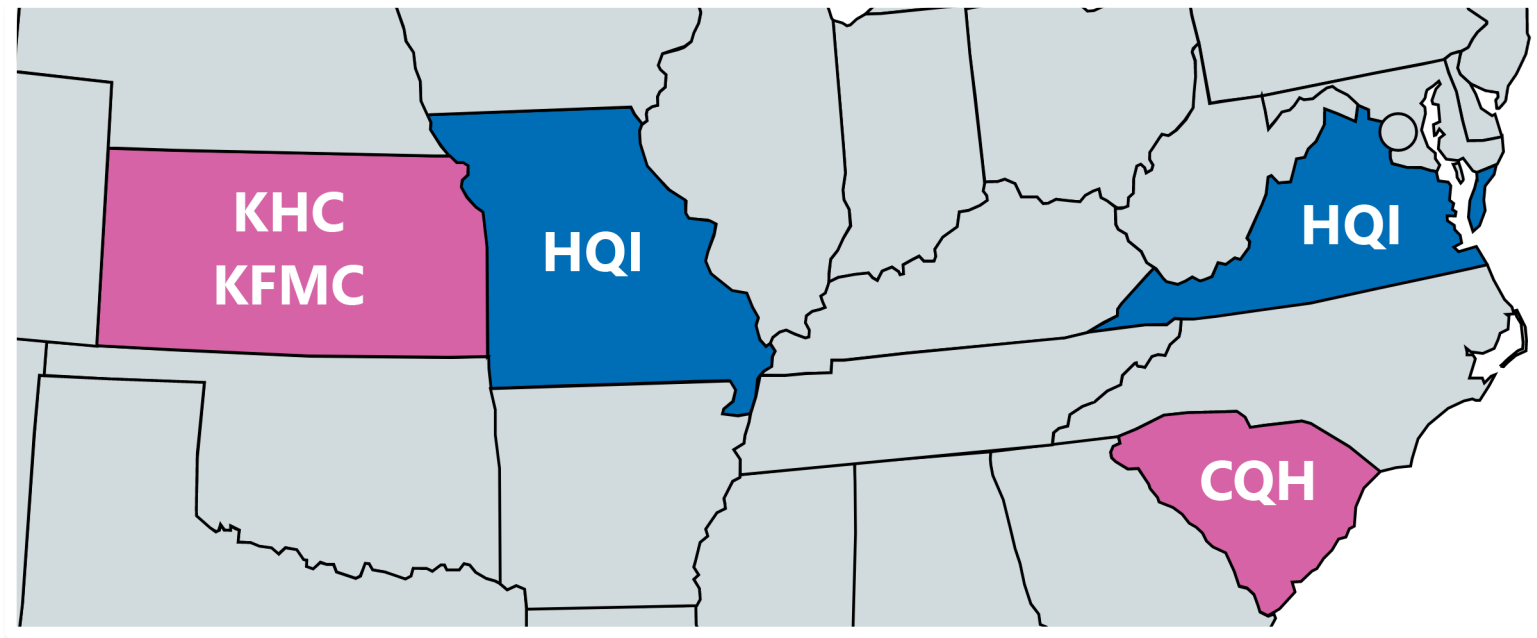




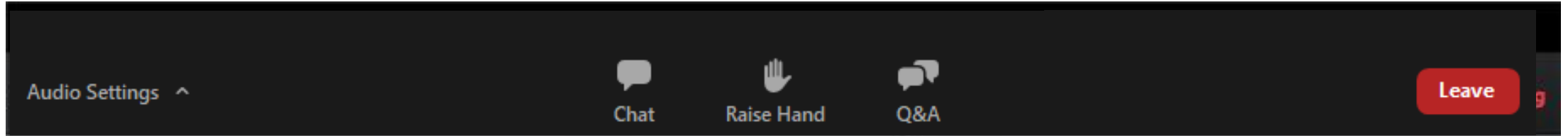
Connect With Your Pharmacist to Support Your Vaccine Initiative and QAPI Efforts

April 25, 2024

Health Quality Innovation Network



Logistics – Zoom Webinar



To ask a question, click on the **Q&A** icon.

Resources from today's session will be posted in **Chat**.

You may adjust your audio by clicking **Audio Settings**.

