



Payment for Medicare Part B Preventive Vaccines & Their Administration for Rural Health Clinics & Federally Qualified Health Centers

Related CR Release Dates: January 16, 2025 & December 18, 2025	MLN Matters Number: MM13923 Revised
Effective Date: July 1, 2025	Related Change Request (CR) Numbers: CR 13923 & CR 14254
Implementation Date: July 7, 2025	Related CR Transmittal Numbers: R13055CP , R13547BP & R13547CP
Related CR Title: Payment for Part B Preventive Vaccines and their Administration on the Claim for Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs)	

What's Changed? We added links to the additional manual updates from CR 14254; clarified reimbursement after cost reporting; and updated the CR release dates, transmittal numbers, and transmittal links.

Affected Providers

- Rural health clinics (RHCs)
- Federally Qualified Health Centers (FQHCs)

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Action Needed

Make sure your billing staff knows about the vaccine payment policies for RHCs and FQHCs:

- Hepatitis B vaccines are paid like other Medicare Part B preventive vaccines starting January 1, 2025
- New claim-based payments for Part B preventive vaccines and their administration are starting July 1, 2025
- Updates to the Medicare Claims Processing and Benefit Policy manuals

Background

Section 1833(a)(3)(A) of the [Social Security Act](#) specifies that part B preventive vaccines and their administration are exempt from the RHC and FQHC payment limit of 80% of reasonable costs. Therefore, CMS pays for pneumococcal, influenza, and COVID-19 vaccines and their administration in RHCs and FQHCs at 100% of reasonable costs under section 1833(a)(1)(B) of the Social Security Act. For RHCs, we don't include the costs associated with these vaccines and their administration when we determine the all-inclusive rate, and we don't subject them to the payment limit. For FQHCs, we don't include these costs under the FQHC Prospective Payment System.

Key Updates

Starting January 1, 2025, we pay for hepatitis B vaccines like we do pneumococcal, influenza, and COVID-19 vaccines in RHCs and FQHCs.

Starting July 1, 2025, RHCs and FQHCs can bill for all 4 types of Part B preventive vaccines—pneumococcal, influenza, hepatitis B, and COVID-19 vaccines and their administration—at the time of service with or without a qualifying visit. RHCs and FQHCs can bill HCPCS code M0201 for influenza, pneumococcal, hepatitis B, and COVID-19 vaccine administration if the home visit meets all the requirements of both [42 CFR 405 Subpart X](#), for RHCs and FQHCs services provided in the home, and [42 CFR 410.152\(h\)\(3\)\(iii\)](#), for the in-home additional payment for Part B preventive vaccine administration.

RHCs and FQHCs will need to annually reconcile any payments received at the time of service with the facilities' actual vaccine and vaccine administration costs on their cost reports, including any in-home additional costs. **We reimburse RHCs and FQHCs at 100% of the reasonable costs through the cost report. We waive the patient coinsurance and deductible.**

Note: We pay for covered monoclonal antibody products and their administration when you use them for treatment or for post-exposure prophylaxis of COVID-19 through the cost report until the end of the CY in which the Emergency Use Authorization declaration for drugs and biological products with respect to COVID-19 ends.

We pay the claims like other Part B vaccine and vaccine administration claims:

- Vaccine products at 95% of the average wholesale price
- Vaccine administration according to the national fee schedule for Part B vaccine administration

The Part B vaccine administration fee schedule includes locality adjusted payment rate files for codes G0008, G0009, G0010, 90480, and M0201 with the annual update applied for CY 2025. You can find these files on the [CMS Vaccine Pricing](#) page. You can also check this page for seasonal flu vaccine codes and payment rates, effective August 1 – July 31 of the following year.

We made updates to:

- [Medicare Claims Processing Manual, Chapter 9](#), sections 60.2, 60.3, and 70.3
- [Medicare Claims Processing Manual, Chapter 18](#), sections 10.2, 10.2.2.1, and 10.2.2.2
- [Medicare Benefit Policy Manual, Chapter 13](#), sections 50.1, 80.1, 220.1, and 220.3

More Information

We issued [transmittals R13055CP, R13547BP, and R13547CP](#) to your MAC as the official instructions for this change. For more information, find your [MAC's website](#).

Document History

Date of Change	Description
December 19, 2025	We added links to the additional manual updates from CR 14254; clarified reimbursement after cost reporting; and updated the CR release dates, transmittal numbers, and transmittal links.
January 16, 2025	Initial article released.

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