



## Vaccine Eligibility and Billing Information – Adults 19+ Years of Age



Providers are required to screen patients for vaccine eligibility at each immunization visit to ensure accountability. Complete vaccine administration and eligibility data must be reported in VacTrAK within 14 days per Alaska Administrative Code 7 AAC 27.650(a). If private vaccine stock is used, the correct eligibility category is always “Ineligible (V01)”; no further screening is required. Adults are eligible to receive Alaska Vaccine Assessment Program (AVAP) (or State) vaccine with the below eligibility criteria.

As of January 1, 2020, if patients have the following insurance status, they are **not** eligible for AVAP (or State) vaccine:

- Medicaid (as either the main or primary insurance)
- Medicare (as either main or primary insurance)
- Insurance that does not cover vaccine
- AlaskaCare Retiree Plans (as only insurance)
- Veterans Affairs (VA) (as only insurance)

The following payers are **not** participating in AVAP:

- Medicaid
- Medicare
- Insurance that does not cover vaccines
- AlaskaCare Retirees Plan
- Veterans Affairs (VA)

Note: Per Alaska Administrative Code 7 AAC 27.149(2), only Alaska residents are eligible for AVAP (or State) vaccine.

**Table.** Adult eligibility categories and billing information

VacTrAK Eligibility Category	Adult Insurance Status	Insurance or Provider Status with AVAP	HL7 Eligibility Mapping Code	HL7 Funding Source Code	Administration Fee Bill To	Vaccine Administration Fee Cap	Vaccine Cost Bill To
State Vaccine*	Insured†	Private insurance is participating in AVAP	V07	VXC 50 Public or	Insurance	Determined by insurance	Do <u>not</u> bill (State-supplied)
	Uninsured	Health care provider opts in for their uninsured adult population		VXC 52 Public Non-VFC	Patient	Determined by provider	Do <u>not</u> bill (State-supplied)
Ineligible (Private Vaccine)	Uninsured	Health care provider does <b>NOT</b> opt in for their uninsured adult population	V01	PHC 70 Private	Patient	Determined by provider	Determined by provider
	Non-participating Payor (see above box)	Not eligible for AVAP			Medicare or Medicaid	Determined by Medicare or Medicaid	Determined by Medicare or Medicaid

\*May appear as "state specific" or "local specific" eligibility in Electronic Health Records (EHR).

†IHS beneficiary status is not considered insurance under the AVAP adult vaccine program.