



Medicare Updates and Billing for Influenza (Flu) Vaccines

September 7, 2022





Today's Presenters

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Objectives

- Provide overview of Medicare preventive services: influenza vaccines
- Encourage providers to promote and educate beneficiaries in life-saving preventive services and screenings
- Assist providers in billing so claim denials may be avoided

Agenda

- Overview of Medicare's Preventive Services Program
- Influenza Vaccine
- Questions and Answers
- Resources and References

Preventive Services Overview

Did You Know

- A beneficiary must be enrolled in Medicare Part B in order to be covered for any Medicare preventive services

Preventive Services Overview

- Medicare pays for many preventive benefits,
- Preventive services support the health of Medicare beneficiaries by
 - Educating about potentially life-saving services and screenings
 - Early detection and/or prevention of diseases
 - Assisting with/suggesting lifestyle modifications

Polling Question #1

- What is your role in the Medicare Program for your facility?
 - Biller
 - Clinician
 - Intake/admissions
 - Compliance
 - Administrator

Polling Question #2

- How experienced are you with documenting and/or billing Medicare preventive services?
 - This is all new to me!
 - I am semi comfortable but ready to learn more
 - I am pretty comfortable but will benefit from session as a refresher course

Seasonal Influenza (Flu) Virus Vaccine

Influenza/Flu

- Contagious disease caused by flu viruses generally occurring during winter
 - Attacks respiratory tract
 - Can lead to pneumonia
- Risks for complications, hospitalizations and deaths from flu occur
 - Higher among individuals aged 65 and older
 - Young children
 - Persons of any age with certain underlying health conditions

Benefits of Influenza Virus Vaccine

- Protects against current strains of flu
- Best way to prevent flu and its complications
- Prevents flu-related death
- Further prevents spread of flu

Did You Know

- Additional risk of contracting/spreading flu comes from unvaccinated caregivers and health care professionals
- Protect your patients...immunize yourself and your staff

Flu – Risk Factors

- Individuals age 65 years or older
- Pregnant women
- Individuals of any age who have certain medical conditions
 - Asthma
 - Diabetes
 - Chronic lung disease

Flu Season

- Flu season ranges from August through March
- Yearly flu vaccination should begin in August or as soon as vaccine available and continue throughout flu season

Coverage

- One flu virus vaccine per flu season for all beneficiaries, regardless of age
 - Additional vaccine may be covered in same season
 - If physician determines additional vaccination R&N (document!)
 - More than one vaccination may be covered in calendar year (12-month period)
 - Due to time span of flu season
 - **Example:** Mr. X vaccinated January 2019 and covered for another vaccination October 2019

Covered Flu Vaccines

- Flu shot
 - Given with a needle in arm
 - Healthy people and those with chronic medical conditions
 - Regular, high-dose or intradermal
- Nasal spray
 - Healthy people ages 2–49 who are not pregnant

Who Can Order/Perform

- No physician's order or supervision required
 - Beneficiary may receive vaccination upon request
 - **Note:** State law may require physician's presence

TOBs

TOB	Description
12X	Hospital inpatient (Part B)
12X	Hospital outpatient
22X	SNF inpatient (Part B)
23X	SNF outpatient
72X	Independent/hospital-based renal dialysis facility
75X	CORF
85X	CAH
83X	Indian Health Service (IHS)

Billing Requirements

- Report ICD-10-CM diagnosis code Z23
 - Add CC A6 (special program indicator code)
- Line item billing for influenza vaccine administration
 - Revenue code 0771
 - HCPCS code G0008
 - One unit

Billing Requirements

- Line item billing for influenza vaccine
 - Revenue code 0636
 - Appropriate CPT code from list on next slides
 - One (1) unit
- **Note:** CAHs report revenue code 096X, 097X or 098X

Instructions for RHCs/FQHCs

- RHC
 - Do not report influenza vaccination and administration on claim
- FQHC
 - Report separate revenue lines for influenza vaccination and administration
 - No claim submitted if vaccine only service performed on DOS

HCPCS/CPT Coding – Influenza Virus Vaccine

HCPCS/CPT Codes	Description
90630	quadrivalent (IIV4), split virus, preservative free, for intradermal use
90653	inactivated (IIV), subunit, adjuvanted, for intramuscular use
90654	trivalent (IIV3), split virus, preservative-free, for intradermal use
90655	trivalent (IIV3), split virus, preservative-free, .25 mL dosage, for intramuscular use
90656	trivalent (IIV3), split virus, preservative-free, .50 mL dosage, for intramuscular use

HCPCS/CPT Coding – Influenza Virus Vaccine

HCPCS/CPT Codes	Description
90657	trivalent (IIV3), split virus, .25 mL dosage, intramuscular use
90658	trivalent (IIV3), split virus, .50 mL dosage, intramuscular use
90660	trivalent, live (LAIV3), for intranasal use
90661	Influenza virus vaccine, derived from cell cultures, subunit, preservative and antibiotic free, for intramuscular use
90662	split virus, preservative free, enhanced immunogenicity via increased antigen content for intramuscular use (IIV)

