



CVP TRAINING SERIES OFFICE OF IMMUNIZATION CHILDHOOD VACCINE PROGRAM MARCH 17, 2022

# **Topics Covered**





Washington State Department of Health | 2



Participants will:

- 1. Learn how to accurately screen for patient eligibility using the WA DOH eligibility guide
- 2. Learn what the Washington Vaccine Association (WVA) does, how it works, and how it benefits your practice
- 3. Learn how to bill the WVA Dosage-Based Assessment (DBA)
- 4. Understand a set of billing and Electronic Health Record (EHR) "basics"
- 5. Learn how to access materials and seek assistance from the WA DOH and the WVA

# Patient Eligibility Screening



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## Eligibility Screening & Vaccine Funding

- WA has a universal childhood vaccine program that is funded through a combination of federal and state dollars.
- All children under age 19 are eligible to receive vaccines supplied through the Childhood Vaccine Program.

CDC Vaccines for Children Funds 57% State Health WA Vaccine Care Authority Association Funds Funds (CHIP/CHP) 40% 3%

## Patient Eligibility Screening Requirements

- Enrolled sites are required to screen and document patient eligibility status at every immunization visit prior to vaccine administration.
- Identifying and documenting the correct eligibility status & funding source helps ensure vaccines are billed correctly.
  - Funding Source = Who supplied the vaccine
    - **Publicly-supplied** = Supplied by the Childhood Vaccine Program
    - **Privately-purchased** = Clinic purchased the vaccine

## What is Patient Eligibility Screening?



Childhood Vacco Eligibility for Publicly Funded The Childhood Vaccine Program is a universal w age are eligible receive vaccine through the p screen and document each patient's eligibility status, the related immunication information Sy Eligibility Status and Codes for Childr	Vaccines: A iccine purchase pr rogram. To ensure tatus at every imm stem (IIS) coding,	ogram financed by a co the appropriate source sunization visit. This do	(360) 236-2829 wachildhoodvace viders mbination of federal a e of funding is used for ument provides guida	purchasing vaccines, providers are required to ince on choosing the correct patient eligibility
Patient Eligibility Status	Eligible for Public Vaccine	IIS Eligibility Code & Description	IIS Funding Code & Description	General Billing
American Indian/Alaska Native Child • Child is less than 19 years old • As defined by the <u>Indian Health</u> <u>Care Improvement Act (25 U.S.C.</u> <u>1603-13)</u>	Yes Federal (VFC) vaccine eligible	V04 VFC eligible – American Indian/ Alaska Native	VXCS1 Publicly funded vaccine stock – VFC	<ul> <li>Follow guidelines based on the patient's insurance status</li> </ul>
Medical Child Child is less than 19 years old Child is less than 19 years old Child in Medicald or Medicald Managed Care known as Apple Health* o Managed care plans provided by; Amerigroup, Community Health Plan of WA, Corolinated Care of WA, Molina Healthcare, United Healthcare, Community Plan**	Yes Federal (VFC) vaccine eligible	V02 VFC eligible – Medicaid/Medicaid Managed Care	VXCS1 Publicly funded vaccine stock – VFC	Bill according to Health Care Authority (HCA) and/or Managed Care Organization (MCD) guidelines     Reimbursement determined by HCA/MCD     Contact HCA/MCD for billing instructions
Uninsured Child • Child is less than 19 years old • Does not have health insurance • Participates in a health sharing plan such as; OneShare, Liberty HealthShare, Medi-Share, Harmony, Samaritan, Zion, Unite Health Share Ministries, etc.	Yes Federal (VFC) vaccine eligible	V03 VFC eligible – Uninsured	VXC51 Publicly funded vaccine stock – VFC	Cannot bill for cost of vaccine     Can bill administration fee up to \$23.44     per vaccine dose     May issue only a single bill within 90 days     Cannot send to collections for unpaid     administration fee



Obtain patient demographic information (insurance, age, race)



Identify patient's eligibility status



Document eligibility status in patient record (EHR, IIS, paper)

# Patient Eligibility Status



### **Federal Vaccines for Children Eligible**

- Under age 19
- Medicaid
- Uninsured
- Underinsured at FQHC/RHC only
- American Indian or Alaska Native

