

# Changes to the Vaccines for Children (VFC) Program

## Participant Eligibility Verification and Billing

Effective October 1, 2016

Presented By:



# VFC Program Changes effective October 1, 2016

- ❖ Vaccines obtained through the Vaccines For Children (VFC) program are limited to children age birth through 18 who have Title XIX (19) Medicaid eligibility on the date of service
- ❖ Children with Title XXI (21) - also referred to as CHIP - and State-Funded eligibility must receive private stock vaccines

Title XIX (19)	VFC Stock
Title XXI (21)	Private Stock
State-Funded	Private Stock

# Participant Eligibility

- ❖ Providers must verify eligibility *on each date of service* or risk non-payment or reduced payment
- ❖ Providers may verify participant eligibility and obtain Title information using:
  - MEDI - [www.myhfs.illinois.gov](http://www.myhfs.illinois.gov)
    - **Case Type**
    - **Special Information** section
  - HIPAA 270/271 eligibility request/response
- ❖ Title Information is not available via the Automated Voice Response system (phone system)

# Participant Eligibility (cont'd)

- ❖ Title 19 = XIX --- use VFC stock
- ❖ Title 21 = XXI --- use private stock
- ❖ State-Funded (except DHS Social Services eligibility which is not applicable to medical services/vaccines) --- use private stock
- ❖ **Reminder:** Children with All Kids eligibility may be Title XIX (19), Title XXI (21), or State-funded

HFS All Kids Eligible	Title XIX (19)
	Title XXI (21) – also referred to as CHIP
	State-Funded

# MEDI Eligibility

- ❖ Review Case Type, Special Information, and Managed Care Enrollment and/or Third Party Liability if applicable. “Special Information” will provide Title or state-funded eligibility information.
- ❖ Example: participant is Title XIX (19) – use VFC stock; participant is also enrolled in managed care so the provider must bill the MCO

→ **For the date(s) of service entered, the client is eligible for medical benefits.**

→ **Case Type:** ALL KIDS, MEDICAID ELIGIBLE, FULL COVERAGE

<b>Begin Date:</b> 05/01/2016	<b>End Date:</b> 05/01/2016	<b>Case Id:</b> [REDACTED]	<b>System Date:</b> 04/05/2016
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**Service Type(s):** OCCUPATIONAL THERAPY - SPEECH THERAPY - SKILLED NURSING CARE - SUBSTANCE ABUSE - VISION (OPTOMETRY) - PSYCHOTHERAPY - PSYCHIATRIC-INPATIENT - PSYCHIATRIC-OUTPATIENT - CARDIAC REHABILITATION - PEDIATRIC - MENTAL HEALTH - URGENT CARE - MEDICAL CARE - DURABLE MEDICAL EQUIPMENT PURCHASE - AMBULATORY SERVICE CENTER FACILITY - DURABLE MEDICAL EQUIPMENT RENTAL - SURGICAL - SECOND SURGICAL OPINION - CHIROPRACTIC - DENTAL CARE - DIAGNOSTIC X-RAY - ORAL SURGERY - HOME HEALTH CARE - HOSPICE - HOSPITAL - HOSPITAL INPATIENT SERVICES - DIAGNOSTIC LAB - HOSPITAL OUTPATIENT SERVICES - HOSPITAL EMERGENCY ACCIDENT - EMERGENCY ROOM VISIT - HOSPITAL AMBULATORY SURGICAL - RADIATION THERAPY - MRI/CAT SCAN - NEWBORN CARE - WELL BABY CARE - ANESTHESIA - DIAGNOSTIC MEDICAL - DIALYSIS - CHEMOTHERAPY - SURGICAL ASSISTANCE - IMMUNIZATIONS - FAMILY PLANNING - EMERGENCY SERVICES - PHARMACY - PODIATRY - PROFESSIONAL (PHYSICIAN) VISIT OFFICE -

→ **Special Information:** Title XIX.

