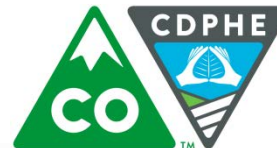


VFC Program Overview

Presented to the Colorado Children's Healthcare Access Program
October 16, 2015

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COLORADO
Department of Public
Health & Environment

VFC Staff Here Today

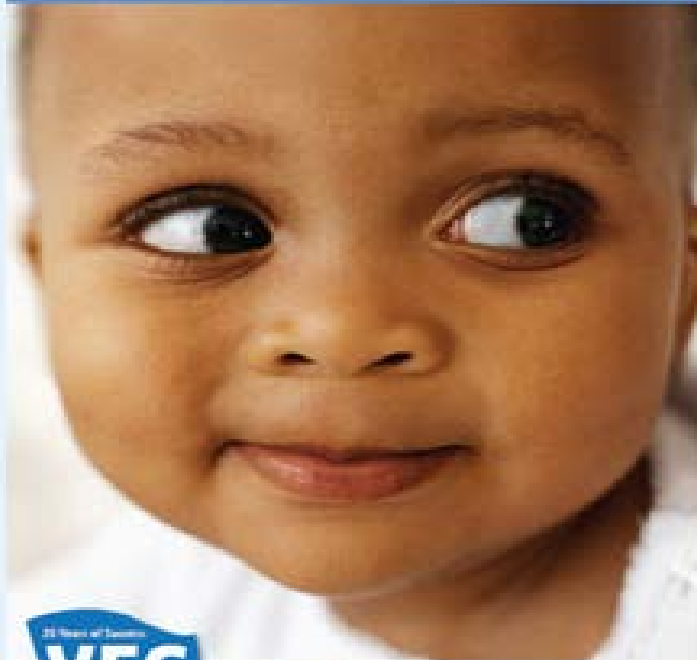
- Marianne Koshak – Program Manager
- Nicole Ortiz – Vaccine Manager
- Jason Hein – Ordering/Inventory Manager
- Debra Hindman – Vaccine Analyst



Vaccines for Children

20 years of protecting America's children

The Vaccines for Children program was established in 1994 to make vaccines available to uninsured children. VFC has helped prevent disease and save lives...big time!



CDC estimates that vaccination of children born between 1994 and 2013 will:

prevent **322 million** illnesses



help avoid **732,000** deaths



save nearly **\$1.4 trillion** in total societal costs
(that includes \$295 billion in direct costs)



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

©2014. Results from vaccination during the Vaccines for Children Program for U.S.-born babies, 1994-2013. | CDC-1113 | 04/2014

www.cdc.gov/features/vfcprogram

Vaccines for Children: 20 years of protecting America's children.

VFC Program Eligibility

- Vaccines For Children works with enrolled providers who receive VFC vaccine at no cost for children ages 0 through 18 years who are
 - Medicaid eligible
 - Uninsured
 - American Indian or Alaska Native
- FQHC, RHC and deputized local public health providers can use VFC for underinsured patients



VFC Under-insured Definition

- Children ages 0 through 18 years who are covered by an insurance plan that:
 - Does not cover vaccines
 - Does not cover certain vaccines (under-insured for those vaccines only)
 - Covers vaccines only to a fixed dollar limit (eligible for VFC vaccine after the cap is reached for that coverage period)
- In Colorado, all local public health agencies can provide VFC to under-insured children



Reasons to Be a VFC Provider

- Ability to provide government purchased vaccines to eligible patients with no out of pocket costs
- Administering vaccines in the patients medical home is a best practice
- All ACIP recommended vaccines are available
- Training on vaccine storage and handling



VFC Provider Requirements

- Annual enrollment or re-enrollment
 - Current medical license
 - Enrolled as a Medicaid provider
 - Serve a VFC population
- Annual “You Call The Shots” and “Vaccine Storage & Handling” training for all VFC contacts (CDC)
- Vaccine ordering and Inventory online courses (CDPHE)
- Order vaccines through the Vaccine Ordering Module (VOM)
- Site visit every other year



VFC Participation Requirements

- Provide up to date location and contact information
- Screen patients and document eligibility at each immunization encounter
- Comply with schedules, dosages and contraindications established by the Advisory Committee on Immunization Practices (ACIP)



VFC Participation Requirements

- Maintain records for 3 years
 - Eligibility screening, immunization documentation, billing, medical records
- Charge eligible children only the administration fee (cap \$21.68 per vaccine dose)
- Don't turn away eligible children unable to pay the administration fee



VFC Participation Requirements

- Offer the patient a VIS each time a vaccine is administered
- Comply with vaccine management requirements
 - Order appropriate inventory (45 days)
 - Proper storage conditions at all times
 - No use of dorm style refrigerator/freezer
 - Return spoiled/expired public vaccine to vaccine distributor within 6 months



VFC Participation Requirements

- No fraud or abuse as defined by CDC
- Participate in VFC site visits, unannounced visits, educational opportunities
- Replace dose-for-dose vaccine that has been wasted (if necessary)
- Use VOM to report VFC doses administered, reconcile VFC vaccine inventory, place orders



Staff VFC Role - Provider

- Signs the enrollment forms
- Accountable for compliance with program requirements
- Accountable for vaccine loss
- Designate a VFC Coordinator and back up
- Ensure that vaccine storage units meet VFC requirements
- Review and approve vaccine management plan



Staff VFC Role – VFC Coordinator

- Ensure 2x/day temperature logging
- Maintain vaccine management plan
- Train staff on routine and emergency vaccine management
- Order & receive vaccines, keep VFC & private vaccine clearly marked, rotate stock, remove expired vaccine from unit
- Take immediate action for out of range temps
- Take the CDC trainings annually



