

## **Provider Exemption from DBA Compliance Policy**

### **Background:**

The Washington Vaccine Association requires all providers to bill for childhood vaccines using the dosage-based assessment (DBA) method, as required under HB 2551. WVA recognizes that certain providers serve children whose health care is publicly funded and the DBA requirement does not apply to them. These providers include local health jurisdictions (LHJs), and tribal clinics that are responsible for providing federal health services to American Indians and Alaskan natives. These LHJs and tribal clinics are outside the scope of the law creating the WVA. Currently the DOH has a federally funded grant to work with five LHJs on a pilot project to help LHJs bill for privately insured patients, including support for billing the DBA.

### **Purpose:**

The purpose of this policy is to identify the limited situations where the DBA billing requirements of HB 2551 do not apply and to remove these providers from compliance reporting.

### **Policy:**

Providers that meet one of the two criteria below will be exempt from the DBA billing requirement and not included in WVA's segmentation of providers based on vaccine volume:

1. Provider is designated as one of the tribal health centers in the DOH database, as that list is amended from time to time.
2. Provider is a LHJ (local health departments, public health departments) with the exception of the LHJs in a billing pilot project involving five LHJs who have or are working toward the capacity to bill private health plans.

The WVA will work closely with DOH to identify any LHJ that develops the ability to bill privately insured patients and support billing the DBA, and to follow up on the continuation of the billing pilot project. The WVA will review the policy on an annual basis to determine if the criteria should be modified.

### **Rationale:**

- Children less than 19 for whom federal funding is used to purchase vaccines are not covered lives under HB 2551.
- Approximately one-third of the LHJs do not see patients. The majority of patients seen at LHJs are low-income children covered under state-subsidized programs. The remaining two-thirds that do see patients do not have contracts with health plans.

- This policy supports an efficient use of WVA resources to assist providers and monitor compliance of providers who are capable of submitting the DBA.
- By defining this exemption from the DBA narrowly, the WVA maximizes the assessments flowing from potential DBA submitters. Even those providers with a low percentage of privately insured children must work toward compliance.

Support for Policy:

- This policy has been discussed among the WVA Operations Team, DOH, and WVA staff.
- It has been approved by the WVA Operations team on 5/12/2011.
- These exempt providers will be marked as such in the WVA Provider database in a new “n/a” category and will be excluded from all reporting (compliance, forecasting, etc.)