

1. Screen for Eligibility

Eligibility screening must be conducted prior to the administration of any 317-funded vaccine (e.g., Vaccines for Adults and Bridge Access Programs). Eligibility is self-reported by the patient and verification of eligibility can be obtained verbally from the patient.

✓ **Eligible for VFA and/or BAP (COVID) vaccines if at least 19 years of age and**

1. Has no insurance, or
2. Is underinsured (public or private health insurance does not cover all vaccines or covers vaccines with a fixed dollar limit which has been reached)
3. Has insurance which requires co-payment (BAP only)

✓ **Eligible for certain VFA vaccines if at least 19 years of age and**

4. Has Medicare **Part B**, but **NOT Part D**, patient is eligible for:
 - Hep A
 - Hep B (if considered low risk for Hep B)
 - HPV, MMR, Varicella, and Zoster
 - Td (if no wound exposure) and Tdap
5. Has Medicare **Part D**, but **NOT Part B**, patient is eligible for:
 - Hep B, PCV20

2. Document Patient's Eligibility

There are three important elements to include when you document a patient's eligibility:

1. Date of screening
2. If patient is eligible for the Vaccines for Adults (VFA) and/or Bridge Access Program (BAP)
3. If patient is eligible AND at least 19 years of age, document which of the criterion above is met

3. Use a Compliant Record Keeping System

• **CAIR and Electronic Health/Medical Record (EHR/EMR)**

Note: if your practice's EMR/EHR does not capture all the necessary screening elements, they may be documented in the system's notes section.

• **CAIR and [317 Eligibility Screening Form \(IMM-1226\)](#)**

Make sure to maintain patient eligibility screening records for a minimum of 3 years. [Refer to the 317 CAIR Documentation Requirement.](#)

4. Communicate the Patient's Eligibility

All staff should be knowledgeable of eligibility. Ensure practice protocols are in place so vaccinators know when to use 317-funded versus private vaccines.