

# State-supplied Vaccine Administration Fees and Billing Policy

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Oregon's Vaccines for Children (VFC) and Vaccine Access Project enrolled clinics who receive publicly funded vaccine are required to comply with the following vaccine administration fees and billing procedures, as stated in the provider agreements.

## **Vaccine administered to VFC-eligible patients, and in public clinics, 317-eligible patients:**

- Administration fees for Oregon Health Plan-covered children must be billed to the appropriate Coordinated Care Organization (CCO), or directly to the Oregon Health Plan for those covered by Fee-For-Service option.
- Vaccine administration fees for all non-Medicaid patients must be capped at \$21.96 per injection.
- We recommend that clinics have a fee policy that demonstrates their actual costs for vaccine administration – a first dose, and a fee for any subsequent doses given at the same visit. That policy should show that the fee is discounted for non-Medicaid VFC eligible children and uninsured adults.
- If patient/parent states they are unable to afford the administration fees, the fees must be completely waived.
- It is the clinic's responsibility to notify all patients/parents that administration fees will be waived if the fees are unaffordable.
- For non-Medicaid and VFC/VAP-eligible patients, administration fees may be billed at the date of service, and only ONE TIME within the following 90 days to the patient/parent, but the account cannot be sent to collections for failure to pay. Those unable to pay may not be refused access to care.

## **Vaccine administered to billable (privately insured) patients:**

- The state does not cap vaccine administration fees.
- Administration fees may be billed to private insurance or the patient/parent.

### Q & A

**Q:** What qualifies as “unable to pay” for the purposes of waiving the administration fees?

**A:** There are no income level requirements for waiving the administration fees. Anytime a patient/parent states that they are unable to pay the administration fees, you must waive the fees completely.

**Q:** Must we notify patients/parents that administration fees will be waived if they are unable to pay?

**A:** Yes. It is your responsibility to ensure that your patients/parents know that administration fees will be waived if they are not affordable. If patients/parents have an unpaid bill for administration fees, they may feel unwelcome and not return to your clinic for needed services. By law, you must ensure that administration fees do not become a barrier to receiving immunization services.

**Q:** Should this notification be made verbally or in writing?

**A:** It's up to you to determine what is most appropriate for your clinic and your patients.

Some options include:

- Notify patients/parents verbally, if they are asked to pay the administration fees at the time of the visit.
- Include a written statement on bills, if your clinic sends bills for administration fees after the date of service. You may also want to include instructions for patients/parents to have the administration fees waived.
- Post signs or posters in your waiting room or in exam rooms.

**Q:** If my clinic bills a patient/parent for the VFC or VAP/317 vaccine administration fees, and the patient/parent does not contact us, can I re-send the bill to the patient/parent?

**A:** If the patient is non-Medicaid and VFC/VAP-eligible you may only bill one time within 90 days of the date of service.

**Q:** Can we provide a discount to the patient/parent if s/he pays on the day of service?

**A:** Yes, if you make it clear to the patient/parent that the entire administration fee will be waived if s/he is unable to pay.

**Q:** How should I bill administration fees to Oregon Health Plan/CCOs?

**A:** In general, providers bill using the vaccine-specific CPT, with the SL modifier, and the vaccine administration fee(s) in the cost column. Please refer to the CCOs with whom you contract for their specific guidance.

**Q:** How do we bill administration fees for VFC/VAP-eligible patients who have Medicaid and private Insurance?

**A:** Bill either the CCO or the private insurance for the appropriate administration fee based on what is the lowest out of pocket expense to the parent.

**Q:** What if we bill a dually-insured (Medicaid and private insurance) patient's private insurance for vaccine dose and administration fees, and we receive less than the billed amount?

**A:** You can either return the portion the private plan paid and then bill the appropriate CCO or write off the loss. If you are a VFC/VAP provider, please call us for help in how to reconcile your inventory and correct the vaccine eligibility data submitted to ALERT IIS.

**Oregon VFC Help Desk**

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