



Medicare Fee-for-Services (MFFS) Billing for the Administration of the Influenza A (H1N1) Virus Vaccine – JA0920

Note: MLN Matters® article SE0920 was revised on September 10, 2009. The title has been changed and there were references to two MLN Matters® articles (MM6626 and MM6617) added, which may be found in the Reference Materials section below. All other information remains the same.

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Contractors Affected

- Part A/B Medicare Administrative Contractors (A/B MACs)
- Medicare Carriers
- Fiscal intermediaries (FIs)

Provider Types Affected Physicians, providers, and suppliers administering the H1N1 vaccine to Medicare patients are affected by special edition (SE) article SE0920.



SE0920 explains Medicare coverage and reimbursement rules for the H1N1 vaccine.

Provider Needs to Know...

Healthcare Common Procedure Coding System (HCPCS) Codes for H1N1

- The Centers for Medicare & Medicaid Services (CMS) has created two new HCPCS codes for H1N1:
 - G9141—Influenza A (H1N1) immunization administration (includes the physician

counseling the patient/family), and

- G9142---Influenza A (H1N1) vaccine, any route of administration.
- These codes are effective for dates of service on and after September 1, 2009.

Payment for G9141

- Payment for G9141 (Influenza A (H1N1) immunization administration will be paid at the same rate established for G0008 (Administration of influenza virus vaccine).
- H1N1 administration claims will be processed using the diagnosis V04.81 (influenza) and revenue code 771, depending on the provider type.
- The same billing rules apply to the H1N1 virus vaccine as the seasonal influenza virus vaccine with one exception. **Since the H1N1 vaccine will be made available at no cost to providers, Medicare will not pay providers for the vaccine.**

G9142 HCPCS Code

- Providers do not need to place the G9142 (H1N1 vaccine code) on the claim.
- However, if the G9142 appears on the claim, only the claim line will be denied.

Office Visits

- Payment will not be made to providers for office visits when the only purpose of the visit is to administer either the seasonal and/or the H1N1 vaccine(s).

Mass Immunizer Roster and Centralized Billers

- Providers who normally participate in the Medicare Part B program as mass immunizer roster billers and mass immunizer centralized billers may submit H1N1 administration claims using the roster billing format.
- The same information must be captured for the H1N1 roster claims as it is for the seasonal influenza roster claims.
- The roster must contain at a minimum the following information:
 - Provider name and number;
 - Date of service;
 - Control number for Medicare contractor;
 - Patient's health insurance claim number;
 - Patient's name;
 - Patient's address;
 - Date of birth;
 - Patient's sex; and
 - Beneficiary's signature or stamped "signature on file".

Reimbursement to Beneficiaries

- Medicare will reimburse Medicare beneficiaries, up to the fee schedule amount, for the administration of H1N1 influenza vaccine when furnished by a provider not enrolled in Medicare.
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- Beneficiaries must submit a Form CMS-1490S to their local Medicare contractor.
 - Medicare will reimburse beneficiaries for the administration of the H1N1 vaccine, but not the H1N1 vaccine itself because the H1N1 vaccine will be furnished at no cost to all providers.
 - Medicare beneficiaries may not be charged any amount for the H1N1 vaccine itself.

Timing and Frequency of Vaccinations

- Medicare will pay for seasonal flu vaccinations even if the vaccinations are rendered earlier in the year than normal. Such preparations are critical for the upcoming flu season, especially in planning for the influenza A [H1N1] vaccine.
 - Though Medicare typically pays for one vaccination per year, if more than one vaccination per year is medically necessary (i.e. the number of doses of a vaccine and/or type of influenza vaccine), then Medicare will pay for those additional vaccinations.
 - **The Medicare claims processing contractors have been notified to expect and prepare for earlier-than-usual seasonal flu claims and there should not be a problem in getting those claims paid.**
 - Furthermore, in the event that it is necessary for Medicare beneficiaries to receive both a seasonal flu vaccination and influenza A [H1N1] vaccination, then Medicare will pay for both.
 - However, as noted earlier, if either vaccine is provided free of charge to the health care provider, then Medicare will only pay for the vaccine's administration (not for the vaccine itself).
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Background

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- Medicare Part B provides coverage for the seasonal influenza virus vaccine and its administration as part of its preventive immunization services.
 - **The Part B deductible and coinsurance do not apply for the seasonal influenza virus vaccine and its administration.**
 - Typically, the seasonal influenza vaccine is administered once a year in the fall or winter.
 - Additional influenza vaccines (i.e., the number of doses of a vaccine and/or the type of influenza vaccine) are covered by Medicare when deemed to be a medical necessity.
 - The Influenza A (H1N1) virus has been identified as an additional type of influenza.
 - The H1N1 virus vaccine will be provided to Medicare Part B beneficiaries as an additional preventive immunization service.
 - **Medicare will pay for the administration of the H1N1 vaccine.**
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Operational Impact	N/A
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The related MLN Matters® article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0920.pdf> on the CMS website.

Reference
Materials

Providers may also want to review the following MLN Matters® articles:

- MM6626 (October 2009 Update of the Hospital Outpatient Prospective Payment System (OPPS)) at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6626.pdf>; and
 - MM6617 (October Update to the 2009 Medicare Physician Fee Schedule Database (MPFSDB)) at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6617.pdf> on the CMS website.
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