

MPC, Inc.

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**MEDICAL PRACTICE
CONSULTANTS, INC.**

The summary of information presented in this newsletter is intended for Medicare Fee-For-Service physicians, providers, suppliers, and other health care professionals, who furnish or provide referrals for and/or file claims for the Medicare-covered preventive benefits discussed in this newsletter.

SEASONAL INFLUENZA

Influenza is a contagious disease caused by influenza viruses that generally occurs during the winter months. It attacks the respiratory tract in humans (nose, throat, and lungs).

The risks for complications, hospitalizations, and deaths from influenza are higher among individuals aged 65 and older, young children, and persons of any age with certain underlying health conditions than the risks for complications among healthy older children and younger adults. A seasonal influenza vaccination is still the best way to prevent influenza and its severe complications.

SEASONAL INFLUENZA VACCINE

Risk Factors for Influenza

Medicare provides coverage of the seasonal influenza virus vaccine and its administration for all Medicare beneficiaries regardless of risk for the disease; however, some individuals are at greater risk for contracting influenza. Vaccination is recommended for all individuals aged six months and older.

While everyone should get a seasonal influenza vaccine each influenza season, it's especially important that certain groups get vaccinated either because they are at high risk of having serious influenza-related complications or because they live with or care for people at high risk for developing influenza-related complications. For more information, refer to the most recent recommendations at <http://www.cdc.gov/flu/protect/keyfacts.htm> on the Centers for Disease Control (CDC) website.

Who Should Not Get the Seasonal Influenza Vaccine

According to the CDC, individuals in the following groups should not be vaccinated without consulting a physician:



- ◆ Individuals with a severe allergy to chicken eggs,
- ◆ Individuals who have had a severe reaction to an influenza vaccination in the past,
- ◆ Individuals who previously had onset of Guillain-Barre syndrome during the 6 weeks after receiving the influenza vaccine,
- ◆ Children less than 6 months of age, and
- ◆ People who have a moderate or severe illness with a fever should wait until their symptoms lessen.

COVERAGE INFORMATION FOR SEASONAL INFLUENZA

Medicare provides coverage of one seasonal influenza virus vaccine per influenza season for all beneficiaries. This may mean that a beneficiary will receive more than one seasonal influenza vaccination in a 12-month period. Medicare may provide coverage for more than one seasonal influenza vaccination per influenza season if a physician determines, and documents in the beneficiary's medical record, that the additional vaccination is reasonable and medically necessary. Medicare provides coverage of the influenza vaccination as a Part B benefit. If the beneficiary receives the service from a Medicare-enrolled provider, the beneficiary will pay nothing.

PNEUMOCOCCAL DISEASE

Pneumococcal disease is an infection caused by the bacteria *Streptococcus pneumoniae*, also known as pneumococcus. The most common types of infections caused by this bacterium include: middle ear infections, pneumonia, blood stream infections (bacteremia), sinus infections, and meningitis. In-

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vasive pneumococcal infection kills thousands of people in the United States each year, most of them aged 65 and older. While influenza viruses generally strike during the winter months, pneumococcal disease occurs year-round.

PNEUMOCOCCAL POLYSACCHARIDE VACCINE (PPV)

Risk Factors for Pneumococcal Infection

The CDC identifies high priority target groups for the pneumococcal vaccination. For more information, refer to the most recent recommendations at <http://www.cdc.gov/vaccines/vpd-vac/pneumo/in-short-both.htm#who> on the CDC website.

COVERAGE INFORMATION FOR PPV

Medicare generally provides coverage of pneumococcal vaccination once in a lifetime for all Medicare beneficiaries. Medicare may provide coverage of additional vaccinations based on risk or uncertainty of beneficiary pneumococcal vaccination status.

REVACCINATION

Pneumococcal vaccine is typically administered to adults once in a lifetime. However, revaccination may be appropriate for beneficiaries at highest risk for pneumococcal disease and those most likely to have rapid declines in antibody levels. This group includes individuals with the following conditions:

- ◆ Functional or anatomic asplenia e.g., sickle cell disease, splenectomy)
- ◆ Human Immunodeficiency Virus,
- ◆ Leukemia,
- ◆ Lymphoma,
- ◆ Hodgkin’s disease,
- ◆ Multiple myeloma,
- ◆ Generalized malignancy,
- ◆ Chronic renal failure,
- ◆ Nephrotic syndrome, or
- ◆ Other conditions associated with immunosuppression such as organ or bone marrow transplantation, and those receiving immunosuppressive chemotherapy.

NOTE: If a beneficiary who is not at highest risk is revaccinated because of uncertainty about his or her pneumococcal vaccination status, Medicare will pay for the revaccination. Routine revaccinations of beneficiaries who are not at highest risk are not appropriate.

Medicare provides coverage of the influenza vaccination as a Part B benefit. If the beneficiary receives the service from a Medicare-enrolled provider, the beneficiary will pay nothing.

HEPATITIS B VIRUS (HBV)

Hepatitis B is a serious disease caused by the HBV. The virus can affect people of all ages. Hepatitis B attacks the liver and can cause chronic infection, resulting in cirrhosis (scarring) of the liver, liver cancer, liver failure, and death. The virus is found in the blood and body fluids of infected people and can be spread through sexual contact; the sharing of needles, other drug paraphernalia, and razors; tattoos or body piercing; from a mother to her infant during birth; and by living in a household with a chronically infected person.

HBV VACCINE

Risk Factors for Hepatitis B Infection

Medicare provides coverage for certain beneficiaries at high or intermediate risk for HBV infection.

Vaccination is recommended for the following high risk groups:

- ◆ Individuals with End Stage Renal Disease (ESRD),
- ◆ Individuals with hemophilia who received Factor VIII or IX concentrates,
- ◆ Clients of institutions for the mentally handicapped,
- ◆ Persons who live in the same household as an HBV carrier,
- ◆ Homosexual men, and Illicit injectable drug users.

Vaccination is recommended for the following intermediate risk groups:

- ◆ Staff in institutions for the mentally handicapped, and
- ◆ Workers in health care professions who have frequent contact with blood or blood-derived body fluids during routine work.

Exception: Persons in the above-listed groups would not be considered at high or intermediate risk if they have laboratory evidence positive for antibodies to HBV (ESRD patients are routinely tested for HBV antibodies as part of their continuing monitoring and therapy).

Coverage Information for HBV

Medicare provides payment for the HBV vaccine and its administration, for beneficiaries at intermediate to high risk of contracting HBV. Medicare requires that the HBV vaccine be administered under a physician’s order with supervision. Medicare provides coverage for the hepatitis B vaccine as a Medicare Part B benefit. Both the coinsurance or copayment and the Medicare Part B deductible apply. For dates of service on or after January 1, 2011, both the coinsurance or copayment and deductible are waived.



Let us remember that, as much has been given us, much will be expected from us, and that true homage comes from the heart as well as from the lips, and shows itself in deeds.
~Theodore Roosevelt