

October 2009

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AAP addressing payment for H1N1 vaccine administration

<http://aapnews.aappublications.org/cgi/content/full/30/10/1>

Physician payment data in Medicaid, commercial plans available by state

<http://aapnews.aappublications.org/cgi/content/full/30/10/10-a>

1. H1N1 coding, coverage, payment resources now available

The AAP has a dedicated a Web page on the AAP home page of H1N1 resources for clinicians that is updated regularly. The site provides information on coding, coverage, payment, and practice guidance, as well as guidance for educational institutions, childcare providers, communities and states. To access the site go to:

<http://www.aap.org/new/swineflu.htm#Coding>

2. Kansas pediatrician successfully advocates for appropriate payment for H1N1 immunization administration

Kathy Cain, MD, FAAP and member of the AAP Private Payer Advocacy Advisory Committee (PPAAC) reports that BCBS of Kansas is making an exception to its fee schedule and will pay all network physicians the regional Medicare rate for CPT code 90470 (*H1N1 immunization administration (intramuscular, intranasal), including counseling when performed*). Dr. Cain shared with the carrier the recent AAP letter urging payments to be at least 100% of the Medicare rate and BCBS of Kansas responded that it will pay the H1N1 administration at the Medicare rate which is higher than its standard rate for immunization administration. A copy of the letter (<http://www.aapca3.org/law/ppa/h1n1admin.pdf>) is attached for chapters and members to share with local and regional carriers.

3. CMS and CDC issue H1N1 billing guidance; penny charge ok'd for H1N1 vaccine

In response to pediatrician's concerns raised about payer's billing guidelines for the H1N1 influenza vaccine to include a charge of \$0.01, the AAP sought clarification from America's Health Insurance Plans (AHIP), the Centers for Medicare & Medicaid Services (CMS) and the Centers for Disease Control (CDC) CMS and CDC have both responded by releasing a set of Questions & Answers addressing the H1N1 billing including the \$0.01 charge. Although the vaccine is being provided at no charge to providers, in recognizing the nuances of billing software, CMS and CDC noted that providers will not be subject to sanctions or penalties for billing the vaccine code with a \$0.01 charge.

The document is available at the CMS site at:

http://www.cms.hhs.gov/H1N1/Downloads/H1N1_Medicare_FFS_Emergency_QsAs.pdf

Please refer to Question H1N1-15 (Section 1, page 4).

The CDC posted the guide H1N1 Vaccine Administration Billing Q&A at

http://www.cdc.gov/h1n1flu/vaccination/statelocal/vaccing_billing_qa.htm Please refer

to question 13 of the document.

4. CDC clarifies statement on third party billing for H1N1 administration

At the urging of the AAP, the CDC also clarified statements regarding third party billing. CDC posted the guide H1N1 Vaccine Administration Billing Q&A at http://www.cdc.gov/h1n1flu/vaccination/statelocal/vaccing_billing_qa.htm and Question 10 confirms that private payers may be billed the agreed upon rate for H1N1 influenza vaccine administration and not limited to the regional Medicare rate if the agreed upon rate is higher.

10: May providers bill private third-party payers or insurers for H1N1 vaccine administration if the level of reimbursement provided by the private insurer is greater than the regional Medicare vaccine administration rate? Yes. The H1N1 provider agreement states that the provider "may charge a fee for the administration of the vaccine to the patient, their health insurance plan, or other third party payer. The administration fee cannot exceed the regional Medicare vaccine administration fee." This means that the provider may not request out-of-pocket payment from a patient that is greater than the amount that Medicare reimburses for influenza vaccine administration in that jurisdiction. "Charge" refers to collecting an out-of-pocket payment from the patient.

However, the provider agreement does not dictate the level of reimbursement for vaccine administration that is provided by an insurance plan or payer. Providers should bill payers and insurance plans at their regular agreed-upon rates, and may accept whatever level of reimbursement is provided by a plan or payer for H1N1 vaccine administration.

5. AAP News articles related to private payer advocacy issues

The following articles related to private payer advocacy issues are in the October 2009 AAP News:

AAP addressing payment for H1N1 vaccine administration

<http://aapnews.aappublications.org/cgi/content/full/30/10/1>

Physician payment data in Medicaid, commercial plans available by state

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Report H1N1 billing issues on the AAP Hassle Factor Form

To monitor H1N1 billing and payment issues, AAP members are encouraged to submit the information on the AAP Hassle Factor Form

(<http://www.aap.org/moc/reimburse/hasslefactor/HassleForm.cfm>). If the issue is with a clearinghouse, where you are asked to indicate the carrier, choose "Other Carrier" and clearly identify in the section below that this is a clearinghouse issue and the name of the clearinghouse. AAP staff will then analyze this data continuously over the next few weeks to identify problem areas and address the coding issues with those carriers and clearinghouses.

For additional information on AAP private payer advocacy, contact Lou Terranova, Senior Health Policy Analyst at lterranova@aap.org or 800/433-9016 ext 7633

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