



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR PUBLIC HEALTH**

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MEMORANDUM

TO: All Local Health Departments

FROM: Rosie Miklavcic, RN BSN MPH
Chief Nursing Officer and Director of Administration & Financial Management

DATE: October 5, 2009

SUBJECT: Instructions for Reporting and Billing 2009 novel H1N1 Influenza Vaccinations

The Kentucky Department for Public Health (KDPH) encourages all local health departments to offer the novel H1N1 influenza vaccinations to targeted risk groups as soon as their vaccine becomes available. To avoid a missed opportunity, please offer H1N1 influenza vaccinations during all appropriate healthcare encounters.

Four (4) H1N1 influenza vaccine administration documents will be available from KDPH. These documents include the following:

- LHDO-2 SEASONAL Influenza and/or H1N1 Influenza, VACCINE ADMINISTRATION RECORD
- LHDO-3 H1N1 Influenza Vaccine ADMINISTRATION RECORD (NO Third Party Billing)
- LHDO-4 H1N1 Influenza Vaccine ADMINISTRATION RECORD (Third Party Billing)
- LHDO-5 SCHOOL FORM H1N1 Influenza Vaccine ADMINISTRATION RECORD

Please Note: The request for translation services of these forms has been submitted to the Cabinet for Health and Family Services. The Spanish versions will be forwarded to LHDs upon receipt.

The H1N1 Influenza Vaccine Administration forms and Vaccine Information Statements (VIS) for the live attenuated and the inactivated vaccine are included as attachments with this document.

BILLING INFORMATION

The H1N1 Influenza vaccine will be provided FREE by the Centers for Disease Control and Prevention. No provider will be allowed to charge patients for the H1N1 influenza vaccine.

In accordance with federal guidance, Kentucky local health departments (LHDs) **will not** be allowed to charge the patients directly for the administration of the H1N1 influenza vaccine as each LHD is a recipient of Public Health Emergency Response (PHER) funds. It is not permissible to charge patients in public health clinics or mass vaccination clinics conducted by or on behalf of a public health entity. A 'public health clinic' is defined as a clinic that is conducted by, or on behalf of a state or local health jurisdiction and receives PHER implementation funds to administer H1N1 vaccine in any setting. However private providers, whom you may have vaccine recipient agreements with and who do not receive PHER funds, may charge the patient for the administration of the H1N1 influenza vaccine.

It is permissible to bill third party payors/insurers in public health clinics or mass vaccination clinics conducted by, or on behalf of a public health entity. **LHDs are not allowed to charge the patient any co-payments or out-of-pocket charges.**

LHDs that choose to bill third party payors/insurers must report the administration through the Patient Services Reporting System (PSRS). LHDs that choose NOT to bill third party payors/insurers will NOT be required to report the administration through PSRS. However, any collection, reporting and billing of these administration services must meet the requirements of the third party payors/insurers.

The H1N1 vaccine administration may be reported/recorded on a Patient Encounter Form (PEF) with documentation in the patient medical record or on the attached vaccine administration records. In addition to the regular encounter entry screen, the Medicare Roster Billing Screen is available. The Roster Billing Process is acceptable for Medicare patients who receive their vaccine through a mass vaccination clinic.

BILLING OPTIONS

- I. **H1N1 influenza vaccine administration provided in the clinic, mass vaccinations sites, or school settings when Third Party Payors/Insurers will NOT be billed.**
 - A. LHD will use the LHDO-3 form. You should collect the minimum demographics and obtain consent for administering the vaccine. Consent must be signed by the patient or parent/legal guardian after being provided the appropriate VIS form and had the opportunity to ask questions of the medical professional administering the vaccine. All of the data fields on the top half of the form are required. The health professional will complete the "*For Health Department Use ONLY*" area of the form.
 - B. Forms LHDO-2 (Seasonal and H1N1 Influenza combined form) and LHDO-5 (School setting form) may be used by placing an "X" through the insurance collection information section.

- C. The LHDO abbreviated record forms will be used as the patient's medical record. The record must be kept for a minimum of three (3) years following vaccination.

II. H1N1 Influenza Vaccine administration provided in the clinic, mass vaccinations sites, or school settings when Third Party Payors/Insurers will be billed.