You have been automatically muted with video turned off.

Your Team



Mary Locklin, MSN, RN, CIC
Senior QIA-Infection
Prevention



**Chad Worz, PharmD, BCGP,
FASCP**
Chief Executive



**Cindy Warriner, BS,
BSP Pharm, RPh, CDCES**
Senior Consultant Pharmacist

Presentation Objectives

Participants will:

- Gain awareness of Pharmacist's availability to order vaccines
- Appreciate the expertise of Pharmacist as on-site education provider
- Understand measures to mitigate complex billing associated with vaccines
- Understand the role of the pharmacy/pharmacist in assisting with regulatory compliance and quality improvement



Internal Team Interaction

- Alignment of consultant pharmacist, medical director and director of nursing – relationship/communication is important
- Collaboration for the administration (*inventory for vaccines*) of vaccinations/medications
- Monthly medication reconciliation reviews – timing (*inclusion of immunizations*)
- Medication reviews for new admissions or return from hospital (*inclusion of immunizations*)

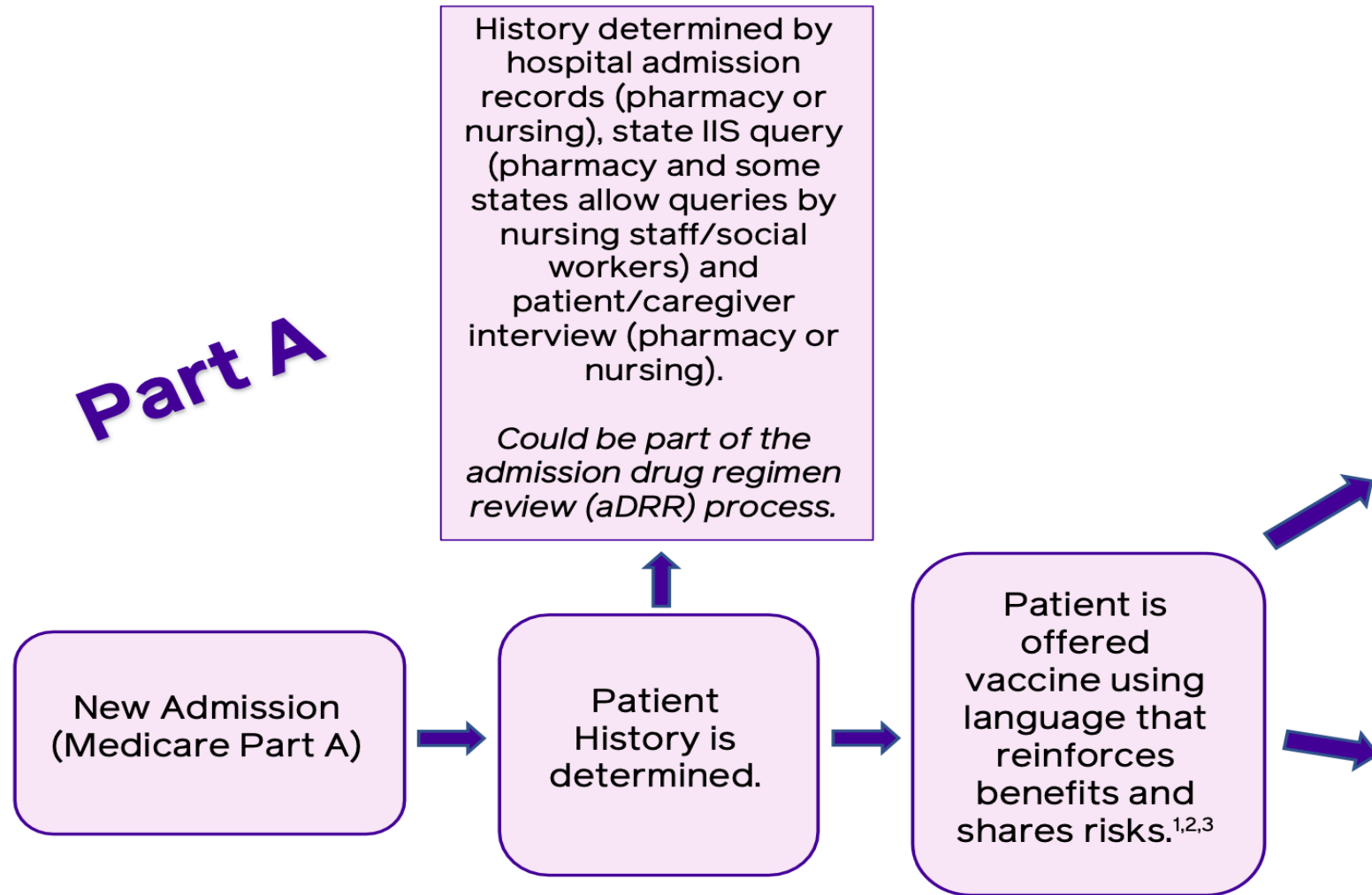
Medicare Billing Information

Chapter 6 of the Medicare Claims Processing Manual provides some background on Skilled Nursing Facility (SNF) billing for preventative services like vaccinations. You can access the entire document [here](#).

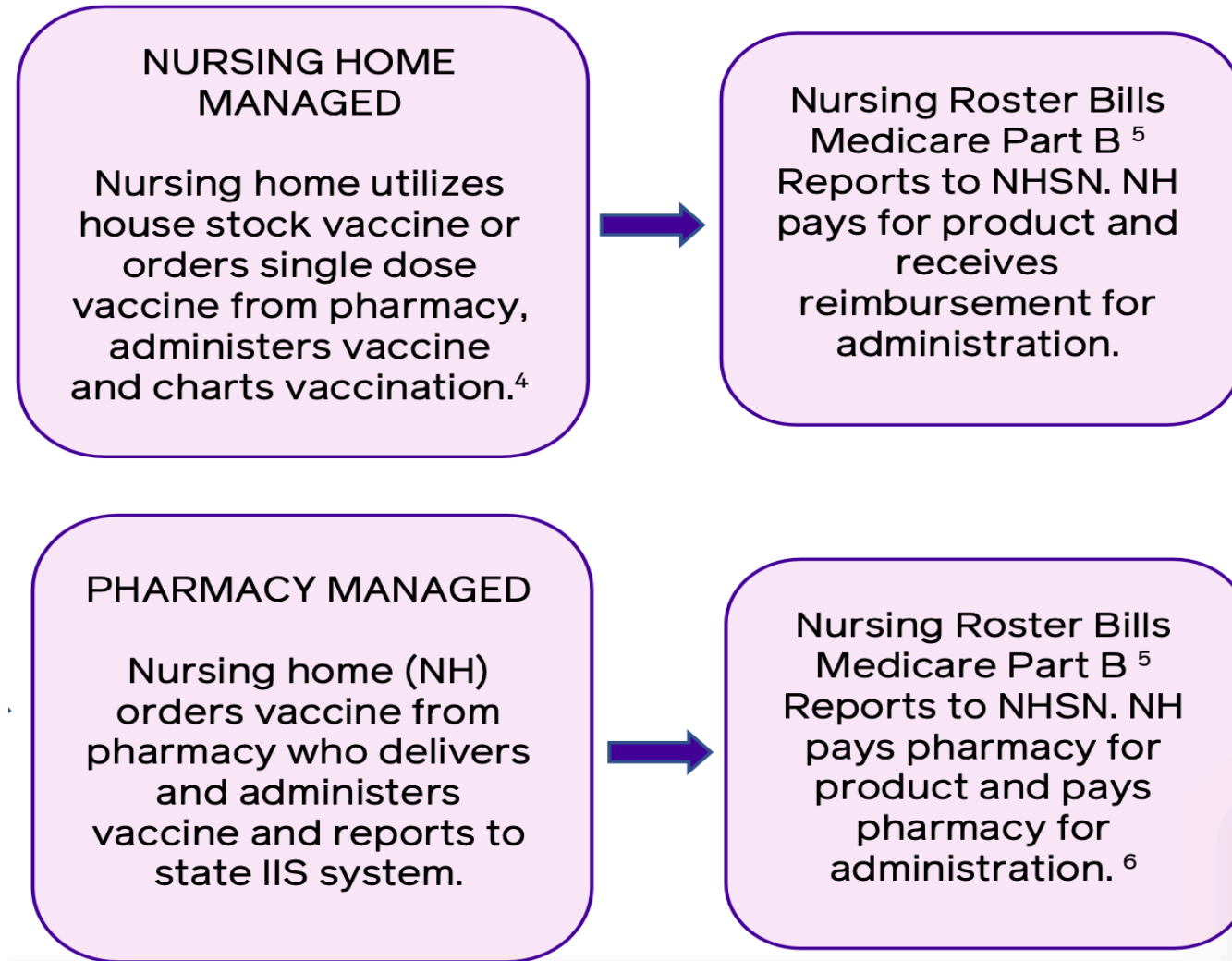
Two helpful excerpts from Section 20.4, *Screening and Preventive Services*, are below.

