CMS Manual System Pub. 100-20 One-Time Notification Transmittal 114 Department of Health & Human Services (DHHS) Centers for Medicare & Medicaid Services (CMS) Date: SEPTEMBER 17, 2004 CHANGE REQUEST 3490

SUBJECT: Payment Allowances for the Influenza Virus Vaccine (CPT 90658) and the Pneumoccocal Vaccine (CPT 90732) When Payment is Based on 95 Percent of the Average Wholesale Price (AWP)

I. SUMMARY OF CHANGES: This one time notification provides the payment allowances for the influenza virus vaccine (CPT 90658) and the pneumoccocal vaccine (CPT 90732) when payment is based on 95 percent of the Average Wholesale Price (AWP).

NEW/REVISED MATERIAL - EFFECTIVE DATE*: September 1, 2004 IMPLEMENTATION DATE: October 1, 2004

Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual not updated.)
(R = REVISED, N = NEW, D = DELETED) – (Only One Per Row.)

| R/N/D | CHAPTER/SECTION/SUBSECTION/TITLE |
|-------|----------------------------------|
| N/A | |
| | |
| | |

III. FUNDING: Medicare contractors shall implement these instructions within their current operating budgets.

IV. ATTACHMENTS:

| | Business Requirements |
|---|-------------------------------|
| | Manual Instruction |
| | Confidential Requirements |
| X | One-Time Notification |
| | Recurring Update Notification |

^{*}Unless otherwise specified, the effective date is the date of service.

Attachment – One-Time Notification

Pub. 100-20 Transmittal: 114 Date: September 17, 2004 Change Request 3490

SUBJECT: Payment Allowances for the Influenza Virus Vaccine (CPT 90658) and the Pneumoccocal Vaccine (CPT 90732) When Payment is Based on 95 Percent of the Average Wholesale Price (AWP)

I. GENERAL INFORMATION

This one time notification provides the payment allowance for CPT 90658 and CPT 90732 when payment is based on 95 percent of the AWP. The Medicare Part B payment allowance in these situations for CPT 90658 is \$10.10 and for CPT 90732 is \$23.28, effective September 1, 2004. Annual Part B deductible and coinsurance amounts do not apply. All physicians, non-physician practitioners and suppliers who administer the influenza virus vaccination and the pneumoccocal vaccination must take assignment on the claim for the vaccine.

Provider Education: A Medlearn Matters provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article must be included in your next regularly scheduled bulletin. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.

II. BUSINESS REQUIREMENTS

[&]quot;Should" denotes an optional requirement

| Requirement | Requirements | Re | espo | nsi | bilit | y (" | X" i | indi | cate | es the |
|-------------|--|----|------|---------|-------|------|----------------|------|------|--------|
| Number | | co | lum | ns 1 | that | app | oly) | | | |
| | | | | | | | red S ntair | • | m | Other |
| | | FI | RHHI | Carrier | DMERC | SSIH | MCS | VMS | CWF | |
| 3490.1 | Effective September 1, 2004, the Medicare Part B payment allowance for CPT 90658 is \$10.10. | X | | X | | | | | | |
| 3490.2 | Effective September 1, 2004, the Medicare Part B payment allowance for CPT 90732 is \$23.28. | X | | X | | | | | | |

[&]quot;Shall" denotes a mandatory requirement

| Requirement Number | Requirements | Responsibility ("X" indicates the columns that apply) | | | | | | | | |
|-----------------------|--|---|------|---|-------|------|-----------------|-----|-----|-------|
| | | | | | | Sha | red S intair | | em | Other |
| | | FI | RHHI | X | DMERC | FISS | MCS | VMS | CWF | |
| 3490.3 | Contractors shall not search their files to either retract payment for claims already paid or to retroactively pay claims. However, contractors shall adjust claims brought to their attention. | X | | X | | | | | | |
| 3490.4 | A Medlearn Matters provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article must be included in your next regularly scheduled bulletin. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly. | X | | X | | | | | | |

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

| X-Ref Requirement # | Instructions |
|---------------------|--------------|
| | |

B. Design Considerations: N/A

| X-Ref Requirement # | Recommendation for Medicare System Requirements |
|---------------------|---|
| | |

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

| Effective Date*: September 1, 2004 | Medicare contractors shall |
|--|--|
| Implementation Date: October 1, 2004 | implement these instructions within their current operating budgets. |
| Pre-Implementation Contact(s): Angela Mason, 410-786-7452 | |
| Post-Implementation Contact(s): Appropriate Regional Office | |

^{*}Unless otherwise specified, the effective date is the date of service.