

LOUISIANA MEDICAID IMMUNIZATION FEE SCHEDULE - ADULT (AGE 21 YEARS & OLDER)

Effective for Dates of Service on or after January 1, 2016 through June 30, 2016

COLUMN:

TS	CPT Code	CPT Description	Age 21 Years & Older			
			4A Age Min -	4B Fee	4C Sex	4D UVS
03	90471	Immunization administration (subcutaneous or IM injection), one vaccine		\$14.70		
03	90472	Immunization administration, (subcut. or IM injection) ea additional vaccine		\$9.13		X
03	90473	Immunization administration, nasal/oral, one vaccine		\$10.43		
03	90474	Immunization administration, nasal/oral, each additional vaccine		\$9.13		X
03	90649	Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18, quadrivalent, IM use	21 26	\$121.03		
03	90650	Human Papilloma virus (HPV) vaccine, types 16, 18, bivalent, IM use	21 26	\$124.37	F	
03	90651	Human Papilloma virus vaccine, types 6,11,.58, nonavalent,3 dose sched, IM	21 26	\$162.34		
03	90654	Influenza virus vaccine, split virus, preservative-free, for intradermal use	21 64	\$17.76		
03	90656	Influenza vaccine, trivalent, split virus, preservative free, 3 years & older, IM use		\$16.78		
03	90658	Influenza vaccine, trivalent, split virus, 3 years & older, IM use		\$12.77		
03	90660	Influenza vaccine, trivalent, live, intranasal use	21 49	\$21.28		
03	90672	Influenza vaccine, quadrivalent, live, for intranasal use	21 49	\$24.19		
03	90686	Influenza vaccine, quadrivalent, split virus, preservative free,3 yrs & older, IM use		\$14.56		
03	90688	Influenza vaccine, quadrivalent, split virus, 3 yrs & older, IM use		\$12.61		
03	90714	Tetanus and diphtheria toxoids (Td), preservative free, 7 years or older, IM use		\$18.82		
03	90732	Pneumococcal polysacch vaccine,23-valent, 2 years & older, subcut. or IM		\$28.72		

Listed below are some aids to help you understand this fee schedule. If, after reading the information below, you need further clarification of an item, please call Molina Healthcare Provider Relations at 1-800-473-2783.

COLUMN 1:

TS (Type of Service): Files on which codes are loaded and from which claims are paid. The file to which a claim goes for pricing is determined by, among other things, the type of provider who is billing the procedure code.

03 - Full service. The file from which physician services are paid. Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse Midwives, and Physician Assistants are reimbursed at 100% of this fee for immunizations.

COLUMN 2: Procedure Code

COLUMN 3: Procedure Code Description

COLUMN 4A: Codes with minimum or maximum age restrictions. If the recipient's age on the date of service is outside the minimum or maximum age, claims will deny.

COLUMN 4B: Reimbursement rate on file

COLUMN 4C: Sex (Restriction): Some procedure codes are indicated for only one sex.

COLUMN 4D: UVS>001. An 'X' in this column means more than one unit of service per day may be billed.

Revised: July 2016