Now CMS can pay you for administering two distinct pneumococcal vaccinations to Medicare patients under updated vaccine guidelines released in recent transmittal 3159 to the Medicare Claims Processing Manual. The two vaccinations have to be different versions of the pneumococcal vaccine, and the second must be administered at least 11 full months after the first pneumococcal vaccine, CMS states. The policy change is retroactive to Sept. 19, 2014, though Medicare administrative contractors (MACs) have until Feb. 2 to implement it.

Previously, Medicare covered one pneumococcal vaccination for the lifetime of the patient, with a second shot allowed for high-risk patients. When the patient was unaware of his or her health history, a vaccination would be covered. The coverage shift was driven by an August recommendation from the Advisory Committee on Immunization Practices (ACIP), which said the vaccination was more effective when given in a two-dose series of a 23-valent vaccination and 13-valent vaccination, six months apart. The higher number of valents means greater protection against different strains of pneumonia. ACIP recommended two different vaccinations be given six to 12 months apart, though the CMS policy requires at least 11 full months between them.

The CMS policy also sets no requirements for the order in which the vaccines are given, other than that they cannot be the same. In addition to the 23-valent and 13-valent versions, there is a seven-valent version of the pneumococcal vaccine. As with the previous pneumococcal vaccination policy, a physician’s order is not required to get or give the vaccination. The patient may request it. While the new CMS policy sets an expectation that the provider will know the patient’s health history at the time of the vaccination, it continues to allow you to rely on the patient’s verbal health history when determining eligibility for the vaccine, CMS says. That means you won’t automatically face a denied claim for giving the pneumococcal vaccine to a patient who has already received it.

Each unique pneumococcal vaccine has its own CPT code, which is how you differentiate between the vaccine types for billing purposes. Here are those codes:

- 90669 for the seven-valent pneumococcal vaccine;
- 90670 for the 13-valent vaccine; and
- 90732 for the 23-valent vaccine.

You continue to bill G0009 for the administration of the vaccine, and no bundling edits exist with the influenza vaccine or E/M services.

*Article courtesy of Scott Kraft - PartBNews*