VFC/317 INVENTORY SEPARATION

Q&A

Vaccine Funding Categories

Q What is the difference between 317 and VFC?
   A VFC vaccine is for VFC eligible children: 0-18 children that are Medi-Cal/CHDP eligible, uninsured, Alaska Native/American Indian. VFC children that are underinsured (private insurance does not cover immunizations) can only receive VFC vaccine at a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC). 317 is the federal vaccine budget that states are given to administer vaccine to patients that are not VFC eligible. In CA this means uninsured or underinsured adults for selected vaccines.

Q Why is it that certain vaccines like meningococcal cannot be given for 317 for adults, i.e., entering dorm living?
   A The State of CA receives a limited budget for 317 vaccines and therefore, can only provide certain vaccines.

Q What vaccines are considered State General Fund vaccines?
   A The State of California gives the Immunization Branch $7.3 million in state general funds for vaccines each year. These funds are used to purchase influenza vaccine for local health departments and a limited amount of Tdap vaccine that is currently being targeted to pregnant women.

Q How do we know when to use 317 or State General Fund Vaccine?
   A Your Immunization Coordinator will be able to let you know which State General Fund and 317 vaccines you have access to.

Q Would County purchased vaccine be considered private?
   A Yes.

Q Just to confirm... if a child is underinsured, they do not qualify for either VFC or 317 vaccines, is that correct?
   A An underinsured child only qualifies for VFC vaccine at an FQHC or RHC.

Q What does 317 mean, patients with private insurance??
   A No, 317 vaccines are for uninsured or underinsured adults. They can only be used on privately insured patients in an outbreak situation.
Vaccine Eligibility Table

Q What happens with the underinsured under 18 years olds who previously qualified for 317? Are they going to qualify for VFC now?
   A Underinsured children can only receive VFC vaccine at an FQHC or RHC.

Q How about if a VFC eligible patient came into clinic requesting Flu shot, can we give the State GF to those patients?
   A There are no restrictions on who can receive State GF influenza vaccine. However, keep in mind that the VFC Program is an entitlement program and you should be able to order sufficient vaccine for all of your VFC patients’ needs. If for some reason, you have run out of VFC vaccine and a patient presents to your clinic, you could certainly give a dose of State GF flu.

Q 317/State GF are for adults only, how would I know what patients belong to 317 or State GF?
   A Influenza vaccine is provided by State GF. For Tdap vaccine, clinics should work closely with their Immunization Coordinator to ensure that vaccine that comes from State GF is reserved for pregnant women (who may have insurance, but no access to the vaccine from their provider) and that the 317 vaccine is reserved for uninsured and underinsured adults.

Q Other than flu, in what other instances would there be vaccines designated as “State GF” vaccine?
   A Just Tdap for pregnant women.

Q If a soon to be 7th grader comes into the clinic and I find that the child has insurance do I administer Tdap from State GF (cocoon supply) or VFC or 317?
   A The only option would be state GF. The state GF is targeted to pregnant women, but in limited situations, could be used in the situation described.

Vaccine Ordering

Q Do you have the forms to order for these different codes or are we supposed to get them from our pharmacy?
   A All vaccine ordering is done by the Vaccine Coordinator for your site through myvfcvaccines.
Q  How many doses of 317/State GF are we allowed to order per month?
   A  There is not a specific amount you can order per month. For 317 vaccines, you can administer to all patients that fall within the eligibility listed on the Vaccine Eligibility Table. State GF vaccines are ordered and allocated separately. Nisha Gandhi manages the ordering process for State GF flu and Tdap.

Q  Will vaccine come labeled as 317 or VFC?
   A  The vaccine will not come labeled, but the packing slip from McKesson will indicate how many doses of each are in the shipment. Labels to designate VFC, 317, and State supplied vaccines are available from your local Immunization Coordinator. Local Immunization Coordinators can order the VFC, 317, and State stickers from the izcoordinators.org website.

Q  If we are not ordering 317, do we have to report inventory and usage every time we order VFC?
   A  Yes, you do.

Q  Usage – have you thought about separating outbreak response from underinsured adults?
   A  Yes, that has been under discussion. For now, there will be a separate ordering process for ordering vaccines that are not currently on our Vaccine Eligibility Table. For vaccines that are routinely available (Tdap, MMR, etc.) they will be ordered through the 317 order page whether they are for uninsured or outbreak response.

Q  I have some LHD clinics that use small amounts of VFC and very tiny amounts of 317 vaccines. I am concerned about 317 vaccines expiring. Will that be counted against the clinic?
   A  We understand that even with responsible ordering, there may be situations where a clinic cannot use a 10 dose box before it expires. Reasonable efforts to find another provider eligible to receive 317-vaccines that could use it should be made. If that cannot occur, it will not count against the clinic.

Q  When can we start ordering 317 vaccines?
   A  August 1.
Q For adults receiving Hep B vaccine, do we have the ability to order the adult dose of this product?
   A Yes.

CAIR Lot Conversion

Q Can we convert part of our current VFC Tdap vaccine into 317 on August 1st to avoid doing a separate 317 order?
   A We recommend that you place a separate order. In limited situations, we can authorize a one-time conversion of current inventory. Please contact your field representative to discuss.

Q Please clarify/confirm we will be able to adjust/convert inventory to 317 prior to August 1st.
   A No. Conversion of inventory should occur after the CAIR changes are launched on August 1st.

Q I have MCV4 vaccines here in the STD clinic from Meningitis incidence and we are giving these vaccines usually to MSM adults, how is it going to be converted?
   A This would be a situation where you would need to go in and convert that lot to 317 after August 1st. Instructions for converting lots will be sent to Immunization Coordinators.

