## 2018 Program Participation Requirements at a Glance

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Summary</th>
<th>Resources/Job Aids</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccine Management Plan</td>
<td>Maintain a current and completed vaccine management plan (for routine and emergency situations) that includes practice-specific vaccine management guidelines and protocols, names of staff with temperature monitoring responsibilities, and completion dates of required EZIZ lessons for key practice staff. Designate a staff member responsible for updating the management plan. Review and update the plan at least once a year, when VFC Program requirements change, and when staff with designated vaccine management responsibilities change. Ensure all staff with assigned vaccine management responsibilities review, sign, and date the plan annually and whenever the management plan is updated. Conduct regular vaccine management drills to maintain competency and readiness for emergency procedures, such as vaccine transport.</td>
<td>EZIZ VFC Program Requirements lesson Vaccine Management Plan (IMM-1122)</td>
</tr>
<tr>
<td>Updated for 2018</td>
<td></td>
<td>Vaccine Coordinator Roles &amp; Responsibilities (IMM-968) VFC Key Practice Staff Change Request Form (IMM-1166)</td>
</tr>
<tr>
<td>Key Practice Staff</td>
<td>Designate on-site practice staff for each key role required by VFC, maintain key practice staff information updated in the practice’s profile, and immediately report key practice staff changes by logging into MyVFCVaccines. Changes to the Provider or Provider of Record Designee cannot be made online, and a Key Practice Staff Change Request form needs to be completed and submitted to the VFC Program. There are four required VFC roles: <strong>Provider of Record (POR):</strong> The physician-in-chief, medical director, or equivalent role that signs and agrees to the terms of the VFC “Provider Agreement” and the California VFC Program “Provider Agreement Addendum” and is ultimately accountable for the practice’s compliance. Must be a licensed MD, DO, NP, PA, pharmacist, or a Certified Nurse Midwife with prescription-writing privileges in California. <strong>Provider of Record Designee:</strong> The on-site person designated by the Provider of Record to sign VFC documents on his/her behalf and to assume responsibility for VFC matters in his/her absence. <strong>Vaccine Coordinator:</strong> An on-site employee who is fully trained and responsible for implementing and overseeing the provider’s vaccine management plan. <strong>Backup Vaccine Coordinator:</strong> An on-site employee fully trained in the practice’s vaccine management activities and fulfills the responsibilities of the Vaccine Coordinator in his/her absence. <strong>Immunization Champion (optional):</strong> A staff member who goes above and beyond their normal duties to promote immunizations to patients and in the community.</td>
<td></td>
</tr>
</tbody>
</table>
Staff Training Requirements

Provider of Record and Designee, Vaccine Coordinator and Backup, and other key practice staff who have immunization-related responsibilities must comply with federal VFC educational requirements and complete required annual EZIZ training lessons. Additionally, the clinic’s Provider of Record must ensure staff demonstrate competency in their assigned VFC responsibilities:

- All staff with temperature monitoring responsibilities must be properly trained on temperature monitoring, use of the practice’s temperature monitoring devices, and required actions for out-of-range temperatures. Training must also include response to routine and emergency vaccine management situations as included in the clinic’s vaccine management plans.
- Staff authorized to accept packages must be trained to notify Vaccine Coordinators for vaccine deliveries.
- Clinical staff must be knowledgeable of and familiar with ACIP-recommended immunizations, including schedules, indications, dosages, and new products.

New providers cannot enroll and existing providers cannot recertify until all key practice staff complete the required EZIZ lessons.

Staff training must be documented and included within the vaccine management plan. Documentation must include the staff member’s name and date of training. Required training by role:

<table>
<thead>
<tr>
<th>Legend: ✓ = Required Lesson</th>
<th>Start Date</th>
<th>Key Practice Staff</th>
<th>Provider of Record</th>
<th>Provider of Record Designee</th>
</tr>
</thead>
<tbody>
<tr>
<td>VFC Program Requirements</td>
<td>January 2018</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Storing Vaccines (NEW)</td>
<td>January 2018</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Monitoring Storage Unit</td>
<td>January 2018</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Temperatures (NEW)</td>
<td>January 2018</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Conducting a Vaccine Inventory</td>
<td>January 2018</td>
<td>✓</td>
<td>Encouraged</td>
<td>Encouraged</td>
</tr>
<tr>
<td>Refrigerator and Freezer</td>
<td>January 2018</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Temperature Log (NEW)</td>
<td>January 2018</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Vaccine Management Plan (NEW)</td>
<td>January 2018</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

