



Waiver of Coinsurance and Deductible for Hepatitis B Preventive Service Vaccine Code, Section 4104 of the Patient Protection and Affordable Health Care Act (the Affordable Care Act), Removal of Barriers to Preventive Services in Medicare

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Related Change Request (CR) Number: 12230

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Implementation Date: October 4, 2021

Provider Types Affected

This MLN Matters Article is for home health agencies and other institutional providers that bill Medicare Administrative Contractors (MACs) for Hepatitis B vaccine services they provide to Medicare patients. Specifically, this applies to those providers billing Medicare for Hepatitis B vaccine using Types of Bill (TOB) 012X, 013X, 022X, 023X, and 034X, effective for dates of service on or after April 1, 2018.

Provider Action Needed

This article informs you that Medicare is waiving coinsurance (or copayment) and deductible for the Hepatitis B vaccine (HCPCS code 90739). Make your billing staff aware of these changes.

Background

[Section 4104 of the Affordable Care Act](#) waives the coinsurance or copayment and deductible for Medicare-covered preventive services that the U.S. Preventive Services Task Force (USPSTF) recommends. The waiver includes such services graded A or B for any indication or population and that are appropriate for the individual.

Hepatitis B Vaccine HCPCS Code 90739 has been added to the preventive services recommended by the USPSTF with a grade of A. As a result, coinsurance and deductibles won't apply for this code. For the above TOBs, Medicare will make a reasonable cost reimbursement.

More Information

We issued [CR 12230](#) to your MAC as the official instruction for this change.

For more information, contact your [MAC](#).

Document History

Date of Change	Description
May 11, 2021	Initial article released.

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