

# Vaccine Reimbursement for Local Health Departments

**Presented to:**



**Presented by:**

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# Agenda

- ForHealth Consulting Introduction
- Program Background & Overview
- Vaccine Reimbursement Process & Timeline
- Tips & Best Practices in Color
- Reporting Overview
- Contract Process
- FAQ
- Q&A

# ForHealth Consulting Introduction

# Who we are

At ForHealth Consulting, we partner with purposeful organizations like yours to *improve the healthcare experience, making it more equitable, effective, and accessible*. As part of UMass Chan Medical School, we leverage world-class expertise and deep experience to create transformational solutions across the health and human services system.

We **dive deep** into your organization to **understand your goals** and how we can get you there.

We develop **innovative, actionable strategies** that help you do what you do better.

We put **ideas into practice** to **create value** in the real world.

We are **committed to diversity and inclusion** in every aspect of what we do, and in how we measure outcomes and define success.

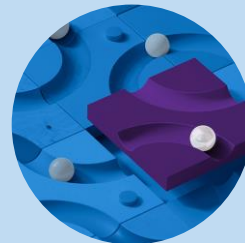
# Better Healthcare Solutions

We merge our expertise with your know-how to create novel solutions to healthcare's most pressing challenges. Our analytical tools help you enhance care with better access, knowledge, and performance.



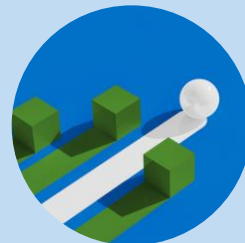
## Better Access Solutions

Solutions that put high-quality care within reach of those who need it.



## Better Knowledge Solutions

Tools that empower you with information that supports better outcomes.



## Better Performance Solutions

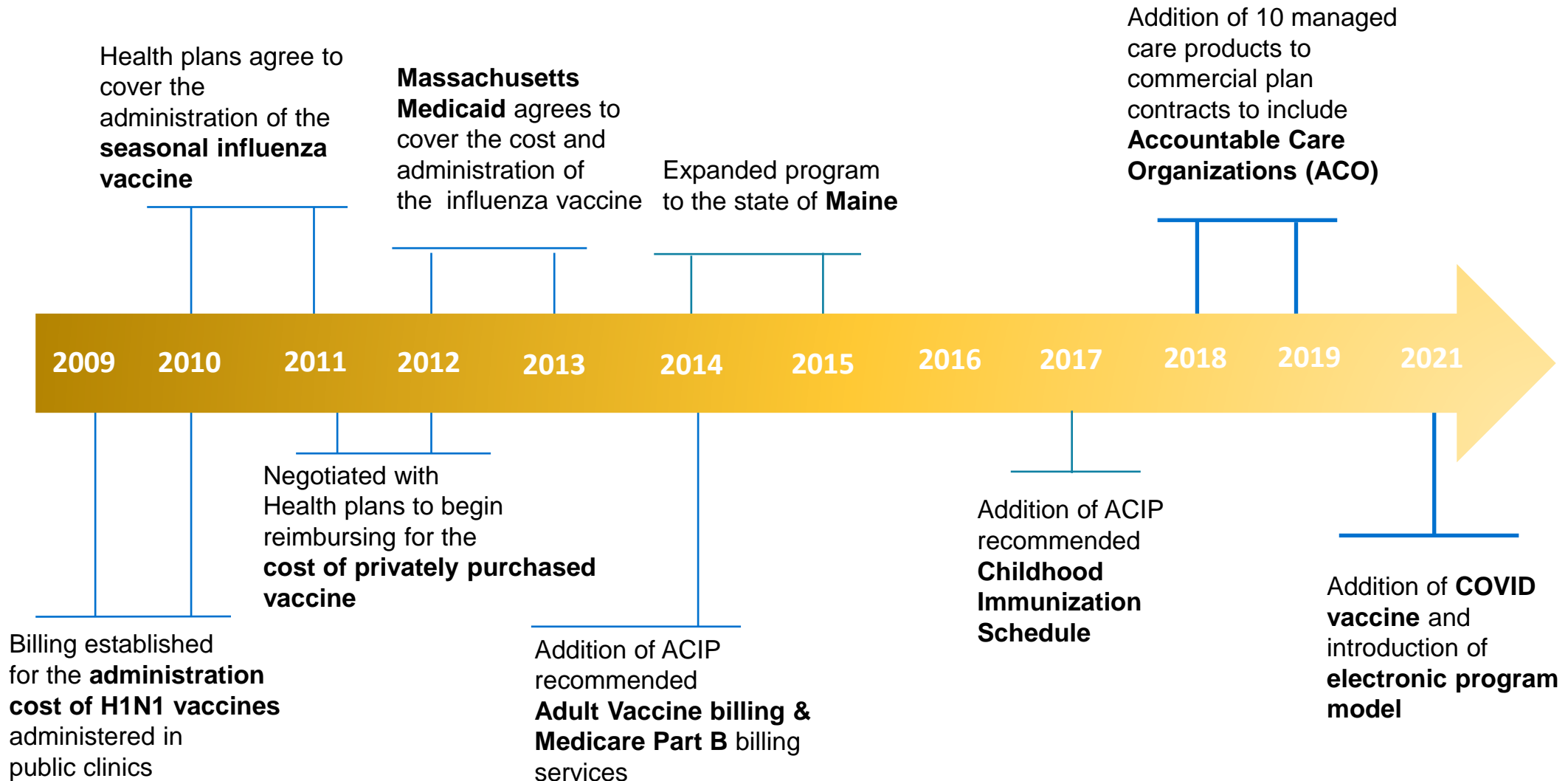
Products that make you more efficient, so you can deliver care that works.

