



FQHC VAX Secure Invoice Upload

Tracking Number

2020133

Date

4/22/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>FQHC-VAX-172</u> Contract Number (required)	<u>Family Health Centers, Inc.</u> * Contractor Name	<u>57-0524498</u> * Tax ID	<u>7000026038</u> * SCEIS Number
<u>Angela Brown</u> Contact (Full Name)	<u>Assist. Controller</u> Title	<u>(803) 531-6961</u> Phone	<u>Angela.Brown@myfhc.org</u> Contact EMAIL
<u>P. O. Box 1806 3310 Magnolia Street, NE</u> * Address	<u></u> * STE #	<u>Orangeburg</u> * City	<u>SC 29115</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>T103092021V</u>	<u>2,210.00</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

T1 03092021V INVOICE

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Angela Brown
 4/22/2021 3:03:18 PM

\$2,210.00
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 4/23/2021 11:24:39 AM

Budget and Finance Approval

Baker, Walter
 4/23/2021 2:49:04 PM

Approved Funding \$432,450.00

Approved Invoices to Date _____

Available Funding \$432,450.00

Payment Processing Instructions

5021310000 - \$2210.00 - J0402AZ998 - J040X01058580130 - 31070000 - Not Relevant - Order Number 98000018

Accounts Payable Approval

Robinson, Sharon D.
 5/3/2021 9:07:11 AM



If rejecting this form for any reason please provide a brief note to the agency. It will be included in the rejection email notification

COVID-19 Vaccination Reimbursement Request

Community Vaccination Event Information*

Provider Name:	FAMILY HEALTH CENTERS, INC. (Inv. T103092021V)
COVID-19 Vaccine Pin Number:	138050
Location Name:	ORANGEBBURG COUNTY FAIRGROUNDS
Location Address (incl zip):	350 MAGNOLIA STREET ORANGEBURG, SC 29115
Date & Times:	3/09/2021 - 8:30AM - 4PM
Total # Vaccinations:	221
Eligible Vaccinations**:	0

Please select yes or no to the following questions to determine eligible reimbursement:

<u>Yes</u>	Did your organization provide event management, traffic control and logistics for this event?
<u>Yes</u>	Did your organization provide administrative staff for this event?
<u>Yes</u>	Did you organization provide vaccination staff for this event?

Reimbursement Calculator

Item	Rate	Eligible Event Reimbursement
Event Mgmt, Traffic, Logistics	\$10	\$2,210
Administrative Staff	\$5	\$0
Vaccination Staff	\$15	\$0
Total Event Reimbursement Amount		\$2,210

Additional Cost Summary***:

Total additional cost:	
Less other funding/reimbursement:	
Net additional cost:	\$0

Total Request Amount: \$2,210

* Community Vaccination Events may span multiple days as long as the event location remains the same. All dates should be specified.

** If seeking third-party reimbursement for the services at the event was not appropriate or feasible, then all vaccinations are eligible for reimbursement. If billing third party payers was feasible, then only vaccinations not eligible for insurance reimbursement are eligible for Staffing Reimbursement.

*** Claiming additional costs requires detailed justification and documentation. Please attach answers to the following questions:

- 1) Summary Description of Request and Costs
- 2) Describe Benefit to the State of South Carolina and Statewide Vaccination Efforts including the future distribution and administering of vaccines.
- 3) Describe activities conducted and outcomes expected or achieved
- 4) Is the cost being covered by any other funding source or insurance? Please explain.
- 5) Were all avenues of funding exhausted before using Vaccine Reserve Account funds? Please explain.