→ **Managed Care Organization** [Print This Section](#)

<b>Plan Code:</b> 19	<b>Site Name:</b> [REDACTED] HEALTH PLAN INC VMC
<b>Exclusion Code:</b> 4	<b>Organization Name:</b> [REDACTED] HEALTH PLAN INC VMC
<b>Site Number:</b> 001	<b>Organization Phone:</b> 8666063700
<b>Begin Date:</b> 05/01/2016	<b>Street:</b> 222 N LA SALLE ST
<b>End Date:</b> 05/01/2016	<b>City - State - Zip:</b> CHICAGO - IL - 60601

# MEDI Eligibility (cont'd)

❖ Example: participant is in a State Funded plan - use private stock

**For the date(s) of service entered, the client is eligible for medical benefits.**

→ **Case Type:** ALL KIDS PREMIUM LEVEL 2, FULL COVERAGE

<b>Begin Date:</b> 06/01/2016	<b>End Date:</b> 06/01/2016	<b>Case Id:</b> [REDACTED]	<b>System Date:</b> 02/26/2016
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**Service Type(s):** OCCUPATIONAL THERAPY - SPEECH THERAPY - SKILLED NURSING CARE - SUBSTANCE ABUSE - VISION (OPTOMETRY) - PSYCHOTHERAPY - PSYCHIATRIC-INPATIENT - PSYCHIATRIC-OUTPATIENT - CARDIAC REHABILITATION - PEDIATRIC - MENTAL HEALTH - URGENT CARE - MEDICAL CARE - DURABLE MEDICAL EQUIPMENT PURCHASE - AMBULATORY SERVICE CENTER FACILITY - DURABLE MEDICAL EQUIPMENT RENTAL - SURGICAL - SECOND SURGICAL OPINION - RESTORATIVE DENTAL - CHIROPRACTIC - DENTAL CARE - DIAGNOSTIC X-RAY - ORAL SURGERY - HOME HEALTH CARE - HOSPICE - HOSPITAL - HOSPITAL INPATIENT SERVICES - DIAGNOSTIC LAB - HOSPITAL OUTPATIENT SERVICES - HOSPITAL EMERGENCY ACCIDENT - EMERGENCY ROOM VISIT - HOSPITAL AMBULATORY SURGICAL - MRI/CAT SCAN - NEWBORN CARE - WELL BABY CARE - ANESTHESIA - DIAGNOSTIC MEDICAL - DIALYSIS - CHEMOTHERAPY - SURGICAL ASSISTANCE - IMMUNIZATIONS - FAMILY PLANNING - EMERGENCY SERVICES - PHARMACY - BRAND NAME RX DRUGS - GENERIC RX DRUGS - PODIATRY - PROFESSIONAL (PHYSICIAN) VISIT OFFICE -

**CoPay Information:**  
CoPay for each VISION (OPTOMETRY) 10.00  
CoPay for each MENTAL HEALTH 10.00  
CoPay for each RESTORATIVE DENTAL 10.00  
CoPay for each CHIROPRACTIC 10.00  
CoPay for each DENTAL CARE 10.00  
CoPay for each HOSPITAL INPATIENT SERVICES 100.00  
CoPay for each EMERGENCY ROOM VISIT 30.00  
CoPay for each BRAND NAME RX DRUGS 7.00  
CoPay for each GENERIC RX DRUGS 3.00  
CoPay for each PROFESSIONAL (PHYSICIAN) VISIT OFFICE 10.00

→ **Special Information:** State Funded. NonEmerg ER visit copay, \$30. Family Planning related medical services require a copay for office visits. Not Eligible for Non-Emergency Transportation.

→ **Third Party Liability** [Print This Section](#)

<b>Source Code:</b> 006	<b>Group Name:</b> [REDACTED] C.
<b>Coverage Code:</b> CA	<b>Group Number:</b> PC2189

# MEDI Eligibility (cont'd) – Same Case Type Spanning Different Months

- ❖ Use Private Stock for date of service 4/30/16 and VFC stock for date of service 5/1/16

Case Type: ALL KIDS PREMIUM LEVEL 1, FULL COVERAGE

Begin Date: 04/30/2016      End Date: 04/30/2016      Case Id: [REDACTED]      System Date: 08/05/2015