WASHINGTON STATE	E	CVP
Childhood	Vaccine	Program

### WA State Eligible

- Under age 19
- Private insurance
- CHIP/CHP Insurance

# Eligibility Guide

#### **Eligibility Status and Codes for Children**

Patient Eligibility Status	Eligible for Public Vaccine	IIS Eligibility Code & Description	IIS Funding Code & Description	General Billing
<ul> <li>American Indian/Alaska Native Child</li> <li>Child is less than 19 years old</li> <li>As defined by the Indian Health Care Improvement Act (25 U.S.C. 1603-13)</li> </ul>	Yes Federal (VFC) vaccine eligible	V04 VFC eligible – American Indian/ Alaska Native	VXC51 Publicly funded vaccine stock – VFC	<ul> <li>Follow guidelines based on the patient's insurance status</li> </ul>
<ul> <li>Medicaid Child</li> <li>Child is less than 19 years old</li> <li>Enrolled in Medicaid or Medicaid Managed Care known as Apple Health*         <ul> <li>Managed care plans provided by; Amerigroup, Community Health Plan of WA, Coordinated Care of WA, Molina Healthcare, United Healthcare Community Plan**</li> </ul> </li> </ul>	Yes Federal (VFC) vaccine eligible	V02 VFC eligible – Medicaid/Medicaid Managed Care	VXC51 Publicly funded vaccine stock – VFC	<ul> <li>Bill according to Health Care Authority (HCA) and/or Managed Care Organization (MCO) guidelines</li> <li>Reimbursement determined by HCA/MCO</li> <li>Contact HCA/MCO for billing instructions</li> </ul>
<ul> <li>Uninsured Child</li> <li>Child is less than 19 years old</li> <li>Does not have health insurance</li> <li>Participates in a health sharing plan such as; OneShare, Liberty HealthShare, Medi-Share, Harmony, Samaritan, Zion, Unite Health Share Ministries, etc.</li> </ul>		V03 VFC eligible – Uninsured	VXC51 Publicly funded vaccine stock – VFC	<ul> <li>Cannot bill for cost of vaccine</li> <li>Can bill administration fee up to \$23.44 per vaccine dose</li> <li>May issue only a single bill within 90 days</li> <li>Cannot send to collections for unpaid administration fee</li> </ul>

# Eligibility Guide

Patient Eligibility Status	Eligible for Public Vaccine	IIS Eligibility Code & Description	IIS Funding Code & Description	General Billing
<ul> <li>Under-insured Child served at FQHC/RHC</li> <li>Child is less than 19 years old</li> <li>Has insurance but it does not cover vaccine</li> <li>Served at a Federally Qualified Health Center/Rural Health Center (FQHC/RHC)</li> </ul>	Yes Federal (VFC) vaccine eligible only through FQHC/RHC	V05 VFC eligible – Underinsured at FQHC/RHC	VXC51 Publicly funded vaccine stock – VFC	<ul> <li>Cannot bill for cost of vaccine</li> <li>Can bill administration fee up to \$23.44 per vaccine dose</li> <li>May issue only a single bill within 90 days</li> <li>Cannot send to collections for unpaid administration fee</li> </ul>
<ul> <li>CHIP Child</li> <li>Child is less than 19 years old</li> <li>Enrolled in the Children's Health Insurance Program (CHIP) or Washington State Child Health Insurance Program (CHP)</li> <li>Part of Apple Health*</li> </ul>	Yes State (Non- VFC) vaccine eligible	V22 State vaccine eligible – CHIP	VXC52 Publicly funded vaccine stock – Non- VFC	<ul> <li>Bill according to Health Care Authority (HCA) and/or Managed Care Organization (MCO) guidelines</li> <li>Reimbursement determined by HCA/MCO</li> <li>Contact HCA/MCO for billing instructions</li> </ul>
<ul> <li>Insured Child</li> <li>Child is less than 19 years old</li> <li>Has insurance that covers vaccine including private, commercial, employer self-funded, health benefit exchange plans, etc.</li> <li>Has insurance but does not cover vaccine and is receiving care at a <u>non</u>-FQHC/RHC</li> </ul>	Yes State (Non- VFC) vaccine eligible	V25 (previously V10) State vaccine eligible – Private Insurance	VXC52 Publicly funded vaccine stock – Non- VFC	<ul> <li>Bill according to health insurance plan and Washington Vaccine Association (WVA) billing guidance</li> <li>Contact WVA for billing instructions</li> <li>Cannot send to collections for unpaid administration fee (this includes patients out of network and with high deductibles)</li> </ul>

## Public & Private Vaccine Stock

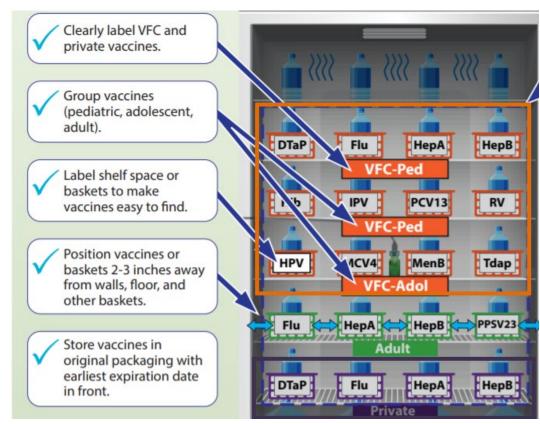
### Separate & clearly label public and private vaccine stock

