



Roster Billing for Hepatitis B: July 2025 Release

Related CR Release Date: February 21, 2025	MLN Matters Number: MM13937 Revised
Effective Date: January 1, 2025	Related Change Request (CR) Number: <u>CR 13937</u>
Implementation Date: July 7, 2025	Related CR Transmittal Number: R13091CP

What's Changed: We revised this Article to add a paragraph pertaining to when mass immunizers may bill for hepatitis B claims using Place of Service code 60 (Mass Immunization Centers) and specialty code 73 (Roster Billers). We made no other changes to this Article. You'll find substantive content updates in dark red (page 2).

Affected Providers

- Physicians
- Mass Immunizers
- Other providers billing Medicare Administrative Contractors (MACs) for hepatitis B vaccine and administration services they provide to Medicare patients

Action Needed

Make sure your billing staff knows about these updates:

- Expanded coverage for more Medicare patients to receive the hepatitis B vaccine
- Medicare patients no longer need a doctor's order for the administration of the hepatitis B vaccine
- Mass immunizers can use the roster billing process to submit Medicare Part B claims for hepatitis B vaccines and their administration





Background

Starting January 1, 2025, CMS expanded hepatitis B vaccination coverage by revising 42 CFR 410.63(a)(2), intermediate risk groups, to include:

- Patients who haven't previously received a complete hepatitis B vaccination series
- Patients with an unknown vaccination history

Before this coverage expansion, the hepatitis B vaccine was available to Medicare patients who were at high or intermediate risk of contracting hepatitis B and if ordered by a doctor of medicine or osteopathy.

Per revised 42 CFR 410.63(a)(2), Medicare patients no longer need a physician's clinical expertise to determine vaccination status. We updated the <u>Medicare Claims Processing Manual, Chapter 18</u>, section 10.1.3 to include:

- A doctor's order is no longer necessary to administer the hepatitis B vaccine under Part B
- Mass immunizers can use the roster billing process to submit Part B claims for hepatitis B vaccines and their administration
- Roster billing is available for all Part B preventive vaccines, including:
 - Pneumococcal
 - Influenza
 - Hepatitis B
 - COVID-19

We pay roster bills for hepatitis B vaccine and administration claims like other Part B vaccines and vaccine administration claims:

- We pay hepatitis B vaccine products at 95% of their Average Wholesale Price
- We pay hepatitis B vaccine administration according to the National Fee Schedule for Medicare Part B Vaccine Administration

The Part B vaccine administration fee schedule includes the CY 2025 locality adjusted payment rate file for HCPCS code G0010 (hepatitis B vaccine administration). On the <u>Vaccine Pricing</u> page, under Table 1, select the "2025 Geographically-Adjusted Payment Rates for Influenza, Pneumococcal, Hepatitis B and COVID-19 Vaccine Administration & In-Home Additional Payment" file.

Mass immunizers may begin submitting hepatitis B claims after 30 days of the issuance of CR 13937. Your MAC will update their systems to allow payment for hepatitis B claims with Place of Service code 60 (Mass Immunization Centers) and specialty code 73 (Roster Billers).

Get more information about roster billing.



More Information

We issued CR 13937 to your MAC as the official instruction for this change. For more information, find your <u>MAC's website</u>.

Document History

Date of Change	Description
March 5, 2025	We revised this Article to add a paragraph pertaining to when mass immunizers may bill for hepatitis B claims using Place of Service code 60 (Mass Immunization Centers) and specialty code 73 (Roster Billers). We made no other changes to this Article. You'll find substantive content updates in dark red (page 2).
February 24, 2025	Initial article released.

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