Service Type(s): OCCUPATIONAL THERAPY - SPEECH THERAPY - SKILLED NURSING CARE - SUBSTANCE ABUSE - VISION (OPTOMETRY) - PSYCHOTHERAPY - PSYCHIATRIC-INPATIENT - PSYCHIATRIC-OUTPATIENT - CARDIAC REHABILITATION - PEDIATRIC - MENTAL HEALTH - URGENT CARE - MEDICAL CARE - DURABLE MEDICAL EQUIPMENT PURCHASE - AMBULATORY SERVICE CENTER FACILITY - DURABLE MEDICAL EQUIPMENT RENTAL - SURGICAL - SECOND SURGICAL OPINION - RESTORATIVE DENTAL - CHIROPRACTIC - DENTAL CARE - DIAGNOSTIC X-RAY - ORAL SURGERY - HOME HEALTH CARE - HOSPICE - HOSPITAL - HOSPITAL INPATIENT SERVICES - DIAGNOSTIC LAB - HOSPITAL OUTPATIENT SERVICES - HOSPITAL EMERGENCY ACCIDENT - EMERGENCY ROOM VISIT - HOSPITAL AMBULATORY SURGICAL - MRI/CAT SCAN - NEWBORN CARE - WELL BABY CARE - ANESTHESIA - DIAGNOSTIC MEDICAL - DIALYSIS - CHEMOTHERAPY - SURGICAL ASSISTANCE - IMMUNIZATIONS - FAMILY PLANNING - EMERGENCY SERVICES - PHARMACY - BRAND NAME RX DRUGS - GENERIC RX DRUGS - PODIATRY - PROFESSIONAL (PHYSICIAN) VISIT OFFICE -

Special Information: Title XXI.

For the date(s) of service entered, the client is eligible for medical benefits.

Case Type: ALL KIDS, MEDICAID ELIGIBLE, FULL COVERAGE

Begin Date: 05/01/2016      End Date: 05/01/2016      Case Id: [REDACTED]      System Date: 04/05/2016

Service Type(s): OCCUPATIONAL THERAPY - SPEECH THERAPY - SKILLED NURSING CARE - SUBSTANCE ABUSE - VISION (OPTOMETRY) - PSYCHOTHERAPY - PSYCHIATRIC-INPATIENT - PSYCHIATRIC-OUTPATIENT - CARDIAC REHABILITATION - PEDIATRIC - MENTAL HEALTH - URGENT CARE - MEDICAL CARE - DURABLE MEDICAL EQUIPMENT PURCHASE - AMBULATORY SERVICE CENTER FACILITY - DURABLE MEDICAL EQUIPMENT RENTAL - SURGICAL - SECOND SURGICAL OPINION - CHIROPRACTIC - DENTAL CARE - DIAGNOSTIC X-RAY - ORAL SURGERY - HOME HEALTH CARE - HOSPICE - HOSPITAL - HOSPITAL INPATIENT SERVICES - DIAGNOSTIC LAB - HOSPITAL OUTPATIENT SERVICES - HOSPITAL EMERGENCY ACCIDENT - EMERGENCY ROOM VISIT - HOSPITAL AMBULATORY SURGICAL - RADIATION THERAPY - MRI/CAT SCAN - NEWBORN CARE - WELL BABY CARE - ANESTHESIA - DIAGNOSTIC MEDICAL - DIALYSIS - CHEMOTHERAPY - SURGICAL ASSISTANCE - IMMUNIZATIONS - FAMILY PLANNING - EMERGENCY SERVICES - PHARMACY - PODIATRY - PROFESSIONAL (PHYSICIAN) VISIT OFFICE -

Special Information: Title XIX.

# MEDI Eligibility (cont'd) - Two Different Case Types On Same Date of Service

- ❖ *Review medical eligibility only.* Example: participant is Title 19 - use VFC stock.
- ❖ **DHS Social Services eligibility not applicable** - does not cover vaccines

Coverage Detail [Print This Section](#)