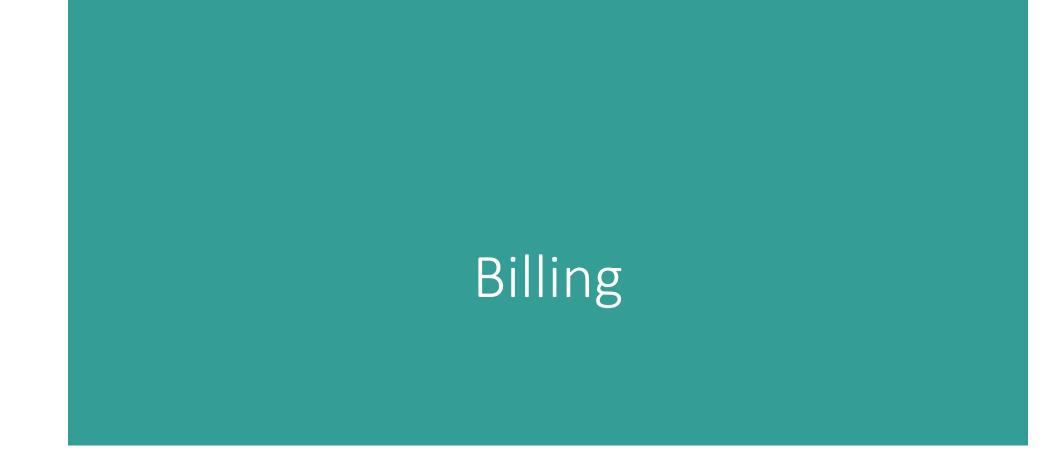
#### Public Childhood Vaccine

• Only for < 19 years

#### Private Purchase Vaccine

- Typically for adults 19+
- If your clinic purchases any private vaccine for children, please ensure it is clearly marked as private supply
- Let parents know they will be billed differently when they receive privately-purchased childhood vaccine







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# What We Do

## **Ensuring Funds** for Childhood Vaccines

#### **PUBLIC/PRIVATE PARTNERSHIP**

The Washington Vaccine Association (WVA) and the Washington State Department of Health (DOH) work together in a public / private partnership to support Washington's universal Childhood Vaccine Program (CVP). The Program provides publicly purchased vaccines that are recommended by the Advisory Committee on Immunization Practices (ACIP) for all children less than 19 years of age. Health plans and other payers reimburse the WVA for vaccines.

The WVA collects these payments and remits the funds to the DOH. The DOH uses funding from both the federal Vaccine for Children Program (VFC) and the WVA assessment funds to purchase vaccines at federal contract rates and distributes vaccines to physicians, hospitals and other providers at no cost to providers or patients through the CVP.

#### WVA MAKES IT POSSIBLE FOR:

- All children to have easy access to critical vaccines;
- Physicians, clinics, and hospitals to receive State-supplied vaccines at no charge;
- Payers to participate in an efficient, cost-effective system to facilitate childhood vaccinations at no cost to their members; and
- Medical providers to have a blended vaccine stock versus the need to segregate publicly and privately-funded vaccine stocks.

#### THE SYSTEM WORKS BY:

- Having providers enroll in the Childhood Vaccine Program and using State-supplied vaccine material;
- Having providers submit the Dosage-Based Assessment (DBA) to payers with their administrative claims submission. This critical step allows physicians, clinics, hospitals, other providers and their patients to receive vaccines for all children at no cost; and
- By ensuring that providers and payers do not bill patients, regardless of how the payer processes the submitted dosage-based assessment.

#### **HOW FUNDING WORKS**



Each month, WVA remits funds to WA State Department of Health (DOH) for pediatric vaccine purchases

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WA DOH fulfills enrolled providers' vaccine orders

Health Plans, Insurance Carriers and TPAs pay WVA DBAs for vaccines\*\* Healthcare providers submit dosage-based assessments (DBAs) to payers for vaccines administered to insured children\*

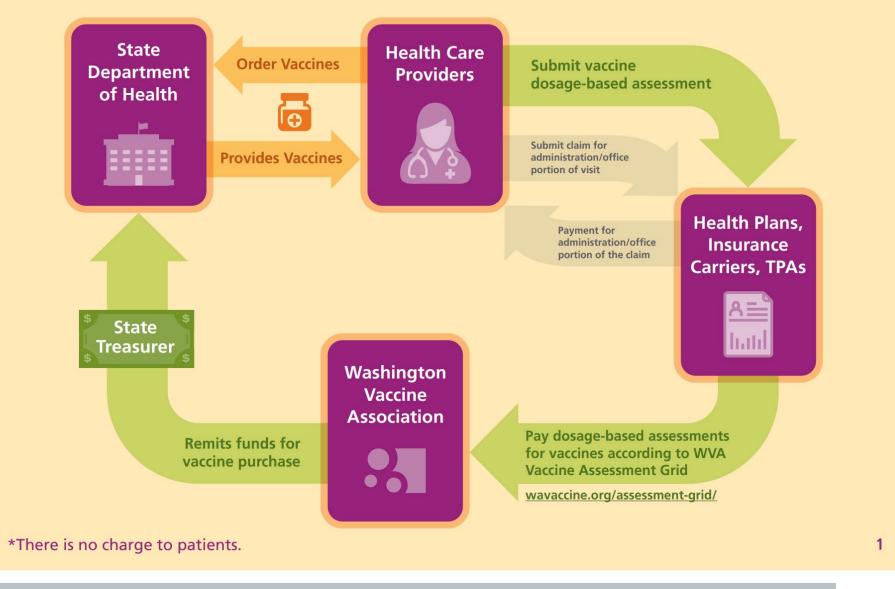
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\*There is no charge to patients. \*\*According to the wavaccine.org/assessment-grid.