- *Coverage of screening and preventive services (e.g., screening mammographies, pneumococcal pneumonia vaccine, influenza vaccine, hepatitis B vaccine) is a separate Part B inpatient benefit when rendered to beneficiaries in a covered Part A stay and is paid outside of the Part A payment rate. (Page 29, paragraph 3)*
- *If the resident receives a type of vaccine that is preventive in nature but for which no Part B benefit category exists (e.g., diphtheria), then the vaccine would not be covered under either Parts A or B and, as a consequence, would become coverable under the Part D drug benefit. (Page 30, paragraph 3)*

How to Address Part A Resident Billing



How to Address Part A Resident Billing



How to Address Part A Resident Billing

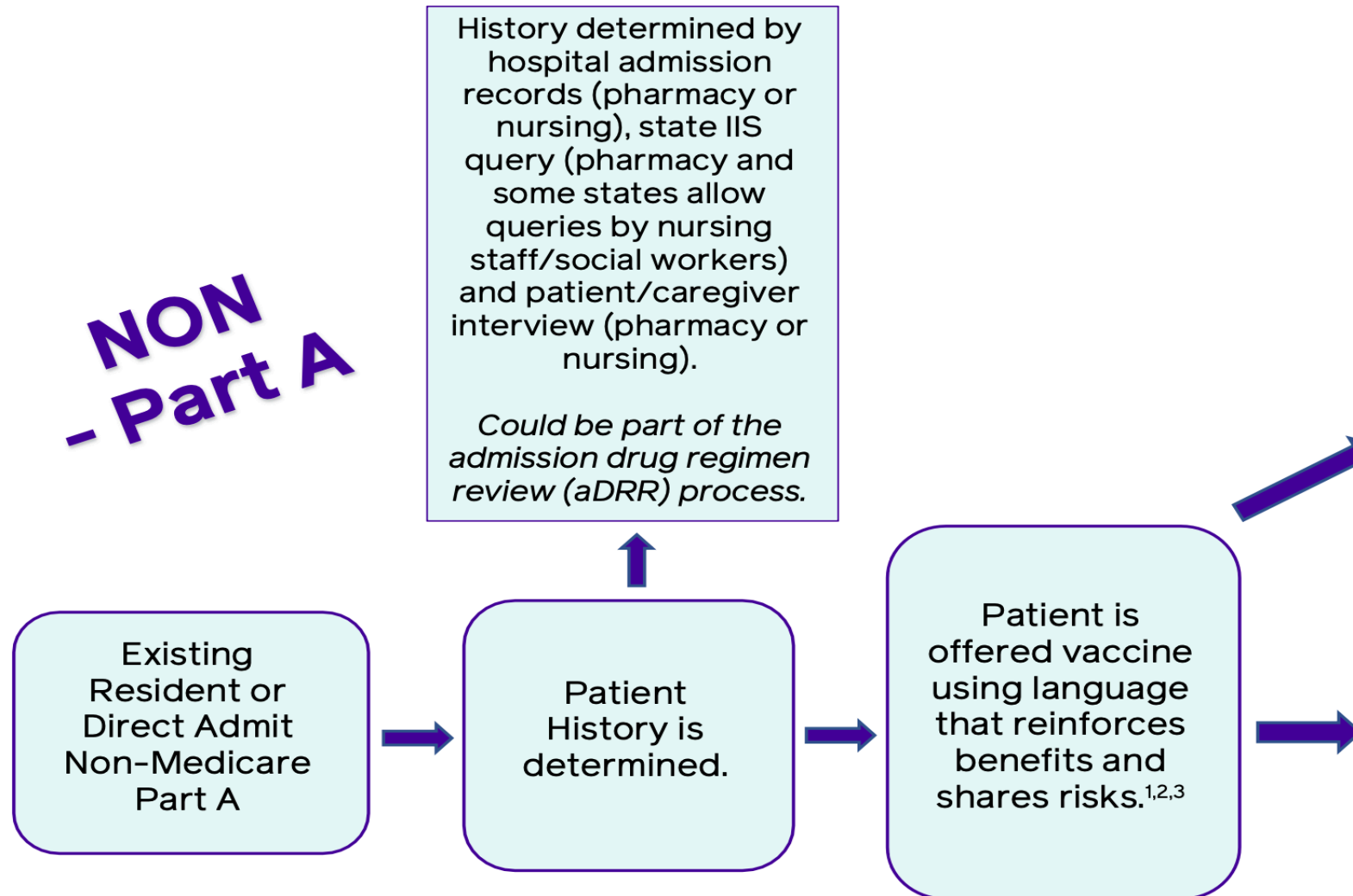
1. *i.e. Our procedure follows CDC guidance, and we give the vaccine if you have not received it or if we don't know if you have received it.*
2. Consent Form
3. Vaccine Information Sheet
4. The National Healthcare Safety Network (NHSN)
5. Code Sheet for high dose or adjuvanted vaccine and administration codes
6. Guidance on contracts between nursing homes and pharmacies for administration of vaccines.

