

The summary of information presented in this brochure 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 brochure.

## INFLUENZA AND PNEUMOCOCCAL INFECTIONS

Approximately 50,000 Americans, mostly adults, die each year from vaccine-preventable diseases or their complications. About 41,000 of these deaths are attributed to influenza and pneumonia, the eighth leading cause of death in the U.S. Most of these deaths occur in people 65 years of age or over. Seniors 65 and older and those with certain medical conditions are at higher risk for contracting these infections. The risk of infectious disease and complications can be reduced or eliminated with vaccine.

Disease prevention through vaccination can save healthcare dollars by keeping people healthy and avoiding the expensive therapies and hospitalizations needed to treat infectious diseases like influenza and pneumococcal pneumonia. All adults 50 years of age and older should be encouraged to get the influenza vaccine, and adults 65 years of age and older should be encouraged to get pneumococcal vaccinations. Medicare beneficiaries who are under these ages but have chronic conditions, including heart disease, lung disease, diabetes, or end-stage renal disease should generally get both vaccinations.

### INFLUENZA

#### Risk Factors for Influenza Infection

Medicare provides coverage of the influenza vaccine and its administration for all Medicare beneficiaries regardless of risk; however, some individuals are at greater risk for contracting influenza. Vaccination is recommended for individuals that fall within one or more of the high risk groups.

The Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) identifies the following groups as being at high risk for serious complications from influenza:

- Individuals aged 50 or older
- Children aged 6 – 59 months
- Pregnant women
- Individuals of any age who have certain underlying health conditions such as heart or lung disease, transplant recipients, or individuals with immunodeficiency (i.e., AIDS)
- Individuals of any age who have certain underlying health conditions such as spinal cord injuries, seizure

disorders, or other neuromuscular disorders that can compromise respiratory functions

The following individuals have been identified by ACIP as being at a greater risk than the general public for complications from influenza:

- Residents of nursing homes and long-term care facilities
- Children aged 6 months – 18 years old on long-term aspirin therapy
- Health care workers involved in direct patient care
- Out-of-home caregivers and household contacts of children less than 6 months of age or individuals in the high risk groups

#### Who Should Not Be Vaccinated with the Influenza Vaccine?

Individuals in the following groups should not receive the influenza vaccine without the recommendation of their physician:

- Individuals with a severe allergy (i.e., anaphylactic allergic reaction) to hens' eggs or to components of the vaccine, or prior adverse reaction following influenza vaccination
- Individuals who previously had onset of Guillain-Barré syndrome during the 6 weeks after receiving the influenza virus vaccine

### COVERAGE INFORMATION FOR THE INFLUENZA VACCINE

Coverage of the influenza vaccine and its administration was added to the Medicare Program on May 1, 1993. Medicare provides coverage of one influenza vaccination per influenza season. However, Medicare provides coverage for more than one influenza vaccination per influenza season if it is reasonable and medically necessary.

Coverage of the influenza vaccine and its administration is provided as a Medicare Part B benefit. If the beneficiary receives the service from a Medicare-enrolled provider, the beneficiary will pay nothing (there is no coinsurance or copayment and no deductible for this benefit).

### PNEUMOCOCCAL

#### Risk Factors for Pneumococcal Infection

The CDC identifies the following high priority target groups for the pneumococcal vaccination:

- Individuals age 65 or older
- Individuals with a serious long-term health problem such as heart disease, sickle cell disease, alcoholism, leaks of cerebrospinal fluid, lung disease (not including asthma), diabetes, or liver cirrhosis
- Individuals with a lowered resistance to infection due to Hodgkin's disease; multiple myeloma; cancer

treatment with x-rays or drugs; treatment with long-term steroids; bone marrow or organ transplant; kidney failure; Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS); lymphoma, leukemia, or other cancers; nephritic syndrome; damaged spleen; or no spleen

- Alaskan Natives or individuals from certain Native American populations

### COVERAGE INFORMATION FOR THE PNEUMOCOCCAL VACCINE

Coverage of pneumococcal polysaccharide vaccine and its administration was added to the Medicare Program on July 1, 1981. Medicare provides coverage of the pneumococcal vaccine once in a lifetime generally for all beneficiaries. Medicare may provide additional vaccinations based on risk.

NOTE: Effective for claims with dates of service on or after January 1, 2008, Medicare also provides coverage for pediatric pneumococcal conjugate vaccine.

Coverage of the pneumococcal vaccine and its administration is provided as a Medicare Part B benefit. If the beneficiary receives the service from a Medicare-enrolled provider, the beneficiary will pay nothing (there is no coinsurance or copayment and no deductible for this benefit).

### REVACCINATION

Beneficiaries considered to be at high risk may be revaccinated if at least 5 years have passed since the last covered pneumococcal vaccine or are revaccinated because they are unsure of their vaccination status. Revaccination is limited to beneficiaries at the highest risk of serious pneumococcal infection and those likely to have a rapid decline in pneumococcal antibody levels. This group includes individuals with the following conditions:

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

**NOTE:** Prior to vaccination, physicians should ask beneficiaries if they have been vaccinated with the pneumococcal vaccine. If patients are uncertain whether they have been vaccinated within the past 5 years, the provider should administer the vaccine. If patients are certain they have been vaccinated within the past 5 years, the vaccine should not be administered.

## HEPATITIS B

Hepatitis B is a highly infectious disease caused by the hepatitis B virus (HBV). Chronic HBV infection can lead to 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 or razors, tattoos, body piercing, from mother to infant during birth, and by living in a household with a chronically infected person. Approximately 1.25 million people in the U.S. have chronic HBV infection. About 2,000 to 3,000 people die each year from HBV, usually as a result of complications from chronic liver disease.

### 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
- Illicit injectable drug users

Vaccination is recommended for the following intermediate risk groups:

- Staff in institutions for the mentally handicapped
- 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 of contracting hepatitis B if they have laboratory evidence positive for antibodies to hepatitis B (ESRD patients are routinely tested for hepatitis B antibodies as part of their continuing monitoring and therapy).

## COVERAGE INFORMATION FOR THE HEPATITIS B VACCINE

Coverage of the hepatitis B vaccine and its administration was added to the Medicare Program in 1984. Medicare provides coverage of the hepatitis B vaccine for beneficiaries at intermediate to high risk. Medicare requires that the hepatitis B vaccine be administered under a physician's order with supervision.

Coverage of the hepatitis B vaccine and its administration is provided as a Medicare Part B benefit. The coinsurance or copayment applies after the yearly Medicare Part B deductible has been met.

## FOR MORE INFORMATION

The Centers for Medicare & Medicaid Services (CMS) has developed a variety of educational resources for health care professionals to promote awareness and increase utilization of preventive services covered by Medicare. For more information about coverage, coding, billing, and reimbursement of Medicare-covered preventive services and screenings, please visit [http://www.cms.hhs.gov/MLNProducts/35\\_PreventiveServices.asp#TopOfPage](http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp#TopOfPage) on the CMS website.

## MEDICARE LEARNING NETWORK (MLN)

The Medicare Learning Network (MLN) is the brand name for official CMS educational products and information for Medicare fee-for-service providers. For additional information visit the Medicare Learning Network's web page at <http://www.cms.hhs.gov/MLNGenInfo> on the CMS website.

## BENEFICIARY-RELATED INFORMATION

The official U.S. Government website for people with Medicare is located on the web at <http://www.medicare.gov>, or more information can be obtained by calling 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

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# Adult Immunizations

