

VIRGINIA Provider Communications

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 and Prevention (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)

NCQA stressed the importance of getting childhood immunizations as soon as possible in a recent webinar, citing the impacts from the possible summer COVID-19 vaccine launch for children. Vaccine physicians are being advised that children should not receive any other vaccinations two weeks prior to or two 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 proactively 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 DTaP (diphtheria, tetanus and acellular pertussis)
- Three IPV (polio)
- One MMR (measles, mumps, rubella)
- Three HiB (H influenza type B)
- Three HepB (hepatitis B)
- One VZV (chicken pox)
- Four PCV (pneumococcal conjugate)
- One HepA (hepatitis A)
- Two or Three RV (rotavirus)
- Two 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
- Rubella CPT: 90706
- Rubella antibody CPT: 86762
- Hepatitis A (Hep A) CPT: 90633 ICD-10-CM: B15.0, B15.9
- Influenza CPT: 90655, 90657, 90661, 90662, 90673, 90685, 90686, 90687, 90688, 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:

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

Billing Codes:

- Meningococcal CPT: 90734
- Tdap CPT: 90715
- HPV CPT: 90649, 90650, 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.

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