**COVID-19 is an annual vaccine offered each Fall season.
Influenza vaccine is an annual vaccine offered each Fall season and it covers multiple strains.
For the over 65 population, CDC recommends high dose or adjuvanted vaccine.**

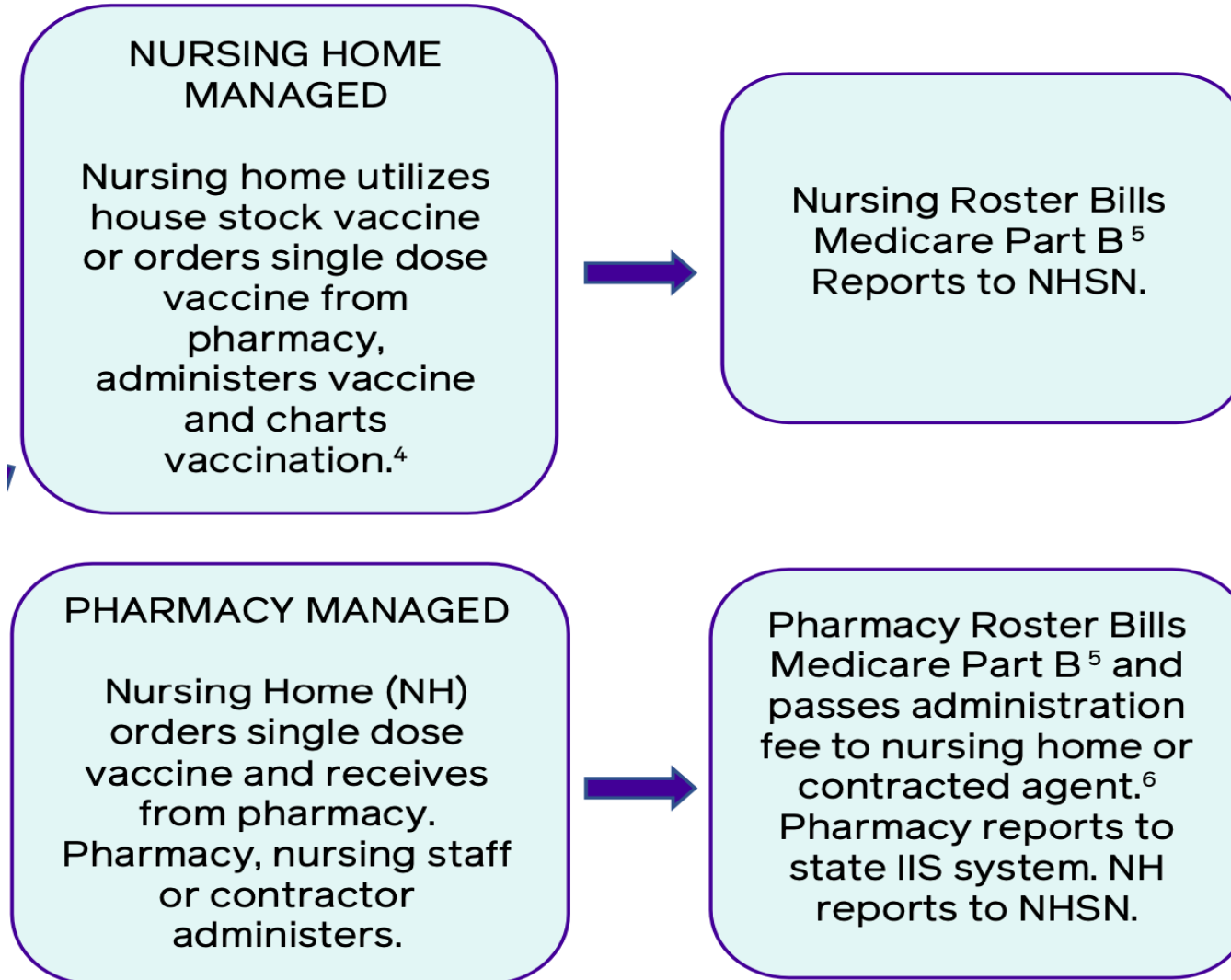
Contracting Possibilities b/t NH/Pharmacy