# Program Background & Overview

# PROGRAM BACKGROUND

- ForHealth Consulting and the Massachusetts Department of Public Health (MDPH) partnered to create a streamlined process for locally-sponsored public flu clinics to obtain reimbursement and financial support during the H1N1 pandemic in 2009
- Program goals include:
  - Helping public providers serve individuals of all ages in their community
  - Removing potential barriers to vaccinations
  - Centralizing resources for contracting and claiming services to leverage economies of scale and benefit local public providers
  - Operate on an annual basis to maintain readiness in the event of a public health emergency

# PROGRAM BACKGROUND





# COVERED SERVICES

**Public Providers can bill the participating health plans for the following:**

- **Immunization Administration:**
  - Individuals 6 months and older
  - All ACIP recommended adult and pediatric vaccines
  - COVID Vaccine
  
- **Immunization Cost:**
  - Individuals 19 and older
  - Privately purchased ACIP recommended vaccines for adults

	VACCINE ADMINISTRATION	VACCINE COST
<b>Patient Age Requirement:</b>	6 months & older	19 years & older
<b>State Supplied Vaccines</b>	✓	X
<b>Privately Purchased Vaccines</b>	✓	✓
<b>ACIP Recommended Adult Immunizations</b>	✓	✓
<b>ACIP Recommended Childhood Immunizations</b>	✓	X
<b>COVID Vaccine</b>	✓	X*

✓ = Covered

X = Not Covered

\*Until COVID vaccine is commercialized/available for health departments to privately purchase

# PARTICIPATING HEALTH PLANS

## **Contracted Commercial Plans:**

- Aetna
- Blue Cross Blue Shield of Massachusetts
- Cigna
- Harvard Pilgrim
- Health New England
- Fallon
- Mass General Brigham Health Plan
- Tufts Health Plan
- Tufts Public Plans
- Unicare
- WellSense Health Plan

## **ForHealth will also submit claims to:**

- MassHealth
  - Providers must contract directly and maintain enrollment
- Medicare Part B
  - Providers must contract directly and maintain enrollment
- Anthem & Out of State BCBS Plans
  - ForHealth will submit claims as an out of network provider; reimbursement will vary
- United
  - ForHealth will submit claims to United as an out of network provider; reimbursement will vary

