

# 2017-2018 PROPER CODING of Sanofi Pasteur Products

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Updated for 2017-2018 Influenza Vaccines

Visit the Reimbursement Page on [VaccineShoppe.com](http://VaccineShoppe.com)<sup>®</sup>  
for additional coding and billing resources for Sanofi Pasteur products.

Do you have questions on coverage and 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 provided in this resource is for informational purposes only. Every reasonable effort has been made to verify the accuracy of the information; however, this resource 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.

Product	ACIP <sup>a</sup> Acronym	Presentation	National Drug Code (NDC) See the last page of this guide for more information on NDC billing.		CPT <sup>®b</sup> Code	Vaccine Administration Code		ICD-10 <sup>c</sup> Code
			When the Payer Requires the Outer Carton NDC	When the Payer Requires the Unit-of-Use NDC (Vial or Syringe)		Patient is 18 years of age or younger and qualified counseling occurs	Patient is 19 years of age or older (regardless of qualified counseling) or patient is 18 years of age or younger and qualified counseling does not occur	
<b>ActHIB<sup>®</sup></b> Haemophilus b Conjugate Vaccine (Tetanus Toxoid Conjugate)	Hib	5 x 1-dose vials	N449281054503 UN1	N449281054758 UN1 (Powder) N449281054658 UN1 (Diluent)	90648	90460 - 1 unit	90471 or 90472	Z23
<b>Adacel<sup>®</sup></b> Tetanus Toxoid, Re- duced Diphtheria Toxoid and Acellular Pertussis Vaccine Adsorbed	Tdap	10 x 1-dose vials	N449281040010 ML0.5	N449281040058 ML0.5	90715	90460 - 1 unit AND 90461 - 2 units	90471 or 90472	Z23 <sup>d</sup>
	Tdap	5 x 1-dose syringes	N449281040015 ML0.5	N449281040088 ML0.5	90715	90460 - 1 unit AND 90461 - 2 units	90471 or 90472	Z23 <sup>d</sup>
<b>DAPTACEL<sup>®</sup></b> Diphtheria and Tetanus Toxoids and Acellular Pertussis Vaccine Adsorbed	DTaP	10 x 1-dose vials	N449281028610 ML0.5	N449281028658 ML0.5	90700	90460 - 1 unit AND 90461 - 2 units	90471 or 90472	Z23
<b>Diphtheria and Tetanus Toxoids Adsorbed</b>	DT	10 x 1-dose vials	N449281022510 ML0.5	N449281022558 ML0.5	90702	90460 - 1 unit AND 90461 - 1 unit	90471 or 90472	Z23 <sup>d</sup>
<b>Fluzone<sup>®</sup> High-Dose Influenza Vaccine</b> 2017-2018 Formulation	IIV	10 x 1-dose syringes	N449281040165 ML0.5	N449281040188 ML0.5	90662	N/A due to age indication	90471 or 90472 or G0008 for Medicare <sup>e</sup>	Z23
<b>Fluzone Intradermal Quadrivalent Vaccine</b> 2017-2018 Formulation	IIV4	10 x 1-dose microinjection systems	N449281071240 ML0.1	N449281071248 ML0.1	90630	90460 - 1 unit or G0008 for Medicare <sup>e</sup>	90471 or 90472 or G0008 for Medicare <sup>e</sup>	Z23
<b>Fluzone Quadrivalent Vaccine</b> 2017-2018 Formulation	IIV4	0.25-mL dose taken from a 5-mL multidose vial	N449281062715 ML0.25	N449281062778 ML0.25	90687	90460 - 1 unit or G0008 for Medicare <sup>e</sup>	90471 or 90472 or G0008 for Medicare <sup>e</sup>	Z23
	IIV4	0.5-mL dose taken from a 5-mL multidose vial	N449281062715 ML0.5	N449281062778 ML0.5	90688	90460 - 1 unit or G0008 for Medicare <sup>e</sup>	90471 or 90472 or G0008 for Medicare <sup>e</sup>	Z23
<b>Fluzone Quadrivalent Vaccine</b> Contains No Preservative 2017-2018 Formulation	IIV4	10 x 1-dose syringes (0.5 mL)	N449281041750 ML0.5	N449281041788 ML0.5	90686	90460 - 1 unit or G0008 for Medicare <sup>e</sup>	90471 or 90472 or G0008 for Medicare <sup>e</sup>	Z23
	IIV4	10 x 1-dose vials (0.5 mL)	N449281041710 ML0.5	N449281041758 ML0.5	90686	90460 - 1 unit or G0008 for Medicare <sup>e</sup>	90471 or 90472 or G0008 for Medicare <sup>e</sup>	Z23
<b>Fluzone Quadrivalent Vaccine Pediatric Dose</b> Contains No Preservative 2017-2018 Formulation	IIV4	10 x 1-dose syringes (0.25 mL)	N449281051725 ML0.25	N449281051700 ML0.25	90685	90460 - 1 unit or G0008 for Medicare <sup>e</sup>	90471 or 90472 or G0008 for Medicare <sup>e</sup>	Z23
<b>Imogam<sup>®</sup> Rabies-HT</b> Rabies Immune Globulin (Human) USP, Heat Treated	Rabies	2-mL vial	N449281019020 MLX.X <sup>f</sup> (Based on patient weight)	N449281019058 MLX.X <sup>f</sup> (Based on patient weight)	90376 <sup>f</sup>	96372 (if more than 1 needle is needed to administer the dose, bill a unit of the administration CPT code 96372 for each needle used)		Z20.3
<b>IMOVAX<sup>®</sup> RABIES</b> Rabies Vaccine	Rabies	1-mL/1-dose vial	N449281025051 UN1	N449281024858 UN1 (Powder) N449281024901 UN1 (Diluent)	90675	90460 - 1 unit	90471 or 90472	Z23 <sup>d</sup>
<b>IPOL<sup>®</sup></b> Poliovirus Vaccine Inactivated	IPV	10-dose vial	N449281086010 ML0.5	N449281086078 ML0.5	90713	90460 - 1 unit	90471 or 90472	Z23

