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November 13, 2008

IZB-FY0809-05

TO: Vaccines for Children (VFC) Providers

FROM: John Talarico, DO, MPH, Interim Chief
Immunization Branch

SUBJECT: Annual Vaccines for Children (VFC) Recertification

BACKGROUND

The Vaccines for Children (VFC) Program and the Immunization Branch thank you for your participation in the VFC Program. We appreciate your efforts to ensure that children in your community are fully immunized. For continued participation in the program, all public and private provider sites currently receiving publicly purchased vaccines through VFC, must renew their certification for participation on an annual basis. This process, also known as “VFC Recertification”, is a federal requirement that must be met by all provider sites currently enrolled, including private providers, local health departments, nonprofit community health centers, schools, head start centers, colleges and universities, etc.

Through this process, enrolled practices provide our program with their practice’s profile and agree with the program’s federal conditions for participation. Information provided includes demographic information such as mailing address and vaccine delivery days/times, estimated number of VFC-eligible children to be immunized with VFC-supplied vaccines during the upcoming year, and listing of current staff with prescription privileges in the practice who will be administering VFC vaccines.

TIMELINE FOR SUBMISSION OF 2009 VFC PROVIDER RECERTIFICATION

In order to receive VFC supplied vaccines after January 1, 2009, and continue as a VFC provider, each enrolled site **must submit a “2009 Annual Recertification” by December 15th, 2008**. In order to prevent delays with the processing of vaccine requests, VFC urges providers to complete this process by the stated deadline.

Organizations with multiple satellite clinics must complete and submit individual Recertification for each site receiving VFC-supplied vaccines. Recertification submitted will be valid for 2009.

2009 RECERTIFICATION PROCESS

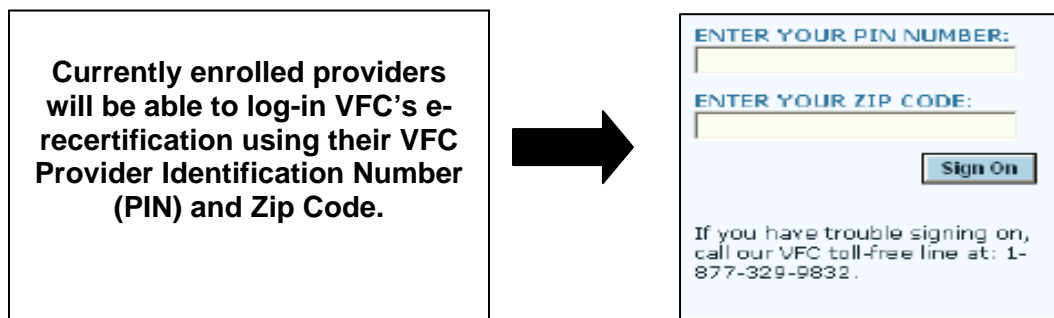
This year, VFC is introducing “E-Recertification”, a new and streamlined process for the completion and submission of VFC Recertification. Each practice currently enrolled in VFC will be able to complete and submit their 2009 VFC Recertification forms on-line. **All you will need is access to the internet and your practice’s Provider Identification Number (PIN) and Zip code, to login.** Once your online form is submitted, you will receive instant confirmation of submission.

To ensure the accurate completion of required information and facilitate a timely submission of forms, VFC has pre-populated annual recertification forms for each currently enrolled provider with information from the program’s vaccine management database. This information will include the practice’s estimated number of VFC eligible children, by age, category, and eligibility, which was based on the number of vaccine doses received during the preceding year. Once a site is logged-in, staff will be able to review, update, or modify displayed information for their practice, prior to submitting the forms electronically.

Provider sites with limited or no internet access may request a set of paper-based VFC Recertification Forms via FAX or by calling the program’s toll free number, 1(877) 243-8832. Paper-based forms must also be received by the December 15th deadline.

ACCESSING AND SUBMITTING YOUR PRACTICE’S VFC RECERTIFICATION

VFC’s on-line Recertification will be available on November 14, 2008, and it will be hosted at www.eziz.org, VFC’s new interactive website. The new site will be hosting the first of several interactive immunization lessons, VFC Program information, provider communications, VFC Program Forms, and more. You will be automatically redirected to this new site from our old site (www.vfcca.org).



To log-in and complete your practice’s recertification, follow the simple steps outlined below. It may take a few minutes to complete this process, and you will only be able to print and submit completed forms, so make sure you set some time aside when you are ready to start.

- 1) Go to VFC’s new website, www.eziz.org, and click on the “VFC-Recertification” link located in the “California VFC Program” section.
- 2) Before you log-in, we recommend printing the “Step-by-step Instructions” located on the “Welcome” page to assist you with process.

- 3) Log-in utilizing your practice's VFC Provider Identification Number (PIN) and Zip Code. Double check that this is your practice's information.
- 4) Once you log-in, you will navigate through a series of screens. Follow instructions located on the right hand side of each page to review, edit, or update information provided for your practice. For your convenience, we have pre-populated several fields with information for your practice from our database.
- 5) Carefully read and agree with federal participation requirements outlined in the "VFC Program Participation Agreement" page. Practice's Physician-in Chief or Medical Director must agree with these federal guidelines and signify agreement by entering their medical license.
- 6) Click the "submit" button to send your form electronically and print a copy for your records.
- 7) Make sure to go back and explore our website and new training site, www.eziz.org!