- Subcontract – 51% of independent community pharmacies serve long-term care facilities
- Average of 44 beds for skilled nursing facilities
- Can provide senior-friendly services/education
- Can provide vaccination services
- NH can reimburse pharmacy for Part A vaccination services
- Pharmacy can reimburse NH for Part B and D administration for non Part A residents

Workflow Processes – *Part D Vaccines*



Workflow Processes – *Part D Vaccines*



Keys to Success

| Topic | Solution/Recommendation/Opportunity |
|---|---|
| Vaccine History Unavailable or Unknown | Establish a policy and procedure to manage new admissions within 24 to 48 hours, post admission. A best practice would include referencing the state IIS system. |
| Medicare Part B Billing vaccines on a skilled stay (Medicare A) For example, influenza, <i>pneumococcal</i> , and COVID | These vaccines are separate from any Part A bundled rate when it is for preventative and not therapeutic purposes. They are subject to consolidated billing and must be submitted by the SNF on either a separate inpatient or outpatient Part B claim, or roster billed for multiple residents. ¹ |
| Medicare Part D Pharmacies can bill Medicare Part D for some vaccines on a skilled stay (Medicare A), but this does not apply to influenza, <i>pneumococcal</i> or COVID vaccines. | If administered for preventive purposes: Part D plan would pay any approved entity that administers the vaccine regardless of Part A status (not subject to SNF consolidated billing). For example, RSV is covered only under Part D, so it is not covered by Part A or B. RSV can be billed by any outside pharmacy or other entity regardless of SNF Part A (if preventative) or long-stay status. ¹ |
| Contracting for Vaccine Administration | Pharmacies can contract in any way/at any point with the nursing facility and vice versa; so, it is bidirectional. ² Pharmacy Immunizer Contract |
| Managed Care Patients Admitted into SNFs | Review managed care plan contract to understand reimbursement. |
| Vaccine Notable Points | Notable Flu and COVID-19 Vaccine Points |

Keys to Success

| | |
|------------------------------|---|
| Reporting to a State's IIS | Currently most LTC pharmacies are connected to state IIS systems. Any vaccine processed by a pharmacy is automatically reported. Nursing facilities that administer vaccines from house stock or outside of the pharmacy process are not reported to state IIS systems. There are rare exceptions to this rule such as the state of Wisconsin. |
| Ordering from Pharmacy | Understand the risk versus benefit of ordering as house-stock or as resident-specific. |
| Cost of Vaccines | Reimbursement occurs for product and administration by Part B roster billing and Part D (vaccines not covered by Part B). ^{5,6} |
| Risk of Waste | Understand your pharmacy/distributor return policy for unused/unexpired vaccines. |
| Storage and Handling | Twice-daily temperature checks ⁷ multidose-vials require dating when opened and discard after x number of days. Refer to each product (eg, 28 days). |
| Coadministration of Vaccines | Per the ACIP Guidelines, two or more inactivated vaccines may be co-administered or administered at any interval. ^{3,8} |

