



Immunization and Vaccination Benefit Grid (Age Based) – Effective 1/1/2009

Reimbursement level for eligible services based on specific contractual language

PROC	Description	Age 0.0 - 8.9	Age 9.0 - 999.9	Age 0.0 - 18.9	Age 19.0 - 999.9	Age 19.0 - 26.9	Age 27.0 - 999.9	Age - ANY
90465	IMMUNE ADMIN 1 INJ; < 8 YRS	ELIGIBLE	NOTCV					
90466	IMMUNE ADMIN ADDL INJ; < 8 Y	ELIGIBLE	NOTCV					
90467	IMMUNE ADMIN O OR N; < 8 YRS	ELIGIBLE	NOTCV					
90468	IMMUNE ADMIN O/N; ADDL < 8 Y	ELIGIBLE	NOTCV					
90470 90471	H1N1 IMMUNIZATION ADMIN IMMUNIZATION ADMIN SNGL OR C							ELIGIBLE ELIGIBLE
	IMMUNIZATION ADMIN SNGL OR C							ELIGIBLE
90472	IMMUNE ADMIN ORAL/NASAL ADDL							ELIGIBLE
90473	ADENOVIRUS VACCINE, TYPE 4							NOTCV
90474	ADENOVIRUS VACCINE, TYPE 7							NOTCV
90476	ANTHRAX VACCINE, SC							NOTCV
90477	BCG VACCINE, PERCUTANEOUS							NOTCV
90581	BCG VACCINE, INTRAVESICAL							NOTCV
90585	HEP A VACCINE, ADULT, IM			NOTCV	ELIGIBLE			
90586	HEP A VACCINE, PED/ADOL 2 DO			NCSSV	NOTCV			
90632	HEP A VACCINE, PED/ADOL 3 DO							NOTCV
90633	HEP A/HEP B VACCINE ADULT IM			NOTCV	ELIGIBLE			
90634	HIB VACCINE, HBOC, IM							NOTCV
90636	HIB VACCINE, PRP-D, IM							NOTCV
90645	HIB VACCINE, PRP-OMP, IM			NCSSV	NOTCV			
90646	HIB VACCINE, PRP-T, IM							NCSSV
90647	H PAPILOMA VACC 3 DOSE IM			NCSSV		ELIGIBLE	NOTCV	
90648	HPV TYP BIVAL 3 DOSE IM							NOTCV
90649	FLU VACCINE, 6-35 MO, IM			NCSSV	NOTCV			

NOTCV = Non Covered Vaccine (Specific for Age Range)

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NCSSV = Non Covered State Supplied Vaccine

*** 90715 Addition to Adult Immunization Program**

Current as of 5/21/2010 – Provider Services

Group Number 1400 & 1450 excluded



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90656	FLU VACCINE NO PRESERV 3 & >							NCSSV
90657	FLU VACCINE, 6-35 MO, IM							NOTCV
90658	FLU VACCINE, 3 YRS, IM							NCSSV
90660	FLU VACCINE, NASAL							NCSSV
90661	FLU VACC CELL CULT PRSV FREE							NOTCV
90662	FLU VACC PRSV FREE INC ANTIG							NOTCV
90663	FLU VACC PANDEMIC H1N1							NCSSV
90665	LYME DISEASE VACCINE, IM							NOTCV
90669	PNEUMOCOCCAL VACCINE, PED			NCSSV	NOTCV			
90670	PNEUMOCOCCAL VACC; 13 VAL IM			NCSSV	NOTCV			
90675	RABIES VACCINE, IM							ELIGIBLE
90676	RABIES VACCINE, ID							ELIGIBLE
90680	ROTAVIRUS VAC, TETRAVALENT L			NCSSV	NOTCV			
90681	ROTAVIRUS VACC 2 DOSE ORAL			NCSSV	NOTCV			
90690	TYPHOID VACCINE, ORAL							NOTCV
90691	TYPHOID VACCINE, IM							NOTCV
90692	TYPHOID VACCINE, H-P, SC/ID							NOTCV
90693	TYPHOID VACCINE, AKD, SC							NOTCV
90696	DTAP-IPV VACC 4-6 YR IM			NCSSV	NOTCV			
90698	DTAP-HIB-IP VACCINE, IM			NCSSV	NOTCV			
90700	DTAP IMMUNIZATION			NCSSV	NOTCV			
90701	DTP IMMUNIZATION			NOTCV	ELIGIBLE			
90702	DT IMMUNIZATION			NCSSV	NOTCV			
90703	TETANUS IMMUNIZATION							ELIGIBLE
90704	MUMPS IMMUNIZATION							NOTCV
90705	MEASLES IMMUNIZATION							NOTCV
90706	RUBELLA IMMUNIZATION							NOTCV
90707	MMR VIRUS IMMUNIZATION			NCSSV	ELIGIBLE			

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90708	MEASLES-RUBELLA IMMUNIZATION							NOTCV
90710	MEASLES-MUMPS-RUBELLA IMMUNI							ELIGIBLE
90712	ORAL POLIOVIRUS IMMUNIZATION							NOTCV
90713	POLIOMYELITIS IMMUNIZATION			NCSSV	ELIGIBLE			
90714	TETANUS AND DIPHTHERIA			NCSSV	ELIGIBLE			
90715	TDAP VACCINE >7 IM							NCSSV*
90716	CHICKEN POX IMMUNIZATION			NCSSV	ELIGIBLE			
90717	YELLOW FEVER IMMUNIZATION							NOTCV
90718	TD IMMUNIZATION			NOTCV	ELIGIBLE			
90719	DIPHTHERIA IMMUNIZATION							NOTCV
90720	DTP/HIB IMMUNIZATION							NOTCV
90721	DIPHTHERIA, TETANUS, TEXOIDS,							NOTCV
90723	DTAP-HEP B-IPV VACCINE, IM			NCSSV	NOTCV			
90725	CHOLERA IMMUNIZATION							NOTCV
90727	PLAGUE IMMUNIZATION							NOTCV
90732	PNEUMOCOCCAL IMMUNIZATION							NCSSV
90733	MENINGOCOCCAL IMMUNIZATION			NOTCV	ELIGIBLE			
90734	MENINGOCOCCAL VACCINE, IM			NCSSV	ELIGIBLE			
90735	ENCEPHALITIS VIRUS IMMUNIZAT							NOTCV
90736	ZOSTER VACC; SC			NOTCV	ELIGIBLE			
90740	HEPB VACC, ILL. PAT 3 DOSE IM			NOTCV	ELIGIBLE			
90743	HEP B VACC, ADOL, 2 DOSE, IM							NOTCV
90744	HEPAT B VACCINE AGE<11			NCSSV	NOTCV			
90746	HEPAT B VACCINE, ADULT	NOTCV	ELIGIBLE					
90747	IMMUN HEPAT B DIALYSIS ANY A							NOTCV

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90748	IMMUN HEPAT B AND HIB VACCIN							NOTCV
90749	IMMUNIZATION PROCEDURE NEC							NOTCV
G0008	ADMIN OF INFLUENZA							NOTCV
G0009	ADMIN OF PNEUMOCOCCAL VACCIN							NOTCV
G0010	ADMIN OF HEPATITIS B VACCINE							NOTCV
T1502	ADMINISTRATION OF ORAL, INTR							NOTCV

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