

What Can We Do to Help Physicians Get into the Business of Immunization?

A Preliminary Environmental Scan and Brainstorming Session

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Presentation Goals

- Share results from preliminary environmental scan of tools and resources geared toward helping physicians get into the business of immunizing their patients
- Solicit input from the Provider Workgroup on the framework and additional resources and approaches that can help

How We Conducted the Environmental Scan

- Reviewed as many resource websites as possible for tools that assist with purchasing, storage, and billing, including professional societies (e.g., ACP, AAP, AAFP, ACOG), federal agencies (e.g., CDC, CMS, FDA, VA), immunization resource groups (IAC), and manufacturers

Disclosures

- Environmental scan likely to be incomplete!!
 - Requesting input of provider workgroup
- Thanks to Susan Farrell (as always, right?)

A Little Orientation: Vaccination as an Accessory



Overview of Resources Identified: ACP

- Making Vaccinations a Winning Proposition for Adult Primary Care Physicians and Healthcare Professionals:
 - *The financial impact of immunization on the medical practice: making it a win-win proposition for patients and physicians.*
 - Video presentation by Dr. John O’Neill, a solo practitioner who successfully administers vaccines in practice
- *Efficient Vaccine Ordering Webinar*

Vaccines are a large financial burden on medical practices so it is important to discover every opportunity to save money on your vaccine purchases. Learn how to optimize ordering with manufacturer discounts/bulk ordering, returning unused vaccines, and other money-saving options.

- <http://www.acponline.org/multimedia/?bclid=782543304001&bctid=1733749311001>
- Speaker: Kathryn Eiler, CMM
 - Pain Medicine Specialists, P.C.; Chalfont, PA

Additional Practice Management Resources from ACP Relevant to Vaccines



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Medications



Immunize Adults : Improving Clinical Care

The module is based on content developed for the American College of Physicians [Adult Immunization Portal](#) by Doron Schneider, MD, FACP, Kim Dixon, MD, FACP, Kathryn Eiler, CMM and Cara Reynolds, MHS.

Editorial direction and production were made possible by a cooperative agreement with the Centers for Disease Control and Prevention (1U66IP000393-01).

Additional Practice Management Resources from ACP Relevant to Vaccines



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Patient Education Resources on Immunization

Tools - uploaded on April 04, 2012 10:13:23 EST

On this site from the Centers for Disease Control & Prevention (CDC) you will find a variety of educational information about vaccines and the diseases they prevent. For each vaccine, you can access information about who should receive the vaccine, when it should be administered, and what patients or parents should know about it.

<http://www.cdc.gov/vaccines/ed/patient-ed.htm>

Quick Reference Information for Medicare Immunization Billing

Websites - uploaded on April 04, 2012 10:55:08 EST

This guide, provided by the Centers for Medicare and Medicaid Services (CMS) is from the CMS Medicare Learning Network.

http://www.cms.gov/MLNProducts/downloads/qr_immun_bill.pdf

Resources to Support Appropriate Vaccine Handling and Storage

Tools - uploaded on April 04, 2012 10:54:08 EST

These checklists, signs and tools will help the practice make sure that vaccines are stored and handled appropriately.

<http://www.immunize.org/handouts/vaccine-storage-handling.asp>

Screening for Contraindications

Tools - uploaded on April 04, 2012 10:41:42 EST

The Immunization Action Coalition provides a good set of screening questionnaires.

<http://www.immunize.org/clinic/screening-contraindications.asp>

Standing Orders for Medications and Vaccinations - P&P

Tools - uploaded on July 05, 2011 09:43:12 EST

Practice Management Forms

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EDUCATION
RECERTIFIC

Billing & Coding Adult Immunizations

[Home](#) > [Running a Practice](#) > [Prac](#)

Running a Practice

Practice Management

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- > [Brief Depression Screeni](#)
- > [Geriatric Screening Tool](#)
- > [Adult High Risk Screening Form](#)
- > [Pain Questionnaire](#)
- > [Vaccination Administration Record](#)
- > [Vaccine Safe Storage & Handling Safety Tips](#)
- > [Vaccine Information Sheets](#)
- > [Vaccine Information Sheets - Federal Law](#)

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BILLING FOR ADDITIONAL SERVICES	2

AAFP Practice Management Resources



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PRACTICE MANAGEMENT

Patient-Centered Medical Home (PCMH)

Payment for Physicians

Coding

FAQ on ICD-10

Coding for Group Visits

Coding for Newborn Care Services

Coding for Vaccine

Medicare Part B Vaccine Coverage

Vaccine Coverage for Medicare Part B

Medicare Part B provides preven

- Influenza: once per flu season
- Pneumococcal: once per lifeti
- Hepatitis B: for persons at inte

Administration services for these

- G0008 administration of influ

PRACTICE MANAGEMENT

Patient-Centered Medical Home (PCMH)

Payment for Physicians

Coding

FAQ on ICD-10

Coding for Group Visits

Coding for Newborn Care Services

Coding for Vaccine Administration

Medicare Part B

Medicare Part D

Contract Negotiations

Collective Bargaining

Payer Issues

Coding for Vaccine Administration

Vaccine Coding

Vaccines Administered at Well-child Visits

When vaccines are provided as part of a well-child encounter, the ICD-9 guidelines instruct that code V20.2 (routine infant or child health check) includes immunizations appropriate to the patient's age. A code from categories V03-V06 may be used as a secondary code if the vaccine is given as part of a preventive health care service, such as a well-child visit.

ICD-9 for Combination Vaccines

When reporting ICD-9 codes for prophylactic vaccination and inoculation against combinations of diseases, use V06.0-V06.9. Report also single vaccination codes from V03-V05 for any vaccinations not included in the combination code.