## **HOW FUNDING WORKS\***





# Key Documents to Support DBA Billing

#### **WVA Billing Guide**



**Private Insurance Assessment Billing PROVIDER & PAYER GUIDE** 



WA	DO	H Elig	ibilit	y Grid			WVA Vacci	n
ge are eligible to receive vaccine through the	Vaccines: A accine purchase p program. To ensur status at every imm ystem (IIS) coding,	A Guide for Pro rogram financed by a co e the appropriate sourc nunization visit. This do	(360) 236-2829 wachildhoodvace oviders embination of federal a e of funding is used fo cument provides guida	tion and Child Profile doh.wa.gov/cvp ines@doh.wa.gov and state dollars. All children less than 19 years r purchasing vaccines, providers are required to ince on choosing the correct patient eligibility adults receiving publicly supplied vaccine.	Washin EFFECT Please r assessm and, the (CVP).	gton Vaccine Association 2021 VE FOR ALL CLAIMS WITH A D ote that this WVA Assessment G ent (DBA) process for providers, refore, no assessment is needed	ASSOCIATION 22 Vacine Assessment Grid ATE of SERVICE ON OR ATTER JULY 1, 2021. id, effective July 1, 2021, replaces the grid last updated on July 1, 2020. The gr health insurance carriers, and third party administrators. There are other child? The availability of specific vaccine brands are determined by the manufacture	ood va
Patient Eligibility Status American Indian/Alaska Native Child	Eligible for Public Vaccine Yes Federal (VFC)	IIS Eligibility Code & Description V04 VFC eligible –	IIS Funding Code & Description VXC51 Publicly funded	General Billing  • Follow guidelines based on the patient's insurance status	CPT Code	NDC Code / Packaging	CPT Code Description	
Child is less than 19 years old As defined by the Indian Health	vaccine	American Indian/	vaccine stock –	insurance status		58160-0976-20	Meningococcal recombinant protein and outer membrane vesicle vaccine.	
Care Improvement Act (25 U.S.C.	eligible	Alaska Native	VFC		90620	(10 pack – 1 dose syringe)	serogroup B (MenB-4C), 2 dose schedule, for intramuscular use	Bex
1603-13)					90621	00005-0100-10	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB-FHbp), or 3 dose schedule, for intramuscular use	<sup>2</sup> Trun
<b>ledicaid Child</b> Child is less than 19 years old Enrolled in Medicaid or Medicaid	Yes Federal (VFC) vaccine	V02 VFC eligible – Medicaid/Medicaid	VXC51 Publicly funded vaccine stock –	Bill according to Health Care Authority (HCA) and/or Managed Care Organization (MCO) guidelines	90633	(10 pack – 1 dose syringe) 58160-0825-52 (10 pack – 1 dose syringe) 00006-4095-02	Hepatitis A vaccine (HepA), pediatric/adolescent dosage-2 dose schedule, fo intramuscular use	Have
Managed Care known as Apple Health*	eligible	Managed Care	VFC	Reimbursement determined by HCA/MCO		(10 pack – 1 dose syringe)		Vaqt
<ul> <li>Managed care plans provided by;</li> </ul>				<ul> <li>Contact HCA/MCO for billing instructions</li> </ul>	90647	00006-4897-00 (10 pack – 1 dose vial)	Haemophilus influenzae type b vaccine (Hib), PRP-OMP conjugate, 3 dose schedule. for intramuscular use	Pedv
Amerigroup, Community Health Plan of WA, Coordinated Care of WA.						49281-0545-03	schedule, for intramuscular use	Acth
Molina Healthcare, United					90648	(5 pack – 1 dose vial) 58160-0818-11	Haemophilus influenzae type b vaccine (Hib), PRP-T conjugate, 4 dose schedule, for intramuscular use	

