



Related MLN Matters Article #: 4240

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Related CR #: 4240

### *Guidelines for Payment of Vaccine (Pneumococcal Pneumonia Virus, Influenza Virus, and Hepatitis B Virus) Administration*

#### Key Words

MM4240, CR4240, R890CP, Guidelines, Payment, Vaccine, Pneumonia, Influenza, Hepatitis, Virus, G0010, 90471, 90472, MM5037, CR5037, R921CP

#### Provider Types Affected

Hospitals, Home Health Agencies (HHAs), Skilled Nursing Facilities (SNFs), Critical Access Hospitals (CAHs), provider-based Renal Dialysis Facilities (RDFs), Comprehensive Outpatient Rehabilitation Facilities (CORFs), and freestanding Renal Dialysis Facilities (RDFs) that bill Medicare Carriers and Fiscal Intermediaries (FIs) for vaccine administration

#### Key Points

- The effective date of the instruction is July 1, 2006.
- The implementation date for the instruction is July 3, 2006.
- The Centers for Medicare & Medicaid Services (CMS) revised Change Request (CR) 4240 to show that payment for the administration of these vaccines is based on the Outpatient Prospective Payment System (OPPS), not reasonable cost.
- CR4240 clarifies and provides guidelines for the payment of vaccine administration in various institutional provider settings.
- In addition, CMS is updating payment for vaccines (Pneumococcal Pneumonia Virus, Influenza Virus, and Hepatitis B Virus) provided in CORFs and RDFs.
- For claims with dates of service prior to January 1, 2006, OPPS and non-OPPS hospitals report G0010 for Hepatitis B vaccine administration.
- For claims with dates of service January 1, 2006, and later, OPPS hospitals report 90471 or 90472 for Hepatitis B vaccine administration as appropriate, in place of G0010.

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- Section 10.2.2.1 of the *Medicare Claims Processing Manual* (FI Payment for Pneumococcal Pneumonia Virus, Influenza Virus, and Hepatitis B Virus Vaccines and Their Administration) has been updated, and payment for the vaccines is included in MLN Matters article MM4240 in the tables on pages 2 thru 4.

### CR5037 Changes

- MLN article MM4240 was revised on September 5, 2007, to refer providers to CR5037 (<http://www.cms.hhs.gov/Transmittals/downloads/R921CP.pdf>) on the CMS website.
- Effective October 1, 2006, CR5037 allows the reporting of diagnosis code V06.6 in place of V03.82 and V04.81 when reporting Influenza Virus and/or PPV vaccines when the purpose of the visit was to receive both vaccines.
- In addition, CR5037 requires Medicare carriers/FIs to accept claims containing Current Procedural Terminology (CPT) code 90660 for the Influenza Virus vaccine (live for intranasal usage).

### Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM4240.pdf> on the CMS website.

The official instructions (CR4240) issued regarding this change can be found at

<http://www.cms.hhs.gov/Transmittals/downloads/R890CP.pdf> on the CMS website.

MLN Matters article MM5037 may be viewed at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/mm5037.pdf> on the CMS website.

CR5037 may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R921CP.pdf> on the CMS website.

If providers/suppliers have questions, they may contact their carrier/intermediary at their toll-free number, which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.