

Pennsylvania Division of Immunizations Eligibility & Billing

Before administering vaccine supplied by the Division of Immunizations to qualifying children, the provider must complete the necessary screening to determine whether the patient is eligible for VFC vaccine and document either ineligibility or eligibility and the reason for eligibility. Eligibility shall be documented in the patient record for each immunization visit. Information must be maintained and able to be retrieved for minimum of three years.

Children (birth through 18 years) are eligible for VFC vaccines if they meet at least one of the following criteria:

- Are enrolled in Medicaid, i.e., children who have health insurance covered by a state Medicaid program; Please note this does NOT include CHIP;
- Are uninsured, i.e., have no health insurance;
- Are American Indian or Alaska Native; or
- Are underinsured. This includes a child who has health insurance but whose coverage does not include vaccines, or a child whose insurance covers only selected vaccines (VFC eligible for non-covered vaccines only).

*Underinsured children are eligible to receive VFC vaccines only through a Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), State Health Centers (SHC) or County Municipal Health Departments (CMHD).

Children with health insurance that covers vaccines, and who fail to meet one of the previously mentioned criteria are **not eligible** through the VFC program, even when the insurance requires a deductible. There are no income restrictions imposed by the VFC program, as long as the child meets all other enrollment criteria.

For children with private health insurance as primary and Medicaid as secondary there are two options for providers. Option 1: Administer VFC vaccines and bill Medicaid for the administration fee.

In most situations Medicaid is the “payer of last resort,” so claims must be filed with and rejected by all other insurers before Medicaid will consider payment for services. This is not true of the vaccine administration fee for Medicaid-eligible VFC children. Medicaid must pay the VFC provider the administration fee because vaccinations are a part of the Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program. However, once a claim is submitted to Medicaid the state Medicaid agency has the option to seek reimbursement for the administration fee from the primary insurer.*

Option 2: The provider can administer private stock vaccines and bill the primary insurance carrier for both the cost of the vaccine and the administration fee. If the primary insurer reimburses less than Medicaid for the vaccine administration fee, the provider can bill Medicaid for the balance, up to the amount Medicaid pays for the administration fee.

*If the state Medicaid agency rejects a claim for the vaccine administration fee and states the claim must first be submitted to the primary insurer for payment, please notify the Division of Immunizations.

Charges and Fees for Immunization of the VFC-eligible Clients

- The reimbursement rate set by the Centers for Medicare & Medicaid Services (CMS) of \$23.14 per dose (per dose of vaccine) may be charged for the administration of vaccine to VFC eligible and non-Medicaid children.
- Providers may not exceed the CMS reimbursement rate when determining administration fees for VFC eligible populations.
- VFC-eligible, non-Medicaid includes Native American, Alaska Native, children with no insurance, or children who are underinsured.
- Healthcare providers who bill for the vaccine administration fee for a non-Medicaid, VFC eligible child after the date of service may issue only a single bill to the patient within 90 days of vaccine administration.
- The reimbursement rates set by Pennsylvania Medicaid may be charged for the administration of vaccine to children enrolled in Medicaid (per dose of vaccine).
- The reimbursement rates set by contracted medical health plans may be charged for the administration of vaccine to children with private health insurance coverage for immunizations (per dose of vaccine).
- Providers may not deny administration of vaccine supplied by the Division of Immunizations to an established patient because of the child's parent's or guardian's inability to pay the administration fee. In addition, unclaimed vaccine administration fees cannot be sent for collections. Therefore, healthcare providers must establish a process to waive unpaid vaccine administration fees.
- Providers may not charge the patient or insurance for the cost of any Division of Immunizations—supplied vaccines.