Evaluation and Management Services Provided on the Same Date as Vaccine Administration

Information on Medicare Vaccine Coverage

Medicare Part B Vaccine Coverage

Medicare Part D Vaccine Coverage

<http://www.aafp.org/practice-management/payment/coding/admin.html>

AAP Practice Management Resources

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™



Immunization

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Immunization



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Home > Pediatricians > Practice Management

Pediatricians

- ▶ Immunization Newsletter
- ▶ Policies and Implementation Guidance
- ▶ Communicating with Families
- ▶ Practice Management

Practice Management



With an increasingly complex schedule and higher prices of vaccines, the AAP is committed to supporting its members' office needs as they immunize children. In addition to the topic areas listed below, consider visiting the AAP [Practice](#)



Coding, Financing, and Private Payer

AAP resources to help practices navigate the changing health care environment to ensure proper payment for services provided and the tools to handle payer issues.

Accountable Care Organizations

Coding Resources

ICD-10-CM

Private Payer Advocacy

Pediatric Cost Model



The Business Case for Pricing Vaccines and Immunization Administration

Provides rationale and methods for pediatricians to better understand and document the true costs of providing vaccines to their patients.



Recommendations for Preventive Pediatric Health Care (Periodicity Schedule)

These guidelines represent a consensus by the American Academy of Pediatrics (AAP) and

AAP Practice Management Resources

Practice Management Topics

Click the links below for resources about immunizing.

- [Financing](#)
- [Supply](#)
- [Storage and Handling](#)
- [Liability](#) and [Refusal to Vaccinate](#)
- [Improving Office Immunization Rates](#)
- [Vaccine Barcoding](#)

Knowing Cost

- [Financing of Childhood and Adolescent Vaccines](#) (Exit Site)
December 2009 Supplement to the journal Pediatrics.
- [Vaccine Survival Guide](#) (PDF 169KB)
Understanding your individual office's cost to immunize is the first step to being able to lower your costs.
- [CDC Price List](#) (Exit Site)
- [The Business Case for Pricing New Vaccines](#) (PDF 107KB)

Lowering Cost

- [Vaccine Purchasing Groups](#)
- [Vaccines for Children Program](#) (Exit Site)

Coding

- [Comprehensive Overview of Immun](#)
- [Vaccine Coding Table](#) (PDF 110KB)
- [When Is it Appropriate to Report 99](#)
- [Vaccine Counseling Position Paper](#)
- [RBRVS: What is it and how does it](#)

AAP Efforts to Improve Payment

- [AAP Task Force on Immunization White Paper on Financing](#) (PDF 943KB)
- [AAP News article: New Immunization Administration CPT Codes Take Effect Jan 1](#)
- [AAP News article: AAP Efforts to Enhance Vaccine Payments Must Comply with the Law](#)
- [2010 Immunization Congress Background and Presentations](#)
- [2007 Immunization Congress Background and Presentations](#)

<http://www2.aap.org/immunization/pediatricians/financing.html>

ACOG: Immunizations for Women



The screenshot shows the ACOG website's 'Immunization for Women' page. The header includes the ACOG logo and the text 'Immunization Information for Ob-Gyns and The American College of Obstetricians and Gynecologists'. A navigation bar contains 'ABOUT US', 'IMMUNIZATION FACTS', 'PRACTICE MANAGEMENT', and 'VAC'. The 'PRACTICE MANAGEMENT' section is highlighted, with a sub-section titled 'Practice Management' containing a list of topics: Office-based vaccine program, Performance Measures, and Affordable Care Act. A larger text block titled 'Practice Management' begins with 'Beginning or expanding the immunization your office offers you the ability to bet mission of keeping women healthy. M efficient and effective practice is essen and your patients. While the initial add immunizations will require the full sup your staff, after it has been implement manageable to maintain a program.'

PRACTICE MANAGEMENT

Practice Management

Office-based vaccine program

Performance Measures

Affordable Care Act

Coding

Financing

Vaccine Supply

Liability

Communicating with Patients

Office Immunization Rates

Storage and Handling

Health Care Workers

http://www.immunizationforwomen.org/practice_management/

ACOG: Immunizations for Women



Immunization for Women

Immunization Information for Ob-Gyns and Their Patients
The American College of Obstetricians and Gynecologists

ABOUT US IMMUNIZATION FACTS

PRACTICE MANAGEMENT

Practice Management

Office-based vaccine program

Performance Measures

Affordable Care Act

Setting up an office-based immunization program

Setting up an office-based immunization program is an important aspect of women's health. Visit this page to learn how to set up an efficient and effective program in your office.

Coding

Recognizing the importance of women receiving recommended immunizations, the College created a coding guide to help keep your office efficient. Visit this page for the College's current Immunization Coding guide.

Financing

Vaccines are a financial investment. Visit this page to learn how to keep your office costs low while providing an essential service.

Supply

Once you know which vaccines your office will offer, visit this page to see how to order and keep your vaccines safe.

Liability

Vaccines are very safe, but adverse reactions, although rare, can occur. Visit this page to learn about VAERS (Vaccine Adverse Event Reporting System) and the best practices for a safe vaccine program.

Immunization Action Coalition

Handouts for Patients & Staff

Clinic Resources

Vaccine Information Statements

Diseases &

Welcome

Needle Tips & More

What's New at IAC

Immunization News

Featured Resources

- ▶ Administering Vaccines
- ▶ Coding & Billing
- ▶ Documenting Vaccination
- ▶ Scheduling Vaccines
- ▶ Screening for Contraindications
- ▶ Storage & Handling
- ▶ Recommendations

Related Resources:

- ▶ Ask the Experts
- ▶ Directory of Resources
- ▶ IAC Publications
- ▶ Image Library
- ▶ Journal Articles
- ▶ Pocket Guides
- ▶ PowerPoint Presentations
- ▶ Unprotected People Reports

Adults Only Vaccination: A Step-by-Step Guide



Immunization Action Coalition

2004

Adults Only Vaccination: A Step-by-Step Guide



Immunization Action Coalition

Vaccination Basics

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Step-by-Step Vaccination Program Financing Tasks

