

NEWSLETTER

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TO: Physicians, Certified Nurse Specialists, Clinical Nurse Practitioners, and Independent Clinics (including FQHCs) -
For Action
Hospitals - Chief Executive Officer, Health Maintenance Organizations, Providers of Pharmaceutical Services -
For Information Only

SUBJECT: **Pneumococcal Conjugate Vaccine (PREVNAR)**

EFFECTIVE: Services provided on or after October 1, 2000

PURPOSE: To notify providers of healthcare services of the: 1.) decision by the Division of Medical Assistance and Health Services (DMAHS) to provide fee-for-service (FFS) coverage and reimbursement for the vaccine administration fee related to administration of the pneumococcal conjugate vaccine (PREVNAR); and, 2.) the availability of this vaccine through the federal Vaccines For Children (VFC) program.

BACKGROUND: In June 2000, the U.S. Public Health Service Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) voted to recommend the addition of the new pneumococcal conjugate vaccine (PREVNAR) to the Recommended Childhood Immunization Schedule. In addition, the ACIP decided to make this vaccine available through the federal VFC program. In New Jersey, the Department of Health and Senior Services (DHSS) administers the VFC.

The pneumococcal conjugate vaccine is recommended for all children under 24 months of age and for high-risk children 24-59 months of age. Children considered high risk for invasive pneumococcal infection are those diagnosed with sickle cell disease, chronic renal insufficiency, and nephrotic syndrome, diabetes, HIV and other immunocompromised states. Additionally, the vaccine is recommended for children 24-59 months of age, of American Indian or African-American descent or who attend group day care centers.

The recommended schedule for immunization with pneumococcal conjugate vaccine parallels that of DTaP: initial dose to be given at 2 months of age (and not earlier than 6 weeks) followed by two additional doses administered at 2 month intervals. The fourth dose should be administered between 12-15 months of age. Infants beginning immunization between 7-11 months of age need two doses followed by the third dose at 12-15 months. Healthy infants beginning immunization between 12-23 months and high-risk children up to 59 months of age require a total of two doses administered 2 months apart. Healthy children in the 24-59 month age group require only a single dose of the vaccine.

ACTION: Effective for services provided on or after October 1, 2000, providers immunizing eligible children enrolled in the Medicaid or NJ KidCare FFS program with the pneumococcal conjugate vaccine may request reimbursement for the \$11.50 administration fee related to the administration of this vaccine. In addition, doses of the pneumococcal conjugate vaccine may be requested from DHSS in accordance with procedures outlined in the Medicaid Newsletter, Volume 9, No. 33, dated June 1999.

Providers may bill the CPT procedure code 90471 when only one injection has been administered on a date of service. Providers must bill CPT procedure code 90472 when the vaccine is provided as an additional injection on the same date of service.

When the pneumococcal conjugate vaccine is administered in conjunction with a preventive EPSDT or a HealthStart visit, the administration fee should be billed on Form MC-19, "Report and Claim for EPSDT/HealthStart Screening and Related Procedures."

For further information or questions concerning this Newsletter, providers may contact Danuta U. Buzdygan, M.D., Chief, Pediatric Consultant, at (609) 588-2718.

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