

# CODING FOR VACCINE SERVICES

## YOUR NEXT STEPS

**After watching AACE’s Webinar, “Billing and Coding for Vaccination-Related Services for Patients with Diabetes”, consider these next steps to help you assess and identify potential changes that could be made in your practice:**

### **Determine...**

1. Who in your practice should be involved in the discussions about coding for vaccine services?
2. Would time-based billing be beneficial based on typical time of visits or, in some cases, should you consider medical decision-making codes?
3. Regarding **principal care management**...
  - i. Do your practice’s most common payers include payment for principal care management?
  - ii. What is your practice **already doing** in support of **principal care management**?
  - iii. What would your practice **need to add or change** to provide the service?
4. Is vaccine counseling already included in currently offered clinical staff services?
  - i. If yes, is it consistently done?
    - a. How would you determine if it’s consistently done?
  - ii. If no, could it be added?
    - a. What steps would you need to take to add it?

For additional resources visit [www.aace.com/vaccines-and-adults-with-diabetes](http://www.aace.com/vaccines-and-adults-with-diabetes).

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AACE members and others using this guidance should make independent judgments and consult with their own coding staff or consultants to ensure they are following the applicable coding rules. Codes and guidelines change, and payers may not adhere to all guidelines. For additional details, see AACE’s Coding Toolkit for Endocrinology Practices for Vaccines for Adults with Diabetes.

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