Step 1: ADMINISTRATION CLAIM

- This claim should include only the administration codes, office call or other charges.
- Vaccine codes and modifiers should NOT be included on this claim.
Step 2: **DBA FORM**

- Most fields same as in administration claim, but this DBA form must include:
  
  - Assessment charge based on 07/01/2015 grid
Step 2: DBA FORM

- Most fields same as in administration claim, but this DBA form must include:

2. Box 24D: CPT code for the state-supplied vaccine given. NO modifiers.

CPT code for state supplied vaccine. NO modifiers.
Step 2: 
DBA FORM

- Most fields same as in administration claim, but this DBA form must include:

2. Box 24D: CPT code for the state-supplied vaccine given. NO modifiers.

Step 2: DBA FORM

- Most fields same as in administration claim, but this DBA form must include:
  2. Box 24D: CPT code for the state-supplied vaccine given. **NO** modifiers.

  3. Box 24F: WVA charge based on 07/01/2015 grid.

  4. Box 25: WVA Tax ID Number (TIN): 27-2251833
Step 2: DBA FORM

- Most fields same as in administration claim, but this DBA form must include:
  2. Box 24D: CPT code for state-supplied vaccine given. **NO** modifiers.
  3. Box 24F: WVA charge based on 07/01/2015 grid.
  4. Box 25: Vaccine Association tax ID number: 27-2251833
  5. Box 33: Washington Vaccine Association; PO Box 94002; Seattle, WA 98124-8402