Healthcare Community Plan\*\* Cannot bill for cost of vaccine Uninsured Child VXC51 Yes V03 Can bill administration fee up to \$23.44 Federal (VFC) VFC eligible -Publicly funded Child is less than 19 years old Ininsured vaccine stock per vaccine dose Does not have health insurance vaccine May issue only a single bill within 90 days · Participates in a health sharing plan such as; eligible VFC Cannot send to collections for unpaid OneShare, Liberty HealthShare, Medi-Share administration fee Harmony, Samaritan, Zion, Unite Health Share Ministries, etc. Page 1 of 4

#### equest this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil rights@dob.wa.e H 348-577 September 2020.

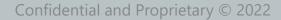
### e Grid

#### 21-22 Vaccine Assessment Grid

sts vaccines and their corresponding CPT codes that are part of the dosage-based vaccines (and corresponding CPT codes) that are not included in the DBA process not all brands of flu vaccine are offered through the Childhood Vaccine Program

CPT Code	NDC Code / Packaging	CPT Code Description	Tradename	WVA Assessment Amount per dose as of 7/1/2020	CDC Private Sector Cost/Dose 4/1/21	WVA Assessment Amount per dose as of 7/1/2021	Percent Change 7/1/2020 t 7/1/2021
90620	58160-0976-20 (10 pack – 1 dose syringe)	Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B (MenB-4C), 2 dose schedule, for intramuscular use	Bexsero®	\$120.84	\$191.75	\$120.84	0.0%
	00005-0100-10 (10 pack – 1 dose syringe)	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB-FHbp), 2 or 3 dose schedule, for intramuscular use	Trumenba®	\$115.17	\$157.35	\$115.17	0.0%
	58160-0825-52 (10 pack – 1 dose syringe)	dose syringe) Hepatitis A vaccine (HepA), pediatric/adolescent dosage-2 dose schedule, for		\$20.72	\$34.85	\$20.72	0.0%
	00006-4095-02 (10 pack – 1 dose syringe)	intramuscular use	Vaqta®	, 920.72	\$34.60	420.72	0.010
	00006-4897-00 (10 pack – 1 dose vial)	Haemophilus influenzae type b vaccine (Hib), PRP-OMP conjugate, 3 dose schedule, for intramuscular use	PedvaxHIB ®	\$13.54	\$27.25	\$13.54	0.0%
90648	49281-0545-03 (5 pack – 1 dose vial) 58160-0818-11	Haemophilus influenzae type b vaccine (Hib), PRP-T conjugate, 4 dose schedule, for intramuscular use	ActHIB®	\$9.46	\$17.63	\$9.46	0.0%
	(10 pack – 1 dose vial)		Hiberix®		\$11.57		
	00006-4121-02 (10 pack – 1 dose syringe)	Human Papillomavirus vaccine types 6, 11, 16, 18, 31, 33, 45, 52, 58, nonavalent (9vHPV), 2 or 3 dose schedule, for intramuscular use	Gardasil®9	\$189.08	\$239.29	\$189.08	0.0%
90670	00005-1971-02 (10 pack – 1 dose syringe)	Pneumococcal conjugate vaccine, 13 valent (PCV13), for intramuscular use	Prevnar 13 TM	\$144.84	\$211.86	\$144.84	0.0%
90680	00006-4047-41 (10 pack – 1 dose tube) 00006-4047-20 (25 pack – 1 dose tube)	Rotavirus vaccine, pentavalent (RV5), 3 dose schedule, live, for oral use	RotaTeq <sup>⊗</sup>	\$72.04	\$87.88	\$72.04	0.0%
90681	58160-0854-52 (10 pack – 1 dose vial)	Rotavirus vaccine, human, attenuated (RV1), 2 dose schedule, live, for oral use	Rotarix®	\$97.88	\$127.03	\$97.88	0.0%

Note: All of these and more (e.g., FAQs) can be found at www.wavaccine.org.



2 WVA

WASHINGTON VACCINE ASSOCIATION

# Is a DBA Required?

Not all vaccines administered require a DBA be submitted. It is required for commercially insured children under 19.

The DOH Eligibility Grid provides the information you will need to determine the correct eligibility status.

# YES •Commercially Insured Child (V25)

### NO

American Indian / Alaska Native Child (V04)
Medicaid Child / Apple Health (V02)
Uninsured Child (V03)
Under-insured Child served at FQHC/RHC (V05)
CHIP Child (V22)

### WA DOH Eligibility Grid

### Childhood Vaccine Program



#### Eligibility for Publicly Funded Vaccines: A Guide for Providers

The Childhood Vaccine Program is a universal vaccine purchase program financed by a combination of federal and state dollars. All children less than 19 years of age are eligible to receive vaccine through the program. To ensure the appropriate source of funding is used for purchasing vaccines, providers are required to screen and document each patient's eligibility status at every immunization visit. This document provides guidance on choosing the correct patient eligibility status, the related Immunization Information System (IIS) coding, and general billing guidelines for children and adults receiving publicly supplied vaccine.

