



# PAYER BULLETIN: PENBRAYA™

WASHINGTON VACCINE ASSOCIATION

**April 12, 2024**

**Dear WVA Payer:**

Effective **June 1, 2024**, the **PENBRAYA™** meningococcal groups A, B C, W, and Y vaccine for persons under the age of 19 will be added to the WVA's [Vaccine Assessment Grid](#). Providers participating in the WA Department of Health's Childhood Vaccine Program will be instructed to bill this code effective **June 1, 2024**.

**As a payer, you are required to update your adjudication system to include the following CPT code, two NDC codes, and WVA assessment amount to accurately reimburse the WVA for PENBRAYA™.**

**Update your fee schedules!**

NAME	CPT CODE	NDC CODE / PACKAGING	WVA ASSESSMENT AMOUNT
Penbraya™	90623	00069-0600-01 (1 Pack - Single Dose Vial)	\$207.67
		00069-0600-05 (5 Pack – Single Dose Vial)	

For more information regarding the DBA process, please see the [WVA Health Insurer and TPA Compliance Guide](#), [wavaccine.org](http://wavaccine.org), or [compliance@wavaccine.org](mailto:compliance@wavaccine.org).

Best regards,



Julia Walter Zell, MA, Esq., Executive Director