**For the date(s) of service entered, the client is eligible for medical benefits.**

→ **Case Type:** ALL KIDS, MEDICAID ELIGIBLE, FULL COVERAGE

<b>Begin Date:</b> 07/20/2016	<b>End Date:</b> 07/20/2016	<b>Case Id:</b> [REDACTED]	<b>System Date:</b> 01/13/2016
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**Service Type(s):** OCCUPATIONAL THERAPY - SPEECH THERAPY - SKILLED NURSING CARE - SUBSTANCE ABUSE - VISION (OPTOMETRY) - PSYCHOTHERAPY - PSYCHIATRIC-INPATIENT - PSYCHIATRIC-OUTPATIENT - CARDIAC REHABILITATION - PEDIATRIC - MENTAL HEALTH - URGENT CARE - MEDICAL CARE - DURABLE MEDICAL EQUIPMENT PURCHASE - AMBULATORY SERVICE CENTER FACILITY - DURABLE MEDICAL EQUIPMENT RENTAL - SURGICAL - SECOND SURGICAL OPINION - CHIROPRACTIC - DENTAL CARE - DIAGNOSTIC X-RAY - ORAL SURGERY - HOME HEALTH CARE - HOSPICE - HOSPITAL - HOSPITAL INPATIENT SERVICES - DIAGNOSTIC LAB - HOSPITAL OUTPATIENT SERVICES - HOSPITAL EMERGENCY ACCIDENT - EMERGENCY ROOM VISIT - HOSPITAL AMBULATORY SURGICAL - RADIATION THERAPY - MRI/CAT SCAN - NEWBORN CARE - WELL BABY CARE - ANESTHESIA - DIAGNOSTIC MEDICAL - DIALYSIS - CHEMOTHERAPY - SURGICAL ASSISTANCE - IMMUNIZATIONS - FAMILY PLANNING - EMERGENCY SERVICES - PHARMACY - PODIATRY - PROFESSIONAL (PHYSICIAN) VISIT OFFICE -

→ **Special Information:** Title XIX.

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**For the date(s) of service entered, the client is eligible for limited medical benefits. Additional information available below or refer to the Provider Handbook for program specific coverage limitations.**

→ **Case Type:** DHS SOCIAL SERVICES

<b>Begin Date:</b> 07/20/2016	<b>End Date:</b> 07/20/2016	<b>Case Id:</b> [REDACTED]	<b>System Date:</b> 02/22/2016
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**Special Information:** State Funded. Coverage is limited to IL Department of Human Services Programs. Services under this coverage are billed directly to HFS. If you have any questions about DHS Social Services cases, please call the RIN help desk at 1-800-385-0872

# MEDI Eligibility (cont'd) – DHS Social Services Eligibility *Only*

- ❖ DHS Social Services eligibility does not apply to medical services/vaccine coverage – DO NOT use this information to determine which vaccine stock to use
- ❖ If this is the only eligibility returned in MEDI, providers will need to further investigate whether the participant has other medical insurance coverage to determine whether to use VFC or private stock

Coverage Detail Print This Section

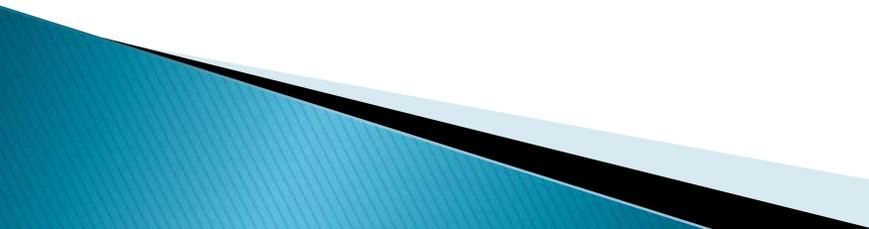
For the date(s) of service entered, the client is eligible for limited medical benefits. Additional information available below or refer the Provider Handbook for program specific coverage limitations.

→ Case Type: DHS SOCIAL SERVICES

Begin Date:	End Date:	Case Id:	System Date:
08/01/2016	08/01/2016	[REDACTED]	04/04/2016

→ **Special Information:** State Funded. Coverage is limited to IL Department of Human Services Programs. Services under this coverage are billed directly to HFS. If you have any questions about DHS Social Services cases, please call the RIN help desk at 1-800-385-0872

# 270/271 Participant Eligibility Verification

- ❖ HIPAA Eligibility Request – 270
  - ❖ HIPAA Eligibility Response – 271
  - ❖ Requires ASC X12 format software
  - ❖ Chapter 300, 837P Companion Guide
    - Loop 2110 MSG Segment
    - Special message number
    - Section 4.3, Special Messages
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# Billing Process – VFC Vaccines

- ❖ VFC stock vaccinations are free to providers for:
  - Children birth through 18 years of age
  - Title XIX (19) eligible
- ❖ Bill the vaccine-specific procedure code with *no modifier*
- ❖ Federally Qualified Health Centers (FQHCs), Rural Health Centers (RHCs) and Encounter Rate Clinics (ERCs) must bill VFC vaccines using the vaccine-specific procedure code, with *no modifier*, as the detail code(s) for encounter code T1015 or S5190
- ❖ Title information is not required on the claim

