

## **INFORMATIONAL LETTER NO. 2596-MC-FFS**

**DATE:** June 6, 2024

**TO:** Iowa Medicaid Hospital, Physician MD, Physician DO, Rural Health Clinic

(RHC), Clinic, Community Mental Health Center (CMHC), Certified Nurse Midwife, Federally Qualified Health Center (FQHC), Nurse Practitioner (NP), Physician Assistant, Area Education Agency (AEA), Local Education Agency (LEA), Pharmacies, Family Planning, Screening Centers, Maternal Health Centers, Public Health Agencies, Pharmacist,

Independent Labs

**APPLIES TO:** Managed Care (MC), Fee-for-Service (FFS)

FROM: lowa Department of Health and Human Services (HHS), lowa Medicaid

**RE:** New Vaccine for Children (VFC) Program Codes

**EFFECTIVE:** See Chart Below

\*\*\*This informational letter (IL) will replace IL No. 2576-MC-FFS1\*\*\*

The following codes have been updated for the **Vaccine for Children Program (VFC)**, effective as indicated in the chart below:

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Code	Description	Brand Name	Ages	Effective Date
90380	Respiratory syncytial virus, monoclonal antibody, seasonal dose; <b>0.5 mL</b> dosage, for intramuscular use	Beyfortus	Zero to 19 months	October 2, 2023
90381	Respiratory syncytial virus, monoclonal antibody,	Beyfortus	Zero to 19 months	

<sup>&</sup>lt;sup>1</sup> <u>https://secureapp.dhs.state.ia.us/impa/Information/ViewDocument.aspx?viewdocument=(96017bd4-5b05-4011-a168-f7c355905064)</u>

	seasonal dose; <b>1 mL</b> dosage, for intramuscular use			October 2, 2023
90677	Pneumococcal conjugate vaccine, 20 valent (PCV 20), for intramuscular use	Prevnar 20	Six weeks to 18 years	October 6, 2023
<u>90678</u> <sup>2</sup>	Respiratory syncytial virus vaccine, preF, subunit, bivalent, for intramuscular use	Abrysvo	Pregnant women only	January 9, 2024
96372*	Administration of injection of drug/substance under skin or into muscle	N/A	N/A	October 1, 2023
96380	Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by intramuscular injection, with counseling by physician or other qualified health care professional	N/A	Specific to Beyfortus (nirsevimab) administration	October 6, 2023
96381	Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by intramuscular injection, without counseling	N/A	Specific to Beyfortus (nirsevimab) administration	October 6, 2023

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\*CPT code 96372 (*injection of a drug or substance, subcutaneous or intramuscular*) **should not** be reported for administering Beyfortus for dates of service on or after **October 6, 2023**.

If you have questions, please contact Iowa Medicaid Provider Services or the appropriate MCO:

## **Iowa Medicaid Provider Services:**

• Phone: 1-800-338-7909

■ Email: <u>imeproviderservices@dhs.state.ia.us</u>

#### **Iowa Total Care:**

Phone: 1-833-404-1061

Email: <u>providerrelations@iowatotalcare.com</u>
Website: <u>https://www.iowatotalcare.com</u>

<sup>&</sup>lt;sup>2</sup> https://hhs.iowa.gov/public-health/immunization/vfc



## **Molina Healthcare of Iowa:**

Phone: 1-844-236-1464

• Email: <a href="mailto:iaproviderrelations@molinahealthcare.com">iaproviderrelations@molinahealthcare.com</a>

• Website: https://www.molinahealthcare.com/providers/ia/medicaid/home.aspx

Provider Portal: <a href="https://www.availity.com/molinahealthcare">https://www.availity.com/molinahealthcare</a>

# Wellpoint Iowa, Inc. (formerly Amerigroup Iowa, Inc.):

Phone: 1-833-731-2143

■ Email: <u>ProviderSolutionsIA@wellpoint.com</u>

Website: https://www.provider.wellpoint.com/iowa-provider/home