## SECTION 5: BILLING AND REIMBURSEMENT GUIDELINES

of the Professional Provider Office Manual

## **5.41 MASS IMMUNIZERS**

This is a subsection of Section 5: Billing and Reimbursement Guidelines of the *Professional Provider Office Manual*. If Blue Cross and Blue Shield of Louisiana (Louisiana Blue) makes any procedural changes, in our ongoing efforts to improve our service to you, we will update the information in this subsection and notify our network providers. For complete *Professional Provider Office Manual* information, please refer to the other sections of this manual. Contact information for all manual sections is available in the Manual Reference Section.

For member eligibility, benefits or claims status information, we encourage you to use iLinkBlue (www.lablue.com/ilinkblue), our online self-service provider tool. Additional provider resources are available on our Provider page at www.lablue.com/providers.

This manual is provided for informational purposes only and is an extension of your Professional Provider Agreement. You should always directly verify member benefits prior to performing services. Every effort has been made to print accurate, current information. Errors or omissions, if any, are inadvertent. The Member Contract/Certificate contains information on benefits, limitations and exclusions, and managed care benefit requirements. It also may limit the number of days, visits or dollar amounts to be reimbursed.

As stated in your agreement: This manual is intended to set forth in detail our policies. Louisiana Blue retains the right to add to, delete from and otherwise modify the *Professional Provider Office Manual* as needed. This manual and other information and materials provided are proprietary and confidential and may constitute trade secrets.



## MASS IMMUNIZERS

Mass immunizers are providers who only administer vaccines and immunizations. Louisiana Blue allows the following codes for mass immunizers. Mass immunizers shall indemnify and hold harmless both Louisiana Blue and member(s) for any billed charges for vaccine administration and immunization CPT/HCPCS not listed herein.

90460	90658	90686	91304
90471	90660	90687	91318
90472	90661	90688	91319
90473	90662	90694	91320
90480	90670	90715	91321
90619	90672	90732	91322
90651	90673	90734	G0008
90653	90674	90736	G0009
90656	90682	90750	
90657	90685	90756	