- Find free or discounted vaccines that may be available to help reduce your overall costs
 - Vaccines for Children (VFC)
 - Health departments
 - Other organizations
 - Bulk purchasing
- Investigate possible third-party coverage for the costs of vaccine and/or its administration
 - Insurance
 - Medicare
 - Medicaid
- Sort through the billing maze
 - Code your work for billing purposes

CMS Resources

- Medicare Part B, Medicaid and CHIP Coverage of Seasonal Influenza and Pneumococcal Vaccinations
 - http://www.cms.gov/Medicare/Prevention/Immunizations/Downloads/2012-2013_Flu_Guide.pdf
- Medicare Claims Processing manual for Preventative and Screening Services
 - <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c18.pdf>
- Influenza vaccine pricing information
 - <http://cms.gov/Medicare/Medicare-Fee-for-Service-Part-B-Drugs/McrPartBDrugAvgSalesPrice/VaccinesPricing.html>

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Medicaid/CHIP

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Coordination

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Outreach and
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Home > Medicare > Immunizations > Immunizations

Medicare Fee-For-Service PREVENTIVE SERVICES



QUICK REFERENCE INFORMATION: Medicare Immunization Billing (Seasonal Influenza Virus, Pneumococcal, and Hepatitis B)

Please note: The information in this publication applies only to the Medicare Fee-For-Service Program (also known as Original Medicare).

Immunization Procedure Codes & Descriptors

Administration & Diagnosis Codes	Vaccine Codes & Descriptors	Frequency Of Administration
Seasonal Influenza Virus Vaccine Administration Code: G0008 Diagnosis Code: V04.81	90653* – Influenza vaccine, inactivated, subunit, adjuvanted, for intramuscular use	Once per influenza season Medicare may cover additional seasonal influenza virus vaccinations if medically necessary
	90654 – Influenza virus vaccine, split virus, preservative-free, for intradermal use	
	90655 – Influenza virus vaccine, trivalent, split virus, preservative free, when administered to children 6-35 months of age, for intramuscular use	
	90656 – Influenza virus vaccine, trivalent, split virus, preservative free, when administered to individuals 3 years and older, for intramuscular use	
	90657 – Influenza virus vaccine, trivalent, split virus, when administered to children 6-35 months of age, for intramuscular use	
	90660 – Influenza virus vaccine, trivalent, live, for intranasal use	
	90661 – Influenza virus vaccine, derived from cell cultures, subunit, preservative and antibiotic free, for intramuscular use	
	90662 – Influenza virus vaccine, split virus, preservative free, enhanced immunogenicity via increased antigen content, for intramuscular use	
	90672 – Influenza virus vaccine, quadrivalent, live, for intranasal use	
	90673** – Influenza virus vaccine, trivalent, derived from recombinant DNA (RIV3), hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use	
90685 – Influenza virus vaccine, quadrivalent, split virus, preservative free, when administered to children 6-35 months of age, for intramuscular use		
90686 – Influenza virus vaccine, quadrivalent, split virus, preservative free, when administered to individuals 3 years of age and older, for intramuscular use		
90687 – Influenza virus vaccine, quadrivalent, split virus, when administered to children 6-35 months of age, for intramuscular use		

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The Military Vaccine Agency analyzed temperature sensitive loss trends based on reported vaccine losses during the period of October 2010 to September 2012. The analysis identified the following: the primary cause of loss is from failure to place vaccine in an appropriate storage unit, the second most common cause of loss is from placing vaccine in the wrong storage unit (freezer vs. refrigerator), and the third leading cause of loss was due to alarm system failures. All of these losses could have been prevented if proper storage and handling practices were in place and followed.

Vaccine Storage and Handling Guidelines



17 June 2013

Checklist for Safe Vaccine Storage and Handling

Are you doing everything you should to safeguard your vaccine supply?

Review this list to see where you might make improvements in your vaccine management practices. Check each listed item with either YES or NO.

Establish Storage and Handling Policies

- YES NO 1. We have designated a primary vaccine coordinator and at least one alternate coordinator to be in charge of vaccine storage and handling at our facility.
- YES NO 2. Both the primary and alternate vaccine coordinator(s) have completely reviewed either CDC's Vaccine Storage & Handling Toolkit (www.cdc.gov/vaccines/recs/storage/toolkit/storage-handling-toolkit.pdf) or equivalent training materials offered by our state or local health department's immunization program.
- YES NO 3. We have detailed, up-to-date, written policies for general vaccine management, including policies for routine activities and an emergency vaccine retrieval and storage plan for power outages and other problems. Our policies are based on CDC's Vaccine Storage & Handling Toolkit and/or on instruction from our state or local health department's immunization program.
- YES NO 4. We review these policies with all staff annually and with new staff, including temporary staff, when they are hired.

Log In New Vaccine Shipments

- YES NO 5. We maintain a vaccine inventory log that we use to document the following:
 - YES NO a. Vaccine name and number of doses received
 - YES NO b. Date we received the vaccine
 - YES NO c. Condition of vaccine when we received it
 - YES NO d. Vaccine manufacturer and lot number
 - YES NO e. Vaccine expiration date

Use Proper Storage Equipment

- YES NO 6. We store vaccines in separate, self-contained units that refrigerate or freeze only. If we must use a household-style combination unit, we use it only for storage of our refrigerated vaccines, maintaining frozen vaccines in a separate stand-alone freezer.
- YES NO 7. We store vaccines in units with enough room to maintain the year's largest inventory without crowding.
- YES NO 8. We never store any vaccines in a dormitory-style unit (a small combination freezer-refrigerator unit with the freezer compartment inside the refrigerator).
- YES NO 9. We use only calibrated thermometers that have a Certificate of Traceability and Calibration Testing*

immunization
action coalition



Home

Product Information

Diseases

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& More

Office Management Tools

[Building on Vaccination Basics](#)

Educate your staff on vaccine administration to help your vaccination process run smoothly.

