

APPENDIX A				
Vaccine & Administration Codes				
Revised: April 1, 2025				
Effective with date of service October 1, 2023, DCH will reimburse the administration of vaccines for members 21 years and older. The administration codes approved for vaccines are provided in Column D.				
CPT	CPT Name, Description, Dose	Vaccine Name	Administration codes	Max Allowed per Administration
90585	Bacillus Calmette-Guerin vaccine (BCG) for tuberculosis, live, for percutaneous use 50mg	BCG Vaccine	90460, 90461	\$10.00
90585	Bacillus Calmette-Guerin vaccine (BCG) for tuberculosis, live, for percutaneous use 50mg	BCG Vaccine	90471, 90472	\$10.00
90586	Bacillus Calmette-Guerin vaccine (BCG) for bladder cancer, live, for intravesical use	Tice BCG	90471, 90472	\$10.00
90611	Smallpox and monkeypox vaccine, attenuated vaccinia virus, live, non-replicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous use	Jynneos	90471/90472	\$10.00
90611	Smallpox and monkeypox vaccine, attenuated vaccinia virus, live, non-replicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous use (18 yrs)	Jynneos	90460	\$10.00
90611	Smallpox and monkeypox vaccine, attenuated vaccinia virus, live, non-replicating, preservative free, 0.5 mL dosage, suspension, for subcutaneous use	Jynneos	90461	\$10.00
90619	Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, tetanus toxoid carrier (MenACWY-TT), for intramuscular use	Menquadfi	90471, 90472	\$10.00
90620	Meningococcal B RP W/OMV Vaccine IM	Bexsero	90471, 90472	\$10.00
90621	Meningococcal B RIP Vaccine IM	Trumenba	90471, 90472	\$10.00
90623	Meningococcal pentavalent vaccine, conjugated Men A, C, W, Y- tetanus toxoid carrier, and Men B-FHbp, for intramuscular use (PENBRAYA)	Pembraya	90460, 90461	\$10.00
90623	Meningococcal pentavalent vaccine, conjugated Men A, C, W, Y- tetanus toxoid carrier, and Men B-FHbp, for intramuscular use (PENBRAYA)	Pembraya	90471, 90472	\$10.00
90627	Tick-Borne Encephalitis Virus Vaccine, inactivated; 0.5 mL dosage, for intramuscular use	Ticovac	90460, 90461	\$10.00
90627	Tick-Borne Encephalitis Virus Vaccine, inactivated; 0.5 mL dosage, for intramuscular use	Ticovac	90471, 90472	\$10.00
90632	Hepatitis A Vaccine, Adult Dosage, per 1 ml	Havrix	90471, 90472	\$10.00
90636	Hepatitis A and Hepatitis B Vaccine (HepA-HepB), Adult Dosage	Twinrix	90471, 90472	\$10.00
90651	Vaccine for Human Papilloma Virus (3 Dose Schedule) Injection into muscle	Gardasil 9	90471, 90472	\$10.00
90653	Influenza vaccine, inactivated (IIV), subunit, adjuvanted, for intramuscular use	Fluad	90471, 90472	\$10.00
90656	Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.5 mL dosage, for intramuscular use	Afluria/Fluaval/Fluarix/Fluzone	90471/90472	\$10.00
90658	Influenza virus vaccine, trivalent (IIV3), split virus, 0.5 mL dosage, for intramuscular use	Afluria/Fluzone	90471/90472	\$10.00
90660	Influenza virus vaccine, trivalent, live (LAIV3), for intranasal use (Code price is per dose = 0.2 mL)	Flumist	90471, 90472	\$10.00
90661	Influenza virus vaccine, trivalent (cclIV3), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use	Flucelvax	90471/90472	\$10.00
90662	Influenza virus vaccine (IIV), split virus, preservative free, enhanced immunogenicity via increased antigen content, 65 yrs and older, for IM use	Fluzone	90471, 90472	\$10.00
90670	Pneumococcal Vaccine 13 Val IM	Prevnar 13	90471, 90472	\$10.00
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use (Code Price is per dose = 0.5 mL)	Vaxneuvance	90471, 90472	\$10.00
90673	Influenza virus vaccine, trivalent (RIV3), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use	Flublox	90471/90472	\$10.00
90675	Rabies vaccine, for intramuscular use (Code price is per 1 mL)	Rabavert	90460, 90461	\$10.00
90675	Rabies vaccine, for intramuscular use (Code price is per 1 mL)	Rabavert	90471, 90472	\$10.00
90677	Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use (Code Price is per dose = 0.5 mL)	Prenar	90471, 90472	\$10.00
90678	Respiratory syncytial virus vaccine, preF, subunit, bivalent, for intramuscular use (Code Price is per dose = 0.5 mL)	ABRYSVO	90471, 90472	\$10.00
90679	Respiratory syncytial virus vaccine, preF, recombinant, subunit, adjuvanted, for intramuscular use (Code Price is per dose = 0.5 mL)	AREXVY	90471, 90472	\$10.00
90683	Respiratory syncytial virus vaccine, mRNA lipid nanoparticles, for intramuscular use (Code price is per 0.5 mL dose)	MRESVIA	90471, 90472	\$10.00
90684	Pneumococcal conjugate vaccine, 21 valent (PCV21), for intramuscular use (Code price is per 0.5 mL dose)	Capvaxix	90471	\$10.00
90707	Measles, Mumps and Rubella Virus Vac., Live	M-M-R II Vaccine w/ Diluent	90471, 90472	\$10.00

Revised: April 1, 2025

Effective with date of service October 1, 2023, DCH will reimburse the administration of vaccines for members 21 years and older. The administration codes approved for vaccines are provided in Column D.

CPT	CPT Name, Description, Dose	Vaccine Name	Administration codes	Max Allowed per Administration
90713	Poliovirus Vaccine, inactivated (IPV) for SQ use	I POL	90471, 90472	\$10.00
90714	Tetanus and Diphtheria Toxoids (Td) absorbed, preservative free, for use in 7 years or older	Td	90471, 90472	\$10.00
90715	Tetanus, Diphtheria Toxoids and Acellular Pertussis Vaccine (Tdap), for use in individuals 7 years or older, for IM use	Tdap	90471, 90472	\$10.00
90716	Varicella Virus Vaccine, Live, for s-q use	Varivax	90471, 90472	\$10.00
90732	Pneumococcal Vaccine, 23- Valent	Pneumovax 23	90471, 90472	\$10.00
90734	Meningococcal Conjugate Vaccine, Serogroups A, C, Y, and W-135 (tetavalent) for IM use	Menactra	90471, 90472	\$10.00
90739	Hepatitis B vaccine (HepB), adult dosage, 2 dose schedule, for intramuscular use (Code Price is per 0.5 mL = 1 dose)	Heplisav-B	90471, 90472	\$10.00
90740	Hepatitis B vaccine (HepB), dialysis or immunosuppressed patient dosage, 3-dose schedule, for intramuscular use (Code price is per dose = 40mcg)	Recombivax HB	90471, 90472	\$10.00
90746	Hepatitis B Vaccine, adult dosage, for intramuscular use 20mcg	Recombivax HB	90471, 90472	\$10.00
90747	Hepatitis B Vaccine, dialysis or immunosuppressed patient dose (4 dose schedule), for intramuscular use 40mcg	Engerix-B 40mcg/1ml	90471, 90472	\$10.00
90750	Zoster (shingles) vaccine, (HZV), recombinant, subunit, adjuvanted, for intramuscular injection	Shingrix	90471, 90472	\$10.00
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	Prehevbrio	90471, 90472	\$10.00