# REIMBURSEMENT RATES (NON-COVID)

- **Vaccine Reimbursement Program is a model unique to MA**
  - Health plan contracts are atypical
  - Driven by provider enrollment in the MPDH immunization program and tied to the State Contract for influenza vaccine pricing
    - Providers should utilize the state contract/CDC purchase pricing when purchasing applicable vaccines
- **Health plan rates are variable and change annually or quarterly depending on the plan**
  - For influenza & pneumo, Medicare reimbursement is set at 95% of the Average Wholesale Price (AWP). The health plans then apply their own payment methodologies that may vary slightly for commercial, Medicaid, and Medicare advantage products.
- **Currently the vaccine administration reimbursement ranges from \$11.37 - \$25 depending on health plan and/or plan type**
- **The vaccine cost will vary based on time of year and the factors above. Feel free to outreach and request the reimbursement range currently in effect for a specific vaccine type offered by your community.**

# REIMBURSEMENT RATES (COVID)

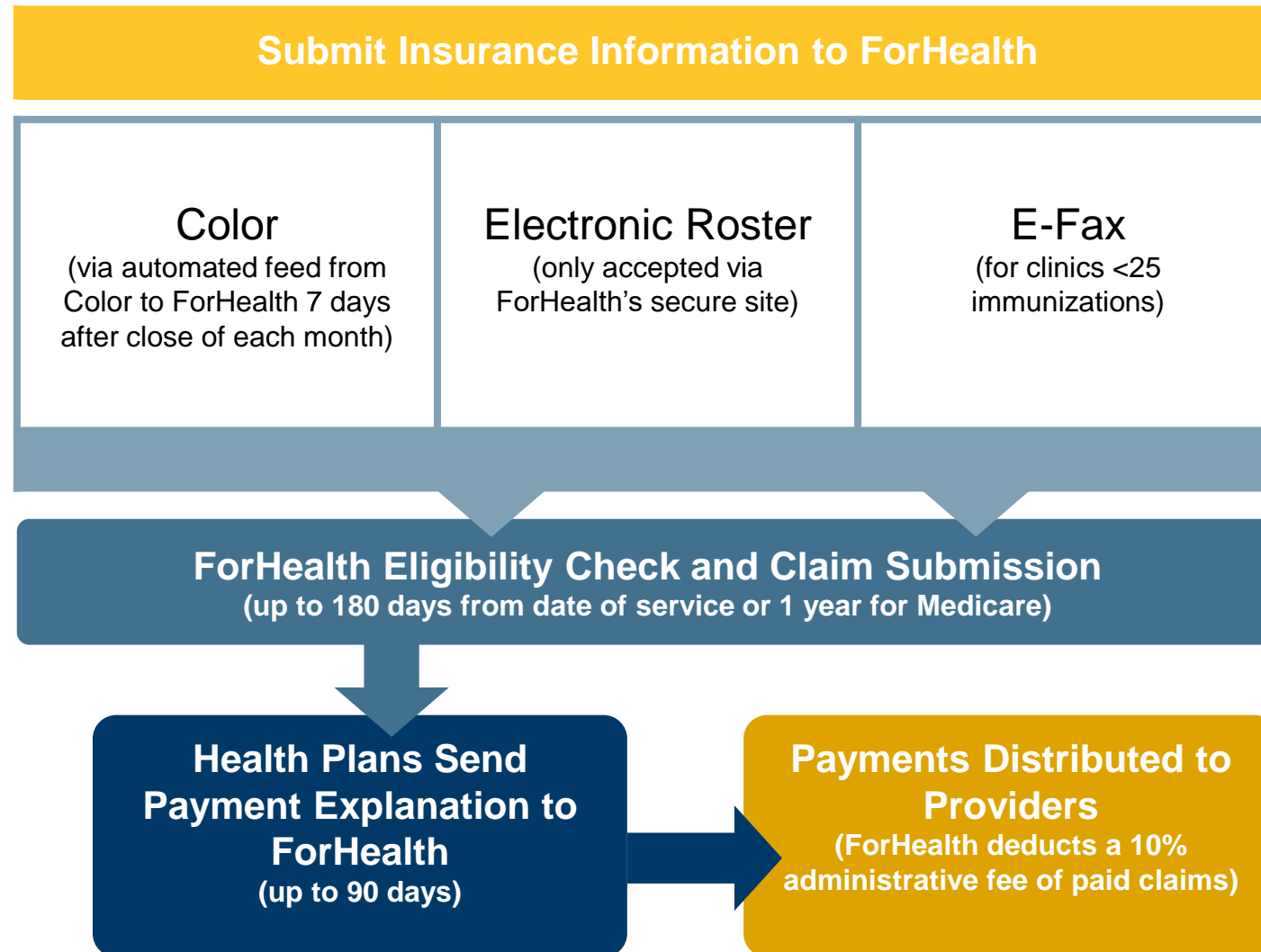
- **COVID vaccine reimbursement has simplified over time**
  - Used to vary by health plan, vaccine type, and dose administered
- **Now reimbursement only varies by health plan type**
  - Medicare and most commercial plans reimburse \$40 per dose administered
  - MassHealth and some commercial plans reimburse \$45.87 per dose administered
- **These rates are likely to be change once COVID vaccines are commercialized this fall**

