

Provider Checklist

This checklist is intended to assist providers achieve compliance with the dosage-based assessments (DBA) requirements of the Washington Vaccine Association's (WVA) governing statute and Plan of Operation. This checklist is intended to be used to review how provider billing systems have been set up to accommodate the WVA DBA process. Additional information for providers can be found in the WVA's *Private Insurance Assessment Billing Provider & Payer Guide* ("Guide") (<https://wavaccine.org/assessment-guide/>).

Program Enrollment

- Ensure practice is enrolled in the Childhood Vaccine Program if practice is using State-supplied vaccine material. There is an annual enrollment process. For more information on program enrollment or re-enrollment, contact 1-866-397-0337 or WAChildhoodVaccines@doh.wa.gov.

Patient Eligibility Determination

- Provider has reviewed and understands the latest version of the Washington State Department of Health's *Eligibility for Publicly Funded Vaccines: A Guide for Providers* document (<https://www.doh.wa.gov/Portals/1/Documents/Pubs/348-577-EligibilityPubliclyFundedVaccinesGuide.pdf>) to ensure the appropriate payer is billed, resulting in the correct payment to the WVA. 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.

Dosage-Based Assessment (DBA) Submission

- Provider has reviewed and understands the DBA process as outlined in the WVA's *Private Insurance Assessment Billing Provider & Payer Guide* ("Guide") (<https://wavaccine.org/assessment-guide/>). The WVA does not submit DBAs so any corrective action needed is performed by providers, health insurers, and third-party administrators (TPAs).
- Provider completes two separate claims, whether electronically or by paper. One for the administration claim and one for the DBA (State-supplied vaccine material). The provider is the pay-to on the administration claim and the WVA is the pay-to on the DBA. If a provider cannot separate the provider's vaccine administrative fee from the vaccine material assessment (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.
- Each July 1, the provider updates their billing system with the correct CPT pricing for the vaccine material found on the WVA's Vaccine Assessment Grid (<https://wavaccine.org/assessment-grid/>). Submitting the correct grid price on the DBA is important for the WVA to receive the correct assessment amount from the health insurers or TPA. Incorrect amounts require reprocessing and additional expense. The date of service drives which Grid price to use.
- If the administration and/or DBA is denied for incorrect provider demographics or patient eligibility information, lacking a National Drug Code (NDC), or other reason, the provider must re-file both the corrected administrative and vaccine material DBA forms to the health insurer or TPA. The WVA relies on provider offices to pursue payment of the DBA, or vaccine portion of the claim, to the full extent they pursue payment of the administration portion of the claim. The WVA does not submit claims directly to health insurers and TPAs and relies on correct DBA processing to maintain program funding.

- Provider has systems to ensure provider does not receive payment in error from health insurers or TPAs for vaccine material. If payment for vaccine material to the provider is discovered, provider prompts the health insurer or TPA to reprocess the DBAs correctly which will result in health insurers and TPAs taking back the payment from the provider and providing payment to the WVA instead.

Electronic Data Interchange (EDI)

- Providers strive to submit DBAs electronically and have notified their claim clearinghouse or electronic medical records vendor of the intention to submit electronically using the DBA process with WVA's name, TIN (27-2251833), and NPI (1699092718) in the billable provider/pay-to section, with the provider billing office phone number in the same section.
- Providers will **not** submit an EDI clearinghouse **application** (e.g., Change Healthcare, CAQH, Zelis, PaySpan, PNC, ECHO, Office Ally, InstaMed, and OptumPay) using the WVA's TIN (27-2251833) or NPI (1699092718). Doing so may misroute payment intended for the WVA to the provider.

Patient Responsibility

- Provider is not collecting patient co-pays, co-insurances, or deductibles for the vaccine material portion of the visit as there is no patient responsibility due.
- Provider is not billing patients for State-supplied vaccine material, and provider statements and accounts should not reflect a patient balance for this material. The WVA can only exchange funds in terms of payments and refunds with health insurers and TPAs, not with patients or providers.

Questions may be directed to info@wavaccine.org.