

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, RSV, 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.