Date of Service	Reimbursement Rate*	Note:
12/11/2020 – 3/31/2021	\$16.94 - \$56.79	Reimbursement varied by health plan and dose
4/1/2021 – current	\$40 - \$45.88	Reimbursement varies by health plan type




\*MA plans; national plans may vary

# Vaccine Reimbursement Process & Timeline

# REIMBURSEMENT PROCESS



# PAYMENT METHODS

		
<b>COMMERCIAL HEALTH PLANS</b>	<b>MEDICARE*</b>	<b>MASSHEALTH*</b>
<b><u>FREQUENCY</u></b> Quarterly (Mar, Jun, Sept, Dec)	<b><u>FREQUENCY</u></b> Issued throughout the year in order of service month	<b><u>FREQUENCY</u></b> Issued throughout the year in order of service month
<b><u>METHOD</u></b> Distributed via paper check from ForHealth	<b><u>METHOD</u></b> Distributed by Medicare via payment method provided during enrollment	<b><u>METHOD</u></b> Distributed by MassHealth via payment method provided during enrollment
<b><u>NOTIFICATION</u></b> Email notification sent including corresponding payment report	<b><u>NOTIFICATION</u></b> Email notification sent by ForHealth from notify@quickbase.com	<b><u>NOTIFICATION</u></b> Email notification sent by ForHealth from notify@quickbase.com

\*For providers actively enrolled with Medicare and/or MassHealth

# TIMELINE

- Color sends a billing feed to ForHealth 7 days after the close of each month
  - Allows time for edits and updates to be captured for billing
  - ForHealth cannot accept updated insurance information after this time period
- ForHealth takes each month of data and processes it through eligibility verification tools
  - Claims that match data requirements (i.e. length of member ID for plan, name and DOB match) are transmitted directly to health plans
  - Claims that fail this match go into a manual queue to be further researched which is a much longer process
    - This volume varies by time of year
    - If corrected information is found claim is submitted, if not the claim is ineligible for processing
    - For example, ~50,000 vaccines rendered between 9/22 – 12/22 fell into this category
      - This represents 44% of all vaccines administered for the same time period



# TIMELINE

- Some plans reject or deny claims after initial submission for incorrect data
  - These claims fall back into the manual work queue
- Health plans have up to 90 days to remit payment
- ForHealth receives large bulk payment files from health plans that must be reconciled to the appropriate community
- Some smaller plans send paper remittances that must be entered manually

# TIMELINE

- Providers can expect to receive payments beginning the quarter after vaccines are administered
  - For example, while a few payments for September/October clinics may come in the December distribution, the majority will come in March and remainder in June
    - Payments can continue to trickle in up to one year after the service date
- Timing is driven largely by data quality and whether claims can be submitted automatically or fall into the manual review queue

# Tips & Best Practices in Color

# BEST PRACTICES IN COLOR

- To ensure maximum reimbursement and quicker turnaround on claims:
  - Perform in-clinic check-in and verify insurance information
    - Ask patients to provide insurance card and verify that patient name and member ID match what was captured in Color
    - Ask patients, specifically seniors, if they have multiple insurances and capture both in Color
  - If not feasible for all patients, consider reviewing insurance in advance of clinics and identifying patients that may require additional review at check-in
    - Pull past clinic data from Color dashboard to determine the volume of patients in your community that did not provide insurance information or provided partial/incomplete insurance information

