

## Keeping up with routine vaccination during COVID-19: Well-child visits and vaccinations are essential services

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In May 2020, the Centers for Disease Control (CDC) released a [report](#) that showed a drop in routine childhood vaccinations as a result of COVID-19; a result of stay at home orders and concerns about infection during well-child visits. Both the American Academy of Pediatrics and the CDC recommend the continuation of routine childhood vaccinations during the COVID-19 pandemic, noting they are essential services.



To encourage well-visits and vaccinations, here are some extra steps you can take, if you haven't already, to make visits as safe as possible for both patients and staff. They include:

- Scheduling sick visits and well-child visits during different times of the day
- Asking patients to remain outside until it's time for their appointment to reduce the number of people in waiting rooms
- Offering sick visits and well-child visits in different locations

It's important to identify those children who have missed immunizations and well-child visits to schedule these essential in-person appointments. To help, the CDC has published [vaccine catch-up guidance](#) on their website.

## **Important update from The National Committee for Quality Assurance (NCQA)**

In a recent webinar, NCQA stressed the importance of getting childhood immunizations as soon as possible citing the impacts from the possible summer COVID-19 vaccine launch for children. Physicians are being advised that children should not receive any other vaccinations two (2) weeks prior to or two (2) weeks after receiving a COVID-19 vaccine. They reemphasized the significance of delay and suggest that childhood immunizations are administered as soon as needed through proactive scheduling and preplanning.

## **Helpful information for keeping babies and children healthy**

Childhood Immunization Schedule (CIS) HEDIS® measures require that all children are immunized by the age of two:

- Four (4) DTaP (diphtheria, tetanus and acellular pertussis)
- Three (3) IPV (polio)
- One (1) MMR (measles, mumps, rubella)
- Three (3) HiB (H influenza type B)
- Three (3) HepB (hepatitis B)
- One (1) VZV (chicken pox)
- Four (4) PCV (pneumococcal conjugate)
- One (1) HepA (hepatitis A)
- Two (2) or three (3) RV (rotavirus)
- Two (2) Influenza (flu)

Billing codes:

- **MMR:**
  - **CPT:** 90707, 90710
  - **ICD-10-CM:** B05.0-4, B05.81, B05.89, B05.9
- **Mumps ICD-10-CM:** B26.0-3, B26.81-85, B26.89, B26.9
- **Rubella:**
  - **ICD-10-CM:** B06.00-02, B06.09, B06.81-82, B06.89, B06.9
  - **CPT:** 90706
- **Rubella antibody CPT:** 86762
- **Hepatitis A (HepA):**

- **CPT:** 90633
- **ICD-10-CM:** B15.0, B15.9
- **Influenza:**
  - **CPT:** 90655, 90657, 90661-90662, 90673, 90685-90689
  - **HCPCS:** G0008
- **Rotavirus vaccine (RV)** CPT: 90681 (two-dose) and 90680 (three-dose)

Children should be fully immunized by 13 years of age to meet the Immunization for Adolescents (IMA) HEDIS® measure:

- One (1) meningococcal vaccine (MCV) injection between 11 to 13 years of age
- One (1) tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap/Td) between 10 to 13 years of age
- Two (2) or three (3) HPV vaccines between 9 to 13 years of age

Billing codes:

- **Meningococcal** CPT: 90734
- **Tdap** CPT: 90715
- **HPV** CPT: 90649-90651

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

For a complete list of HEDIS® measures, descriptions and coding tips, visit [anthem.com](https://www.anthem.com).

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