*Test-out option available
| VFC Eligibility Screening & Documentation | Follow VFC Program requirements for patient eligibility screening and documentation:  
- Screen all children from birth through 18 years of age for VFC eligibility (Medi-Cal eligible, uninsured, American Indian/Alaska Native, and underinsured children seen at a FQHC or RHC) prior to vaccine administration—at every immunization visit.  
- Document all elements of VFC’s “Patient Eligibility Screening Record” form, including the screening date, VFC eligibility (Y/N), and any eligibility criterion (or criteria) if met.  
- Do not deny vaccine administration because the parent/guardian is unable to pay the administration fee.  
- Keep all VFC eligibility records on file for three years. | VFC Patient Eligibility Screening Record form (IMM-1111)  
VFC’s Who’s Eligible flier (IMM-1088)  
VFC Eligibility & Documentation Requirements (IMM-1161) |
|---|---|---|
| ACIP Recommendations & Standards | VFC providers must offer all ACIP-recommended vaccines for the VFC population they serve.  
Follow VFC Program requirements:  
- Comply with recommendations about immunization schedules, dosages, and contraindications as established by the ACIP and included in the VFC Program. Offer all age-appropriate vaccines according to patient populations served, and as identified and agreed upon in the practice’s Recertification population profile.  
- Administer VFC-supplied vaccines only to children who meet VFC eligibility criteria.  
- Distribute the current Vaccine Information Statements (VIS) before vaccine administration.  
- Maintain records in accordance with the National Childhood Vaccine Injury Act (NCVIA), which includes reporting clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS).  
- Acknowledge that revaccination is recommended if non-viable vaccines have been administered to patients.  
Record information about each immunization given, including:  
- the name of the vaccine  
- the date it was given  
- the route and administration site  
- the lot number and manufacturer  
- the name and title of the person who administered it  
- the practice’s name and address  
- the VIS publication date and date VIS was provided | CDC Recommended Immunization Schedules  
Instructions for using VIS  
Current Vaccine Information Statements  
VAERS and VERP flyer (IMM-1153)  
VFC Vaccine Fact Sheets |
### Billing for Vaccine Administration

<table>
<thead>
<tr>
<th><strong>Immunize all VFC-eligible children with VFC-supplied vaccines at no charge to the patient for vaccines.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Providers may charge VFC-eligible children not covered by Medi-Cal (i.e. uninsured, American Indian/Alaska Natives, and underinsured children seen at a FQHC or RHC) up to the current federal maximum regional administration charge of $26.03 per dose (not antigen) of vaccine. Waive the administration fee if the parent/guardian is unable to pay.</td>
</tr>
<tr>
<td>For Medi-Cal children, providers must bill Medi-Cal for vaccine administration fees and accept reimbursement rates set by Medi-Cal or the contracted Medi-Cal health plans. Never bill the difference between Medi-Cal’s administration fee and the administration fee cap to the parent/guardian.</td>
</tr>
<tr>
<td>Note: Pharmacies, urgent care and other specialty VFC providers agree to vaccinate all “walk-in” VFC-eligible children and not refuse to vaccinate these children based on a parent’s inability to pay the administration fee.</td>
</tr>
</tbody>
</table>

### Vaccine Storage Units

<table>
<thead>
<tr>
<th>Use or purchase refrigerators or freezers that comply with VFC vaccine storage unit requirements. Very high volume providers must use pharmacy- or biologic-grade refrigerators. Other providers may use refrigerators and freezers that are pharmacy- or biologic-grade, commercial-grade, and household-grade stand-alone.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never use any of the following for vaccine storage: household-grade combination refrigerator-freezers, compact household-grade stand-alone refrigerators (with capacity 11 cubic feet or less), dormitory-style or bar-style combined refrigerator/freezers, manual defrost refrigerators, convertible units, or cryogenic (ultra-low) freezers, or any vaccine transport unit for routine storage (including coolers and battery-operated units).</td>
</tr>
<tr>
<td>Dedicate vaccine refrigerators and freezers to vaccine storage. If storage of medications or biologics is necessary, store them below vaccines on a different shelf. Never store food or beverages in vaccine storage units.</td>
</tr>
<tr>
<td>Purchase new vaccine refrigerators or freezers if existing storage units do not meet VFC Program requirements, or in the event of storage unit malfunctioning that resulted in spoiled vaccines.</td>
</tr>
</tbody>
</table>