# BEST PRACTICES IN COLOR



**Verifying patient health insurance information at check-in:**

<https://www.loom.com/share/979bb2ab73c944d49bab1fb55ccc6b14>

# BEST PRACTICES IN COLOR



**Reviewing patient health insurance information pre- and post-clinic:**

<https://www.loom.com/share/1a5ff88e6d584b65b0c5423d000379d2>

# Reporting Overview

# PAYMENT SUMMARY REPORTS

- With each commercial distribution, providers receive a payment summary report
  - Date range on report is when payment was received and reconciled by ForHealth, not when vaccines were administered
  - Broken into COVID vs. Non-COVID services
  - Displays any payments received directly to provider and deducts corresponding ForHealth fee
  - Shows payer and # of services administered
    - Note: some plans count a service as 1 per patient, others count as 2 (one for vaccine administration one for vaccine cost)

## PROVIDER NAME

December 2022 Disbursement Report

From: 9/15/2022 Through: 12/19/2022

### Vaccine - Non COVID

#### Payments Through UMMS

Payer	# of Services	Amount Paid	Fee (10%)	Payable
BC/BS of Massachusetts	4	\$188.14	\$18.81	\$169.33
Fallon Community Health Plan	1	\$18.23	\$1.82	\$16.41
Harvard Pilgrim Health Care	4	\$95.49	\$9.55	\$85.94
United Health Care	2	\$63.93	\$6.39	\$57.54
<b>Total:</b>	<b>11</b>	<b>\$365.79</b>	<b>\$36.58</b>	<b>\$329.21</b>

#### Direct Payments to Provider

Payer	# of Services	Amount Paid	Fee (10%)	Payable
Medicare B Massachusetts - NHIC	12	\$508.74	\$50.87	(\$50.87)
<b>Total:</b>	<b>12</b>	<b>\$508.74</b>	<b>\$50.87</b>	<b>(\$50.87)</b>

### COVID

#### Payments Through UMMS

Payer	# of Services	Amount Paid	Fee (10%)	Payable
Aetna	4	\$183.52	\$18.35	\$165.17
BC/BS of Massachusetts	34	\$1,512.96	\$151.30	\$1,361.66
Fallon Community Health Plan	3	\$137.61	\$13.76	\$123.85
Harvard Pilgrim Health Care	8	\$367.04	\$36.70	\$330.34
Tufts	21	\$481.64	\$48.16	\$433.48
UNICARE	2	\$75.70	\$7.57	\$68.13
United Health Care	17	\$725.88	\$72.59	\$653.29
<b>Total:</b>	<b>89</b>	<b>\$3,484.35</b>	<b>\$348.44</b>	<b>\$3,135.92</b>

#### Direct Payments to Provider

Payer	# of Services	Amount Paid	Fee (10%)	Payable
Mass Health	8	\$183.48	\$18.35	(\$18.35)
Medicare B Massachusetts - NHIC	117	\$5,294.42	\$529.44	(\$529.44)
<b>Total:</b>	<b>125</b>	<b>\$5,477.90</b>	<b>\$547.79</b>	<b>(\$547.79)</b>

**Total Payable:**

**\$2,866.46**



# AD HOC REPORTING

- Providers may also request the following:

REPORT NAME	TIMING	USED FOR
Patient Detail Report	After each quarterly distribution	Contains the patient & vaccine level detail that corresponds to a quarterly payment
Medicare or MassHealth Patient Detail Report	After payment notification is received	Contains the patient & vaccine level detail that corresponds to a Medicare and/or MassHealth payment
Denial Report	After the June or September payment distributions	Summarizes claims that are currently denied (note that these may still be worked by ForHealth and paid later or claims that were denied but later billed to a different health plan)
Pending Report	After the June or September payment distributions	Summarizes claims that are submitted to health plans but not yet paid or denied