#### Eligibility Status and Codes for Children

Patient Eligibility Status	Eligible for Public Vaccine	IIS Eligibility Code & Description	IIS Funding Code & Description	General Billing
American Indian/Alaska Native Child • Child is less than 19 years old • As defined by the <u>Indian Health</u> <u>Care Improvement Act (25 U.S.C.</u> <u>1603-13</u> )	Yes Federal (VFC) vaccine eligible	V04 VFC eligible – American Indian/ Alaska Native	VXC51 Publicly funded vaccine stock – VFC	<ul> <li>Follow guidelines based on the patient's insurance status</li> </ul>
Medicaid Child • Child is less than 19 years old = Enrolled in Medicaid or Medicaid Managed Care known as Apple Health* • Managed care plans provided by; Amerigroup, Community Health Plan of WA, Coordinated Care of WA, Molina Healthcare, United Healthcare Community Plan**	Yes Federal (VFC) vaccine eligible	V02 VFC eligible – Medicaid/Medicaid Managed Care	VXC51 Publicly funded vaccine stock – VFC	Bill according to Health Care Authority (HCA) and/or Managed Care Organization (MCO) guidelines     Reimbursement determined by HCA/MCO     Contact HCA/MCO for billing instructions
Uninsured Child • Child is less than 19 years old • Does not have health insurance • Participates in a health sharing plan such as; OneShare, Liberty HealthShare, Medi-Share, Harmony, Samaritan, Zion, Unite Health Share Ministries, etc.	Yes Federal (VFC) vaccine eligible	V03 VFC eligible – Uninsured	VXC51 Publicly funded vaccine stock – VFC	Cannot bill for cost of vaccine     Can bill administration fee up to \$23.44     per vaccine dose     May issue only a single bill within 90 days     Cannot send to collections for unpaid     administration fee



# Dosage-Based Assessment (DBA) Basics

- The DBA process is required if:
  - The patient is commercially insured and under age 19
  - The vaccine is listed on the WVA Vaccine Grid. [NOTE: There are NO COVID vaccines on the current WVA Vaccine Grid to be billed using the DBA process; if this changes, you will be notified.]
  - The vaccine material was provided to clinic by the WA DOH CVP (not privately purchased by the provider)
- May require clinics to correctly identify & document private/commercially insured patients to ensure the DBA is generated.
- The WVA Vaccine Grid amount must be billed on the DBA for the vaccine material codes; need to ensure that this does not cause patient balances or build up Accounts Receivable in clinic's billing system.
- Practices are reimbursed for the admin and office visit codes, but NOT the vaccine material codes
- The WVA's Tax ID Number (TIN) 27-2251833 must be the "pay to" on the DBA and not the rendering provider's TIN; the provider does not get reimbursed for the vaccine material on a DBA

<u>Note</u>: Always reach out to the WVA with questions.

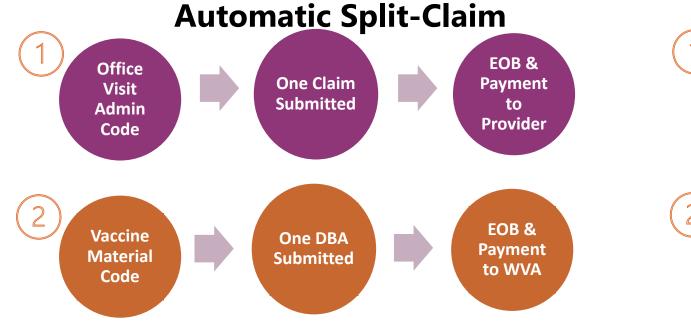


# No Patient Responsibility for DBAs

- Technically, the Dosage-Based Assessment (DBA) is <u>not</u> a health insurance claim; it is an assessment (fee) that is assessed of the commercial insurance carriers to generate funds to allow the WA DOH to purchase vaccines for provider offices
- Irrespective of the patient's commercial insurance benefits, the patient has <u>no cost-sharing responsibility</u> for vaccines under the WVA DBA process
- There are <u>no co-pays, co-insurances, or deductibles</u> applied to DBAs for the vaccine material on the WVA Vaccine Grid and the provider office should not collect any; it is ok for them to collect the office visit/administration fee if the commercial insurance benefit allows



