



Automated Medical Payments

Medicaid Bulletin Colorado Title XIX

Fiscal Agent



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Medicaid Provider Services

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Mailing Addresses

Claims & PARs
P.O. Box 30
Denver, CO 80201-0030

Correspondence, Inquiries & Adjustments
P.O. Box 90
Denver, CO 80201-0090

Provider enrollment, Provider information,
Changes, Signature authorization,
and Claim requisitions
P.O. Box 1100
Denver, CO 80201-1100

Medicaid Fiscal Agent Information on the Internet

coloradomedicaid.consultec-inc.com

Medicaid bulletins contain important policy and billing information and should be shared promptly with billing staff.

Bulletins supplement information in the Medicaid Provider Manual and should be retained with the provider manual for reference. Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.

Please direct questions about bulletins and billing information to Medicaid Provider Services.

Distribution: Practitioners, Public
Health Clinics, & Outpatient Hospitals

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Reference: B0100117

Urgent - Read Immediately!

Synagis vaccine

The FDA-approved Synagis (Palivizumab) vaccine is used to prevent serious lower respiratory tract disease caused by Respiratory Syncytial Virus (RSV) in pediatric patients at high risk for RSV disease. Synagis is administered by intramuscular injections, at 15 mg per kg of body weight, once a month during expected periods of RSV prevalence in the community.

Synagis is a benefit of the Medicaid Program, and does not require Prior Authorization under the following circumstances:

- The client is two years of age or younger at the time of first injection, with a chronic lung or respiratory condition, and was either full term or premature
- The client was born prematurely, less than 28 weeks, and is under the age of 12 months at time of first injection, with or without a chronic lung or respiratory condition (e.g., ICD9 765.0)
- The client was born prematurely, 29-35 weeks, and is under the age of 6 months at time of first injection, with or without a chronic lung or respiratory condition (e.g., ICD9 765.1)

Prior authorization is required for clients who do not meet the above criteria but who are at risk for RSV. The client's risk is increased due to one or more of the following conditions, as recommended by the American Academy of Pediatrics:

- Body Mass <5kg
- Congenital Heart Disease
- Low Socioeconomic Status
- T-cell immunodeficiency
- Passive smoke exposure
- Birth within 6 months before onset of RSV season
- Day care attendance
- Two or more individuals sharing a bedroom
- School age siblings
- Multiple births

Providers must use HCPCS code **90378** to bill Synagis vaccine.

90378	Respiratory Syncytial virus immune globulin (RSV-IGIM), for intramuscular use, 50mg each
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Bill one unit per 50mg vial; limit 4 units per day. Outpatient hospitals should bill with the appropriate revenue code. Providers must discontinue using the local code X1565 (published in bulletin B9802323) for this service. Procedure code X1565 is no longer valid for billing the Colorado Medicaid program.

If child does not meet the profile described above, please contact the fiscal agent's prior authorization line at:

303-534-0279 or 1-800-237-7647
for PAR information.