

Roster Billing for Influenza, Influenza A (H1N1) and Pneumococcal Vaccines on the CMS-1450 (UB-04) Claim

Medicare PLUS BlueSM PPO



Blue Cross Blue Shield of Michigan is a nonprofit corporation and independent licensee of the Blue Cross and Blue Shield Association.

Medicare Plus BlueSM PPO plans for individual and group members provide full coverage for influenza, influenza A (H1N1) and pneumococcal polysaccharide vaccines with no member copayment. Health care providers and suppliers already enrolled in the Medicare program may use their Medicare provider identification and national provider identifier numbers and follow the roster billing process as long as they provide the flu, H1N1 or pneumococcal vaccine to multiple members.

Roster billing is a simplified billing process that allows mass immunizers to submit one claim with a list of the members they immunized. Mass immunizers must meet Original Medicare¹ requirements in order to use the roster billing method for Medicare Plus Blue plans. BCBSM can accept roster billing only on paper claims at this time.

A mass immunizer offers flu, H1N1 or pneumococcal vaccinations to multiple individuals and may be a traditional Medicare provider or supplier or a nontraditional one (such as a senior citizen's center, a public health clinic, or community pharmacy). Immunizers must enroll in the Medicare program even if immunizations are the only service they provide.

- Mass immunizers must submit immunization claims on roster bills and accept assignment under Original Medicare on both the administration and the vaccine.

Since BCBSM can only accommodate roster billing on paper claims at this time, claims will be entered into the processing system through optical character recognition scanning. Please remember the following to ensure that all items on your roster claim can be identified through OCR scanning:

- Attach a maximum of **three** rosters to a single CMS-1450 (UB-04) claim.
 - Typed rosters are preferred.
 - If information is not typed, the roster information must be written in blue or black ink and must be legible.
 - Ink that is too light will not scan properly.
 - Do not fold your claim and roster forms.

¹ Please see CMS' website, [cms.hhs.gov/manuals/downloads/clm104c18.pdf](https://www.cms.hhs.gov/manuals/downloads/clm104c18.pdf), for additional information on roster billing. *BCBSM is not responsible for the content or the practices of the destination website.

Roster Billing for Influenza , Influenza A (H1N1) and Pneumococcal Vaccines on the CMS-1450 (UB-04) Claim (continued)

Incomplete or incorrect roster bills will be returned.

Mail your CMS-1450 (UB-04) claims and attached roster bills to the following address:

Medicare Advantage
Blue Cross Blue Shield of Michigan
P.O. Box 32953
Detroit, MI 48232-0593

If you have questions about roster billing for flu, H1N1 and pneumococcal vaccinations on the CMS-1450 (UB-04) claim, please call Medicare Plus Blue Provider Servicing at **1-866-309-1719**. You can also find complete roster billing guidelines on our website at bcbsm.com/provider/ma.

If the local BCBS plan does not allow submission of claims for roster billing you may submit your claim directly to us.

General roster billing requirements for CMS-1450 (UB-04) claims

- Submit separate CMS-1450 claims for each type of vaccination.
- You may preprint the CMS-1450 (UB-04) fields listed on the Medicare Plus Blue plans Roster Billing Instruction Sheet.
- Roster billing Instructions are the same as for Original Medicare, with the following exceptions:
 - Report “C” for Medicare in the first position in Form Locator 50, as Source of Payment.
 - Report 00210 in the second thru sixth position in Form Locator 50, as Payer ID.
- Each CMS-1450 (UB-04) claim must have an attached Medicare Plus Blue plan roster bill listing the members who received that type of vaccination.
 - Include the following information on the roster bill:
 - Billing provider name
 - Medicare National Provider Identification (NPI) Number
 - Date of service formatted as MM/DD/YYYY (e.g., 09/10/2010)
 - Member contract number (Enter the alpha prefix that appears on the member’s Blue Cross Blue Shield Medicare Advantage ID card in addition to the member’s nine-digit contract number. Do not report the member’s health insurance claim number.)
 - Patient’s last name
 - Patient’s first name
 - Patient’s date of birth, formatted as MM/DD/YYYY
 - Patient’s sex (“M” or “F”)
 - Patient’s complete address
 - Patient’s signature or stamped “signature on file”
 - Clinic location must be present
 - Nurse’s initials must be present

Incomplete or incorrect roster bills will be returned.

CMS-1450 (UB-04) Roster Billing Instruction Sheet

The following fields must be completed on a CMS-1450 (UB-04) claim form (either typed or written in blue or black ink) for roster billing of influenza, influenza A (H1N1) and pneumococcal vaccination claims for **Medicare Plus Blue PPO** members.

Form Locator	Field Content
1	Provider Name, Address and Telephone number
4	Enter type of bill. If the type of bill is inpatient Part B, "12X" or "22X," the following information is also required: <ul style="list-style-type: none"> • Form Locator 12 — Admission date • Form Locator 14 — Admission type • Form Locator 15 — Admission source code • Form Locator 17 — Patient's status code • Form Locator 69 — Admission diagnosis
5	Enter Federal Tax Identification Number
8	Enter "See attached roster" in Patient Name field.
17	Enter "01" in Patient Status Code field.
18 - 28	Enter condition code M1.
18 - 28	Enter condition code A6
42	Vaccine — Enter revenue code 636 along with the appropriate vaccine HCPCS code in Form Locator 44. Administration — Enter "771" along with the appropriate G HCPCS code in Form Locator 44.
44	Vaccine — Enter the appropriate CPT or HCPCS code if using revenue code "636." Pneumococcal: *90732, *90739, *90669 and *90670 Influenza: *90655, *90656, *90657, *90660, *90662, *90654, 90661, 90672, 90673, 90685, 90686, 90688, and Q2033, Q2034, Q2035, Q2036, Q2037, Q2038 or Q2039 Influenza A (H1N1) : *G9142 — Made available at no cost to provider Administration — Enter the appropriate G HCPCS code for revenue code 771. Pneumococcal vaccine: *G0009 Influenza vaccine: *G0008 Influenza A (H1N1) : *G9141
47	Enter total charges
50	Enter "C" and 00210 in Payer field.
51, Line A	Enter "See attached roster" in Health Plan ID field.
67	Enter the appropriate diagnosis code: V04.81 (Influenza virus) V06.6 (Pneumococcus and Influenza) V03.82 (Pneumococcus)
76	Enter the provider's NPI in the Attending NPI field.

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