



Revisions to Medicare Part B Coverage of Pneumococcal Vaccinations Policy

Related CR Release Date: December 19, 2024	MLN Matters Number: MM13898
Effective Date: October 23, 2024	Related Change Request (CR) Number: CR 13898
Implementation Date: February 3, 2025	Related CR Transmittal Number: R13003BP
Related CR Title: Revisions to Medicare Part B Coverage of Pneumococcal Vaccinations for the Medicare Benefit Policy Manual Chapter 15, Section 50.4.4.2	

Affected Providers

- Physicians
- Suppliers
- Other providers billing Medicare Administrative Contractors (MACs) for pneumococcal vaccine services they provide to Medicare patients

Action Needed

Make sure your billing staff knows about:

- Updated Medicare coverage requirements for pneumococcal vaccinations
- Changes to align with the Advisory Committee on Immunization Practices (ACIP) recommendations for pneumococcal vaccination coverage

Background

Section 1861(s)(10)(A) of the [Social Security Act](#) and regulations at [42 CFR 410.57](#) authorize Medicare program coverage under Part B for the pneumococcal vaccine and its administration.

Medicare routinely follows the vaccination guidance of the CDC’s ACIP when updating coverage for pneumococcal vaccinations. CR 13898 updates the most recent transmittal, [CR 13750](#), which CMS issued on August 21, 2024.

Effective October 23, 2024, we updated the Medicare coverage requirements to align with ACIP recommendations. ACIP recommends that adults age 50 or older who haven't previously gotten a Pneumococcal Conjugate Vaccine (PCV), or whose earlier vaccination history is unknown, should get 1 dose of PCV (either PCV21, PCV20, or PCV15). When you use PCV15, follow it with a dose of 23-Valent Pneumococcal Polysaccharide Vaccine (PPSV23).

Adults ages 19–49 with certain underlying medical conditions or other risk factors, who haven't previously gotten a PCV or whose earlier vaccination history is unknown, should get 1 dose of PCV (either PCV21, PCV20, or PCV15). When you use PCV15, follow it with a dose of PPSV23.

Underlying medical conditions or other risk factors include:

- Alcoholism
- Cerebrospinal fluid leak
- Chronic heart disease
- Chronic liver disease
- Chronic lung disease
- Chronic renal failure
- Cigarette smoking
- Cochlear implant
- Congenital or acquired asplenia
- Congenital or acquired immunodeficiencies
- Diabetes mellitus
- Generalized malignancy
- HIV infection
- Hodgkin disease
- Iatrogenic immunosuppression
- Leukemia
- Lymphoma
- Multiple myeloma
- Nephrotic syndrome
- Sickle cell disease or other hemoglobinopathies
- Solid organ transplant

Clinical guidance shows that when you use PCV15, the recommended interval between administering PCV15 and PPSV23 is greater than 1 year. You can consider a minimum interval of 8 weeks for adults with an immunocompromising condition, cochlear implant, or cerebrospinal fluid leak to decrease the risk for invasive pneumococcal disease caused by serotypes unique to PPSV23 in these vulnerable groups.

Immunocompromising conditions include:

- Chronic renal failure
- Congenital or acquired asplenia
- Congenital or acquired immunodeficiencies
- Generalized malignancy
- HIV infection
- Hodgkin disease
- Iatrogenic immunosuppression
- Leukemia
- Lymphoma
- Multiple myeloma
- Nephrotic syndrome
- Other hemoglobinopathies
- Solid organ transplant
- Sickle cell disease

Adults who've only received PPSV23 should receive a PCV (either PCV21, PCV20, or PCV15) 1 year or more after their last PPSV23 dose. When you use PCV15 in those with history of PPSV23 receipt, you don't need to give another dose of PPSV23.

For adults age 50 or older who completed their vaccine series with both PCV13 and PPSV23 but didn't get PPSV23 at age 50 or older, ACIP recommends either 1 dose of PCV21 or PCV20 at least 5 years after the last pneumococcal dose or complete the recommended PPSV23 series.

ACIP recommends shared clinical decision-making regarding administering PCV21 or PCV20 for adults age 50 or older who completed their vaccine series with both PCV13 and PPSV23, and when they received PPSV23 at age 50 or older. If you decide to give PCV21 or PCV20, ACIP recommends a dose of PCV21 or PCV20 at least 5 years after the last pneumococcal vaccine dose.

ACIP recommends adults age 50 or older and adults ages 19–49 with certain underlying medical conditions or other risk factors who've only gotten PCV13 to complete their pneumococcal vaccine series by getting a dose of PCV21 or PCV20 at least 1 year after the PCV13 dose, or PPSV23 as previously recommended.

ACIP recommends adults ages 19–49 with certain underlying medical conditions or other risk factors, who got both PCV13 and PPSV23 with incomplete vaccination status, complete their pneumococcal vaccine series by getting either a dose of PCV21 or PCV20 at least 5 years after the last pneumococcal vaccine dose, or PPSV23 as previously recommended.

More Information

We issued CR 13898 to your MAC as the official instruction for this change. We also updated [Medicare Benefit Policy Manual, Chapter 15](#), section 50.4.4.2.

For more information, find your [MAC's website](#).

Document History

Date of Change	Description
December 19, 2024	Initial article released.

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