HCPCS/CPT Coding – Influenza Virus Vaccine

HCPCS/CPT Codes	Description
90672	quadrivalent, live (LAIV4), for intranasal use
90673	trivalent (RIV3), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use
90674	quadrivalent (ccIV4), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use
90682	quadrivalent (RIV4), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use

HCPCS/CPT Coding – Influenza Virus Vaccine

HCPCS/CPT Codes	Description
90685	quadrivalent (IIV4), split virus, preservative free, .25 mL dosage, for intramuscular use
90686	quadrivalent (IIV4), split virus, preservative free, .5 mL dosage, for intramuscular use
90687	quadrivalent (IIV4), split virus, .25 mL dosage, for intramuscular use
90688	quadrivalent (IIV4), split virus, .50 mL dosage, for intramuscular use

HCPCS/CPT Coding – Influenza Virus Vaccine

HCPCS/CPT Codes	Description
90694	quadrivalent (aIV4), inactivated, adjuvanted, preservative free, 0.5 mL dosage, for intramuscular use [Effective 7/1/20]
90756	quadrivalent (ccIV4), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use
Q2039	Influenza virus vaccine, not otherwise specified

Billing Tips

- Vaccine and administration billed on same claim
- Use the correct TOB
 - Hospitals should bill for inpatients on 12X TOB using discharge date of hospital stay or benefits exhaust date
 - SNF should bill for inpatients on 22X TOB
- May list charges for other services on same claim as flu vaccine
 - Applicable codes for additional services must be included

Roster Billing

- Roster billing available for providers who give mass immunizations for flu vaccines
 - Immunizations for at least five beneficiaries on same date required
 - Waived for inpatient hospital or SNF roster billing
 - Refer to CMS IOM Publication 100-04, *Medicare Claims Processing Manual*, Chapter 18, Section 10.3
- Roster billing does not apply to FQHCs

Medicare Payment

Facility Type	Vaccine	Administration
Hospital (not IHS or CAH)	Reasonable cost	OPPS or reasonable cost
IHS Hospital & IHS CAH	95% AWP	MPFS
CAH (Method I and II)	Reasonable cost	Reasonable cost
SNF (IP Part B & OP)	Reasonable cost	MPFS
CORF	95% AWP	MPFS

Medicare Payment

Facility Type	Vaccine	Administration
Hospital-based RDF	Reasonable cost	Reasonable cost
Independent RDF	95% AWP	MPFS
RHC/FQHC	Settled on cost report	Settled on cost report

Payment Allowances and Effective Dates for Flu Season

- Most flu vaccine payment allowances effective 8/1 – 7/31, but not all
 - [Seasonal Influenza Vaccines Pricing](#)
- CMS web page for NCCI edits
 - [National Correct Coding Initiative Edits](#)

Beneficiary Cost-Sharing

- Affordable Care Act Section 4104
 - Deductible waived
 - Coinsurance/copayment waived

Why Claim Did Not Pay

- Beneficiary received more than one flu vaccine in same season and provider didn't/can't justify R&N
- Provider did not report CC A6 on claim (RTP 32200)
 - A6 not necessary for roster bills

References, Resources, Wrap Up

CMS Resources

■ [CMS IOMs](#)

- Regulations and Guidance > Manuals > Internet-Only Manuals (IOMs)

■ Immunization IOM references

- 100-02, *Medicare Benefit Policy Manual*, Chapter 15
 - Section 50.4.4.2 – Immunizations
- 100-04, *Medicare Claims Processing Manual*, Chapter 18
 - Section 10 – Pneumococcal Pneumonia, Influenza Virus, and Hepatitis B Vaccines

Flu Shot Coding References

- Flu shot coding – HCPCS/CPT Codes
 - [Flu Shot web page](#)
- FQHC and RHC
 - <https://www.cms.gov/medicare/preventive-services/institutional-providers-additional-information>

CMS Medicare Learning Network (MLN)

- [MLN Matters Articles](#)
- [MLN Products](#)
 - Preventive Services Educational Products web page
 - Web-based training
- [CMS Preventive Services web pages](#)
 - Medicare > Prevention (Individual links for each preventive service are located under Prevention tab)

Medicare Learning Network[®] Articles

- [Rural Providers & Suppliers Billing](#)
 - MLN006762 July 2021
- [Billing of Vaccine Services on Hospice Claims](#)
 - MM9052 Revised

CMS Resources

- [CMS Immunization web page](#)
 - Medicare > Immunizations
- [Immunization and Vaccine Resources](#)

Additional Resources

- Centers for Disease Control
 - [CDC website](#)
 - [Influenza \(Flu\) web page](#)

What You Should Do Now

- Share this presentation with internal staff members
- Talk to your patients about the importance of taking advantage of Medicare preventive services
- Update system with correct coding information
- Update any internal procedure to avoid costly, time-consuming claim errors

Thank You!

- Follow-up email
 - Attendees will be provided a Medicare University Course Code
- Questions?