[HCP to Pharmacy Vaccine Referral Template](#)

Print and fill out this form to help document the vaccinations your patients receive at the pharmacy.

[Merck ExpressCheck](#)

(www.checkcoveragenow.com)

Fast, patient-level insurance eligibility and product coverage information for many of your patients for select Merck products.

[Recycling Program](#)

Merck makes recycling your shipping container quick and easy.

[Reimbursement Support](#)

Get CPT[®] codes, verification and authorization assistance, and Medicare Part D information.

[Storage and Handling](#)

Access storage and handling information.

[Vaccination Reminder Cards](#)

Print and fill out these new easy-to-use cards to

NOVARTIS VACCINES DIRECT QUICK CODING SHEET FOR MENVEO

Your Online Order Portal for Vaccines

» Home » Products » Diseases

REIMBURSEMENT SUPPORT CENTER

» Reimbursement and Coding

» Coding for Menveo

Menveo

CPT	90734	Meningococcal conjugate vaccine, serogroups A, C, Y, and W-135, (tetravalent), for intramuscular use
NDC	46028-0208-01	Menveo® (Meningococcal [Groups A, C, Y and W-135] Oligosaccharide Diphtheria CRM ₁₉₇ Conjugate Vaccine), 2 vials per dose, 0.5 mL, 5 x 2 vls/pkg, 5 doses (10 vials) per package

Immunization Administration

CPT	90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); one vaccine (single or combination vaccine/toxoid)
CPT	90472*	Each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)

*Add on code—must be used with primary administration code.

Diagnosis

ICD-9	V01.84	Contact with or exposure to communicable diseases; other communicable diseases: Meningococcus
ICD-9	V02.59	Carrier or suspected carrier of infectious diseases; other specified bacterial diseases; Meningococcal and Staphylococcal
ICD-9	V03.89	Need for prophylactic vaccination and inoculation against bacterial diseases; other specified vaccinations against single bacterial diseases; other specified vaccination

Office Visit†

CPT	99201-99205	New patient; Office or other outpatient visit
CPT	99211-99215	Established patient; Office or other outpatient visit
CPT	99381-99387	New patient; Initial comprehensive preventive medicine
CPT	99391-99397	Established patient; Periodic comprehensive preventive medicine

†May be used in conjunction with 25 Modifier.

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Prevnar 13[®] Details

About Pneumococcal Disease

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Reimbursement Information

Medicare and Managed Care Coverage



Reimbursement Inform
Tools and Resources

PREVNAR 13[®] REIMBURSEMENT RESOURCE SHEET

COMMERCIAL PLANS

- Each Plan decides its own reimbursement rate, which varies based on plan and patient group. Pfizer suggests that you contact the individual plan to determine reimbursement

MEDICARE PART B

- Prevnar 13[®] is covered for all Medicare patients via their Part B fee-for-service benefit¹
- Prevnar 13[®] is available to Medicare patients with \$0 in out-of-pocket costs for the vaccine¹

Medicare Reimbursement for Prevnar 13[®]

Medicare reimbursement information is updated quarterly and posted online at https://www.cms.gov/McrPartBDrugAvgSalesPrice/01_overview.asp#TopOfPage



Or scan this QR code with your mobile QR reader to visit this Web page.

Diagnosis Coding for Prevnar 13[®]

ICD-9 Code (Diagnosis Code)	Description
V03.82 ¹	Pneumococcal vaccination when administered alone
V06.6 ¹	Pneumococcal and influenza vaccinations (Effective October 1, 2006), providers must report diagnosis code V06.6 on claims when the purpose of the visit was to receive both vaccines during the same visit

Procedural Coding for Prevnar 13[®]

	Medicare Plans	Commercial Plans
CPT [®] Code*	90670 ¹	90670 ¹
Administration Code	G0009 ¹	90471 ^{1,2}

*CPT is a registered trademark of the American Medical Association (AMA).

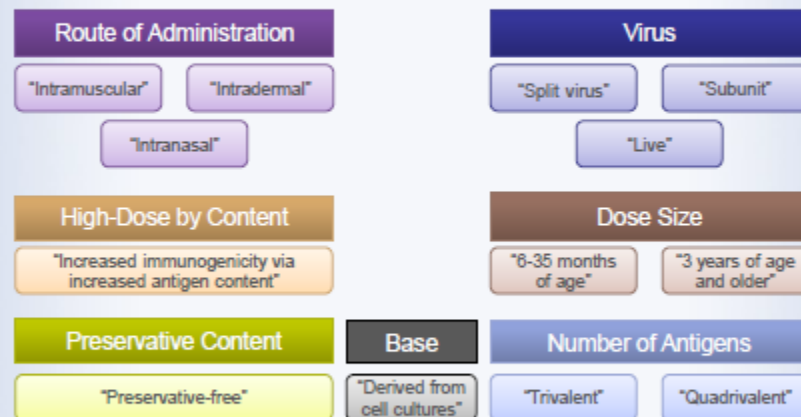
CRACKING THE CODES:

CODING AND BILLING FOR INFLUENZA VIRUS VACCINES ACROSS MULTIPLE SITES

A 2-part program updated for **quadrivalent influenza vaccines** and other changes for the **2013-2014 influenza season**

Brought to you as an educational service by Sanofi Pasteur Inc. Value transfers to licensed health care professionals by pharmaceutical companies may need to be reported according to certain state laws, as well as the federal Sunshine Act provisions.

INFLUENZA VACCINE CODE DISTINCTIONS AND TERMS^{1,2}



References: 1. American Medical Association (AMA), CPT® Category I Vaccine Codes, © 2013 American Medical Association. Last updated January 22, 2013. <http://www.ama-assn.org/resources/doc/cpt/vaccine-codes.pdf>. Accessed June 11, 2013. 2. AMA, CPT 2013 Standard Edition (Current Procedural Terminology/Standard). Chicago, IL: American Medical Association; 2013.

