3-18-23 Weekly Clinical Update

There have been a lot of questions about billing for vaccinations lately, especially now that residents that have not had the spring update of COVID boost are now not considered “up-to-date” and the NHSN reporting has to reflect that newest recommendation. In anticipation of this week’s AHCA State Affiliate call, AHCA sent out a “SNF Fact Sheet” developed by CMS to assist with billing questions.

Here is a summary from the tool that was provided to us:

Medicare billing guidelines

Respiratory syncytial virus (RSV) vaccines

Medicare Part D covers RSV vaccines with no consumer cost-sharing. If the vaccine is covered under a Part D plan, the long-term care (LTC) pharmacy will not bill separately for any administration of the vaccine per Medicare Part D’s **vaccine administration guidance**. If the facility administers the RSV vaccine, the facility may negotiate an administration fee with their LTC pharmacy, but the facility can’t **bill an administration fee to Medicare or the patient**.

For Part A stay residents with Part D (including hospice patients)

LTC pharmacy will bill patient’s Part D plan for the RSV vaccine if the pharmacy is in-network. If the pharmacy is out-of-network, the pharmacy will bill the patient, who can submit their receipt to their Part D plan for payment.

Note: Vaccine access from an out-of-network pharmacy should be rare given the Part D requirement to provide convenient access to LTC pharmacies.

If an outside vaccinator administers the RSV vaccine, the vaccinator will bill the patient’s Part D plan if the vaccinator is in-network. If the vaccinator is out-of-network, they’ll bill the patient, who can submit their receipt to their Part D plan for payment.

For non-Part A / long-term stay residents with Part D

LTC pharmacy will bill patient’s Part D plan for the RSV vaccine if the pharmacy is in-network. If the pharmacy is out-of-network, the pharmacy will bill the patient, who can submit their receipt to their Part D plan for payment.
If an outside vaccinator administers the RSV vaccine, the vaccinator will bill the patient’s Part D plan if the vaccinator is in-network. If the vaccinator is out-of-network, they’ll bill the patient, who can submit their receipt to their Part D plan for payment.

For patients without Part D

The LTC pharmacy will bill the patient for the RSV vaccine as an uncovered service.

Flu, pneumococcal & COVID-19 vaccines

Medicare Part B covers influenza, pneumococcal, and COVID-19 vaccines with no consumer cost-sharing. A vaccine may be billed by the facility or the LTC pharmacy, depending on whether the patient is in their Part A stay.

For Part A stay residents(including hospice patients)

Facility will bill the vaccine cost and administration fee on single claims using Type of Bill (TOB) 22X, or submit claims on a roster bill for multiple patients at a time.
LTC pharmacy isn't allowed to bill directly for these Part B vaccines.

Note: During the COVID-19 public health emergency, outside immunizers could bill Medicare directly for providing flu, pneumococcal, and COVID-19 vaccinations onsite at SNF facilities. This flexibility ended on June 30, 2023.

For non-Part A / long-term stay residents

Facility can bill the vaccine cost and administration fee on single claims using TOB 23X, or submit claims on a roster bill for multiple patients at a time.
LTC pharmacy can bill directly for both the vaccine cost and the administration fee.

CMS updates the price and billing codes for vaccines each year. See 2023-24 Medicare vaccine pricing and codes

Hopefully this helps clear up some of the confusion.