FAMILY HEALTH CENTERS, INC.
3310 Magnolia Street
Orangeburg, SC 29115

TEAM 1

COVID VACCINE TEAM 1 - MARCH 2021

T103092021V

CLAIMS#	SERVICE DATE	Visit Type	CHARGES	# of Vaccines
ORANGEBURG COUNTY FAIRGROUNDS, 350 MAGNOLIA STREET, ORANGEBURG, SC 29115				
114687	03/09/2021	Covid Vaccine	\$ 10.00	1
114111	03/09/2021	Covid Vaccine	\$ 10.00	1
114113	03/09/2021	Covid Vaccine	\$ 10.00	1
114114	03/09/2021	Covid Vaccine	\$ 10.00	1
114108	03/09/2021	Covid Vaccine	\$ 10.00	1
114109	03/09/2021	Covid Vaccine	\$ 10.00	1
114217	03/09/2021	Covid Vaccine	\$ 10.00	1
114221	03/09/2021	Covid Vaccine	\$ 10.00	1
114150	03/09/2021	Covid Vaccine	\$ 10.00	1
114151	03/09/2021	Covid Vaccine	\$ 10.00	1
114156	03/09/2021	Covid Vaccine	\$ 10.00	1
114691	03/09/2021	Covid Vaccine	\$ 10.00	1
114692	03/09/2021	Covid Vaccine	\$ 10.00	1
114204	03/09/2021	Covid Vaccine	\$ 10.00	1
114206	03/09/2021	Covid Vaccine	\$ 10.00	1
114202	03/09/2021	Covid Vaccine	\$ 10.00	1
114252	03/09/2021	Covid Vaccine	\$ 10.00	1
114258	03/09/2021	Covid Vaccine	\$ 10.00	1
114666	03/09/2021	Covid Vaccine	\$ 10.00	1
114356	03/09/2021	Covid Vaccine	\$ 10.00	1
116754	03/09/2021	Covid Vaccine	\$ 10.00	1
116929	03/09/2021	Covid Vaccine	\$ 10.00	1
114693	03/09/2021	Covid Vaccine	\$ 10.00	1
114345	03/09/2021	Covid Vaccine	\$ 10.00	1
114347	03/09/2021	Covid Vaccine	\$ 10.00	1
114349	03/09/2021	Covid Vaccine	\$ 10.00	1
114342	03/09/2021	Covid Vaccine	\$ 10.00	1
114397	03/09/2021	Covid Vaccine	\$ 10.00	1
114405	03/09/2021	Covid Vaccine	\$ 10.00	1
114407	03/09/2021	Covid Vaccine	\$ 10.00	1
114547	03/09/2021	Covid Vaccine	\$ 10.00	1
114549	03/09/2021	Covid Vaccine	\$ 10.00	1
114550	03/09/2021	Covid Vaccine	\$ 10.00	1
114570	03/09/2021	Covid Vaccine	\$ 10.00	1
114572	03/09/2021	Covid Vaccine	\$ 10.00	1

114575	03/09/2021	Covid Vaccine	\$	10.00	1
114576	03/09/2021	Covid Vaccine	\$	10.00	1
114636	03/09/2021	Covid Vaccine	\$	10.00	1
114638	03/09/2021	Covid Vaccine	\$	10.00	1
114639	03/09/2021	Covid Vaccine	\$	10.00	1
114640	03/09/2021	Covid Vaccine	\$	10.00	1
114645	03/09/2021	Covid Vaccine	\$	10.00	1
114649	03/09/2021	Covid Vaccine	\$	10.00	1
114652	03/09/2021	Covid Vaccine	\$	10.00	1
114715	03/09/2021	Covid Vaccine	\$	10.00	1
114717	03/09/2021	Covid Vaccine	\$	10.00	1
114708	03/09/2021	Covid Vaccine	\$	10.00	1
114791	03/09/2021	Covid Vaccine	\$	10.00	1
114794	03/09/2021	Covid Vaccine	\$	10.00	1
114796	03/09/2021	Covid Vaccine	\$	10.00	1
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116958	03/09/2021	Covid Vaccine	\$	10.00	1
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114110	03/09/2021	Covid Vaccine	\$	10.00	1
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114343	03/09/2021	Covid Vaccine	\$	10.00	1
114090	03/09/2021	Covid Vaccine	\$	10.00	1

114091	03/09/2021	Covid Vaccine	\$	10.00	1
114095	03/09/2021	Covid Vaccine	\$	10.00	1
114097	03/09/2021	Covid Vaccine	\$	10.00	1
114098	03/09/2021	Covid Vaccine	\$	10.00	1
114102	03/09/2021	Covid Vaccine	\$	10.00	1
114103	03/09/2021	Covid Vaccine	\$	10.00	1
TOTAL				<u>\$ 2,210.00</u>	<u>221</u>