

**KMAP DME BULLETIN 12117C**

## **Polio Vaccine Coverage for Adults**

Effective with the processing date of November 29, 2012, and retroactive to dates of service on and after January 1, 2012, code 90713 will be covered for beneficiaries 19 years of age and older. Providers should resubmit denied claims for reprocessing. Providers must bill the appropriate administration code in addition to the vaccine code for each dose administered.

**KMAP**

[Kansas Medical Assistance Program](#)

- [Bulletins](#)
- [Manuals](#)
- [Forms](#)

Customer Service

- 1-800-933-6593 (in-state)
- 785-274-5990  
8:00 a.m. - 5:00 p.m.  
Monday - Friday

For the changes resulting from this provider bulletin, view the *Durable Medical Equipment Provider Manual*, Section 7020, page 7-3.