Perinatal hepatitis B talking points – CLHO-CD call 3/13

Current state:

* At the end of the July-June fiscal year, the Immunization Program reimburses LPHAs for case management of infants enrolled in the Perinatal Hepatitis B Prevention Program closed in the previous fiscal year. In addition to infant contacts case management, reimbursement is paid for any case management provided to household or sexual contacts identified within one year of the infant’s birth date.
	+ The reimbursement process includes review by the state and LPHA coordinators and the processing of the payment
	+ When the federal fiscal year followed the calendar year, there wasn’t much issue. Now that the federal fiscal year aligns with the state fiscal year, it requires a quick turnaround
* Reimbursement has been at the same rate since 2013
	+ $475 for full infant case management (HBIG, 3 doses, post-vaccination serologic testing; or $95/each)
	+ $200 for full household/sexual contact case management (pre-vaccination testing, 3 doses, post-vaccination testing; $40/each)
* Examination of previous payment processes found that updates were needed. In 2019, we sent invoices for LPHAs to sign and return to OIP to process the payments, which created troubles for a couple LPHAs

Proposed changes:

* Move to reimburse for the calendar year. Less of a rush to get payment out
* Increase reimbursement: $525 ($105/each) for infants and $250 ($50/each) for household/sexual
* As part of the process to create one PE for all CD work, we are looking to add the reimbursement amount into the PE language to help prevent issues moving forward. Until that is done, if any LPHAs ran into issues last year let us know and we can provide additional supporting documentation to pay via a similar invoicing process as used in 2019.