

# DID YOU KNOW – Coding Education Series

## E&M Visits with Immunization Administration



E&M visits on the same day as immunization administration can be rejected; the key to overcoming this denial is to add a Modifier 25 to the appropriate E&M code.

### **Key Factors:**

- If the E&M service is unrelated to the same-day procedure, you can append the **Modifier 25** and report the services separately; OR
- The E&M service may be reported separately if it occurs due to exacerbation of an existing condition, or other change in patient status.
  - If the patient arrives for a prescheduled immunization, by contrast, you should not report a separate E/M service unless the patient has a new, unrelated complaint or has experienced a worsening of symptoms that prompts a new history, exam, and medical decision-making (MDM) process (which could include additional workup/treatment/testing or therapy).

### **Documentation Factors:**

- To support a separate service, the provider should document a supportive history, exam and MDM.
- Both the E/M service and the same-day immunization administration must be linked to a diagnosis substantiated in the documentation.
  - Diagnosis codes for all vaccines and immunizations are reported with code **Z23- Encounter for Immunization.**

### **Immunization Administration Codes:**

- For administration without counseling, report 90471-90474 (patients over 18 years old)
  - These codes apply to patients of any age, and they specify the route of administration.
  - Report 90471-90472 for percutaneous, intradermal, subcutaneous, or intramuscular injections; or
    - 90473-90474 for administration by intranasal or oral route.