



Keeping Kids Well: Provider Tip Sheet on Immunizations

WHY

For The Individual	For The Whole Population	
 If an unvaccinated child is exposed to a disease germ, the child's body may not be strong enough to fight the disease. 	 Immunizing children helps to protect the health of our community, especially those people who cannot be immunized. 	
 Vaccine-preventable diseases have a costly impact, resulting in doctor's visits, hospitalizations, and premature deaths. 	 One of the most terrible diseases in history - smallpox - no longer exists outside the laboratory due to immunizations. Over the years, vaccines have saved millions of lives. 	
 Sick children can also cause parents to lose time from work. 	• We don't vaccinate just to protect our children. We also vaccinate to protect our grandchildren and their grandchildren. Our children don't have to get smallpox shots anymore because the disease no longer exists. Smallpox is now only a memory, and if we keep vaccinating against other diseases, the same will someday be true for them too.	
 Childhood vaccinations plummeted in mid-March after COVID-19 was declared a national emergency, leaving many children vulnerable to preventable diseases. 		
 The <u>American Academy of Pediatrics</u> unequivocally recommends immunizations for all who are able. 		
For The Family's Trusted Healthcare Provider		

- Provider attitudes and beliefs about vaccine safety have been linked to improvement in vaccination coverage in preschool children. Most parents believe immunization is important, and they trust pediatricians as the most important source of immunization information.
- Since the onset of the pandemic, a significant drop in well-child visits has resulted in delays in vaccinations. Concern exists that delays in vaccinations may result in secondary outbreaks with vaccine-preventable illnesses.
- AAP President Sara "Sally" H. Goza, M.D., FAAP, called the findings "incredibly worrisome" and urged pediatricians and families to schedule visits to catch up on immunizations and other vital services using new AAP guidance.





RECOMMENDED ACTIONS

The Community Care of North Carolina (CCNC) CareImpactSM Value-Based Practice Dashboard Recommended Actions is a patient list which includes care gaps on relevant quality measures, prioritized with patients at highest need of follow-up. This list is built on claims data and is updated weekly. For practices that are members of CCNC's clinically integrated network CCPN (Community Care Physician Network), your CCNC practice support coach can assist in pulling a Recommended Actions report that will highlight care gaps for your patients. For all CCNC practices, your practice coach can help you leverage your EHR to identify patients for outreach.

MEASURING IMMUNIZATIONS FOR YOUR PRACTICE

Childhood Immunizations	Measure Description: The percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DtaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine. Combination 3: Child has received 4 DTap, 3 IPV, 1 MMR, 3 HiB, 3 Hep B, 1 VZV, 4 PCV immunizations Combination 10: Child has received 4 DTap, 3 IPV, 1 MMR, 3 HiB, 3 Hep B, 1 VZV, 4 PCV, 1 HepA, 2/3 RV, 2 Flu immunizations Numerator Statement: Children who received the recommended vaccines by their second birthday. Denominator Statement: Children 2 years of age with at least 11 months of Medicaid enrollment during the measurement year. Exclusions: Exclude children who had a contraindication for a specific vaccine from the denominator for all antigen rates. Data Source: Your practices EHR and or North Carolina Immunization Registry (NCIR Measure Alignment) NCQA HEDIS
Adolescent Immunizations	 NQF 0038 Measure Description: The percentage of adolescents 13 years of age who had the recommended immunizations by their 13th birthday. Combination 1: One dose of meningococcal conjugate vaccine and one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine Combination 2: One dose of meningococcal conjugate vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine and two doses of the human papillomavirus (HPV) vaccine Numerator Statement: Adolescents who received the recommended vaccines by their 13th birthday. Denominator Statement: Adolescents 13 years of age with at least 11 months of Medicaid enrollment during the measurement year. Exclusions: Exclude adolescents who had a contraindication for a specific vaccine from the denominator for all antigen rates. Data Source: North Carolina Immunization Registry (NCIR) Measure Alignment: NCQA HEDIS NQF 1407





Tips For How To Utilize Your Practice's EHR

- Run reports on well-child visits for the last rolling year.
- When exporting vaccination reports, include demographic data (Name, DOB, Last Vaccine Administration Date(s), Patient Address, and Phone Number) to enhance your patient outreach and efficiency.
- Use the Report functionality (if available within the EHR) for Combo 2 (Children turning 2) and Combo 10 (Children turning 13).
- Remember to remove patients already scheduled for a WCC or vaccination from any list.
- Export the report to Excel: Sort/Filter for appropriate Age, Date and Vaccine type.
- If needed, locate your vendor's reporting manual and/or contact your EHR vendor for further assistance.

IMMUNIZATION CODES

CPT	90460, 90471, 90472, 90473, 90474
ICD-10	Z00.121, Z00.129, Z00.123





IMMUNIZATION ADMINISTRATION CODES

Administration CPT Code(s) to Bill	CPT Code Description
90471EP	Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); one vaccine (single or combination vaccine/toxoid)
+90472EP (add- on code)*	Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); each additional vaccine (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). Do not report 90473 in conjunction with 90471.

^{*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.





INFLUENZA BILLING CODES

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 Code to Report	CPT Code Description
90672	Influenza virus vaccine, quadrivalent, live (LAIV4), for intranasal use
90685	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative-free, 0.25 mL dosage, for intramuscular use
90686	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use
90687	Influenza virus vaccine, quadrivalent (IIV4), split virus, NOT preservative free, 0.25 mL dosage, for intramuscular use
90688	Influenza virus vaccine, quadrivalent (IIV4), split virus, NOT preservative free, 0.5 mL dosage, for intramuscular use

For Additional Coding Assistance, please refer to the <u>EPSDT/Program-Guide-2020</u>. See pages 50-65.





Items of Note about Publicly Supplied VFC Billing: Vaccines For Children:

Bill vaccine code with \$0 charge and - no modifier.

Bill the appropriate administration CPT code 90460 or 90471 through 90474 with modifier - EP.

One unit of CPT 90460 is billed for each vaccine for which counseling is provided.

Medicaid and NCHC may reimburse for an immunization administration code (CPT codes 90471EP through 90474EP for Medicaid and 90471-90474 for NCHC) in addition to an E&M code on the same day by the same provider.

Important Resources

- Refer often to the <u>NC Health Check Early Preventive Screen Guide</u> and the section on Immunizations found on page 50.
- Use the <u>NC Immunization Registry</u> (NCIR) as a resource for vaccinations that are overdue for children in your practice.
- For the most up to date list of vaccines covered by Medicaid, please refer to the Program (PDP) Fee Schedule.
- Follow the CDC Immunization Schedule Birth-18.
- Utilize the <u>CDC Catch Up Schedule</u> for children and adolescents who are behind on their immunizations.
- Review the Vaccines for Children Provider website.