

## **Internal Medicine Coding Alert**

## **Reader Questions: Identify Code Combos for 2-Plus Vaccinations**

Question: How should I report the administration of the influenza vaccine along with another vaccine at the same office visit? Do the rules differ for Medicare versus private payers?

Ohio Subscriber

Answer: Yes, Medicare and private payers often have different coding conventions for when your internist provides a flu vaccine and another vaccine during the same encounter.

In a likely scenario, your internist would be administering the flu and the pneumonia vaccine during the same office visit. If the internist provides these vaccines to a patient with private insurance, report the following:

- 90656 (Influenza virus vaccine, split virus, preservative free, when administered to individuals 3 years and older, for intramuscular use) or 90658 (Influenza virus vaccine, split virus, when administered to individuals 3 years and older, for intramuscular use) if the internist administers the vaccine intramuscularly
- 90471 (Immunization administration [includes percutaneous, intradermal, subcutaneous, or intramuscular injections]; one vaccine [single or combination vaccine/toxoid]) for the flu vaccine administration
- 90732 (Pneumococcal polysaccharide vaccine, 23-valent, adult or immunosuppressed patient dosage, when administered to individuals 2 years or older, for subcutaneous or intramuscular use) for the pneumonia vaccine supply
- +90472 (... each additional vaccine [single or combination vaccine/toxoid] [List separately in addition to code for primary procedure]) for the pneumonia vaccine administration.

But for a Medicare payer, you'd report the same multi-shot scenario thusly:

- 90656 or 90658 for the flu vaccine supply for intramuscular use
- G0008 (Administration of influenza virus vaccine) for the flu vaccine administration
- 90732 for the pneumonia vaccine supply
- G0009 (Administration of pneumococcal vaccine) for the pneumonia vaccine administration.

Note: Medicare also has an administration code for hepatitis B vaccine; use G0010 (Administration of hepatitis B vaccine). For private insurers, however, you should stick with +90472 for the administration of any subsequent vaccines.

Example: If the internist administers three injectable immunizations during the same session for a non-Medicare patient, report 90471 and  $+90472 \times 2$ .

Some payers may accept the Medicare HCPCS codes -- so be sure to check with individual payers for their specific guidelines.