

For further information, please refer to MA Bulletin 31-09-05 at the following link: http://dhs.pa.gov/publications/bulletinsearch/index.htm

Thank you for your service to our Medical Assistance Recipients. We value your participation.

Check the Department of Human Services’ website often: www.dhs.pa.gov