

## Payer Checklist

This checklist is intended to assist health insurers and third-party administrators (TPA) achieve compliance with the dosage-based assessments (DBA) requirements of the Washington Vaccine Association's (WVA) governing statute (Chapter 70.290 RCW) and Plan of Operation. It should be utilized by health insurers and TPAs to evaluate and ensure their internal adjudication systems have been set up to accommodate the WVA DBA process. Additional information for health insurers and TPAs can be found in the WVA's *Private Insurance Assessment Billing Provider & Payer Guide* ("Guide") (<https://wavaccine.org/assessment-guide/>).

### General

- Washington State-domiciled providers submit DBAs on behalf of the WVA to the health insurers and TPAs that then remit payment to the WVA. The WVA receives remits from health insurers and TPAs only, not from providers or patients. The DBA is an assessment under the WVA Act and is not a medical claim although it is processed like a medical claim.
- If a provider cannot separate the provider's vaccine administrative fee from the vaccine material cost (DBA), the health insurer or TPA must produce a settlement report, not less than every quarter, and remit payment to the WVA with remittance detail until the provider can bill the health insurer or TPA a separate DBA. Please contact [compliance@wavaccine.org](mailto:compliance@wavaccine.org) with any questions.

### Vaccine Grid Adherence

- The correct DBA amounts, taken from the Vaccine Assessment Grid ("Grid") corresponding to the date of service, should be reviewed annually as the Grids are in effect from July 1 to June 30 each year. Current and historic Grid amounts for each CPT and corresponding NDC code can be found on the WVA website in PDF and Excel formats: <https://wavaccine.org/assessment-grid/>.
- The WVA should not receive remittances for CPT codes not listed on the Grid. Incorrectly paid DBAs will require reversals and adjustments that impact the health insurer's/TPA's and the WVA's administrative costs.<sup>1</sup>
- The DBA should remit to the WVA the specified Grid amount and the Grid amount will override any logic to pay at the lesser of charge and allowed amounts. In effect, the Grid amount is the allowed amount.
- The DBA should remit to the specified Grid amount regardless of modifiers submitted by the provider.

### Tax ID Number (TIN) 27-2251833 and NPI 1699092718

- Health insurers and TPAs should only remit payment for codes on the Grid to the WVA's TIN (27-2251833). If upon review, the health insurer or TPA encounters vaccine material DBAs being paid to TINs other than WVA's, those remittances need to be redirected to the WVA's TIN.
- The WVA's TIN (27-2251833) and NPI (1699092718) should not be set up to process DBAs as an out-of-network (OON) benefit. The WVA was created by state statute and is considered a public health organization. As long as the provider submitting the DBA is enrolled with the State of Washington's Department of Health's (DOH) Child Vaccination Program (CVP), the DBA should be paid at the listed Grid rate. Common Claim Adjustment Reason Codes (CARCs) used when systems adjudicate DBAs as OON include 242, 243, and 279.

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<sup>1</sup> Note: TRICARE military payers have a separate Grid price to which they adhere.

**Patient Responsibility**

- ❑ The DBA should be paid without contractual adjustments that would result in patient responsibility. Common CARCs used when systems adjudicate DBAs resulting in patient responsibility include 100, 170, and 187.
- ❑ Patients should not be charged co-payments, coinsurances, or deductibles for vaccine material listed on the Grid. The WVA Act (Chapter 70.290 RCW) DBA requirements apply to health insurers and TPAs with respect to pediatric lives covered by the benefit plan regardless of terms of coverage. The amount of the assessment is not dependent on the terms of coverage under the applicable benefit plan (e.g., deductibles or limitation on vaccine coverage) unless the benefit plan has no coverage and the patient is seen at a Federally Qualified Health Center or Rural Center in which case the provider will submit the DBA as an uninsured patient.
- ❑ The health insurer or TPA is responsible for monitoring any patient payments remitted to the WVA and for subsequently requesting a refund from the WVA in order to reimburse the patient. Third-party payment vendors associated with the health insurer's or TPA's patient-facing portals should be identified and queried to determine any patient payments made incorrectly to the WVA.
- ❑ The WVA can only exchange funds in terms of payments and refunds with health insurers and TPAs and not payments to and from patients or providers. Patient or provider funds received by the WVA require refund processing.

**Reprocessing DBAs**

- ❑ The WVA does not accept takebacks, vouchers, or offsets from payers when claims are reprocessed by payers seeking reimbursement for overpaid DBAs.
- ❑ If a health insurer or TPA is planning to reprocess DBAs in bulk, please contact the WVA at [info@wavaccine.org](mailto:info@wavaccine.org) to make arrangements (e.g., a lump payment with claim-specific notation) to reduce manual refund check processing costs and to provide the WVA with a DBA-level detail file.

**Electronic Remittance Advices (ERAs/835s) and ACH Payments**

- ❑ While the WVA primarily works with the Availity clearinghouse to receive 835 remittance files and set up ACH payments, the WVA has additional relationships with numerous clearinghouses (e.g., Change Healthcare, CAQH, Zelis, PaySpan, PNC, ECHO, Office Ally, InstaMed, and OptumPay). While the WVA proactively works to identify health insurers and TPAs that are still submitting paper remittances and/or checks, health insurers and TPAs interested in enabling electronic submissions can contact the WVA at [EDI@wavaccine.org](mailto:EDI@wavaccine.org). The WVA's TIN is 27-2251833 and NPI is 1699092718.

**Other**

- ❑ Health insurers and TPAs need to remove timely processing denial edits in their adjudication systems as there are no expiration periods for DBAs to be remitted. Common CARCs used when systems adjudicate DBAs resulting in timely submission denials include 164, 210, and 226.
- ❑ TPAs are required per statute (RCW 70.290.075) to register with the WVA on the WVA's TPA Registration Portal that can be found on the WVA website: <https://wavaccine.org/registration-requirements/>.
- ❑ The WVA is a non-profit entity that does not require a 1099. The 1099 results in administrative expense for the carrier/TPA and the WVA. A WVA W9 may be downloaded from our website if required: <https://wavaccine.org/other-resources-and-links/>.

Questions may be directed to [info@wavaccine.org](mailto:info@wavaccine.org).