



Providers VAX Secure Invoice Upload

Tracking Number

1735

Date

7/6/2022

Contract Information

AP REC 07/12/2022

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>OTH-VAX-264</u>	<u>Good Pharmacy of Rock Hill, Inc</u>	<u>57-0440985</u>	<u>7000063924</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number

<u>Marvin A. Hyatt Jr</u>	<u>Vice President</u>	<u>(803) 487-8379</u>	<u>hyattlawfirm@comporium.net</u>
Contact (Full Name)	Title	Phone	EXT Contact EMAIL

<u>1237 Ebenezer Road</u>	<u>Rock Hill</u>	<u>SC</u>	<u>29732</u>
* Address	* STE #	* City	* State * Zip

<u>INVOICE NUMBER</u>	<u>INVOICE AMOUNT</u>
<u>17</u>	<u>14,400.00</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.

Good Pharmacy Invoice#17
COVID19 Vaccine Reimbursement Calculator (53)

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

Marvin A. Hyatt Jr
7/6/2022 2:05:02 PM

\$14,400.00

Yes
 No

Invoice Total

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

COVID19 Coordination Office

Lopez, Jessica N.
7/6/2022 2:59:13 PM

Budget and Finance Approval

Samuels, Tierra B.
7/8/2022 4:15:34 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Full Amount \$14,400.00 31070000 Not Relevant J0402AZ998
 J040X01058580130 5021310000 98000018

Accounts Payable Approval

Cate, Vasa
7/11/2022 12:42:21 PM

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:	Good Pharmacy of Rock Hill, Inc.
COVID-19 Vaccine Pin Number:	546012
Location Name:	Good Pharmacy of Rock Hill, Inc.
Location Address (incl zip):	1237 Ebenzer Rd. Rock Hill, SC 29732
Date & Times:	5/1/22-5/31/22
Total # Vaccinations:	720
Eligible Vaccinations**:	720

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

- No Did your organization provide event management, traffic control and logistics for this event?
- Yes Did your organization provide administrative staff for this event?
- Yes Did you organization provide vaccination staff for this event?

Reimbursement Calculator

Item	Rate	Eligible Event Reimbursement
Event Mgmt, Traffic, Logistics	\$10	\$0
Administrative Staff	\$5	\$3,600
Vaccination Staff	\$15	\$10,800
Total Event Reimbursement Amount		\$14,400

Additional Cost Summary***:

Total additional cost:	
Less other funding/reimbursement:	
Net additional cost:	\$0.00

Total Request Amount: \$14,400.00

* 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:



1/6/2021

To whom it may concern:

As part of the COVID-19 response, DHEC has many partners and vendors who are assisting with testing, contact tracing, and other critical response activities. In order to maintain good working relationships with all our partners and vendors, as well as avoid interruption in services provided, we are requesting the ability process all invoices related to COVID-19 as a Zspecial to expedite payments.

If you need additional detail or have any questions or concerns regarding these invoices, please do not hesitate to reach out to ACC-FinAdmin@dhec.sc.gov.

Sincerely,

Darbi C MacPhail, MHA
Chief Finance and Operations Officer
SC Department of Health and Environmental Control