



Arkansas Department of Human Services

Division of Medical Services

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OFFICIAL NOTICE

DMS-2003-O-11 **DMS-2003-L-11** **DMS-2003-R-16**
DMS-2003-G-6 **DMS-2003-KK-14** **DMS-2003-OO-10**
DMS-2003-II-10 **DMS-2003-Q-9**

TO: **Health Care Provider –Certified Nurse-Midwife; Child Health Services (EPSDT); Federally Qualified Health Center (FQHC); Hospital; Nurse Practitioner; Pharmacy; Physician; Rural Health Clinic and Arkansas Department of Health**

DATE:

SUBJECT: **Medicaid Reimbursement for Flu Vaccines Administered to Recipients Ages 19 and Older**

Effective for dates of service on and after November 24, 2003, Medicaid reimbursement of covered flu vaccines for recipients ages 19 and older will increase from \$6.00 to \$9.75. Reimbursement covers the vaccine and the necessary supplies when administered in the office or the outpatient clinic.

Providers must use the 2003 CPT procedure codes **90658** and **90659** when filing claims for the covered flu vaccines. CPT procedure code **90659** is the only flu vaccine covered in the Pharmacy Program. Use of the 2004 CPT procedure codes will not be implemented by Medicaid until the 2004 CPT conversion.

If you need this material in an alternative format, such as large print, please contact our Americans with Disabilities Act Coordinator at (501) 682-6789 or 1-877-708-8191. Both telephone numbers are voice and TDD.

If you have questions regarding this notice, please contact the EDS Provider Assistance Center at In-State WATS 1-800-457-4454, or locally and Out-of-State at (501) 376-2211.

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Thank you for your participation in the Arkansas Medicaid Program.

Roy Jeffus, Director

Arkansas Medicaid provider manuals (including update transmittals), official notices and remittance advice (RA) messages are available for downloading from the Arkansas Medicaid website: www.medicaid.state.ar.us.