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**EZIZ Vaccine Storage requirements**
**2018 Program Participation Requirements at a Glance**

<table>
<thead>
<tr>
<th>Digital Data Loggers</th>
<th>VFC providers must use digital data loggers or similar continuous temperature monitoring devices to monitor temperatures in any unit (refrigerator, freezer, or transport cooler) storing VFC supplied vaccines. Data loggers must comply with VFC temperature monitoring device requirements. Ensure all data loggers include the following minimum features: a digital display of current, minimum, and maximum temperatures; minimum accuracy of ±1.0°F (0.5°C); a buffered temperature probe (the one that comes with the device) immersed in a vial filled with up to 60mL liquid (e.g., glycol, ethanol, glycerin), loose media (e.g., sand, glass beads), or a solid block of material (e.g., Teflon®, aluminum); an out-of-range temperature alarm; logging interval of at least 30 minutes; and memory storage of 4,000 readings or more. Never use these devices for vaccine temperature monitoring: thermometers (e.g., round dial thermometers, fluid-filled and/or min-max bar thermometers, household-use and kitchen thermometers, infrared temperature guns, alcohol or mercury thermometers, bi-metal stem thermometers, or any thermometer without continuous temperature data recording); chart recorders; or data loggers with probes that aren’t immersed in a vial filled with liquid, loose media, or a solid block of material. At least one VFC-compliant back-up digital data logger device must be readily available on site for use during any instance of vaccine transport or when primary devices fail, or being calibrated. Back-up units should have different calibration dates from primary units. Store the backup device’s buffered probe in the vaccine storage unit; store the digital display in a cabinet and document its location on the practice’s vaccine management plan. Calibrate primary/backup devices annually, or every other year when manufacturers recommend a period longer than two years. Ensure each device has a valid and current certificate of calibration inclusive of all elements outlined in the Certificate of Calibration Quick Guide. Keep certificates of calibration on file and make them available to VFC Field Representatives upon request. All key practice staff monitoring storage unit temperatures must be trained on how to operate the practice’s data loggers, interpret their on-screen temperature readings, download temperature reports, and properly configure HI and LO temperature alarm limits in accordance to the VFC Program Data Logger Setup &amp; Use Job Aid.</th>
</tr>
</thead>
</table>

**EZIZ Data Logger Requirements**

- Digital Data Logger Pre-Purchase Worksheet (IMM-1236)
- Data Logger Setup & Use (IMM-1206)
- Certificate of Calibration Quick Guide (IMM-1119)
## 2018 Program Participation Requirements at a Glance

### Vaccine Storage Unit Configuration

- Prepare vaccine refrigerators and vaccine freezers in compliance with VFC Program requirements.
  - Place water bottles in vaccine refrigerators and ice packs in vaccine freezers to stabilize temperatures.
  - Place buffered probes in the center of the refrigerator and freezer near vaccines.
  - Place the data logger’s digital display outside of the storage unit to allow temperature monitoring without opening the vaccine storage unit door.
  - Plug the refrigerator and freezer directly into a close, dedicated wall outlet that does not have built-in circuit switches and is not controlled by a light switch. Never plug the storage unit into extension cords or power strips or surge protectors with an on/off switch.
  - Post “Do Not Unplug” signs on electrical outlets and circuit breakers to prevent interruption of power.

- Set up vaccine refrigerators and vaccine freezers in compliance with VFC Program requirements.
  - Designate separate shelf space or breathable mesh baskets for VFC-supplied and privately purchased vaccines.
  - Clearly label shelves or baskets to group vaccines by pediatric, adolescent, and adult types.
  - Allocate enough space to position vaccines or baskets 2-3 inches away from walls, floor, and other baskets to allow space for air circulation.
  - Post VFC temperature logs on vaccine storage unit doors or in an easily accessible location.

