IMMUNIZATION BILLING WORKSHEET*

Code	Description	Diagnosis	VFC	Dose Given					
90371	Hepatitis B Immune Globulin	V07.2		1	2	3	4	5	6
90375	Rabies Immune Globulin	V07.2		1	2	3	4	5	6
90376	Rabies Immune Globulin – Heat treated (RIG-HT)	V07.2		1	2	3	4	5	6
90384	Rho (D) Immune Globulin Full Dose	V07.2		1	2	3	4	5	6
90385	Rho (D) Immune Globulin Mini Dose	V07.2		1	2	3	4	5	6
90389	Tetanus Immune Globulin	V07.2		1	2	3	4	5	6
90396	Varicella-Zoster Immune Globulin	V07.2		1	2	3	4	5	6
90585	BCG	V03.2		1	2	3	4	5	6
90632	Hepatitis A Vaccine – Age 18 & up	V05.8		1	2	3	4	5	6
90633	Hepatitis A Vaccine – Age 2 & up	V05.8		1	2	3	4	5	6
90645	Hib – 4 dose (Brand name – Hib Titer)	V03.8 or V05.8	VFC 2 mo – 5 yrs	1	2	3	4	5	6
90646	Hib – booster	V03.8 or V05.8		1	2	3	4	5	6
90647	Hib – 3 dose (Brand name – PedVax)	V03.8 or V05.8	VFC 2 mo – 5 yrs	1	2	3	4	5	6
90648	Hib – 4 dose (Brand name – ActHib)	V03.8 or V05.8	VFC 2 mo – 5 yrs	1	2	3	4	5	6
90657	Influenza (6-35 months of age)	V04.8	VFC 6 mo – 35 mo	1	2	3	4	5	6
90658	Influenza (3 years and above)	V04.8	VFC 3 yrs – 18 yrs	1	2	3	4	5	6
90669	Pneumococcal PCV7 (2-59 months)	V03.82 or V05.8	VFC 2 mo – 59 mo	1	2	3	4	5	6
90675	Rabies – IM	V04.5		1	2	3	4	5	6
90676	Rabies Vaccine – Intradermal use	V07.2		1	2	3	4	5	6
90700	DTaP	V06.8	VFC 2 mo – 7 yrs	1	2	3	4	5	6
90702	DT	V06.8	VFC 2 mo – 6 yrs	1	2	3	4	5	6
90703	Tetanus Toxoid	V03.7		1	2	3	4	5	6
90704	Mumps	V04.6		1	2	3	4	5	6
90705	Measles	V04.2		1	2	3	4	5	6
90706	Rubella	V04.3		1	2	3	4	5	6
90707	MMR	V06.4	VFC 12 mo – 18 yrs	1	2	3	4	5	6
90708	MR	V06.8		1	2	3	4	5	6
90709	Rubella and Mumps	V06.8							
90713	IPV (Injectable Polio Vaccine)	V04.0	VFC 2 mo – 18 yrs	1	2	3	4	5	6
90716	Varicella	V05.4	VFC 12 mo – 18 yrs	1	2	3	4	5	6
90718	Td	V06.5	VFC 7 yrs – 18 yrs	1	2	3	4	5	6
90719	Diptheria Toxoid	V03.5							
90721	DTaP/HIB	V06.8		1	2	3	4	5	6
90725	Cholera	V03.0		1	2	3	4	5	6
90732	Pneumococcal PPV23 (High Risk Only)	V03.82 or V05.8	VFC 2 yrs – 18 yrs						
90733	Meningococcal	V03.89		1	2	3	4	5	6
90744	Hepatitis B Vaccine – Pediatric/adol	V05.8	VFC 0 through 18 yrs	1	2	3	4	5	6
90746	Hepatitis B Vaccine – Age 19 and above	V05.8		1	2	3	4	5	6
90747	Hepatitis B Vaccine - Dialysis Pt./immunosuppressed	585		1	2	3	4	5	6
90281	Immune Globulin	V07.2		1	2	3	4	5	6

*** This list is subject to change**.