The attached document entitled "Instructions for completing your on-line VFC Recertification" outlines detailed steps for accessing, completing, and submitting annual recertification forms electronically.

QUESTIONS?

If you have any questions, please call your VFC Field Representative or the VFC Program at: 877-243-8832 (877-2GET-VFC). You can also visit our new website at www.eziz.org.

Enclosures: E-Recertification Instructions
EZIZ.ORG postcards
Listing of VFC Field Representatives

cc: CDPH Immunization Branch Field Representatives
Local Health Officers
Local Health Department Immunization Coordinators
Local Health Department CHDP Program Directors
Vanessa Baird, Chief, Medi-Cal Managed Care Division, DHCS
Marian Dalsey, M.D., Chief, Children Medical Services Branch, DHCS
Michael Farber, M.D., Chief Medical Officer, Medi-Cal Managed Care, DHCS
Shabbir Ahmad, D.V.M., M.S., Ph.D., Acting Chief, Maternal, Child and Adolescent Health Program, CDPH
Laurie Weaver, Chief, Office of Family Planning, CDPH
Villita Lewis, Deputy Director, Benefits and Quality Monitoring, MRMIB
Robert Heiligman, M.D., Medi-Cal Benefits Branch, DHCS
Kathy Chance, M.D., Children Medical Services Branch, DHCS



CALIFORNIA VACCINES FOR CHILDREN (VFC) PROGRAM

INSTRUCTIONS FOR COMPLETING THE ANNUAL VFC RECERTIFICATION ONLINE

ABOUT THE 2009 ON-LINE RECERTIFICATION PROCESS

Each clinic receiving publicly purchased vaccines from the Vaccines for Children (VFC) Program must complete and submit recertification forms annually as a requirement for continued participation in VFC. For 2009, VFC is introducing "e-Recertification", a new and streamlined process which allows registered providers to complete and submit their required Recertification forms On-line. Upon submission, providers will receive instant confirmation of submission and will be able to print a copy for their files. Sites with multiple satellite clinics must complete this process individually for each site. **The deadline for submitting your clinic's VFC Recertification forms is December 15, 2008.**

To complete your 2009 VFC Provider Recertification on-line, you will navigate through a series of screens. For your convenience, we have pre-populated most fields with information from our database. Please review the information provided and update or revise it, if necessary. Items with a question mark "?" next to them provide a brief explanation of the information required in the field.

ARE YOU READY? OK, LET'S GET STARTED

STEP 1: CONFIRMING YOUR PRACTICE'S INFORMATION, SHIPPING & MAILING ADDRESSES, AND NUMBER AND TYPES OF VACCINE STORAGE UNITS

Fields in this section have been pre-populated from our data base. Please review the information to see that is correct. If you need to make changes, click the "Update Information" button. When you have finished making your changes, click on the "Done" button. You are ready to proceed to step 2.

STEP 2: REVIEW AND CONFIRM YOUR PRACTICE'S PATIENT ESTIMATES

First, please tell us the estimated percentage of children in your practice who are VFC eligible.

Second, review the estimated number of VFC eligible children who will be seen over the next 12 months which we have provided for your practice. These numbers have been calculated based on 2007 vaccine doses received by your practice. You may update or edit these numbers if you think your practice will see more (or less) VFC-eligible children during the next 12 months. To make changes, simply type the corrected numbers into the appropriate boxes. You are ready to proceed to step 3.

STEP 3: LIST HEALTH CARE PROVIDERS WITH PRESCRIPTION-WRITING PRIVILEGES IN YOUR PRACTICE

Listed are the health care providers we have on record at your facility with prescription writing privileges who will administer VFC vaccines. If you need to add or delete any providers, please click on



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the "Update Information" button. When you have finished making your changes, please click on the "Done" button.

Note: It is not necessary to include the names of all staff who may administer VFC vaccine, but rather only those who possess a medical license or are authorized to write prescriptions (e.g. MD, DO, NP). You are ready to proceed to step 4.

STEP 4: TELL US ABOUT YOUR PREFERRED MODE OF COMMUNICATION

To keep up with changing needs of our providers, the CA VFC Program is planning for future methods of communicating with providers. Email communication would be more timely and immediate compared to regular mail or fax broadcast messages— which can take up to several days to complete— and involve less paper to file. If your practice is interested in receiving VFC Program communications by email, signify your interest by entering your preferred Email address in the space provided. We are collecting this information for future planning. You are ready to proceed to step 5.

STEP 5: READ AND SIGN YOUR VFC RECERTIFICATION AGREEMENT

Please review all the terms of this agreement carefully. To participate in the VFC Program and receive federally-procured vaccines, providers must sign and abide by the conditions listed in the agreement, on behalf of themselves and all the practitioners, nurses and others associated with this medical office, group practice, managed care organization, community/migrant/rural clinic, health department, or other health delivery facility of which the provider is the physician-in-chief or equivalent. By entering your entering your name (Clinic's medical director or physician-in-Chief), your medical license number, and date, you signify your acceptance of the VFC Program federal participation requirements. You have one more step to submit your report!

FINAL STEP: SUBMIT AND PRINT YOUR VFC RECERTIFICATION AGREEMENT

To submit your completed recertification information to the VFC Program, click the "Submit e-Recertification" button. Congratulations, you have completed your 2009 VFC Recertification online! We recommend you print a copy for your records by clicking on the "Print Information" button.

Thank you for completing your VFC Recertification on-line!