### Routine Vaccine Orders & Accountability

- Trained and authorized clinic staff must submit vaccine orders through the practice’s account on MyVFCvaccines.org following program requirements:
  - Conduct a physical vaccine inventory before ordering routine vaccines to determine doses on hand.
  - Account for every dose of VFC-supplied vaccine ordered and received by the provider’s practice.
  - Order routine ACIP-recommended vaccines according to the provider population, category, order frequency, vaccine usage, and on-hand inventory.
  - Order all vaccines for each order period in accordance with the practice’s patient estimates and in sufficient quantities to last until the next order period; individual vaccine orders are not permitted.
  - Stock one brand and formulation for each vaccine to avoid administration errors.
  - Keep track of VFC vaccine doses administered since the previous order (including influenza) using the VFC Daily Usage Log, VFC Flu Usage Log, an immunization registry, or equivalent electronic or paper form.
  - Report on each vaccine order the quantity of vaccines administered since the previous order and the current on-hand inventory.
  - Maintain and make available accurate and separate stock records for privately purchased vaccines.

### Refrigerators:

- Preparing Refrigerators job aid (IMM-962)
- Refrigerator Setup for Vaccine Storage (IMM-963)

### Freezers:

- Preparing Freezers (IMM-965)
- Freezer Setup for Vaccine Storage (IMM-966)

### Power Supply:

- Safeguard Your Power Supply (IMM-967)
- Do Not Unplug Sign (IMM-744)

### Vaccine Ordering Worksheet (IMM-1246) – New!

### Vaccine Physical Inventory form (IMM-1052)

### Usage Logs:

- VFC Daily Usage Log (IMM-1053)
- Private Daily Usage Log (IMM-1053P)
- Flu Daily Usage Log (IMM-1053F)
# California Vaccines for Children (VFC) Program

## 2018 Program Participation Requirements at a Glance

<table>
<thead>
<tr>
<th>Receiving Vaccine Deliveries</th>
<th>Follow VFC Program requirements:</th>
<th>Vaccine Receiving Log and Checklist (IMM-1112)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Never reject vaccine shipments.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Receive, inspect, and store vaccines and diluent within manufacturer recommended ranges immediately upon delivery.</td>
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<tr>
<td></td>
<td>• Inspect vaccines for out-of-range temperatures and shipping times during transport.</td>
<td></td>
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<tr>
<td></td>
<td>• Check package contents to ensure brands and quantities match the packing slip and approved VFC order. Immediately report all shipment issues (e.g., damaged boxes, out-of-range temperatures and shipping times, missing diluents, and incorrect brands and quantities) using the VFC Vaccine Receiving Log and Checklist.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Keep packing slips for all vaccine shipments received, including publicly funded and private vaccine shipments.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Vaccine Storage</th>
<th>Always store vaccines within manufacturer recommended ranges:</th>
<th>EZIZ Storing Vaccines lesson</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Updated Fahrenheit temperature range for refrigerators</strong></td>
<td>• Frozen vaccines (MMR, MMRV, and VAR) between <strong>-58.0°F and 5.0°F</strong> (-50.0°C and -15.0°C).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• All other vaccines in a refrigerator between <strong>36.0°F and 46.0°F</strong> (2.0°C and 8.0°C).</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Store VFC-supplied vaccines according to VFC Program guidelines.</td>
<td></td>
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<tr>
<td></td>
<td>• Store vaccines in original packaging and within closed boxes to protect from light and allow for air circulation.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Store VFC-supplied and privately purchased vaccines separately and grouped by vaccine type.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Do not store vaccines in the doors, drawers, or bins.</td>
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</tr>
<tr>
<td></td>
<td>• Place vaccines with the earliest expiration dates toward the front of the storage unit and use first.</td>
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</tr>
<tr>
<td></td>
<td>Vaccine storage at alternate off-site locations requires prior VFC approval; always store and administer vaccines at the approved location for the VFC PIN.</td>
<td></td>
</tr>
</tbody>
</table>
Consistently monitor temperatures of all VFC-supplied vaccines: during routine on-site storage, during vaccine transport (routine transfers, emergency transport, and mass vaccination clinic transport), and during VFC-approved mass vaccination clinic events.

Set temperature alarm alerts for refrigerated and frozen vaccines according to HI and LO settings outlined in the VFC Program’s Data Logger Setup & Use Job Aid.