# **Two Different Billing Practices**



Combination Claim



• Desired Filing Method

- Avoid if Possible
- Clinics should Move to Automatic Split-Claim



# 837 DBA Submissions Preferred

#### **Dosage-Based Assessment (837 Professional)**

	В	С	D	E	F	G	н
		C		E	F	G	
	X12N 837, Version 5010A1		Segment/				CMS-1500 Box
	Claim - Field Description	Loop	Element	Qualifier	Qualifier Description	Data for WVA DBA Process	Crosswalk
			1				100000000000000000000000000000000000000
	Billing Provider						
	Federal Tax ID Number (TIN)	2010AA	REF01	E1	For EIN		None
	TIN	2010AA	REF02			27-2251833	Box 25
		-					
	Billing Provider Information	2010AA	NM101	85	Billing Provider		None
-	Billing Provider Entity Type	2010AA	NM102	2	Organization		None
	Billing Organizational Name	2010AA	NM103			Washington Vaccine Association	Box 33
	Identification Code Type	2010AA	NM108	XX	NPI		None
				**	NPI		
	National Provider Identifier (NPI)	2010AA	NM109			1699092718	Box 33a
	Billing Provider Taxonomy	2000A	PRV01	BI	Billing		None
		2000A	PRV02	PXC			
	Identification Qualifier Code			PAC	Taxonomy		None
	Identification Code Type	2000A	PRV03			251K00000X	Box 33b
	Billing Provider Address	2010AA	N3			Leave Blank	None
				-			
	Billing Provider Address - Line 1	2010AA	N301			1700 Seventh Ave	Box 33
	Billing Provider Address - Line 2	2010AA	N302			Suite 1810	Box 33
	Billing Provider City	2010AA	N401			Seattle	Box 33
	Drining Provider Oily						
	Billing Provider State	2010AA	N402			WA	Box 33
	Billing Provider ZIP Code	2010AA	N403			981011397	Box 33
	Billing Provider Contact	2000A	PER01	IC	Information Contact		None
	Identification Code Type	2000A	PER03	TE	Telephone Number		None
						Service Provider's Billing Office/ Contact	
	Billing Provider Telephone Number	2000A	PER04			Telephone Number	Box 33
	Pay-To Provider Name	2010AB	NM101	87	Pay-To Provider	Washington Vaccine Association	None
	Pay-To Entity Type	2010AB	NM102	2	Organization		None
	Pay-To Address - Line 1	2010AB	N301	-		PO Box 94002	None
	Pay-10 Address - Line 1						
	Pay-To City	2010AB	N401			Seattle	None
	Pay-To State	2010AB	N402			WA	None
	Paulte The Code						
	Pay-To ZIP Code	2010AB	N403	-		981249402	None
	Patient Account Number	2300	CLM01				Box 26
	Total Charge	2300	CLM02	3		Total Charge Amount	Box 28
		2300	CLM05-1	11	Office		Box 24B
-	Provider Signature Indicator	2300	CLM06	Y	Yes		Box 31
					res		
•	Note	2300	NTE				None
					Indicates additional		
	Note Reference Code	2300	NTE01	ADD	information for claim		Box 19
		0000				Pater and for last actor about the state	
	Note Text	2300	NTE02			Enter any free text notes about the claim	BOX 19
		-		-			
	Rendering Provider Name	2310B	NM1				None
2000	Rendering Frovider Name						
	Identification Code Type	2310B	NM101	82	Rendering Provider		None
4	Identification Code Type	2310B	NM102	1	Individual		None
	Identification Code Type	2310B	NM108	xx	NPI		None
				~~	ne i	-	
	Identification Code Type	2310B	NM109			Rendering Provider's NPI #	Box 24J
		1					
	Service Facility Location Information	22100					None
					-		
-	Service Facility Identifier	2310C	NM101	77	Service Location		None
				FA	Facility	Use Office Address of Service Facility	None
	Service Facility Type	2310C	NM102	2	Non-Person Entity		None
				6	non-Person Entity		
	Service Facility Name	2310C	NM103				Box 32
	Capitan Line Capitan Data(a)	2400	DTP01	472	Date of Conder		None
-	Service Line, Service Date(s)	2400	DIPOT	9/2	Date of Service		none
6				100000	Range of Dates of		
	Service From - To Dates	2400	DTP02	RD8	Service		None
-	Format as: CCYYMMDD-CCYYMMDD	2400	DTP03				Box 24A
		- 100					
			-				
	Procedures, Services, Supplies	2400	SV1				None
	Product/Service ID	2400	SV101-1	HC	Standard CPT Code		None
	Procedure-CPT/HCPCS Code	2400	SV101-2				Box 24D
	FIOLEGUIE-CF I/HCPUS CODE	2400	34101-2				DUX 240
0							
X	Line Item \$ Charge Amount	2400	SV102				Box 24F
U							
1000							
	Drug Identification	2410	LIN				None
					Must be N4 (No		Box 24 Shaded
	Product or Service Identification Code	2410	LIN02	N4	description given)		area for service line
	in logate of betrice identification Code	P110	511102		accounter Auton)		and the service life
	and the second se					conceptibility and a list	Box 24 Shaded
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#### STEP 1

## **Complete the DBA electronically** (837 Professional)

#### This includes:

- 1. Billing Provider Federal Tax ID Number
- 2. Billing Provider Information
- 3. Patient Account Number, Claim Notes and Provider Signature
- 4. Rendering Provider Name
- 5. Service Facility & Location NPI
- 6. Service Line and Date of Service
- 7. Procedures, Services and Supplies
- 8. Line Item Charge (\$) Amount
- 9. Vaccine Material Identification

#### STEP 2

#### Submit electronically to payer

Submit the DBA to the payer (health plan, insurance company, or third-party administrator) via your electronic claims clearinghouse – NOT to WVA.

