

## Outpatient Facility Coding Alert

### Reader Question: Know Your Payer to Choose the Vaccine Code

**Question:** Our facility will be given shingles and the new pneumonia vaccines, Does Medicare pay for the same and if it does what is the appropriate code to use?

Texas Subscriber

**Answer:** There are three codes for pneumonia vaccination:

- 90669 (Pneumococcal conjugate vaccine, 7 valent, for intramuscular use).
- 90670 (Pneumococcal conjugate vaccine, 13 valent, for intramuscular use).
- 90732 (Pneumococcal polysaccharide vaccine, 23- valent, adult or immunosuppressed patient dosage, when administered to individuals 2 years or older, for subcutaneous or intramuscular use).

**Your insurer decides the code:** The code you report for the administration of the vaccine will depend upon the payers.

For the administration of the pneumonia vaccine to a Medicare beneficiary, use G0009 (Administration of pneumococcal vaccine) when no physician fee schedule service on the same day.

For those insurers that do not follow Medicare guidelines, use 90471 (Immunization administration [includes percutaneous, intradermal, subcutaneous, or intramuscular injections]; one vaccine [single or combination vaccine/toxoid]).

Medicare covers pneumonia vaccine once in a lifetime and additional vaccine is generally based on risk.

For shingle vaccine use code: 90736 (Zoster [shingles] vaccine, live, for subcutaneous injection). Use code 90471 for administration.

Shingles vaccine is not covered under Medicare Part B. It is included as a benefit under Medicare Part D.