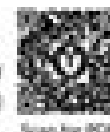


Influenza Vaccine Products for the 2024–2025 Influenza Season

Manufacturer	Trade Name (vaccine abbreviation) ¹	How Supplied	Mercury Content (mcg Hg/0.5mL)	Age Range	CVX Code	Vaccine Product Billing Code ²
						CPT
AstraZeneca	FluMist (LAIV3)	0.2 mL (single-use nasal spray)	0	2 through 49 years	111	90660
GSK	Fluarix (IV3)	0.5 mL (single-dose syringe)	0	6 months & older ³	140	90656
	FluLaval (IV3)	0.5 mL (single-dose syringe)	0	6 months & older ³	140	90656
Sanofi	Flublok (RV3)	0.5 mL (single-dose syringe)	0	18 years & older	155	90673
	Fluzone (IV3)	0.5 mL (single-dose syringe)	0	6 months & older ³	140	90656
		0.5 mL (single-dose vial)	0	6 months & older ³	140	90656
		5.0 mL, multi-dose vial (0.25 mL dose)	25	6 through 35 months ³	141	90657
		5.0 mL, multi-dose vial (0.5 mL dose)	25	6 months & older	141	90658
	Fluzone High-Dose (HD-IV3)	0.5 mL (single-dose syringe)	0	65 years & older ⁴	135	90662
CSL Seqirus	Afluria (IV3)	5.0 mL, multi-dose vial (0.25 mL dose)	24.5	6 through 35 months ³	141	90657
		5.0 mL, multi-dose vial (0.5 mL dose)	24.5	3 years & older ⁵	141	90658
		0.5 mL (single-dose syringe)	0	3 years & older ³	140	90656
	Fluzel (aIV3)	0.5 mL (single-dose syringe)	0	65 years & older ⁴	168	90653
	Flucevax (ccIV3)	0.5 mL (single-dose syringe)	0	6 months & older ³	153	90661
		5.0 mL, multi-dose vial (0.5 mL dose)	25	6 months & older ³	320	90661

NOTES

- All 2024–2025 seasonal influenza vaccines are inactivated. IV = egg-based inactivated influenza vaccine (injectable); where necessary to refer to cell culture-based vaccine, the prefix “cc” is used (e.g., ccIV). RV = recombinant hemagglutinin influenza vaccine (injectable). aIV = adjuvanted inactivated influenza vaccine.
- An administration code should always be reported in addition to the vaccine product code. Note: Third-party payers may have specific policies and guidelines that might require providing additional information on their claim forms.
- Dosing for infants and children age 6 through 35 months:
 - Afluria 0.25 mL
 - Fluarix 0.5 mL
 - Flucevax 0.5 mL
 - FluLaval 0.5 mL
 - Fluzone 0.25 mL or 0.5 mL
- Solid organ transplant recipients age 18 through 64 years who are on immunosuppression medication regimens may receive HD-IV influenza vaccine as options for influenza vaccination, without a preference over other age-appropriate IVs or RVs.
- Afluria is approved by the Food and Drug Administration for intramuscular administration with the Pharmedet Stratis Needle-Free Injection System for persons age 18 through 64 years.



Medicare Billing For Flu Vaccine 2013

Carol J. Buck



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The Next Step: Advanced Medical Coding and Auditing, 2013 Edition Carol J. Buck, 2013 Learning advanced medical coding concepts is easy with Carol J Buck's proven step by step method. The Next Step Advanced Medical Coding and Auditing 2013 Edition provides an in depth understanding of physician based medical coding and coding services such as medical visits diagnostic testing and interpretation treatments surgeries and anesthesia. Patient cases reflect actual medical records with personal details changed or removed and give you real world experience coding from physical documentation with advanced material. Enhance your clinical decision making skills and learn to confidently pull the right information from documents select the right codes determine the correct sequencing of those codes properly audit cases and prepare for the transition to ICD 10 CM with the help of Carol J Buck. Auditing cases in every chapter offer realistic experience with auditing coded reports. UNIQUE Evaluation and Management E M Audit Forms developed to determine the correct E M codes simplify the coding process and help you ensure accuracy. Dual Coding prepares you for the switch to ICD 10 by accompanying all ICD 9 answers with corresponding codes from ICD 10 CM. Realistic patient cases simulate the professional coding experience by using actual medical records with personal patient details changed or removed allowing you to practice coding with advanced material. UNIQUE Netter anatomy plates in each chapter help you understand anatomy and how it affects coding. From the Trenches boxes in each chapter highlight real life medical coders and provide practical tips advice and encouragement. More than 175 illustrations and a full color design make advanced concepts more accessible and visually engaging. Stronger focus on auditing cases prepares you to assign correct codes to complicated records as well as audit records for accuracy. Updated content presents the latest coding information so you can practice with the most current information available.

