

## CHAMPVA POLICY MANUAL

CHAPTER: 2  
SECTION: 23.3  
TITLE: IMMUNIZATION INJECTIONS

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AUTHORITY: 38 CFR 17.270(a) and 17.272(a)(31)

RELATED AUTHORITY: 32 CFR 199.4(g)(37)

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### I. EFFECTIVE DATE

October 12, 1984

### II. PROCEDURE CODE(S)

90378-90379, 90476-90477, 90632-90660, 90669, 90700-90716, 90718-90723, 90732, and 90740-90749

### III. DESCRIPTION

The process of rendering a subject immune, most frequently accomplished by immunization with either live or inactivated viral agents or bacterial antigens (active immunization) or by administration of performed antibody after an exposure to a disease has occurred (passive immunization).

### IV. POLICY

A. Administration of the appropriate vaccines for the following diseases: hepatitis A, hepatitis B, diphtheria, tetanus, pertussis, haemophilus influenza type b, inactivated polio, measles, mumps, rubella, varicella, pneumococcal, and Influenza found at Addenda 1 and 2 of this section are in accordance with current Centers for Disease Control (CDC) recommendations.

B. Well-child immunizations are covered for beneficiaries from birth to age six (see [Chapter 2, Section 12.1](#), *Well-Child Care*).

### V. POLICY CONSIDERATIONS

A. The CDC provides immunization recommendations only. **The physician will determine the appropriateness of immunizations for the patient based on CDC recommendations and other specific factors. Catch-up immunizations should be done during any physician visit when feasible.**

B. Refer to CDC's home page (<http://www.cdc.gov/>) for current schedule of recommended vaccines.

**\*END OF POLICY\***