Follow program requirements:

- Ensure vaccine storage unit temperatures are recorded on current VFC temperature logs.
- Monitor and record current, minimum and maximum temperatures in vaccine refrigerators and freezers twice each day, at the beginning and end of each business day—even if using digital data loggers. Any VFC-approved mass vaccination clinic must monitor and record temperatures every hour and attach data logger download summary report to the transport log.
- Download and analyze temperature data files (feature of digital data loggers) at the end of every two-week period—or sooner if an excursion is identified. Look for temperature trends that might indicate performance issues with vaccine storage units.
- Acknowledge that if temperatures are not monitored and documented, if temperature logs are missing, or if temperature logs are falsified, all affected vaccines will be automatically deemed non-viable and considered a negligent vaccine loss.
- Ensure VFC temperature logs are legible and completed accurately, and in ink.
- Immediately cross out, correct, and initial neatly any inadvertent documentation error.
- Ensure the supervisor certifies and signs that temperatures were recorded twice daily, staff printed names and initials, and corrective actions were taken when the VFC temperature log is complete for each 15-day period.
- Acknowledge that temperature logs missing during a VFC site visit but found at a later date will not be accepted.
- Retain paper logs and electronic files related to temperature monitoring for three years.
## 2018 Program Participation Requirements at a Glance

| Reporting Storage & Handling Incidents (Temperature Excursions) | Vaccines stored out of range might be deemed non-viable and considered a negligent vaccine loss. Providers are required to respond to and report all temperature excursions on SHOTS (Storage and Handling Triage System), which is accessed through your MyVFCvaccines.org account. Never ignore alarm alerts. If temperature alarms go off repeatedly, do not disconnect the alarm until it has been confirmed as a false alarm.

A temperature excursion does not automatically mean that exposed vaccines are non-viable or unusable. Follow program requirements:

- Take immediate action to prevent vaccine spoilage and to correct any improper storage condition if a vaccine storage unit temperature is identified as out of range.
- Mark as “Do Not Use” any vaccines exposed to out-of-range temperatures; do not administer vaccines until vaccine viability has been determined by the vaccine manufacturers.
- Download and review temperature data files for every temperature excursion if using digital data loggers.
- Report and document all out-of-range temperatures on MyVFCvaccines.org. Depending on the temperatures reported, you will be given results and instructions that no further action is required, or that you must contact the vaccine manufacturers.
- Transport vaccines in the event of extended power outages or unit malfunctions following the guidelines for proper refrigerated vaccine transport and frozen vaccine transport. |

| Vaccine Inventory Management (Spoiled, Expired, & Wasted) | Follow VFC Program requirements:

- Conduct a physical vaccine inventory at least monthly and before ordering routine vaccines using the VFC Vaccine Physical Inventory Form or equivalent electronic or paper form.
- Never borrow VFC-supplied vaccines to supplement private stock, or vice versa.
- For vaccines that will expire within 6 months and cannot be used, notify the VFC Call Center prior to transferring to another VFC provider.
- Remove spoiled, expired, and wasted vaccines from storage units immediately to prevent inadvertent use.
- Report all VFC-supplied spoiled, expired, or wasted vaccines prior to submitting a new vaccine order.
- Monitor vaccine storage units regularly and purchase additional units if capacity cannot accommodate the inventory in a manner consistent with VFC Program requirements. |

| MyVFCvaccines - SHOTS SHOTS Guide (IMM-1224) | EZIZ Conducting a Vaccine Inventory lesson Inventory: How to Do a Physical Inventory (IMM-1090) Vaccine Inventory Form (IMM-1052) Prevent Vaccine Loss flyer (IMM-1113) |
### Vaccine Transfers & Transports

Follow VFC Program transfer requirements:
- Contact the VFC Call Center prior to transferring vaccines and only transfer to an alternate location that has vaccine storage units and temperature monitoring devices that meet VFC Program requirements.
- Never routinely transfer VFC-supplied vaccines to other VFC providers.
- Never transfer VFC-supplied vaccines to non-VFC providers.
- Document all vaccine transfers.

Follow VFC Program transport requirements:
- Transport vaccines only when absolutely necessary and follow the guidelines for proper refrigerated vaccine transport and frozen vaccine transport.
- Store VFC-supplied vaccines only at facilities designated in the provider profile; never store VFC vaccines in personal residences.
- Use digital data loggers to monitor temperatures during vaccine transport.
- Complete a VFC Refrigerated or Frozen Vaccine Transport Log each time vaccines are transported.
- Acknowledge that vaccines transported without proper documentation may be deemed non-viable.

