



Division of Public Health Services

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Updates from the Arizona Immunization Program Vaccine Center **February 2013**

Important Changes to the VFC Program

Over the past several months, CDC has been in contact with state Immunization offices across the nation regarding anticipated changes to the vaccine storage, handling and accountability policies for the VFC program. Please be aware that as of January 1, 2013, the following changes have been incorporated into the Arizona VFC program.

- **Unannounced Storage and Handling Site Visits:** VFC site visit representatives will be tasked with identifying VFC providers statewide to perform “spot checks” of storage and handling practices in the VFC provider office. Providers will be chosen based upon previous storage and handling compliance issues, time since the last visit and geographic distance from those providers who will receive a VFC compliance visit during the year. These visits will provide us with information to assist in creating targeted education and the opportunity to assist providers in complying with storage and handling requirements.
- **Education Compliance Visits:** VFC providers will be required to attend at least one VFC educational training per calendar year. These trainings can consist of one or more of the following: the annual Immunization Conference, a VFC Webinar, a Learn at Lunch session, a VFC in-service or complete a VFC on-line training. More information will be available on VFC webinars and VFC on-line trainings in the near future.
- **Dorm-Style or Bar Style Refrigerators:** Dorm style and Bar Style refrigerators are not allowed to be used for permanent or **temporary storage** of federally funded VFC vaccines. If you are currently using a dorm-style or bar-style refrigerator, **please discontinue use IMMEDIATELY!**
- **Refrigerator/Freezer Unit:** CDC **recommends** the use of stand-alone refrigerator and freezer units, meaning a self-contained unit that only refrigerates or freezes and is suitable for vaccine storage. These units can vary in size, from a compact, under-the counter style to a large, stand-alone, pharmaceutical grade storage unit. CDC has made the use of stand-alone freezer and stand-alone refrigerator units **optional** at this time. However, in the future this may become a CDC requirement. **At this time, if you do not have stand-alone units, you may continue to use your current combination refrigerator/freezer units.** If you anticipate the need to purchase a new unit, we are advising all providers to purchase the stand-alone refrigerator and stand-alone freezer units in preparation for the future requirement.
- **The characteristics of an appropriate storage unit include:**
 - Enough room to store the year’s largest inventory without crowding;
 - Provide sufficient room to store water bottles in the refrigerator and frozen coolant packs in the freezer to stabilize the temperature;
 - Having a working calibrated thermometer with the Certificate of Traceability and Calibration placed in a central area inside each storage compartment. Each thermometer probe should come placed in glycol to measure vaccine temperature and not the ambient air of the refrigerator or freezer

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- **Digital Data Loggers:** CDC recommends the use of continuous digital data loggers with detachable probes for temperature monitoring. This device will allow for twice daily temperature monitoring and recording. **At this time, the Arizona Immunization program does not require the use of data loggers. Please continue to use the NIST calibrated and certified thermometer that are currently being used to monitor the VFC vaccines.**

If you have questions regarding this information, please contact the Vaccine Center at 602-364-3642.



VFC Vaccine Administration Fee

As you may have heard, the allowable vaccine administration fee has been revised for the first time in VFC history. Effective January 1, 2013, the maximum allowable rate for Arizona providers is \$21.33. This new fee will be effective for the next two years (i.e. 2013 and 2014). This is the maximum rate you can charge all non-Medicaid VFC eligible patients, per vaccine dose. Please remember, that for non-Medicaid VFC eligible clients, you must completely waive the fee if the parent/guardian tells you they cannot afford it.

VFC UNDERinsured Eligibility Category

Continue vaccinating UNDERinsured children with Arizona VFC Program vaccine until you are told to stop.

The Arizona VFC Program still has vaccine available for the underinsured children. Please continue to vaccinate UNDERinsured children until the Arizona VFC Program tells you to stop. We expect this vaccine to last until approximately June 2013.

Definition of Underinsured: A person who has health insurance, but the coverage does not include vaccines or a person whose insurance covers only selected vaccines. Children who are underinsured for selected vaccines are VFC-eligible for non-covered vaccines only. Underinsured children are eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) or under an approved deputization agreement. Children with deductibles and co-pays are considered insured and NOT underinsured.

There will always be sufficient vaccine for VFC-eligible children.

Always continue vaccinating VFC-eligible children. VFC-eligible children are:

- Uninsured
- AHCCCS
- Native American/Alaskan Native

There is sufficient vaccine for KidsCare children.

Please continue vaccinating KidsCare children.

Federally Qualified Health Centers, Rural Health Centers, County Health Departments and the 25 newly Deputized VFC Providers always have the authority to vaccinate UNDERinsured children with VFC vaccine.

If you have any questions, please contact the Arizona VFC Program at 602-364-3642.

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Vaccine Order Management System (VOMS)

On January 7, 2013, the Arizona Immunization Program, Vaccine Center went live with the new CDC vaccine order management software (VTrckS). With each vaccine order, we are now required to submit to CDC information from Arizona VFC providers on dose level accountability. We appreciate all the effort our VFC providers put into establishing and managing their inventory in ASIIS. All of your hardwork enables us to provide CDC with this absolutely critical information, which ensures we are being good stewards of the federally funded VFC vaccine. Below are three helpful hints to ensure that providers continue to successfully manage their inventory in ASIIS/VOMS.

- Reconcile your inventory at least monthly
- Ensure that all data entry into ASIIS is current
- Only keep enough inventory on hand for 6-8 weeks at a time

If you have general questions regarding your inventory please contact the Vaccine Center at 602-364-3642. If you are having technical issues with your inventory, please contact the ASIIS hotline at 877-491-5741.

Medicaid (AHCCCS) as Secondary Insurance

We have received several questions from providers regarding the handling of children who present to the VFC provider office and have a private primary insurance and AHCCCS as a secondary insurance. Children who present to the VFC provider office in this situation are considered VFC-eligible as long as they are enrolled in AHCCCS. The following information will provide two options for VFC providers in the administration of vaccines to the child as well as information on how the claim can be processed. The provider office can choose the option that works best for them.

Option 1: A provider can administer VFC vaccines to these children and bill AHCCCS for the administration fee. Immunizations are a component of the Early Periodic Screening, Diagnosis and Treatment (EPSDT) program, and the Medicaid program must pay the VFC administration fee; the state Medicaid agency has the option to seek reimbursement for the administration fee from the primary insurer. In most circumstances, Medicaid is considered the “payer of last resort.” This means that claims must be filed to and rejected by all other insurers before the Medicaid agency will consider payment for the service. This is not true for the VFC vaccine administration fee for Medicaid-eligible children.

Option 2: A provider can administer private stock vaccine and bill the primary insurance carrier for both the cost of the vaccine and the administration fee. If the primary insurance pays less than the Medicaid amount for the vaccine administration fee, the provider can bill Medicaid for the balance of the vaccine administration fee up to the amount Medicaid pays for the administration fee. The provider may replace the private-purchased vaccine with VFC vaccine and bill Medicaid for the administration fee. When replacing private-purchased vaccines with VFC vaccines, the provider must contact the Vaccine Center for final approval.

Reminder: Because these children are considered Medicaid eligible, the parent/guardian of the child should never be charged/billed for a vaccine or for an administration fee.

MMR-V: ProQuad®

ProQuad® NDC 00006-4999-00, single dose vial presentation (package of 10) is available to order in VOMS.

ACIP Recommended Immunization Schedules

Providers can obtain the most current immunization schedules for children and adolescents at <http://www.cdc.gov/vaccines/recs/schedules/child-schedule.htm#hcp>.