

LOUISIANA MEDICAID IMMUNIZATION FEE SCHEDULE: AGE 19 - 20 YEARS

Effective for Dates of Service July 1, 2016 through December 31, 2016

COLUMN:

1 2 3

4A 4B 4C 4D

TS	CPT Code	CPT Description	Age 19-20 Years			Medicaid Expansion
			Fee	Sex	UVS >001	
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	90620	Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B (MenB), 2 dose schedule, for IM use	\$144.68			E
03	90621	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB), 3 dose schedule, for IM use	\$115.75			E
03	90632	Hepatitis A vaccine, adult dosage, IM use	\$51.57			
03	90636	Hepatitis A and hepatitis B vaccine (HepA-HepB), adult dosage, IM use	\$80.27			
03	90648	Haemophilus influenza type b vaccine (Hib), PRP-T conjugate, 4 dose schedule, for IM use	\$26.03			E
03	90649	Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18, quadrivalent, IM use	\$121.03			
03	90650	Human Papilloma virus (HPV) vaccine, types 16, 18, bivalent, IM use	\$124.37	F		
03	90651	Human Papilloma virus vaccine types 6, 11...58, nonavalent (HPV), 3 dose sch,IM	\$162.34			
03	90654	Influenza virus vaccine, split virus, preservative-free, for intradermal use	\$17.76			
03	90656	Influenza vaccine, trivalent, preservative free, 3 years & older, IM use	\$16.78			
03	90658	Influenza vaccine, trivalent, 3 years & older, IM use	\$12.77			
03	90660	Influenza vaccine, trivalent, live, intranasal use Not covered effective 9-23-16	\$21.28			
03	90672	Influenza vaccine, quadrivalent, live, for intranasal use Not covered effective 9-23-16	\$24.19			
03	90686	Influenza virus vaccine, quadrivalent, split virus, preserv free, 3 yrs or older, IM use	\$14.56			
03	90688	Influenza virus vaccine, quadrivalent, split virus, 3 yrs & older, IM use	\$12.61			
03	90670	Pneumococcal conjugate vaccine, 13 valent for intramuscular use	\$155.84			E
03	90707	Measles, mumps and rubella vaccine (MMR), live, subcutaneous use	\$41.67			
03	90710	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use	\$120.14			
03	90714	Tetanus and diphtheria toxoids (Td), preservative free, 7 yrs or older, IM use	\$18.82			
03	90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), when administered to individuals 7 years or older, for IM use	\$33.15			
03	90716	Varicella vaccine, live, for subcutaneous use	\$72.82			
03	90732	Pneumococcal polysacch vaccine, 23-valent, 2 years & older, subcut. or IM use	\$28.72			
03	90734	Meningococcal conjugate vaccine, serogroups A, C, Y, and W-135, quadrivalent (Men ACWY), for IM use.	\$90.68			
03	90746	Hepatitis B vaccine (HepB), adult dosage, 3 dose schedule, for IM use	\$55.31			

Revised: July 2016/Sept 2016

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Listed below are some aids we hope will 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: Reimbursement rate on file

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

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

COLUMN 4D: An 'E' in this column means the vaccine was added for Medicaid Expansion, effective with date of service July 1, 2016 forward.

Revised: June 2016/Sept 2016