# Contract Process

# CONTRACTING PROCESS

- **To enroll, providers must:**
  - **Attend a Vaccine Reimbursement Training (held annually in August or available upon request)**
  - **Enroll and maintain enrollment in the MDPH Immunization Program**
  - **Complete and sign a contract**
    - Note: ForHealth contracts are “Evergreen”– automatically renewed annually unless providers request to change, add, or terminate services
  - **Complete a UMW-9 form upon enrollment to facilitate payment for services**
    - Providers must also supply an updated UMW-9 form for any change in mailing address for payments

# HELPFUL CONTACTS

## **CWM Vaccine Reimbursement Program**

Email: [vaccine@umassmed.edu](mailto:vaccine@umassmed.edu)

Phone: (800) 890-2986 (Option 1)

Fax: (617) 886-8320

## **DPH Immunization Program**

Phone: (617) 983-6828

## **Color Onboarding - DPH**

Email: [ColorHelp@mass.gov](mailto:ColorHelp@mass.gov)

## **Color Technical Support**

Email: [support@color.com](mailto:support@color.com)

# FAQ

# VACCINE REIMBURSEMENT FAQ

## Why did ForHealth not pay a claim?

*ForHealth does not pay vaccine claims. ForHealth acts as a third-party biller to submit the data collected at public vaccine clinics to third-party payors. Generally, claims are denied by health plans due to demographic information submitted on the claim not matching the patient's information on file with their insurance company, or because the patient has a limited or non-participating health plan.*

## Why does the reimbursement process take so long?

*The turnaround time from patient visit to payment includes time for data to be collected, corrected, and transmitted from Color to ForHealth. ForHealth then performs eligibility verification and either transmits or researches the claim further. The research process can take months depending on time of year/volume. Once a claim is received by a health plan, the plan has up to 180 days to remit payment. ForHealth must then receive and reconcile payment before each quarterly payment distribution when it is disbursed to each provider.*

# VACCINE REIMBURSEMENT FAQ

## **Why doesn't ForHealth provide a denial report with every payment?**

*We work vaccine claims year-round. Most vaccines are administered in September – December. ForHealth reviews denied claims to determine whether they can be worked and corrected to obtain payment. This process takes time and a claim supplied on a denial report in the March payment, may be worked and resolved before the June payment. We find that denial reports provided in June are a much more accurate depiction of a community's denials than a report provided earlier in the year.*

## **Why is there a discrepancy between the number of vaccines we administered and the number of services on payment reports for the year?**

*Some health plans count a vaccine claim as one claim per patient. Other health plans count a vaccine claim as the number of services billed. In this scenario, each patient would have two claims – one for the vaccine administration and one for the vaccine cost.*

# VACCINE REIMBURSEMENT FAQ

## **Why doesn't the date range on the payment summary report reflect when vaccines were administered?**

*The payment summary report displays the date range of when payments were received and reconciled by ForHealth. Health plans may issue payment, adjust or retract a claim one or more years after the service was rendered. This means the date range of when vaccines were administered may include many vaccines administered across a broad range of service dates. We are happy to provide patient detail reports that include the service dates of all claims paid in each distribution.*

## **Why doesn't ForHealth email or supply a patient detail report automatically with each payment?**

*ForHealth prides itself on our commitment to patient privacy and data security. Many communities do not review or request patient detail reports. Sending this level of detail to all communities would involve unnecessarily sending a large volume of Protected Health Information (PHI). For this same reason, we do not email PHI. Instead, we provide each community with access to our Secure File Transfer Protocol (SFTP) site which allows us to securely transmit PHI if requested.*



# VACCINE REIMBURSEMENT FAQ

## **Are there mechanisms besides Color that can be used to submit vaccine data to ForHealth?**

*While Color is the most efficient mechanism to submit vaccine data, providers may also submit electronic rosters or, in rare instances, securely E-Fax data to our program. Please attend one of our annual trainings hosted each August or email [Vaccine@umassmed.edu](mailto:Vaccine@umassmed.edu) to request training materials and sign up for our contact list.*

## **Are we required to work with ForHealth to receive vaccine reimbursement?**

*While we strive to be a reliable and advantageous resource to Massachusetts communities, providers are not required to utilize our program. Providers may choose to credential and contract with health plans directly and procure billing systems and staffing to conduct these services independently.*

# Q & A

Thank You