



December 5, 2022

Web Announcement 2952

Attention All Providers: Procedure Codes Released for Vaccine Counseling Visits for Children under 21 Years of Age

Update to [Web Announcement 2748](#) and [Web Announcement 2909](#): The Centers for Medicare & Medicaid Services (CMS) has released new vaccine counseling procedure codes to adhere to the requirement for states to cover standalone vaccine counseling under the Early and Periodic Screening, Diagnosis & Treatment (EPSDT) benefit.

The provider types listed in Table 2 are advised to begin using the procedure codes listed in Table 1 effective immediately with dates of service on or after May 11, 2022, when a COVID-19 or EPSDT vaccine is not administered, but counseled. Effective December 5, 2022, providers are advised to discontinue using procedure code 99401 (Preventative medicine counseling and/or risk factor reduction intervention(s) provided to an individual, up to 15 minutes) with modifier CR when a COVID-19 vaccine is not administered, but counseled, as advised in [Web Announcement 2748](#) and [Web Announcement 2909](#).

The procedure codes and descriptions of the procedure codes are shown below.

Table 1.

Procedure Code	Description
G0312	Immunization Counseling by a physician or other qualified health care professional when the vaccine(s) is not administered on the same date of service for ages under 21, 5 to 15 mins time
G0313	Immunization Counseling by a physician or other qualified health care professional when the vaccine(s) is not administered on the same date of service for ages under 21, 16 to 30 mins time
G0314	Immunization Counseling by a physician or other qualified health care professional for COVID-19, ages under 21, 16-30 mins time (This code is used for the EPSDT benefit)
G0315	Immunization Counseling by a physician or other qualified health care professional for COVID-19, ages under 21, 5-15 mins time (This code is used for the EPSDT benefit)

The following provider types may bill the procedure codes listed in Table 1:

Table 2.

Provider Type	Provider Type Description
12	Hospital, Outpatient
17 specialty 166	Special Clinics: Family Planning
17 specialty 174	Special Clinics: Public Health Clinic
17 specialty 179	Special Clinics: School Based Health Centers (SBHC)
17 specialty 180*	Special Clinics: Rural Health Clinic
17 specialty 181*	Special Clinics: Federally Qualified Health Center (FQHC)
17 specialty 182*	Special Clinics: Indian Health Program
17 specialty 195	Special Clinics: Community Health Clinic, State Health Division
17 specialty 198	Special Clinics: Human Immunodeficiency Virus (HIV)
20	Physician, M.D., Osteopath, D.O.

24	Advanced Practice Registered Nurse (APRN)
32 specialty 249	Community Paramedicine
47*	Indian Health Services (IHS) and Tribal Clinics
60	School Health Services
74	Nurse Midwife
77	Physician's Assistant

*PT 17 specialties 180, 181 and 182 and PT 47 providers must bill the vaccine administration codes with modifier Q2. The claim will pay according to the established encounter rate and the vaccine administration code will pay at \$0 as the service is included in the encounter reimbursement.

Claims for procedure codes G0312, G0313, G0314 and G0315 with dates of service on or after May 11, 2022, through claims processed prior to December 5, 2022, that suspend with error code 853 (HCPCS – annual update – suspend claims) will be released for adjudication at a later date. Results of the adjudication of the released claims will be reported on a future remittance advice.

When claims are released for adjudication, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.