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			When the Payer Requires the Outer Carton NDC	When the Payer Requires the Unit-of-Use NDC (Vial or Syringe)		Patient is 18 years of age or younger and qualified counseling occurs	Patient is 19 years of age or older (regardless of qualified counseling) or patient is 18 years of age or younger and qualified counseling does not occur	
<b>Menactra®</b> Meningococcal (Groups A, C, Y and W-135) Polysaccharide Diphtheria Toxoid Conjugate Vaccine	MCV4	5 x 1-dose vials	N449281058905 ML0.5	N449281058958 ML0.5	90734	90460 - 1 unit	90471 or 90472	Z23
<b>Menomune®- A/C/Y/W-135</b> Meningococcal Polysaccharide Vaccine, Groups A, C, Y and W-135 Combined	MPSV4	1-dose vial	N449281048901 UN1	N449281048758 UN1	90733	90460 - 1 unit	90471 or 90472	Z23
<b>Pentacel®</b> Diphtheria and Tetanus Toxoids and Acellular Pertussis Adsorbed, Inactivated Poliovirus and Haemophilus b Conjugate (Tetanus Tox- oid Conjugate) Vaccine	DTaP- IPV/HIB	5-dose package	N449281051005 UN1	N449281054515 UN1 (ActHIB vaccine) N449281056005 UN1 (DTaP/IPV)	90698	90460 - 1 unit AND 90461 - 4 units	90471 or 90472	Z23
<b>Quadracel™</b> Diphtheria and Tetanus Toxoids and Acellular Pertussis Adsorbed and Inactivated Poliovirus Vaccine	DTaP- IPV	10 x 1-dose vials	N449281056210 ML0.5	N449281056258 ML0.5	90696	90460 - 1 unit AND 90461 - 3 units	90471 or 90472	Z23
<b>TENIVAC®</b> Tetanus and Diphtheria Toxoids Adsorbed	Td	10 x 1-dose vials	N449281021510 ML0.5	N449281021558 ML0.5	90714	90460 - 1 unit AND 90461 - 1 unit	90471 or 90472	Z23 <sup>d</sup>
	Td	10 x 1-dose syringes	N449281021515 ML0.5	N449281021588 ML0.5	90714	90460 - 1 unit AND 90461 - 1 unit	90471 or 90472	Z23 <sup>d</sup>
<b>TUBERSOL®</b> Tuberculin Purified Protein Derivative (Mantoux)	TB	5 T.U. 1 mL/ 10-test vial	N449281075221 ML0.1	N449281075278 ML0.1	86580	Administration service is included in product code		Z11.1
	TB	5 T.U. 5 mL/ 50-test vial	N449281075222 ML0.1	N449281075298 ML0.1	86580			Z11.1
<b>Typhim Vi®</b> Typhoid Vi Polysaccharide Vaccine	Typh	1-dose syringe	N449281079051 ML0.5	N449281079088 ML0.5	90691	90460 - 1 unit	90471 or 90472	Z23
	Typh	20-dose vial	N449281079020 ML0.5	N449281079038 ML0.5	90691	90460 - 1 unit	90471 or 90472	Z23
<b>YF-VAX®</b> Yellow Fever Vaccine	YF	5-dose vial	N449281091505 UN1 (Vaccine) N449281091210 UN1 (Diluent)	N449281091568 UN1 (Vaccine) N449281091269 UN1 (Diluent)	90717	90460 - 1 unit	90471 or 90472	Z23
	YF	5 x 1-dose vials	N449281091501 UN1 (Vaccine) N449281091205 UN1 (Diluent)	N449281091558 UN1 (Vaccine) N449281091259 UN1 (Diluent)	90717	90460 - 1 unit	90471 or 90472	Z23

**Note that correct coding and billing will depend on the requirements of the third party payer being billed. It is always best that the provider check with the payer they are billing for specific requirements.**

<sup>a</sup> ACIP = Advisory Committee on Immunization Practices.