Confidential and Proprietary © 2022

#### IMPORTANT BILLING REMINDERS

#### ★ Do NOT submit to WVA. Submit to Payer.

#### \* First time electronic filers:

The first time you use the electronic DBA process, please notify your claim clearinghouse or electronic medical records vendor that you intend to submit electronically using the DBA process with WVA's name, Tax ID and NPI.

#### \* Important Numbers:

WVA Tax Identification Number (TIN): 27-2251833

WVA National Provider Identifier (NPI): 1699092718

WVA Billing Taxonomy Number: 251K00000X



# Sample DBA Submissions

SAMPLE ADMINISTRATION CLAIM TO SUBMI WITH DOSAGE-BASED ASSESSMENT HEALTH INSURANCE CLAIM FORM	T Payer & Address according to patient's card (never WVA). Only commercial payers and patients under 19. Out of state patient plans are o.k. – you may need to submit to local payer address.	SAMPLE DOSAGE-B ELECTRINIC CLAIM FOR APPROVED BY NATIONAL UNITOR ALL OUT OF ALL OUT OUT OF ALL OUT OUT OF ALL OUT OUT OF ALL OUT		Payer & Address according to patien card (never WVA). Only commercial payers and patients under 19. Out of state patient plans are o.k. – you may need to submit to local payer address
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Note: Presentation will include "live" demonstration of forms.

OTHER CLAM ID (Designated by NUCC) INSURANCE PLAN NAME OR PROGRAM NAME IS THERE ANOTHER HEALTH BENEFIT PLANT YES NO If yes, complete items 9, 9a, and 9d. I INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier to

RENDERING PROVIDER ID. #

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## Federal Billing Guidelines

Providers cannot receive reimbursement for publicly-supplied vaccines

- For patients paying out of pocket for vaccine administration (uninsured, underinsured, deductibles, out-of-network), the vaccine administration fee cannot exceed \$23.44 per vaccine dose.
- May only issue a single bill within 90 days of service
- Cannot send unpaid administration fees to collections
- Cannot deny access to an established patient due to parent/guardian's inability to pay the vaccine administration fee.

WA State Medicaid/CHIP Billing

Bill according to the Washington State Health Care Authority guidelines for patients covered by Apple Health Plans (Medicaid and CHIP)

### Health Care Authority EPSDT Billing Guide (pg 45-46)

# What vaccines are free from the Department of Health (DOH) for clients age 18 and younger?

No-cost immunizations from DOH are available for clients age 18 and younger. See the Professional Administered Drug Fee Schedule for a list of immunizations that are free from DOH. Therefore, HCA pays only for administering the vaccine.

- In a nonfacility setting:
  - Bill for the vaccine by reporting the procedure code for the vaccine given with modifier SL (e.g. 90707 SL). HCA pays for the administrative cost for those vaccines that are free from DOH and are billed with modifier SL (e.g., 90707 SL).
  - DO NOT bill procedure codes 90460-90461 or 90471-90472 for the administration.

## The Importance of Clinic Billing Contacts

All enrolled clinics must have a billing contact listed in their provider agreement



This should be someone who can answer childhood vaccine billing questions and make changes to resolve issues



Important to update the billing contact listed in the provider agreement when contacts change.



Update during annual provider agreement renewal and any other time by emailing <u>WAChildhoodVaccines@doh.wa.gov</u> a request to return your agreement.

## Tools and Resources

- WVA Website
- WA DOH Childhood Vaccination Website
- Patient Eligibility & Screening Overview
- <u>Eligibility for Publicly Funded Vaccines: A Guide for Providers</u>
- WVA Billing Guide
- WVA Provider Billing Checklist
- WVA Assessment Grid
- <u>Medicaid EPSDT Billing Guide (pgs 45-46)</u>

## CVP Training Series Future Topics

**Upcoming Topics** 

April 21, 2022 – Ordering Basics

Suggestions? Please send to <u>WAChildhoodVaccines@doh.wa.gov</u>

Washington State Department of Health | 27

## Questions?

#### **Childhood Vaccine Program Contact Information**

WAChildhoodVaccines@doh.wa.gov

Phone: (360)236-2829 Fax: (360)236-3811

### Washington Vaccine Association Contact Information

info@wavaccine.org

www.wavaccine.org Phone: 888-928-2224 Fax: 888-928-2242



Washington State Department of Health is committed to providing customers with forms and publications in appropriate alternate formats. Requests can be made by calling 800-525-0127 or by email at civil.rights@doh.wa.gov. TTY users dial 711.