

Bulletin: MSA 10-02

Distribution: Practitioners, Federally Qualified Health Centers, Hospitals, Local Health Departments, Rural Health Clinics, Tribal Health Centers, Medical Clinics and Medicaid Health Plans

Issued: January 21, 2010

Subject: Human Papillomavirus Vaccine (HPV) Coverage Update

Effective: As Indicated

Programs Affected: Adult Benefits Waiver (ABW), Maternity Outpatient Medical Services (MOMS) and Medicaid

The purpose of this bulletin is to notify providers of the activation of an HPV immunization code and extended coverage for an existing HPV immunization code that will be implemented by the Michigan Department of Community Health (MDCH).

Activation of an Existing Current Procedural Terminology (CPT) Procedure Code

Immunization code 90650 (Cervarix HPV2) will be activated effective for dates of service on or after January 1, 2010, for use in adult females ages 19 through 25.

Extension of Coverage for an Existing CPT Procedure Code

New coverage effective for dates of service on or after January 1, 2010, is extended for immunization code 90649 (Gardasil HPV4) for adult males ages 19 through 26. Coverage for adult females ages 19 through 26 remains unchanged.

Vaccines for Children (VFC) Program

The VFC Program covers HPV2 for females ages 10 through 18 and HPV4 for both females and males ages 9 through 18.

Wrap Around Codes

MDCH will cover these CPT codes differently than Medicare under its Outpatient Prospective Payment System (OPPS).

Refer to your CPT code book and references and the Centers for Medicaid and Medicare Services (CMS) website (www.cms.hhs.gov) for full descriptions of the codes. Information regarding the fee screens of these codes is located in the appropriate database and under the MDCH OPPS Wrap Around List posted on the MDCH website at www.michigan.gov/medicaidproviders >> Billing and Reimbursement >> Provider Specific Information >> Outpatient.

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments in writing to:

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Medical Services Administration
P.O. Box 30479
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Or
E-mail: patrickfaganc@michigan.gov

If responding by e-mail, please include "HPV Coverage Update" in the subject line.

Manual Maintenance

Retain this bulletin until applicable information has been incorporated into the Michigan Medicaid Provider Manual. Providers should refer to the MDCH website at www.michigan.gov/medicaidproviders >> Billing and Reimbursement >> Provider Specific Information for additional code information.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

APPROVED



Stephen Fitton, Director
Medical Services Administration