► **Scenario:** A 62-year-old Medicare patient is seen at an immunization clinic and receives a 0.5 mL dose of Fluzone vaccine taken from a 5 mL vial.

HCPCS Code	Description	ICD-9 Code
Q2038	Influenza vaccine, 3 years of age or older, intramuscular injection, Fluzone®	V04.81
G0008	Administration of influenza vaccine	V04.81

Consider Roster Billing¹

EnFluEneous Clinic
556 Respiratory Rd, Sikeston MO
NPI: 0000000000
Date of Service: 10/1/13

Control Number for Contractor Use Only. Leave blank	Health Insurance Claim Number	Patient Last Name	Patient First Name	Patient Middle Initial	Patient Address & Zip Code	Date of Birth	Gender	Patient Signature
	511-00-1111A	Brown	June	R.	21 Main St, Anypow, MO 01225	3/17/1902	F	On file
	523-00-1222B	Green	May	C.	405 Missouri Ave, Sikeston, MO 01121	2/14/1946	F	On file
	535-00-1333A	Moon	Sonny	A.	5 Spring St, Sikeston, MO 01121	12/25/1929	M	On file

Reference: 1. CMS, 2012-2013 Immunizer® Question & Answer Guide to Medicare Part B, Medicaid and CHIP coverage of seasonal influenza and pneumococcal vaccinations: Steps to promoting wellness immunizations. http://www.cms.gov/Medicare/Prevention/Immunizations/Downloads/2012-2013_Flu_Guide.pdf. Accessed June 11, 2013.



Immunization

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Pediatricians

- ▶ Immunization Newsletter
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- ▶ Research

Popular Resources

List of Purchasing Groups

The AAP has collected a list of GPOs and PBGs with whom member pediatricians report working. The inclusion of any groups on this list does not constitute Academy endorsement of the purchasing group, nor does it imply Academy involvement with the purchasing group.

Vaccine Purchasing Groups

Group Purchasing Organizations

Group purchasing organizations (GPOs) are hospitals, nursing homes, and other medical facilities that purchase from specific vendors. AAP members report significant savings through GPOs.

GPOs tend to be operated by hospital-affiliated entities that purchase supplies in addition to vaccines. GPO pricing is similar to Purchasing Groups (PBGs), but there is usually no single manufacturer; in fact, GPOs often offer vaccine options that may not be available to all practices in all areas.

Questions to Ask

When considering joining a GPO or PBG, use the questions below to assess which program is right for you.

- Which manufacturer(s) are included in the program? Under what circumstances can I purchase outside the plan? What are the purchasing compliance requirements?
- Based on this contract, how will my usual vaccine regimen be affected? Would I need to start administering different vaccines? How will this affect office education or nurses' time?
- If I have to change the type of vaccine I order, is the change worth it? Is there another option with similar pricing that would allow me to order what I currently use?
- Is there a cost to participate? What is the length of my contract commitment? Does this plan provide rebates to its participants?
- Is pricing tied to volume? Do all participants have the same terms?
- Does placing large- or small-volume orders allow me to receive the optimal discount?
- How do your discounts compare with my current pricing?
- Can I take advantage of additional manufacturer discounts through this program?
- How frequently am I allowed to order? What is the process to order vaccines? Is a code

GPO Name	Items included in GPO	Membership/Fee Requirements	Contact Information
Atlantic Health Partners	Vaccines Office Supplies Medical Supplies Patient Recall Program Discounts for Vaccine Refrigerator/Freezers	None	Jeff Winokur jwinokur@atlanticealthpartners.com 800-741-2044 www.atlanticealthpartners.com
CASA Physicians Alliance	Vaccines, Medical and Surgical Supplies, Office Supplies, and	NO Fees, Physicians and Physicians Groups in the United States may participate	Andi Dixon or Shari Smith info@casaalliance.net 866-434-9974 www.casaalliance.net

**Question for the Workgroup:
What have we missed?**

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Before we begin brainstorming,
let's take a glimpse at physician
practice reality...

ONLINE FIRST

Burnout and Satisfaction With Work-Life Balance Among US Physicians Relative to the General US Population

Tait D. Shanafelt, MD; Sonja Boone, MD; Litjen Tan, PhD; Lotte N. Dyrbye, MD, MHPE; Wayne Sotile, MD; Daniel Satele, BS; Colin P. West, MD, PhD; Jeff Sloan, PI

Arch Intern Med 2012; E1-9

Arch Intern Med 2012; E1-9

Nearly 1/2 of MDs Burned Out

Background: Despite extensive data about physician burnout, to our knowledge, no national study has evaluated rates of burnout among US physicians, explored differences by specialty, or compared physicians with US workers in other fields.

Methods: We conducted a national study of burnout in a large sample of US physicians from all specialty disciplines using the American Medical Association Physician Masterfile and surveyed a probability-based sample of the general US population for comparison. Burnout was measured using validated instruments. Satisfaction with work-life balance was explored.

