

## Reimbursement for COVID-19 Vaccine Administration under the Alternative Payment and Advanced Payment Care Model Program

The Oregon Health Authority (OHA) will reimburse Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) for COVID-19 vaccine administration according to the clinic's Medicaid Prospective Payment System (PPS) encounter rate.

This fact sheet answers questions specific to reimbursement to FQHCs and RHCs participating in the Alternative Payment and Advanced Payment Care Model (APCM).

### **Will COVID-19 vaccine administrations provided during a medical/primary care office visit initiate Per-Member Per-Month (PMPM) payments?**

No. These services are outside of the scope of the APCM program.

### **Why is a modifier needed only on claims submitted for FFS (open card) members?**

On FFS claims submitted to OHA, the U1 modifier lets OHA know to reimburse the vaccine administration separately at the PPS encounter rate. Without this modifier, the claim will zero pay (as if the vaccine administration is paid under the encounter rate for the primary care medical visit).

### **Are COVID-19 vaccine administration codes available for Wraparound (Prepaid Health Plan Supplemental) payments?**

Yes. COVID-19 vaccines administered to CCO members outside of a medical billable encounter can be reimbursed through supplemental wraparound, like other services excluded from the APCM program.

As outlined in Oregon Administrative Rule (OAR) [410-147-0460](#), the supplemental payment represents the difference, if any, between the CCO's payment and OHA's payment at the clinic's PPS encounter rate for the same service.

### **Are COVID-19 vaccine administrations recognized as Care and Services that Engage Patients (Care STEPs)?**

COVID-19 vaccine administrations may count as a non-billable [Care STEP](#) for vaccinations that are administered:

- Outside of a billed medical/primary care office visit, and
- To members already established as existing enrollees on the clinic's APCM roster.

A Care STEP is a specific direct interaction between the FQHC/RHC staff and the patient, the patient's family or authorized representative(s) through in-person, digital, group visits, or telephonic means.

Care STEP documentation can demonstrate the range of ways in which FQHC/RHC teams provide access to services and value to patients. OHA collects and reviews quarterly submissions of Care STEP data to better understand the non-billable and non-visit-based care and services that FQHCs and RHC deliver.