

What Works

To Improve Adult Immunization

What They Did:

In many cases, patients who receive free immunization services from health departments actually had health insurance that covered these services. The National Vaccine Advisory Committee has recommended that states and localities develop mechanisms for billing insured patients served in the public sector and reinvest reimbursements in immunization programs.

Since 2009, CDC awarded \$27.5 million to 38 state and local health departments to support systems that bill and receive reimbursements for immunization services provided to insured patients, and to ensure that federally purchased vaccine is used for people who are uninsured or underinsured.

Each health department awardee develops a plan to implement billing processes through their immunization programs.

Goals for health departments include:

- Improve delivery of adult immunization services and increase vaccination coverage in the community
- Recover costs associated with community outreach programs, i.e., through non-traditional settings such as churches and senior centers, to deliver adult immunization and other preventive health services
- Generate revenue to support adult and children immunization programs
- Improve documentation of vaccines administered

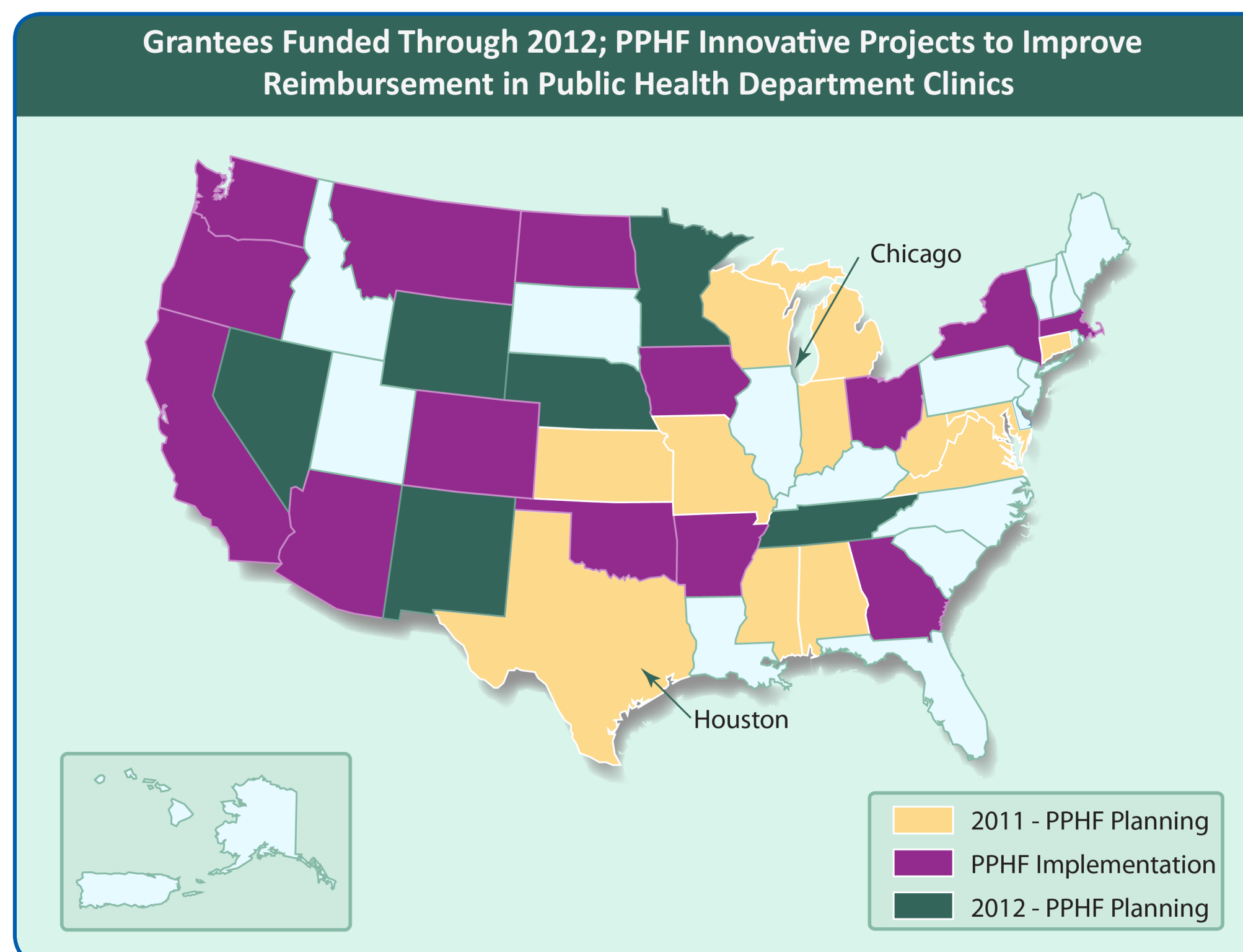
When health departments can be designated as “in-network providers,” they can bill health plans and other third payers for the immunization services they provide. To achieve this designation has been a goal of this project.

In addition, health departments also establish and maintain immunization records in statewide immunization registries.

Health department awardees can access the **Improving Reimbursement for Health Department Clinics Community of Practice**, an online collaboration tool, to share expertise and experiences, success stories, tools, and ways of addressing barriers in planning and implementing billing projects.

The Billables Project

Improving Capability of State and Local Health Departments to Bill for Immunization Services



For more information:

<http://www.cdc.gov/vaccines/programs/billables-project/index.html>

This “What Works” vignette is one in a series of examples collected by the Provider Workgroup of the National Adult and Influenza Immunization Summit. For more information or to nominate an example of “what works” to improve adult immunization, go to <http://www.izsummitpartners.org/>. This vignette does not constitute an endorsement from any of the organizations that participate in the Provider Workgroup or the NAIS.

Results:

In 2009, fewer than half of the 38 health departments participating in this project were billing Medicaid for immunization services. In 2014, 32 (84%) of these health departments bill and receive reimbursement from Medicare, Medicaid, and private health plans through a variety of methods.

Listed below are examples of successes achieved by some of the billables projects.

Arizona

Arizona passed legislation that requires insurance payers to recognize public health departments as in-network providers. This provision and the implementation of a billing program generated over \$1 million in revenue in 2013 and over \$4.1 million in total revenue since the program began.

California

The Kern County Public Health Department had a low or no cost immunization program that generated some revenue before the project began. Six months after the billing project was launched in 2010, the health department increased its immunization services revenue ten-fold. The health department now has specialized staff to identify coding errors and missed billing opportunities.

Georgia

In 2009, the Georgia Department of Public Health began billing state employees’ health plans for immunization services and generated more than \$6.5 million in revenue as of 2012. Because the state mandates that revenue generated from immunization billing must be reinvested in local public health efforts, local immunization programs have directly benefitted.

Mississippi

The Mississippi State Department of Health enhanced its billing system to successfully back-bill Medicare for influenza vaccines administration claims back to July 2011, and began billing employee health plans. The health department collected \$1,089,895 in revenue as of March 2013.

