



Claims Processing Instructions for the New **Pneumococcal 15-valent Conjugate Vaccine Code 90671** and **Pneumococcal 20-valent Conjugate Vaccine Code 90677**

MLN Matters Number: MM12439 **Revised**

Related Change Request (CR) Number: 12439

Related CR Release Date: **December 14, 2021**

Effective Date: **July 1, 2021 for 90677, July 16, 2021 for 90671**

Related CR Transmittal Number: **R11163CP**

Implementation Date: April 4, 2022

Note: We revised this Article due to a revised CR 12439. The revised CR added instructions for vaccine code 90671 and changed the effective date for code 90677. We made those same changes in the Article as we show in dark red font. Also, we revised the CR release date, transmittal number, and the web address of the CR. All other information remains the same.

Provider Types Affected

This MLN Matters Article is for physicians, suppliers, and other providers who bill Medicare Administrative Contractors (MACs) for vaccine services they provide to Medicare patients.

Provider Action Needed

In this Article, you'll learn about:

- A new code for a pneumococcal vaccine
- Where to find pricing for the code
- The basis for Medicare's payment to institutional providers for this code

Make sure your billing staff knows about new vaccine code:

- 90677, which is effective for Dates of Service (DOS) on or after **July 1, 2021**
- **90671, which is effective for DOS on or after July 16, 2021**

Background

Pneumococcal conjugate vaccine code 90677 (Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use) **and 90671 (Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use)** will be payable by Medicare. **The new codes** will be in the 2021 Medicare Physician Fee Schedule Database file update and the annual HCPCS update.

Your MAC will use the [CMS Vaccines Pricing webpage](#) to obtain the payment rate for code

90677. Coinsurance and deductible don't apply.

Your MAC will pay institutional providers for **these codes** based on the Type of Bill (TOB) you use. Here are the 2 payment methods:

- 1) MACs will pay these institutional providers using reasonable cost if you use the following:
 - a. Hospitals (TOBs 12X and 13X)
 - b. Skilled Nursing Facilities (TOBs 22X and 23X)
 - c. Home Health Agencies (TOB 34X)
 - d. Hospital-based Renal Dialysis Facilities (RDFS) (TOB 72X)
 - e. Critical Access Hospitals (CAHs) (TOB 85X)

- 2) MACs will pay these institutional providers based on the lower of the actual charge or 95% of the Average Wholesale Price (AWP) if you use:
 - a. Comprehensive Outpatient Rehabilitation Facilities (TOB 75X)
 - b. Independent RDFs (TOB 72X)
 - c. Indian Health Services (IHS):
 - i. Hospitals (TOBs 12X and 13X)
 - ii. Hospices (TOBs 81X and 82X)
 - iii. IHS CAHs (TOB 85X)

Note: Your MAC will hold your claims they get before April 1, 2022, containing:

- HCPCS code 90677 with DOS on and after July 1, 2021
- **HCPCS code 90671 with DOS on or after July 16, 2021**

Your MAC will process the claims when Medicare systems are ready on April 4, 2022. **Also, your MAC will initiate a mass adjustment for any claims that rejected with HCPCS 90677 with a DOS from July 1 – September 30, 2021. This adjustment will occur after April 4, 2022.**

More Information

We issued [CR 12439](#) to your MAC as the official instruction for this change.

For more information, [find your MAC's website](#).

Document History

Date of Change	Description
December 15, 2021	We revised this Article due to a revised CR 12439. The revised CR added instructions for vaccine code 90671 and changed the effective date for code 90677. We made those changes in the Article as we show in dark red font. Also, we revised the CR release date, transmittal number, and the web address of the CR. All other information remains the same.
November 1, 2021	Initial article released.

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