Staff VFC Roles

VFC Back Up

- Responsible for duties when the VFC Coordinator is not available
- Complete annual CDC training

Key Office Staff

- Know who the VFC Coordinator and back up are
- Basic knowledge of vaccine management plan



Vaccine Accountability

- Providers agree to maintain adequate inventories of vaccine for both private and VFC-eligible patients
- All vaccine properly stored
- Borrowing between inventories should be a rare and unplanned event. It must be **documented** on the borrowing log and the dose paid back as soon as possible
 - Causes issues with reconciliation



Vaccine Management Plan

- Procedures for routine and emergency vaccine handling
- Plan kept near storage unit, all staff familiar
- Includes name of coordinator and back-up, temperature monitoring, procedures for ordering and receiving vaccines, inventory control, documentation of wastage, emergency plan



Temperature Monitoring

- Thermometers must meet minimum requirements (calibrated with current certificate)
- One thermometer for each unit
- One back up thermometer that also meets minimum requirements
- CIB currently providing 2 Data Logger units for temperature monitoring

Respond to out of range temperatures immediately



VFC Program Fraud & Abuse

- **Fraud:** an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person.
- **Abuse:** provider practices that are inconsistent with sound fiscal, business, or medical practices and result in an unnecessary cost to the Medicaid program, the immunization program, a health insurance company, or a patient. Includes reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for health care.



**VFC Participation Used to be
Easier
The rules have changed**

Why?



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Two Reviews of the VFC Program

PUBLIC HEALTH
Reports

Public Health Rep. 2007 Nov-Dec; 122(6): 718-724.

PMCID: PMC1997239

Evaluating Accountability in the Vaccines for Children Program: Protecting a Federal Investment

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Office of Inspector General
U.S. Department of Health & Human Services

Report (OEI-04-10-00430)

06-05-2012

**Vaccines for Children Program:
Vulnerabilities in Vaccine Management**



COLORADO
Department of Public
Health & Environment

Public Health Review

- 2007 review of state immunization programs recommended
 - States update provider enrollment agreements annually
 - Improved tracking of vaccine wastage
 - Closer monitoring of provider vaccine inventories
 - Creation and enforcement of fraud and abuse policies



OIG Report

- Annually, 80+ million doses at a cost of almost \$4 Billion
- Review of sample of providers found:
 - 76% of providers reviewed had vaccine that was exposed to inappropriate temperatures
 - Can reduce potency & efficacy
 - Children not getting maximum protection
 - Expired vaccines
 - Poor or missing eligibility screening documentation
- Result was increased oversight required by state immunization programs



VFC Program Data

- The VFC program spends about \$3.6 billion on vaccine annually
- Nationally, in 2014, over 2.5 million doses of VFC vaccine were either expired, spoiled or wasted.
 - This does not include influenza vaccine doses.



Dose-Level Accountability

- Primary tracking done through reconciliation
 - You receive VFC vaccine
 - System should show that it was given to VFC eligible children OR that you still have the dose in your inventory



Step By Step Process

- Orders are reviewed based on the number of doses given that are reported and the number of doses you have in your reported inventory
- $\text{Doses given} \times 1.5 - \text{ending inventory} = \text{number that should be ordered}$
- If the number ordered is more than this (new provider, back to school) the provider should put that note into VOM



Concerns about an order

- CIB (Jason) sends an email to the person who placed the order asking why and including formula
- Wait for a response – if explained the order goes through as placed
- If no response, order is adjusted to meet the formula and approved
- Orders held up or cancelled only for “red flags” (rare)



What are “red flags”

- Excessive unaccounted for doses
- Provider reports excessive borrowing of VFC vaccine for private patients
- Provider orders vaccine to replace doses lost due to a temperature excursion, especially if not previously reported
- Provider reports an equipment failure and/or replacement of vaccine unit (need to see temperature logs)
- Provider office moves – CIB not notified – vaccine shipment returned
- Unusual circumstances



Information and Updates on Requirements

- Enrollment visit
- Re-enrollment packet
- VFC compliance visits
- Memos
- VFC website – www.coloradovfc.com
 - Information on VFC Policy and Job Aids
 - Current forms
 - Memos



Ensuring Smooth Sailing

- Communicate with CIB routinely
 - Temperature excursion
 - Office move or staff contact change
 - Any reason why additional vaccine is needed
 - Any concerns about vaccine received
 - Unusual circumstances or concerns
- Check email routinely after placing an order – respond to questions quickly
- Order based on the formula when possible



Ensuring Smooth Sailing

- Office staff well trained and clear on VFC program requirements
- Update office contact information when it changes
- Notify us early if your office is changing locations
- Participate in one-on-one training if your office is having difficulty



Ensuring Smooth Sailing

- Avoid borrowing of vaccine
 - Consistent eligibility screening & documentation critical
- Timing of reconciliation and vaccine order
 - Inventory count must reflect doses as of the close of business on the reconciliation end date
 - Count inventory after all immunizations are given for the day and use that day as the end date
 - Count inventory in the morning before immunizations are give and use the previous day as the end date
 - Order should be placed soon after reconciliation closed to provide accurate current inventory data
 - If the reconciliation can't be closed, contact VFC or the VOM help desk immediately to avoid vaccine delays
- Request one-on-one training if an office is having difficulties



CIB

- 3 VFC staff
- 600 provider sites, at least 2 contacts per site (hard to communicate individually)
- On average we process 400 orders per month
- Difficult to communicate multiple times to solve a problem with an order
- VOM help desk created to provide support to providers



CIB Resources

- Main VFC program number
 - 303-692-2650 (someone on call every day)
- VFC Email (checked daily)
 - cdphe_vfc@state.co.us
- Website
 - www.coloradovfc.com