Pharmacy Medication Service Opportunities

- Three seasonal vaccines
 - High dose or adjuvanted flu
 - COVID-19
 - RSV
- Effective cost containment strategies/inventory control
 - Refill on demand vs cycle refill
 - Medication returns for credit

Pharmacy Medication Service Opportunities

- Integration of EMR and pharmacy to improve efficiencies/communication
- Medication reconciliation (include immunization)
 - History and vaccination care plan
- Medication processing to collaborate/discuss:
 - Adjudication principles
 - Prior Authorization
 - Therapeutic interchanges

References

- American Health Care Association and National Center for Assisted Living. Medicare Billing Guidance for Respiratory Vaccines in LTC. AHCANCAL.org. Accessed February 1, 2024. <https://www.ahcancal.org/Quality/Documents/GetVaccinated/Medicare%20Billing%20Guidance.pdf>
- Centers for Medicare & Medicaid. SNF: Enforcement Discretion Relating to Certain Pharmacy Billing. Accessed February 1, 2024. <https://www.cms.gov/medicare/payment/covid-19/snf-enforcement-discretion-relating-certain-pharmacy-billing>
- Centers for Disease Control and Prevention. What to know about Getting Flu, COVID-19 and RSV Vaccines at the Same Time. CDC.gov. Accessed February 1, 2024. <https://www.cdc.gov/respiratory-viruses/whats-new/getting-vaccines-at-same-time.html#:~:text=For%20some%20people%2C%20getting%20all,vaccines%20at%20the%20same%20time>
- Centers for Disease Control and Prevention. Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2023–24 Influenza Season. Accessed February 8, 2024. MMWR. <https://www.cdc.gov/mmwr/volumes/72/rr/rr7202a1.htm>
- Centers for Medicare & Medicaid. Vaccine Pricing. CMS.gov. Accessed January 31, 2024. <https://www.cms.gov/medicare/payment/all-fee-service-providers/medicare-part-b-drug-average-sales-price/vaccine-pricing#SeasonalFluVaccines>

References

- Centers for Disease Control and Prevention. Immunization Information Systems (IIS) CPT Codes Mapped to CVX Codes. CDC.gov. Accessed February 21, 2024. <https://www2a.cdc.gov/vaccines/iis/iisstandards/vaccines.asp?rpt=cpt>
- Centers for Disease Control and Prevention. Vaccine Storage and Handling Resources. Advisory Committee on Immunization Practices. CDC.gov. Accessed February 1, 2024. <https://www.cdc.gov/vaccines/hcp/admin/storage/index.html>
- Centers for Disease Control and Prevention. Timing and Spacing of Immunobiologics: General Best Practice Guidelines for Immunization. Published Aug 1, 2023. Accessed February 15, 2024. <https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/timing.html>
- Centers for Medicare & Medicaid. In-Home Vaccine Administration: Additional Payment. CMS.gov. Accessed January 31, 2024. <https://www.cms.gov/medicare/coverage/preventive-services/home-vaccine-administration-additional-payment>
- Centers for Disease Control and Prevention. Advisory Committee on Immunization Practices. 2023-24 ACIP Summary. Accessed February 8, 2024. <https://www.cdc.gov/flu/professionals/acip/summary/summary-recommendations.htm#65years>
- Centers for Medicare & Medicaid. Roster Billing Institutional & Professional Claims. CMS.gov. Accessed January 31, 2024. <https://www.cms.gov/roster-billing>



CONNECT WITH US

Call 877.731.4746 or visit www.hqin.org



@HQINetwork

Health Quality Innovation Network

Mary Locklin

Senior Quality Advisor, Infection Prevention

mlocklin@hqi.solutions

804.289.5320

Chad Worz

Chief Executive

Cworz@ascp.com

703.739.1301

Cindy Warriner, BS, RPh, CDCES

Senior Consultant Pharmacist

cwarriner@hqi.solutions

804.289.5316