

Pennsylvania Division of Immunizations COVID-19 Vaccination Bridge Access Program Eligibility & Billing

Before administering vaccine supplied by the Division of Immunizations to qualifying adults, the provider must complete the necessary screening to determine whether the patient is eligible for the Bridge Access Program 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.

Adults (19 years and older) are eligible for the Bridge Access Program vaccines if they meet at least one of the following criteria:

- Are uninsured, i.e., have no health insurance;
- Are American Indian or Alaska Native; or
- Are underinsured. This includes an adult who has health insurance but whose coverage does not include COVID-19 vaccines.

*Underinsured adults are eligible to receive COVID-19 Vaccination Bridge Access Program vaccines only through a Federally Qualified Health Centers (FQHC), Rural Health Clinics (RHC), State Health Centers (SHC) or County Municipal Health Departments (CMHD) or other designated Bridge Access Program providers.

Adults with health insurance that covers vaccines, and who fail to meet one of the previously mentioned criteria are **not eligible** through the COVID-19 Vaccination Bridge Access Program, even when the insurance requires a deductible. There are no income restrictions imposed by the COVID-19 Vaccination Bridge Access Program, as long as the adult meets all other enrollment criteria.

For adults with private health insurance as primary and Medicaid as secondary there are two options for providers. Option 1: Administer Bridge Access Program 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 adults. 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 Bridge Access Program-eligible Clients

- Bridge Access Program-eligible, non-Medicaid adults includes Native American, Alaska Native, adults with no insurance, or adults who are underinsured.
- The reimbursement rates set by contracted medical health plans may be charged for the administration of vaccine to adults 19 years of age and older 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 inability to pay the administration fee.
- Providers may not charge the patient or insurance for the cost of any Division of Immunizations—supplied vaccines.