The Next Step: Advanced Medical Coding and Auditing, 2013 Edition - E-Book Carol J. Buck, 2012-12-14 Stronger focus on auditing cases prepares you to assign correct codes to complicated records as well as audit records for accuracy. Updated content presents the latest coding information so you can practice with the most current information available.

Federal Register, 2013-07 **Report on the Legislative and Oversight Activities of the Committee on Ways and Means During the ... Congress** United States. Congress. House. Committee on Ways and Means, 2015

Step-by-Step Medical Coding, 2013 Edition Carol J. Buck, 2012-12-15 Take your first step toward a successful career in medical coding with comprehensive coverage from the most trusted source in the field. Step by Step Medical Coding 2013 Edition is the practical easy to use resource that shows you exactly how to code using all of today's coding systems. In depth step by step explanations of essential coding concepts are followed by practice exercises to reinforce your understanding. In addition to coverage of reimbursement ICD 9 CM CPT HCPCS and inpatient coding the 2013 edition offers complete coverage of the ICD 10 CM diagnosis coding system in preparation for the eventual transition. No other text on the market so thoroughly prepares you for all coding sets in one source. Dual coding in Units 4 and 5 where both ICD 10

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Accounting for Social Risk Factors in Medicare

Payment National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Health Care Services, Board on Population Health and Public Health Practice, Committee on Accounting for Socioeconomic Status in Medicare Payment Programs, 2017-06-18 Recent health care payment reforms aim to improve the alignment of Medicare payment strategies with goals to improve the quality of care provided patient experiences with health care and health outcomes while also controlling costs These efforts move Medicare away from the volume based payment of traditional fee for service models and toward value based purchasing in which cost control is an explicit goal in addition to clinical and quality goals Specific payment strategies include pay for performance and other quality incentive programs that tie financial rewards and sanctions to the quality and efficiency of care provided and accountable care organizations in which health care providers are held accountable for both the quality and cost of the care they deliver Accounting For Social Risk Factors in Medicare Payment is the fifth and final report in a series of brief reports that aim to inform ASPE analyses that account for social risk factors in Medicare payment programs mandated through the IMPACT Act This report aims to put the entire series in context and offers additional thoughts about how to best consider the various methods for accounting for social risk factors as well as next steps CBO, Budget Options Volume 1, Health Care, December 2008, 2009

Medicare

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retirement you need the latest Medicare guidelines from a source you can trust the 2013 Edition of Medicare Handbook Prepared by experts from the Center for Medicare Advocacy Inc Medicare Handbook covers the issues you need to provide effective planning advice or advocacy services including Medicare eligibility and enrollment Medicare covered services deductibles and co payments Co insurance premiums and penalties Federal coordinated care issues Grievance and appeals procedures Face to face encounter requirements for home health and hospice care Medicare Handbook also provides you with coverage rules for Obtaining Medicare covered services Prescription drug benefit and the Low Income Subsidy LIS The Medicare Advantage Program Durable Medical Equipment DME Preventive services Appealing coverage denials and an understanding of The Medicare Secondary Payer Program MSP The Durable Medical Equipment Prosthetics Orthotics and Supplies DMEPOS Competitive Acquisition Program Income related premiums for Parts B and D The 2013 Edition has been updated to include information and strategies necessary to incorporate ACA provisions on behalf of people in need of health care In addition the 2013 Medicare Handbook will also help advocates contest limited coverage under private Medicare Part C plans Medicare Advantage and understand initiatives to reduce overpayments to Medicare Advantage Other Medicare developments discussed in the 2013 Medicare Handbook include Implementation of important provisions of the Affordable Care Act Beneficiary rights when moving from one care setting to another Developments in the Medicare Home Health and Hospice Benefits Additional information regarding preventive benefits Continued changes in Medicare coverage for durable medical equipment

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delivery in health and aging This includes recent enhancements in the theories of gerontology innovations in clinical interventions and major developments in the social policies that structure and finance health care and senior services In addition the policy reforms of the 2010 Patient Protection and Affordable Care Act set in motion a host of changes in the United States healthcare system with potentially profound implications for the programs and services which provide care to older adults and their families In this volume the most experienced and prominent gerontological health care scholars address a variety of populations that social workers serve and the arenas in which they practice followed by detailed recommendations of best practices for an array of physical and mental health conditions The volume s unprecedented attention to diversity health care trends and implications for practice research policy make the publication a major event in the field of gerontological social work This is a Must Read for all social work social work educators practitioners and students interested in older adults and their families **Immunization Update** ,2000 **Departments of Labor, Health and**

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