

Pentacel®

Diphtheria and Tetanus Toxoids and Acellular Pertussis Adsorbed, Inactivated Poliovirus and Haemophilus b Conjugate (Tetanus Toxoid Conjugate) Vaccine

Coding and Billing Sheet

Vaccine Code

CPT® Code 90698 should be assigned on all claims for Pentacel vaccine.

CPT Code	Code Description
90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine, haemophilus influenza Type B, and poliovirus vaccine, inactivated (DTaP-Hib-IPV), for intramuscular use
Source: 2011 Current Procedural Terminology	

Some Medicaid agencies and private health plans are requiring the use of the 11-digit National Drug Code (NDC) in addition to the CPT code, on all claim forms for physician-administered products. The 11-digit NDC for Pentacel vaccine is:

NDC	Code Description
49281-0510-05	Pentacel Vaccine 5-dose package

Administration Codes

The administration of Pentacel vaccine must be reported in addition to the vaccine product code (ie, assign the code for the vaccine along with the appropriate code for its administration). Assign the appropriate immunization administration code based on the documentation in the medical record.

To more accurately account for the work and practice expenses associated with the administration of multiple-component (combination) vaccines, such as Pentacel vaccine, the American Medical Association has established CPT codes, effective January 1, 2011, for the reporting of childhood and adolescent immunization administration. The new codes are based on the number of components in a vaccine. A component refers to all antigens in a vaccine that prevent disease caused by one organism.

To appropriately code for administration of Pentacel vaccine in patients through 18 years of age when counseling occurs, bill 1 unit of 90460 and 4 units of 90461. This will account for the 5 components in Pentacel vaccine. If no counseling occurs in a patient through 18 years of age, or if the patient is over 18 years of age (with or without counseling), bill the original CPT codes, 90471 or 90472 as appropriate. See the grid below for the definitions of these CPT codes.

CPT Code	Code Description
90460	Primary code (first vaccine or toxoid component) - Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional.
+90461	Add-on code (each additional vaccine or toxoid component) - Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional. <i>Note: This code can only be reported in conjunction with the primary code</i>
90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); one vaccine (single or combination vaccine/toxoid)
+90472	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid)
+Add-on code Source: 2011 Current Procedural Terminology	

Please note that as of January 1, 2011, the physician counseling vaccine administration codes CPT 90465-90468 will no longer be active codes.

Office or Other Outpatient Service Codes

There are times when a provider may choose to administer Pentacel vaccine during the course of a problem-focused visit. In these situations, three CPT codes should be reported: the code for the office visit is reported along with the CPT code for Pentacel vaccine (90698) and the appropriate immunization administration code.

- Office Visit Code (99201-99215)^b
- Pentacel Vaccine Code (90698)
- Immunization Administration Code (90460 and 90461 or 90471 or 90472)^c

Preventive Medicine Service Codes

Immunizations are often provided during preventive medicine evaluations, often referred to as physical exams and "well visits." In these situations, three CPT codes should be reported: the code for the preventive visit is reported along with the CPT code for Pentacel vaccine (90698) and the appropriate immunization code.

- Preventive Medicine Service Code (99381-99383 and 99391-99393)^b
- Pentacel Vaccine Code (90698)
- Immunization Administration Code (90460 and 90461 or 90471 or 90472)^c

Diagnosis Codes (ICD-9-CM)

Below are the two suggested diagnosis codes that may be appropriate when submitting claims for Pentacel vaccine and its administration. The codes should be linked to the vaccine and the administration CPT codes. Assign the appropriate code based on review of the documentation in the medical record.

ICD-9-CM Code ^d	Code Description	Suggested Use
V06.3 AND V03.81	Need for prophylactic vaccination and inoculation against combination(s) of diseases; diphtheria-tetanus-pertussis with poliomyelitis [DTP + polio] AND Need for prophylactic vaccination and inoculation against bacterial diseases; other specified vaccinations against single bacterial diseases; Haemophilus influenza type b [Hib]	When Pentacel vaccine is administered as a prophylactic immunization according to the Childhood Immunization Schedule
Source: 2011 International Classification of Diseases, 9th Revision, Clinical Modification		

Billing Instruction and Claims Submission

All timely reimbursement starts with accurate coding and claims submission. The following information is offered to assist you in preparing and appealing claims for Pentacel vaccine.

- Update patient demographic and insurance information routinely; this assures accuracy in completing claims; verify spelling
- Verify each patient's benefits prior to service
- Re-check claims for coding accuracy; (ie, ICD-9-CM codes are coded to the highest level of specificity, use a fourth or fifth digit as appropriate)
- File claims in a timely manner to comply with payer time limits
- Review Remittance Advice (RA) and Explanation of Benefits (EOB) from payers for accuracy
- Be prepared to appeal any denials with supportive literature
- Consider other resources to resolve denials, including the patient's employer group and the patient himself
- Visit the sanofi pasteur Web site www.vaccineshoppe.com for reimbursement tools and resources

^aCPT = Current Procedural Terminology is a registered trademark of the American Medical Association.

^bSelect the appropriate code based on review of documentation in the medical record. To report that the visit is separately identifiable from the vaccine administration services performed on the same day, modifier -25 (significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service) can be appended to the selected visit code.

^cPlease refer to the previous section on injectable immunization administration codes when immunizing with Pentacel vaccine and refer to www.vaccineshoppe.com for sample claim forms.

^dWhen Pentacel vaccine is used, it will be necessary to report more than one ICD-9 code to reflect all diseases for which the vaccine is indicated.

These codes are provided for your information only. It is the responsibility of the provider to determine the most appropriate code to use in billing for services rendered. The use of these codes does not guarantee payment.

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