Providers operating mobile units must follow all VFC Program requirements related to vaccine storage, transport, and temperature monitoring while vaccines are outside of their permanent vaccine storage units.

### Program Enrollment, Recertification, Withdrawal, & Termination

Prospective providers must specify key practice staff, complete necessary training requirements, download and review job aids, comply with storage unit requirements, and complete and submit the online Provider Enrollment Form. Each year the Provider of Record must recertify their participation in the VFC Program by updating their information, completing required EZIZ training, and signing new requirement agreements. Failure to recertify by the deadline will result in a change in the practice’s account status and suspension of vaccine ordering privileges, and will lead to VFC Program termination.

Providers may voluntarily withdraw from the VFC Program. The VFC Program also may terminate a VFC “Provider Agreement” and remove a provider from the VFC Program for failure to comply with program requirements.

In all cases, the Provider of Record must return or transfer all unused VFC-supplied vaccines. Enrolled providers are responsible for all VFC-supplied vaccines in their practice until their Provider Agreement has been officially terminated.

### Refrigerated vaccines
- Transporting Refrigerated Vaccine job aid (IMM-983)
- Refrigerated Vaccine Transport Log (IMM-1132)

### Frozen vaccines
- Transporting Frozen Vaccines job aid (IMM-1130)
- Frozen Vaccine Transport Log (IMM-1116)


[Participation Withdrawal Request Form](http://eziz.org/vfc/enrollment/)

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California Department of Public Health Immunization Branch

IMM-1240 (1/18)
# 2018 Program Participation Requirements at a Glance

## Fraud & Abuse
Providers agree to participate in a manner intended to avoid fraud and abuse. A provider found guilty of fraud and/or abuse will be subject to vaccine restitution and termination from the VFC Program. All suspected fraud and abuse cases that merit further investigation after VFC Program review must be referred to Medicaid’s Integrity Program.

Fraud is an intentional deception or misrepresentation made by a person with the knowledge that deception could result in some unauthorized benefit to himself or other person. Fraud results in a financial gain for the provider but with an inadvertent cost to the VFC Program.

Abuse is a provider practice inconsistent with sound fiscal, business, or medical practice which results in unnecessary costs to the Medicaid program. Abuse results in inadvertent costs to the VFC Program and consists of any actions that lead to negligent loss. Providers agree to replace all vaccines deemed non-viable due to provider negligence.

## Documentation & Record Retention Requirements
Maintain all paper-based and electronic records related to the VFC Program for a minimum of three years.

Make records available to public health officials, including local health jurisdictions, California Department of Public Health, and Department of Health and Human Services, upon request.

Records includes patient screening/eligibility verification, temperature logs, vaccine ordering records, medical records which verify vaccine administration, vaccine purchase and accountability records, VFC training records, vaccine management plan, recertification forms, etc.

## Site Visits
Enrolled providers agree to site visits from VFC Program staff, including scheduled compliance visits, unannounced storage and handling visits, and visits for educational and programmatic support.

All new and returning providers enrolling in the VFC program must receive a VFC enrollment site visit prior to receiving VFC supplied vaccines and a follow-up visit within 12 months of enrollment.

Unannounced storage and handling visits serve as spot checks to ensure VFC-supplied vaccines are administered to VFC-eligible children and are managed and stored according to VFC Program requirements.

Provider of Record or the Designee must sign and acknowledge receipt of site visit findings and agree to complete required follow up within specified periods.
## 2018 Program Participation Requirements at a Glance

| Vaccine Administration | For non-MediCal VFC-eligible children, waive the administration fee if the parent/guardian is unable to pay.  
   | For Medi-Cal children, never bill the difference between Medi-Cal's administration fee and the administration fee cap to the parent/guardian.  
   | Acknowledge that revaccination is recommended if non-viable vaccines have been administered to patients. |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Program Integrity      | Clinic staff will conduct themselves in an ethical, professional, and respectful manner in all interactions with VFC Program staff.  
   | Never destroy, alter, or falsify immunization or VFC Program-related records. |

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