

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT2025176 DECEMBER 11, 2025

IHCP adds coverage of meningococcal pentavalent vaccine Penmenvy (90624)

Effective immediately, retroactive for dates of service (DOS) on or after **April 1, 2025**, the Indiana Health Coverage Programs (IHCP) is adding coverage for the Penmenvy vaccine for members age 10 through 23 years old.

The Current Procedural Terminology (CPT^{®1}) code for the Penmenvy vaccine is listed in [Table 1](#). Prior authorization (PA) and National Drug Code (NDC) are not required. Coverage applies to services delivered under the fee-for-service (FFS) and managed care delivery systems.



For institutional outpatient claims, separate reimbursement is available for CPT code 90624 when billed in conjunction with revenue code 636 – *Drugs requiring detailed coding*.

Additionally, because Penmenvy is included in the Vaccines for Children (VFC) program, providers are instructed to bill with the appropriate SL modifier for the administration of this vaccine for VFC-eligible members.

The FFS claim-processing system has been updated. FFS professional and institutional outpatient claims for this service submitted with DOS on or after Jan. 12, 2026, will be mass adjusted or reprocessed. Providers should see adjusted or reprocessed claims on remittance advices (RAs) beginning Jan. 14, 2026, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check-related) or 80 (reprocessed denied claims).

Alternatively, if providers want to submit claims retroactively for this procedure code (along with the applicable revenue code for the outpatient claims), they can do so within 90 days of this publication for managed care claims, or 180 days of this publication date for FFS claims, to satisfy timely filing requirements. Claims submitted beyond the standard filing limit must include a copy of this bulletin (first page only) as an attachment.

These updates will be reflected in the next regular update to the Professional Fee Schedule and Outpatient Fee Schedule, accessible from the [IHCP Fee Schedules](#) webpage at in.gov/medicaid/providers.

The code will also be added to *Revenue Codes with Special Procedure Code Linkages*, accessible from the [Code Sets](#) webpage at in.gov/medicaid/providers.

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Table 1 – Newly covered procedure code for Penmenvy vaccine, effective retroactively for DOS on or after April 1, 2025

Procedure code	Code description	Program coverage	PA required	NDC required	Special billing information
90624	Meningococcal pentavalent vaccine, Men-B-4C recombinant proteins and outer membrane vesicle and conjugated Men A, C, W, Y-diphtheria toxoid carrier, for intramuscular use	Covered	No	No	Max fee: \$262.50 Covered for members age 10 through 23 years old Reimburses at \$0 for members age 10 through 18 years, due to availability through the VFC, effective April 1, 2025. For VFC billing guidance, see <i>IHCP Bulletin</i> BT201960 . Linked to revenue code 636

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