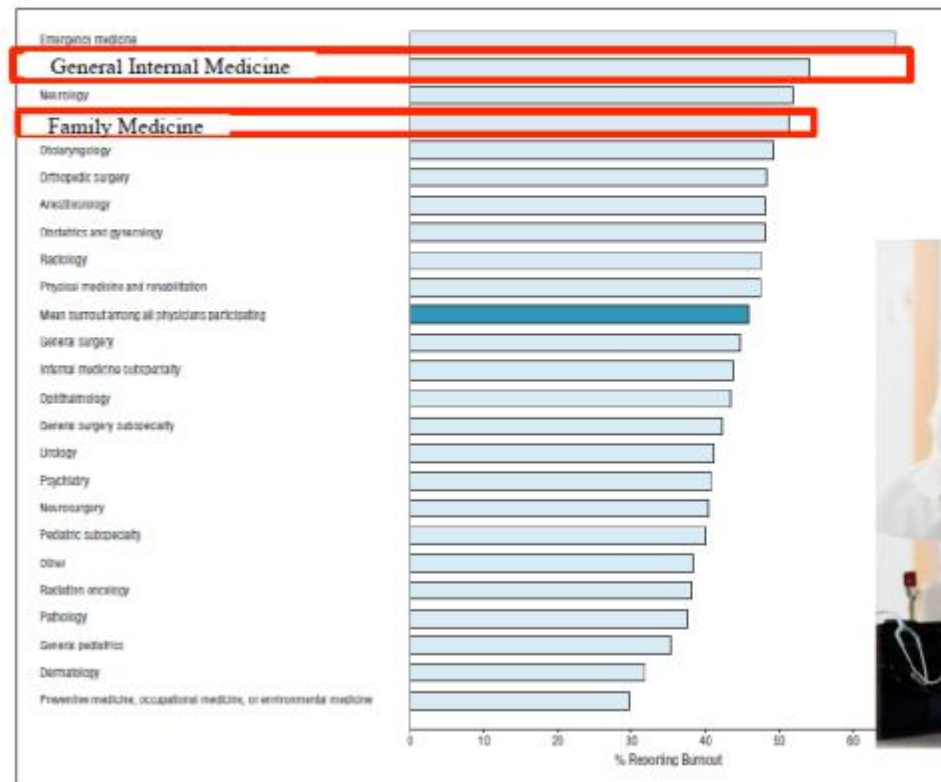


Figure 1. Burnout by specialty.

Resources or Tools Should be Mindful of Delivery System

DOCTOR AND PATIENT | AUGUST 23, 2012, : <http://well.blogs.nytimes.com/2012/08/23/the-widespread-problem-of-doctor-burnout/>

The Widespread Problem of Doctor Burnout

By PAULINE W. CHEN, M.D.

1 in 2 US physicians burned out implies origins are **rooted in the environment and care delivery system** rather than in the personal characteristics of a few susceptible individuals.

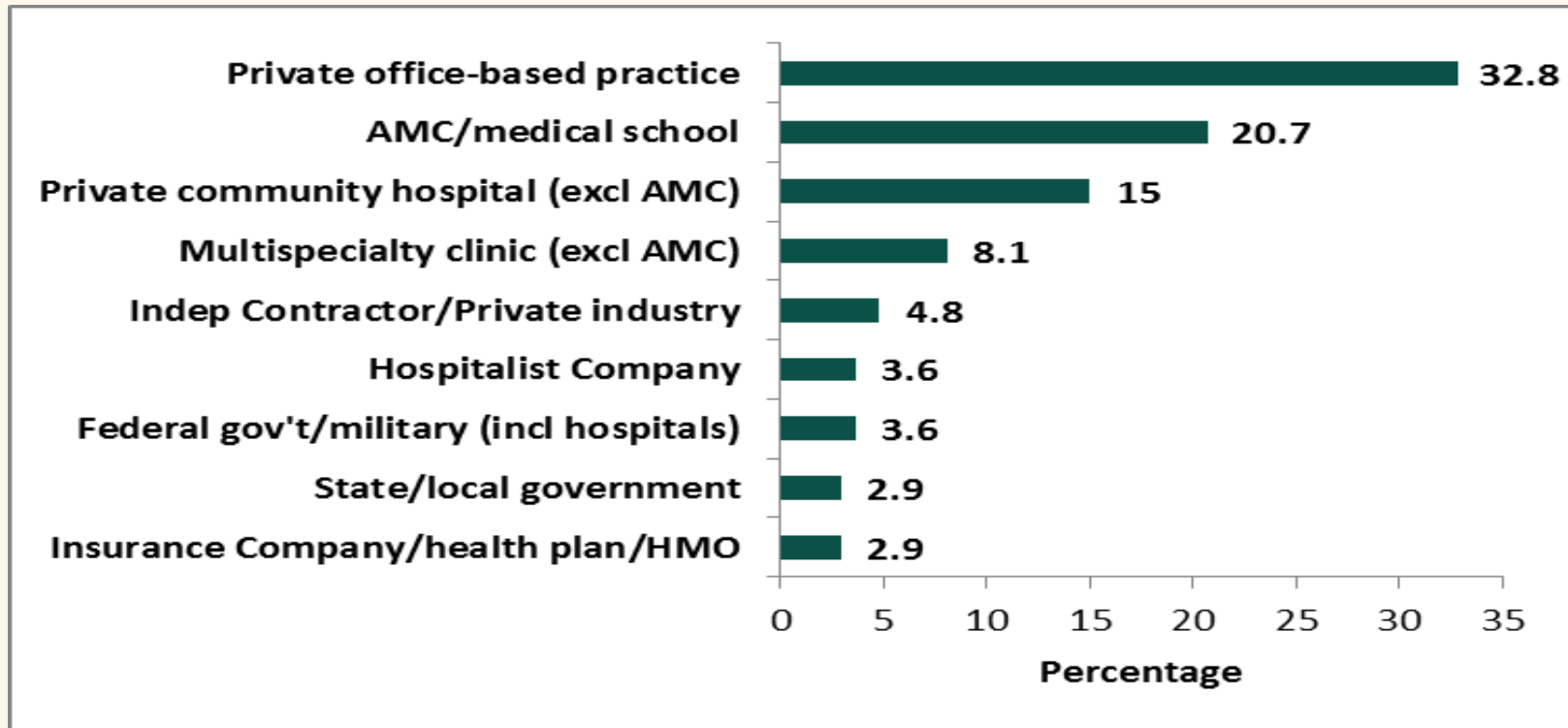


Questions Physicians Have Raised about Immunization

- Can a practice break even or generate income by vaccinating?
- Which vaccines should be purchased? How much? From whom? When?
- Which vaccines will impose a large co-pay on patients?
- What vaccines are covered by Medicare part B?
- What codes do I use for optimal reimbursement?
- Why can't I get vaccines as early in the season as pharmacies?
- How will the ACA impact vaccine coverage?