- A. LHD will use the LHDO-4 form. This form includes the consent, assignment of benefits, and release of information for Medicare, Medicaid, and insurance billings. For those patients who are uninsured or underinsured you may “X” out the third party billing information on LHDO-4 or use the LHDO-3 form.
- B. For H1N1 influenza vaccine administration provided in the clinic, you will have two reporting options for FY 2009-2010. You may use one of the H1N1 Influenza Vaccine Administration Records enclosed with this packet as an abbreviated record **or** when the H1N1 vaccine is administered in addition to a patient's other clinical services, you may continue to pull patient records and document the H1N1 influenza given as a regular clinic activity. *DPH recommends that since the H1N1 influenza vaccine is a rarely offered vaccine and the retention is not permanent, the H1N1 Influenza Administration Record be used in the clinic.*
- C. Forms LHDO-2 (Seasonal and H1N1 Influenza combined form) and LHDO-5 (School form) may be used. If there is no third party billing, place an “X” through the insurance collection information section. If LHDO-2 is used and only the Seasonal Influenza will be charged/billed, then do not check the H1N1 influenza administration code in the “For Health Department Use Only” section.
- D. For coding the H1N1 Influenza Vaccine Administration Record form, there is a space on the administration form for a label containing the system-assigned document number (PEF label). All data fields on the top half of the H1N1 Influenza Vaccine Administration Record form must be entered on the registration screen for the successful completion of the third-party billing process.

In addition, the form includes the consent, assignment of benefits, and release of information for Medicare, Medicaid, and other third party payors. The form must be signed by the patient after the patient has had the opportunity to ask questions of the medical professional administering the vaccine. The medical professional will complete the “For Health Department Use Only” area of the form.

The 80000 code will not be needed for entry on this service.

The G9142 H1N1 Influenza vaccine code does not need to be reported since it has been provided free from the CDC.

Only the G9141 administration code is required with the V0481 ICD code.

The recently released CPT codes 90470-H1N1 immunization administration (intramuscular or intranasal), including counseling when performed, and the 90663-

Influenza virus vaccine, pandemic formulation, H1N1, will be available in the PSRS for use with insurance companies that require these codes for billing purposes.

After the encounter is entered into the system, the abbreviated record is to be filed in a folder marked H1N1 Influenza 2009-2010 and retained for six years.

- E. For coding on the PEF, if the sole purpose of the visit is for the H1N1 Influenza immunization, an Evaluation and Management (E/M) should NOT be reported. Payment **will not be made** to providers for office visits when the only purpose of the visit is the administration of either the seasonal and/or H1N1 vaccine(s).

If the H1N1 Influenza immunization is provided within the context of a visit for another purpose, simply report the H1N1 administration code (G9141 or 90470) in addition to all other CPTs which are appropriate to report for the visit.

III. Immunizations Provided in an Offsite Mass Vaccination Clinic

If influenza vaccinations are conducted in an offsite vaccination clinic, it is permissible to maintain an abbreviated record. The H1N1 influenza vaccine Administration Record is used as the medical record or the medical record/encounter form. There is a space on the form for the label which contains the system-assigned document number. If the label process is not feasible, you may obtain a block of numbers from the DPH Local Health Operations Help Desk and write in the document number. All of the data fields on the top half of the form are required. The form includes the consent, assignment of benefits, and release of information for Medicare, Medicaid, and other third party payors.

IV. Medicare policy regarding free flu services.

Governmental entities (such as Public Health Clinics) may bill Medicare for pneumococcal, Hepatitis B, and influenza virus vaccines administered to Medicare beneficiaries when services are rendered free of charge to non-Medicare beneficiaries. Information from the Claims Processing Manual 100-04, Chapter 18, Section 10.2.5.2. Link for more information: <http://www.cms.hhs.gov/Manuals/IOM/list.asp>

V. Time Coding and Billing

For LHDs choosing NOT to bill Third Party Payors/Insurers

- ALL disciplines involved in the administration of the H1N1 should report their time to the 731 Cost Center, regardless of the physical location where the service is delivered.

For LHDs choosing to bill Third Party Payors/Insurers

- Medical providers will report the amount of time spent administering H1N1 vaccine to those eligible patients to the 700 Cost Center.
- Clinical support staff will report all time spent for medical indirect for H1N1 activities to Cost Center 899 (this would include the collection of information for completing the H1N1 Influenza Administration form, reporting the information in the PSRS, and collecting payment from Third Party Payors/Insurers).

- For patients who do not have a Third Party Payor/Insurer, they would not be reported through the PSRS and time should be coded to the 731 Cost Center.
- Cost Center time coding will apply regardless of the physical location where the service is delivered. (i.e., the service is provided at a mass vaccination clinic or at your LHD, time coding depends on third-party billing).

LHDs may choose to utilize their Phase III (731) allocations before determining if there is a need to bill Third party Payors/Insurers.

VI. To Request Additional Providers

If the LHD will be billing third party payors/insurers, you must have a provider number for each volunteer or contracted nurse. If a LHD needs a provider number for an independent contractor and/or a personal service employee contract, please provide **the name, job title and who will be responsible for the third party billing**. These provider numbers are requested through the DPH Local Health Help Desk at the contact information below.

If you have any questions, please contact Local Health Operations Help Desk of the Division of Administration and Financial Management at (502) 564-6663, the Help Desk at CDM 2168, or e-mail LOCALHEALTH.HELPDESK@KY.GOV .

NOTE: The attached forms are inappropriate to use for other vaccinations other than the vaccine(s) it was designed for.