

Source: American Academy of Pediatrics

<https://www.aap.org/en-us/professional-resources/practice-support/Coding-at-the-AAP/Pages/FAQ.aspx>

In a single encounter, can I report code 90460 more than once?

Yes, it is possible and allowable. Keep in mind that each vaccine administered is its own entity. Therefore, for each individual vaccine administered, you will report code 90460 because every vaccine will have at minimum one vaccine component. Because 90460 represents the first vaccine component of each vaccine, if you report 90460 in multiple units, you lose the ability to separately designate each vaccine administered during the course of a single patient encounter.

Then, depending on the specific vaccine, code 90461 may be additionally reported if the vaccine is a multiple component vaccine.

For example, if you administer a measles, mumps, and rubella (MMR) vaccine and a varicella vaccine at the same encounter, you will report codes 90460, 90461, and 90461 for the MMR vaccine and 90460 for the varicella vaccine.

Based on an example from the Centers for Disease Control and Prevention web site, it appears that 90460 might be reported up to 9 times on a single date of service, with up to 5 instances of 90461 being reported on the same date. Are there any circumstances in which a higher frequency of the use of either code might appropriately be reported?

When counseling is provided and the patient is 18 years or younger, the national routine childhood immunization schedule will drive the number of components needed and hence the number of IA codes reported.

For example, on the routine schedule, the maximum number of diseases covered (components) via immunization is at the 4-year-old visit during influenza season. At this age, with the recently added Prevnar 13 vaccine, the following disease protection is recommended: diphtheria, tetanus, pertussis, polio, measles, mumps, rubella, varicella, influenza, and pneumococcus. If all 10 of these components were given separately (unlikely), code 90460 would be reported 10 times and code 90461 would not be reported at all. If some of the components were provided in a combination vaccine, code 90460 would be reported for the first component of that individual combination vaccine and code 90461 for each additional component within that individual combination vaccine.

In the best-case scenario using currently available combination vaccines, one would report code 90460 5 times and 90461 5 times using DTaP; measles, mumps, rubella, and varicella (MMRV); poliovirus; Prevnar; and influenza vaccines.

It is possible that a child will be behind on vaccines and more vaccines may be given than are typically found for a certain age on the routine schedule. Pediatricians have seen as many as 7 injections given on one date and some of these were combination vaccines. However, if one were to add these up in total over the child's lifetime, the number of components would not exceed the recommended number even though a larger quantity may be given on a single date. These catch-up visits would be the circumstance with which a higher frequency of IA codes may be used. Again, this represents a situation in which charges are lumped in one visit instead of spread out over many, but the total remains the same.

We have received multiple claim denials stating 90460 and/or 90461 is a "duplicate" service. How should we report the appropriate IA codes when a patient presents for her 2-month-old well-child check and given the DTaP-Hib-IPV (Pentacel®) vaccine, pneumococcal vaccine, and rotavirus vaccine in order to avoid denials?

The limitations imposed by some claims processing systems may reject the multiple 90460 codes or multiple 90461 codes appearing on the same claim form as "duplicate claims." The following is what some payers have indicated will work with their systems:

A patient presents for her 2-month-old well-child check and given the DTaP-Hib-IPV (Pentacel®) vaccine,

pneumococcal vaccine, and rotavirus vaccine:

First Claim Form:

	CPT descriptor	CPT code	Units
Line 1	DTaP-Hib-IPV (Pentacel®) vaccine	90698	1
Line 2	Pneumococcal vaccine	90670	1
Line 3	Rotavirus vaccine	90680	1
Line 4	First component administration for each vaccine	90460	3
Line 5	Each additional component administration for each vaccine	90461	4

Second Claim Form:

	CPT descriptor	CPT code	Units
Line 1	Preventive medicine service <1 year	99391	1

Be sure to increase your charges according to the number of units report for the 90460 and 90461.