

October 4, 2022

**PROVIDER ALERT: UPDATES TO THE PROFESSIONAL SERVICES BILLING CODES AND REIMBURSEMENT RATES FOR MONKEYPOX**

The billing and reimbursement rates for laboratory testing and administration of Monkeypox vaccinations are based on published guidance by CMS. Unless otherwise indicated, CMS only priced the administration of these services, as the product is being provided for free initially.

The chart below provides the relevant and most current billing and reimbursement guidance for laboratory testing related to the Monkeypox virus covered by the Department of Health Care Finance (DHCF).

CPT	DESCRIPTION	EFFECTIVE DATE	MAX UNITS	PA REQUIRED	RATES
87593	ORTHOPOXVIRUS AMP PRB EACH	7/26/2022	1	No	\$51.31

For the vaccine administration codes, providers should bill the regular vaccine administration codes (90471, 90472). CMS anticipates that providers will not incur a cost for the Monkeypox vaccine initially. CMS will update the payment allowance for the products at a later date. Providers should not bill for the product if they received it for free. As a result, the product codes are not covered at this time in the DHCF Medicaid professional fee schedule. When products transition to the private market for purchase by providers, coverage and rates will apply.

CPT	DESCRIPTION	COVERAGE/RATES
90611	SMALLPOX & MONKEYPOX VAC 0.5ML	Not Covered
90622	VACCINA VRS VAC 0.3ML PERQ	Not Covered

For questions concerning this Provider Alert, please contact the MFC-DC Provider Relations department, Monday through Friday, 8 a.m. to 5:30 p.m.

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