(Tetanus Toxoid Conjugate) Vaccine

CODING AND BILLING SHEET

Vaccine Code

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

CPT Code	Code Description	
90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine, haemophilus influenzae type b, and poliovirus vaccine, inactivated (DTaP-Hib-IPV), for intramuscular use	

National Drug Codes (NDCs)

Some Medicaid agencies and private health plans require the use of an 11-digit NDC in addition to the CPT code on claims for physician-administered products. Additionally, the Food and Drug Administration (FDA) now requires different NDCs on the packaging and the syringe or vial (unit of use), so it is important to record the correct NDC code in the patient's record as per the standard procedure in your practice.

If your payers require NDC codes on claims, you should confirm their preferred NDC code, either packaging or unit of use. Note that Pentacel vaccine packaging and units of use contain a 10-digit NDC. To change them to an 11-digit format, you must add a leading "0" to the middle set of digits. (For example: 49281-**0**510-05.)

Use of Modifiers when Billing for Vaccines

Vaccines are usually administered at preventive visits. However, they may also be administered at problem-focused visits, prescription refills, and screening exams. When a vaccine is administered at any type of visit, the modifier -25 may need to be attached to the evaluation and management code for the office visit to identify that it is separate and significantly different than other services billed. Check with your payers to confirm their requirements regarding the use of the -25 modifier.

Diagnosis Codes (ICD-9-CM)

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

ICD-9-CM Codeb	Code Description	Suggested Use
V06.3	Need for prophylactic vaccination and inoculation against combination(s) of diseases; diphtheria-tetanus-pertussis with poliomyelitis [DTP + polio]	When Pentacel vaccine is administered as a prophylactic immunization according to the
AND V03.81	AND Need for prophylactic vaccination and inoculation against bacterial diseases; other specified vaccinations against single bacterial diseases; haemophilus influenzae type b [Hib]	Childhood Immunization Schedule



Injectable Immunization Administration Coding

The administration of a vaccine must be reported in addition to the vaccine product code. 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, the American Medical Association has established CPT codes, effective January 1, 2011, for the reporting of childhood and adolescent immunization administration. The 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 1 organism.

Pentacel vaccine is a 5-component vaccine, therefore the appropriate administration coding for patients through 18 years of age when counseling occurs is 1 unit of 90460 and 4 units of 90461. If no counseling occurs in a patient 0-18 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	Component-based Code – Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; first or only component of each vaccine or toxoid administered	
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. Note: This code can only be reported in conjunction with the primary code	
90471	Injection-based Code – Primary code: Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); 1 vaccine (single or combination vaccine/toxoid)	
90472	Injection-based Code – Add-on code for additional vaccines administered: Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine, (single or combination vaccine/toxoid)	

Coding Example for Pentacel Vaccine

- Pentacel vaccine- 90698
- Immunization administration 90471 or 90472 or 90460 (1 unit) AND 90461 (4 units)

Visit the Reimbursement Page on VaccineShoppe.com[®] for additional coding resources for Sanofi Pasteur products.

Do you have questions on coverage or payment for Sanofi Pasteur products?

Contact the Sanofi Pasteur Reimbursement Support Service (RSS).

Call 1-800-VACCINE (1-800-822-2463) and choose the prompt for the RSS.

The information contained in this Pentacel vaccine Coding and Billing Sheet is provided for informational purposes only. Every reasonable effort has been made to verify the accuracy of the information; however, this quick reference is not intended to provide specific guidance on how to utilize, code, bill, or charge for any product or service. Health care providers should make the ultimate decision as to when to use a specific product based on clinical appropriateness for a particular patient. Third-party payment for medical products and services is affected by numerous factors and Sanofi Pasteur Inc. cannot guarantee success in obtaining insurance payments.



^a CPT (Current Procedural Terminology) is a registered trademark of the American Medical Association.

^b When 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.