

Patient Eligibility and Vaccine Administration Fee

Quick Reference Guide

VFC/WyVIP Providers receive vaccine that is designated for either VFC-eligible or WyVIP-eligible children based on the patient information reported on the Provider Profile. At this time, vaccine stocks do not need to be separated.

- Publicly-supplied vaccine can only be administered to children that meet either the VFC eligibility criteria or WyVIP eligibility criteria listed below.
 - The administration of publicly-supplied vaccine to ineligible children constitutes fraud and abuse and will result in an investigation and possible suspension from the program.
- Providers may charge a fee for the administration of publicly-supplied vaccine, but not the vaccine itself.
 - Providers cannot deny administration of a publicly-supplied vaccine to a patient who is unable to pay the administration fee.
 - The allowable vaccine administration fee is set by the Centers for Medicare & Medicaid Services (CMS) and can change at any time.

VACCINES FOR CHILDREN (VFC)

A federally funded entitlement program that provides the funding for the CDC to purchase vaccines and distribute them to states. The program provides vaccines at no cost to VFC-eligible children. The vaccines provided are recommended by the Advisory Committee on Immunization Practices (ACIP)

Eligibility Criteria

- 0-18 years of age
- Medicaid
- No insurance
- American Indian/Alaska Native
- Underinsured at FQHC, RHC, or deputized facility

Administration Fee

- Providers may charge \$21.72 per dose to VFC-eligible patients.
- Example 1: The administration fee for DTaP/IPV is \$21.72
- Example 2: The administration fee for DTaP/HepB/IPV is \$21.72

WYOMING VACCINATES IMPORTANT PEOPLE (WYVIP)

A state funded vaccine program established after the enactment of the Childhood Immunization Act (2006). This program provides vaccines for Wyoming children that are not VFC-eligible.

The following vaccines are NOT available to WyVIP eligible children:

- Hepatitis A
- HPV
- Meningococcal
- Influenza

Eligibility Criteria

- 0-18 years of age
- Wyoming resident
- Not VFC-eligible

Administration Fee

- Providers may charge \$21.72 per antigen to WyVIP-eligible patients.
- Example 1: The administration fee for DTaP/IPV is \$86.88
- Example 2: The administration fee for DTaP/HepB/IPV is \$108.60

Eligibility Scenarios

- Scenario 1:** A child goes to a private provider. The patient has a private insurance as their primary insurance, but has Medicaid as their secondary insurance.
- Eligibility:** The patient is VFC eligible because he/she has Medicaid. The facility should administer VFC vaccine and charge the administration fee to Medicaid.
Note: Although Medicaid is considered the payer of last resort in most cases, this is not true of the VFC vaccine administration fee.
- Scenario 2:** An 18 year old patient goes to a Rural Health Clinic (RHC). He wants to get the Hep A and meningococcal vaccines. The patient has insurance that covers Hep A, but not meningococcal.
- Eligibility:** The patient is VFC eligible for meningococcal only because he is underinsured at an RHC. See *Quick Reference Guide: Delegation of Authority*. The patient must receive private stock Hep A as his insurance covers it and the WyVIP Program does not provide this vaccine.

Quick View of VFC and WyVIP Eligibility and Insurance Status

VFC eligibility scenario: Child is insured and...	Insurance Status	Is child VFC or WyVIP eligible?
Has not yet met plan's deductible.	Insured	WyVIP eligible. Program does not provide Hep A, HPV, meningococcal, and influenza.
Has not yet met plan's deductible and has Medicaid as secondary insurance.	Medicaid eligible	VFC eligible
Insurance plan covers all ACIP recommended vaccines but excludes certain products/ combination vaccines .	Insured	WyVIP eligible. Program does not provide Hep A, HPV, meningococcal, and influenza.
Children enrolled in separate Children's Health Insurance Program (S-CHIP).	Insured	WyVIP eligible. Program does not provide Hep A, HPV, meningococcal, and influenza.
Has insurance, but plan limits coverage to a specific number of provider visits annually.	Insured Underinsured once the limited number of allowable visits are reached during the year.	VFC eligible once the limited number of visits have been reached AND only if administered by a FQHC, RHC, or deputized provider. WyVIP eligible at all other provider types. WyVIP Program does not provide Hep A, HPV, meningococcal, and influenza.
Insurance plan covers only a portion of the vaccine cost and does not have Medicaid as secondary insurance.	Insured	WyVIP eligible. Program does not provide Hep A, HPV, meningococcal, and influenza.
Is American Indian or Alaska Native and has private insurance.	Insured	Option 1: Administer VFC or WyVIP vaccine and bill patient or insurance for administration fee. Option 2: Administer private stock vaccine and bill the primary insurance carrier for both the cost of the vaccine and the administration fee.
Insured and has Medicaid as secondary insurance.	Medicaid eligible	Option 1: Administer VFC or WyVIP vaccine and bill Medicaid agency for the administration fee. Option 2: Administer private stock vaccine and bill the primary insurance carrier for both the cost of the vaccine and the administration fee.