<sup>b</sup> CPT (Current Procedural Terminology) is a registered trademark of the American Medical Association.

<sup>c</sup> ICD-10 = International Classification of Disease, 10th Edition.

<sup>d</sup> When tetanus or rabies products are given as treatment for wound care, use a primary ICD-10 code which describes the patient's condition.

<sup>e</sup> Medicare requires that you bill code G0008 when billing for the administration of influenza vaccines.

<sup>f</sup> Coding for Imogam Rabies-HT immune globulin is based on the units administered. The recommended dosage is 9 IU per pound of patient weight. Example: For an adult patient weighing 165 lbs, 1485 IU of Imogam Rabies-HT immune globulin will be required (165 lbs x 9 IU of Imogam Rabies-HT immune globulin = 1485 IU). For billing purposes you will bill for 10 units of service under CPT 90376 (1485 IUs /150 IU per unit of service = 9.9 [or 10] units of service). The NDC Units Dispensed would be ML9.9.

## How to Bill When a Payer Requires an NDC on Claims

Some payers require an NDC in addition to the CPT code for the product. In such cases, it is important to format the NDC correctly or the claim will be denied and you will need to resubmit a correction in order to be reconsidered for payment. The grid on the inside of this guide provides the NDCs for all Sanofi Pasteur products.

First confirm with your payer if they require the carton NDC, the unit-of-use (vial or syringe) NDC, or if they will accept either. When an NDC is required, enter the following in line 24A of the claim form:

1. Start with qualifier N4, and with no space, follow immediately with the 11-digit NDC number (no hyphens).

Example: N412345678901

- a. To convert Sanofi Pasteur products to the required 11-digit format, add a leading zero in the middle section of numbers (ex. 49281-545-03 = 49281-0545-03).
2. After a space, follow the NDC with the Unit of Measure and Units Dispensed.
    - a. If the product is reconstituted, use the UN followed by the number of units dispensed with no space.  
Example: UN1 signifies that 1 unit of reconstituted vaccine was administered.
    - b. If the product is supplied in a liquid format, bill Units Dispensed as the actual decimal quantity administered.  
Example: ML0.25 signifies that 0.25 mLs of a product were administered.

## Coding for Immunization Administration: Component-based and Injection-based Coding

An immunization administration code must be reported in addition to the vaccine or toxoid product code in order to be paid for the administration service. There are 2 code sets that may be used when billing for administration, depending on the age of the patient and whether or not counseling was performed.

**If the patient is 18 years of age or under, and counseling was performed by the physician or other qualified health care professional, component-based administration codes are used.** These codes are based on the number of components in the vaccine, and a unit of administration is billed for each component. A component is defined as each disease for which the vaccine is intended to provide protection. These codes apply to all routes of administration, including injectable, intranasal, and oral.

- **90460** – 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** – Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; each additional vaccine or toxoid component administered.
- **Example:** All flu vaccines are intended to offer protection against 1 disease, influenza, and are considered single-component vaccines billed with 1 unit of 90460.

**If the patient is 19 years of age or over, or if they are 18 years of age or under and counseling was not performed, use the code set that is based on number of injections administered at that visit (90471-90472).** Note that because all Sanofi Pasteur vaccines are injectable, only 90471 and 90472 are applicable. (Products administered via oral or intranasal use 90473-90474.)

- **90471** – Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); 1 vaccine (single or combination vaccine/toxoid).
- **90472** – Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid).
- **Example:** Fluzone and Adacel vaccines are administered to a patient who is 25 years of age. Bill 1 unit of 90471 for the Fluzone vaccine and 1 unit of 90472 for the Adacel vaccine.

## Use of Modifier -25

Although vaccines are often administered at preventive-care visits, you can take advantage of the opportunity to administer vaccines at problem-focused, prescription refill, and screening visits, depending on your assessment of the current medical situation. Providers will usually be paid for immunizations administered at preventive and non-preventive visits, but plans which follow Correct Coding Initiative (CCI) edits may require that you use modifier -25 to be paid for the visit.

The modifier -25 is attached to the CPT code for the office visit and signals that it is “separate and significant” from other services provided during the same patient encounter. Code the office visit, attaching an ICD-10 code that best describes the reason for the visit (the condition for which the patient presented or was treated), and modifier -25.

As usual, code for the vaccine products and the immunization administration services using the appropriate CPT codes and the ICD-10 code(s) that identify the reason for vaccinations.

The real key is to make sure that the office visit is paired with an ICD-10 code which describes the reason for the visit and that modifier -25 is attached. Also remember to always bill for immunization administration in addition to the product code, regardless of any other services billed on the claim.