ALABAMA MEDICAID AGENCY

Vaccine Counseling Frequently Asked Questions

Updated May 18, 2022

1. Is April 1, 2021, the correct date to file claims for vaccine counseling?

<u>Response</u>: Yes, this is the correct date. Providers can submit an Administrative Review for dates of service for claims that deny for code 555 (claim past timely filing).

2. Is the vaccine counseling billing code a one-time code billed no matter the number of vaccines?

<u>Response</u>: If medical documentation is noted, providers can bill for counseling for each vaccine provided. The COVID vaccine counseling can be billed separately since it has a different modifier. Claims are subject to any NCCI edits.

3. Is it appropriate to bill both CPT 90460/90461 and the vaccine CPT code being that they both are reimbursement for administration of a vaccine?

<u>Response</u>: Medicaid reimburses VFC vaccine providers for the administration of VFC vaccines. CPT 90460 and CPT 90461 should not be billed on the same date of service as a VFC vaccine procedure code.

4. Would it be appropriate to bill CPT 99401 for vaccines administered to patient over 18 years of age and if vaccines are refused regardless of age?

<u>Response</u>: CPT 99401 may be billed when vaccine counseling to a recipient under age 21 is provided whether or not a vaccine is administered.

5. What documentation is required?

<u>Response:</u> Documentation in the medical record should verify the vaccine counseling is appropriate and rendered as billed.

6. How are Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) to bill for vaccine counseling?

<u>Response</u>: FQHCs and RHCs are to bill it on itemized encounter claims.

7. What documentation is Medicaid requiring for vaccine counseling?

Response: As mentioned in the Medicaid Provider Billing Manual and Administrative Code, providers are to document in the medical record information to support the services reimbursed by Medicaid. In relation to vaccine counseling billing, medical record documentation should provide details of the discussion and counseling as well as the approximate time of counseling to support the billing of procedure codes. Please see the Provider Billing Manual and Administrative Code Chapter 1 for more detailed information.