Primary Employer*

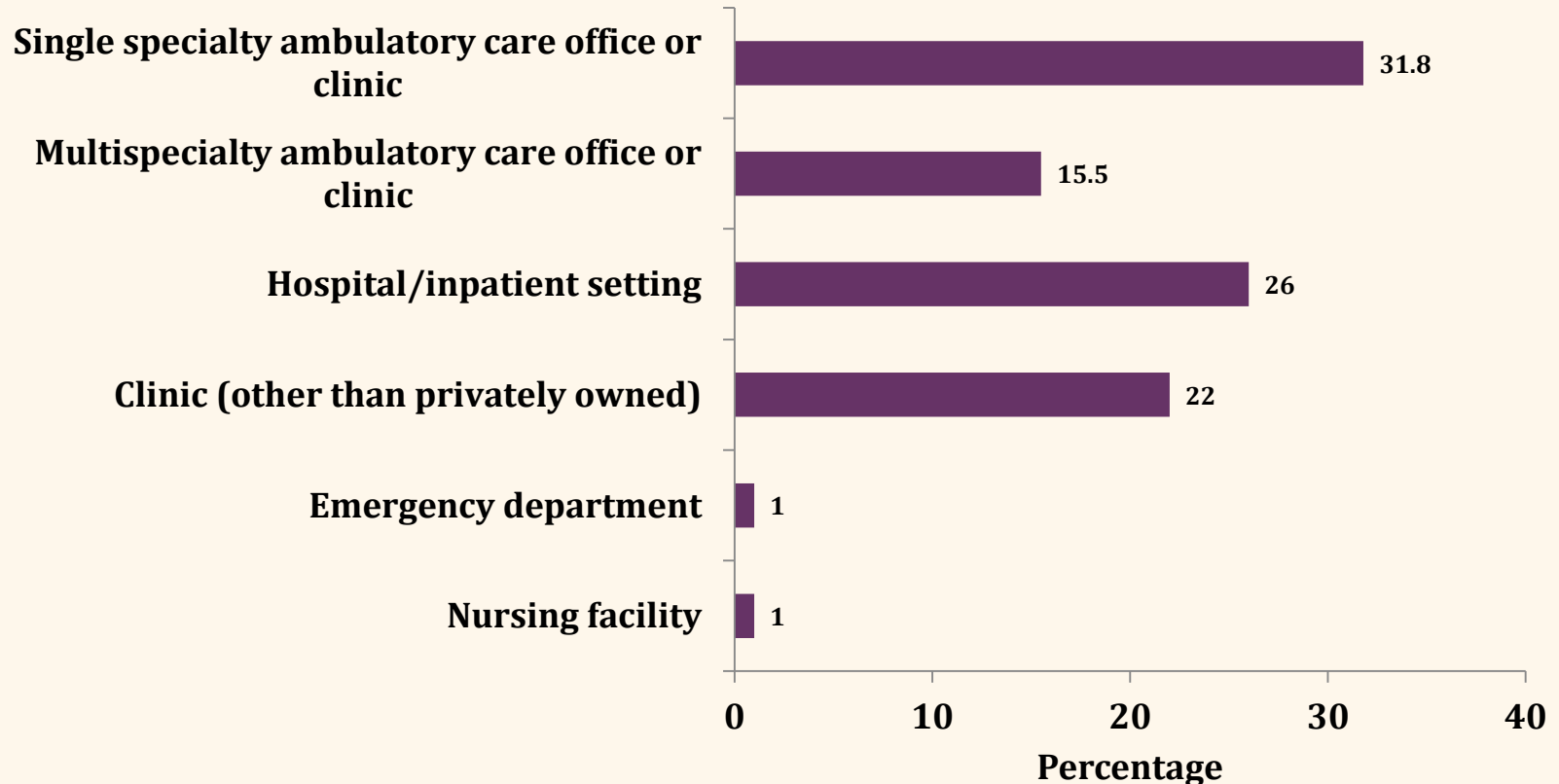
7



* Respondents currently working in medicine; not Resident/Fellow (N=806)

