



Louisiana Department of Health and Hospitals Health Plan Advisory 15-20 June 1, 2015

Immunization Procedure Code Updates and Fee Schedule Updates

Although Current Procedural Terminology (CPT) code 90633 (Hepatitis A vaccine, pediatric/adolescent dosage-2 dose schedule, for intramuscular use) has been a covered service since before Bayou Health was implemented, it has not been displayed on the Immunization Fee Schedule for children and adolescents. The Immunization fee schedule has been updated to correctly display Hepatitis A vaccine for recipients between the ages of 0-18. Health Plans should review their respective fee schedules for coverage of this vaccine. Any denied claims for “non-coverage” of this vaccine should be recycled with no action required by the provider.

Effective with date of service June 1, 2015, CPT code 90634 (Hepatitis A vaccine, pediatric/adolescent dosage-3 dose schedule, for intramuscular use) **will no longer** be covered by the Louisiana Medicaid program. This vaccine is no longer provided by the Vaccines for Children (VFC) program.

Effective with date of service May 1, 2015, CPT code 90651 (Human papilloma virus vaccine types 6, 11, 16, 18, 31, 45, 52, 58, nonavalent, 3 dose schedule for intramuscular use) **will** be covered by the Louisiana Medicaid program for recipients between the ages of 9-26. The VFC program will provide this vaccine for recipients under the age of 19.

The Immunization fee schedules are currently being revised on the Louisiana Medicaid website at www.lamedicaid.com to reflect these changes regarding immunization procedure codes. Health Plans should make appropriate changes to their fee schedules and coverage criteria.