# Billing Process – Private Stock Vaccines

- ❖ Use private stock vaccines for:
  - Children up to age 18 with Title XXI (21) eligibility
  - Children up to age 18 with State-Funded eligibility
  - Participants 19 years and older (regardless of Title)
- ❖ Bill the vaccine-specific procedure code
- ❖ Federally Qualified Health Centers (FQHCs), Rural Health Centers (RHCs) and Encounter Rate Clinics (ERCs) may bill private stock vaccines fee-for-service (FFS) when the participant is age birth through 18 and has Title XXI (21) or state-funded eligibility. Detailed billing instructions on next two slides.
- ❖ Title information is not required on the claim

# Encounter Clinic Billing

## ❖ For VFC stock – Title XIX (19) eligibility

- When a child presents for a visit that meets the definition of a medical encounter, bill the T1015 all-inclusive encounter visit code on the first service line and the visit and vaccine-specific CPT code(s) as detail codes on subsequent service lines
- When a child presents solely to receive VFC-obtained vaccine(s) and a salaried staff member administers the vaccine(s), bill the Wellness Assessment encounter code S5190 on the first service line and the vaccine-specific procedure code(s) as the detail code(s) on subsequent service line(s)

# Encounter Clinic Billing (cont'd)

- ❖ **For Private Stock – Title XXI (21) or State funded eligibility**
  - Encounter clinics may bill private stock vaccines fee-for-service (FFS). For private stock vaccines billed FFS the GB modifier must be appended to each vaccine-specific procedure code.
  - If a child presents for a visit that meets the definition of a medical encounter, bill the T1015 all-inclusive encounter/visit code on the first service line and the appropriate visit code and any other services rendered during the visit (except private stock vaccines) as the detail code(s) on subsequent service line(s). Bill the private stock vaccine(s) FFS on a separate claim using only the vaccine-specific procedure code(s) with the GB modifier appended to each.
  - When a child presents solely to receive private stock vaccine(s) and a salaried staff member administers the vaccine(s), bill the vaccine-specific procedure code(s) FFS with the GB modifier appended to each. Do NOT bill the T1015 or S5190 encounter codes. Please refer to the 'State Max' column on the Practitioner Fee Schedule for the reimbursement rates for private stock vaccines.

# Reimbursement

- ❖ For VFC stock refer to the Practitioner Fee Schedule *Unit Price* column
- ❖ For private stock refer to the Practitioner Fee Schedule *State Max* column

Procedure Code	Unit Price	State Max
90647	6.40	23.65
90648	6.40	28.82
90649	6.40	146.26

# MCO Billing Questions

- ❖ Reimbursement must be negotiated between the Medicaid managed care plans, Pharmacy Benefit Administrators & Providers
  - ❖ Contact the individual plans for information regarding vaccination reimbursement for its members
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# TPL Primary

- ❖ When the participant has commercial insurance primary and is Title XXI (21) or State Funded, use private stock
- ❖ When the participant has commercial insurance primary and is Title XIX (19), the provider must choose which stock to use based on payer source:
  - If billing commercial insurance for vaccines, use private stock
    - Keeping in mind if the primary denies the Department will only reimburse for the administration of the vaccine*
  - If billing HFS as primary, use VFC stock
    - Since vaccines are a preventative service, providers do not have to bill the primary insurance for reimbursement*

# Payment Cycle

- ❖ Claims must be paid within 30 DAYS of receipt for most providers
  - Per ARRA (American Recovery and Reinvestment Act), section 5001(f)(2)(a)(ii) -

# Resources

- ❖ Refer to the HFS Non-Institutional Provider's Resources webpage at:

<http://www.illinois.gov/hfs/MedicalProviders/NonInstitutional/Pages/default.aspx>

- VFC Frequently Asked Questions
- VFC Webinar slide presentation
- MEDI Instructions
- Private Stock vaccine rates
- Vaccine Billing Instructions

- ❖ Refer to the HFS's Medical Provider's Home page at:

<https://www.illinois.gov/hfs/MedicalProviders/Pages/default.aspx>

- Provider Handbooks
  - Medicaid Reimbursements
  - Provider Notices
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