Work Setting Where Spend the Greatest Amount of Time in Direct Patient Care*

9

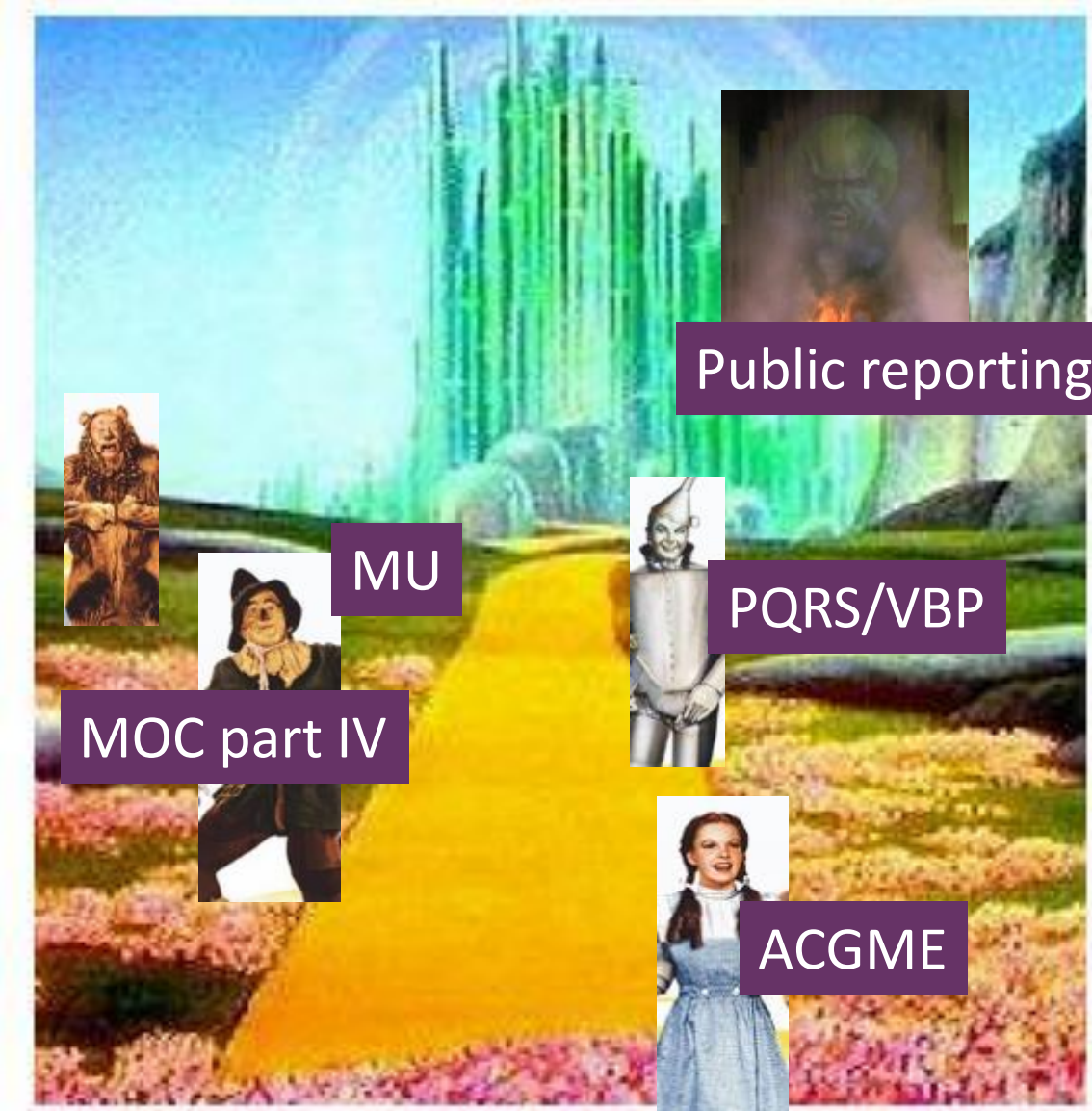


* Respondents currently working in medicine who provide direct patient care; not Resident/Fellow (N=776)



Current Healthcare System

Looks What is on the Yellow Brick Road



High Quality Patient Care



No place like a Patient Centered Medical Home

Can we even talk about
revenue?

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Average Pediatrician Income by State for Well Baby Check-Ups

I asked 3 or more pediatrician offices in the state

State	Visit Cost	Doctor Fee Per Vax	Vaccine Costs
California	\$268.67	\$44.50	Patient/Insurance Pays (No clinics mentioned)
Florida	\$147.00	\$10.00	State Pays
Idaho	\$156.00	\$31.00	State Pays
Illinois	\$200.00	\$23.93	Patient/Insurance Pays (No clinics mentioned)
New York	\$168.75	\$26.00	Patient/Insurance Pays, or State has clinics
Texas	\$156.00	\$22.33	Patient/Insurance Pays, or State has clinics
Average	\$182.74	\$26.29	Tax payers, the patient, or insurance pays

I've always wondered why so many doctors are so adamantly hardcore about demanding all their patients fully vaccinate, and why they kick patients out of their office who refuse. I'd always just assumed it was because the doctors felt that the vaccine protection was so important that they don't want any children to be at risk, so they draw a line in the sand for the good of the child (in their minds). BUT some doctors, especially those large groups who rely heavily on large HMO contracts, may actually be doing this because of money. Do they have the right to do so? Of course. But is it right? I don't

✓ FACT OR FICTION

Vaccines are Money Makers for Docs?

“*FACT: Your doctor does not make a profit from giving vaccines to your child.*”

PEDIATRICS® 

ORIGINAL RESEARCH

Cost of Vaccine Administration Among Pediatric Practices

Judith E. Glazner, MS^a, Brenda Beaty, MSPH^b, Stephen Berman, MD^{c,d}

+ Author Affiliations

ABSTRACT

OBJECTIVE: The goal was to describe variable costs to providers of delivering childhood immunizations.

RESULTS: The total documented variable cost per injection (excluding vaccine cost) averaged \$11.51, calculated from the following categories: nursing time, \$1.71; billing services, \$2.67; nonroutine services, \$1.64; registry use, \$0.96; physician time, \$4.05; supplies, \$0.36; medical waste disposal, \$0.12. Nonroutine activities primarily included performing vaccine inventory and ordering, providing vaccination records to requesters, and answering parent telephone questions about vaccinations. With the use of a simulation model to compensate for the small number of participating practices, the calculated total variable cost per injection was \$11.83. When 2 vaccines were administered, we compared the sum of the 2 payments with the sum of the 2 variable costs (\$23.02). More than one third of the payment agreements (13 of 37 agreements) paid the practices less than the combined variable costs for 2 immunizations.

CONCLUSION: This study shows that the variable costs of vaccine administration exceeded reimbursement from some insurers and health plans. of vaccine health plans.

Accepted August 25, 2009.

<http://immunizeforgood.com/fact-or-fiction/vaccines-are-money-makers-for-docs>

Let the brainstorming begin!

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Questions/Issues/Ideas

- Based on existing tools and the practice environment, what tool(s) or approaches would fill a need in assisting physicians get into the business of vaccination?
- Who is the target audience? Small independent practices? Owned practices? ACOs? Physicians? Practice staff? What are the implications for different practice configurations and members?
- Is there a tool that explains the ACA's coverage of immunizations? Is one needed?
- Is there a tool that links immunization to VBPs/PQRS/other pay-for-performance programs? Would this be valuable?
- Is there a way to provide “bite” size useful information or otherwise customize and target information for the practice?
- What is the role of advocacy? The private sector?

Thanks!