Q Are you converting Private vaccine lots to VFC also?
   A NO, only lots that were previously labeled as State Supplied (VFC/317) will be converted to VFC. Lots that were labeled as private will remain as private.

Q Do we need to notify you if converting VFC to 317 after the transition? And if so, what is the process to notify you of converted doses?
   A State GF Tdap, MCV remaining from an outbreak, and 317 Hepatitis A remaining from the Costco berry outbreak can be converted without any notification. Any other situations should be discussed with your field rep prior to converting doses.
Q Is there any reason why we have to place a separate 317 order on 8/1/14 instead of just converting the 317 vaccine that was changed to VFC back to 317? If we have a relatively small amount of 317 vaccines this might be easier and quicker for us.
   A The vaccine that you have in inventory was purchased with a combination of VFC and 317 funds. We can authorize conversion of stock in limited situations. Please discuss with your field representative. After 8/1, all orders will be placed separately by fund type and no conversion of VFC doses will be allowed.

Q What is the time period we have to convert VFC to 317 after 8/1/14?
   A It should be done within the first week.

**CAIR-General**

Q When we have run the flu report it has never been accurate. It has been off by as much as 1,000 doses. Has the flu report been updated or is it the same as it has been?
   A We are unaware of any issues with the flu report not being accurate. Please report any issues to the CAIR Help Desk so that we can help determine what the problem may be.

Q Can you show us how to request the eligibility report; is it a new option?
   A The State Supplied Vaccine Report is listed under the Reports section in CAIR. It is not new, but has been updated to reflect the addition of a State GF category. In addition, there are the reports that provide information on eligibility, the Dose-based Eligibility report or Patient Vaccine Eligibility Tracking report. All can be accessed from the Main Menu of CAIR.

**Non-CAIR Registries**

Q How do you convert 317 to VFC if you are not enrolled in CAIR? We use Healthy Futures.
   A Please contact your local registry manager for information on non-CAIR registries.

Q Will non CAIR IZ registries also reflect the changes in the separation inventory documentations?
We are not familiar with the specifics on the changes that non CAIR IZ registries are making to comply with this new CDC requirement. We would recommend that you contact your local registry manager for more information.

7/23/2014

Q Can we have today’s training slides?
A Slides have been sent to Immunization Coordinators and will also be posted on the Immunization Coordinator’s website.

Q What part does clerical have to do?
A Clerical staff needs to ensure that they do appropriate screening to determine each patient’s eligibility status.

Q Can we order stickers and how?
A Stickers (State, VFC, 317) can be ordered through the Immunization Branch Store. Immunization Coordinators should determine how many stickers are needed for all of their clinics and place a regular order on the Immunization Coordinators website.

Q Do you have private stickers?
A No, unfortunately we do not.

Q Please clarify once again for storage, vaccine can be grouped by type if labeled correctly OR by group (VFC/317/State) is that right?
A Yes, it is at the clinic’s discretion how they want to organize their refrigerator, as long as the vaccine is clearly organized by fund type.

Q How soon will we get the new guideline form to distribute to staff/clerks?
A Additional materials will be sent to Immunization Coordinators the week prior to August 1st.

Q So, before August 1st, will there be new screening guidelines published?
A Yes, there will.
Other

Q Are we required to have 317 available for adults?
   A Local health departments are encouraged to have 317 vaccines for adults, but there is not a requirement.

Q Would you mind clarifying slide 25 “Vaccine Shipments?” Once the changes occur, are you saying that vaccine vials are to be separated out of the boxes and categorized?
   A No, the vaccines should be removed from the large box that they arrived in from McKesson, but they should remain in their individual boxes.

Q Will public health clinics only order 317 vaccines on 8/1? Can they place a VFC order at the same time or should they wait? If they order at the same time will both orders be rushed?
   A If the clinic has already placed their VFC order recently, then they can bypass the VFC Order and just submit their 317 order. However, if they have not placed their routine order, then we actually encourage them to place both orders. If one order is placed, a second order cannot be placed until the pending order is approved. Only 317 orders will be rushed.

Q After the initial phase, 317 orders will be placed at the same time as VFC orders. Since 317 orders must include 317 inventory & doses administered even if no 317 vaccine is ordered, what is the best way to tell providers to track usage and inventory?
   A Providers receiving publicly purchased vaccines from the State Immunization Branch must carefully track and account for doses received, and use them according to eligibility guidelines. Usage and inventory must be reported each time vaccine orders are submitted. This applies to VFC vaccine orders and 317 vaccine orders. To assist providers (not using CAIR or other Immunization Information System) with the documentation and tracking of inventory and usage, 317 Adult Vaccine Usage Logs and 317 Vaccine Inventory forms have been developed and will be posted on eziz.

Q If there are problems with either a VFC or 317 order will it put hold on both orders or will they be shipped separately?
   A Although a VFC and 317 orders can be submitted during the same order submission session, once submitted, they are treated as individual orders. Providers will receive 2 separate e-mail confirmations. If one or
both orders need adjustments or additional information prior to approving the order, providers will receive one or 2 emails requesting corrections. If only one order needs correction, then the approved order will ship. If both orders are approved, vaccine will ship in the same box. The shipment’s packing slip will indicate the order IDs for the VFC order and the 317 order, and doses corresponding to each fund type.

Q How will providers record the CAIR adjustment/transfer of vaccine from VFC to 317 on MYVFC for ordering and accountability purposes? Do they need to transfer the doses on MYVFC as well?

A Not during this initial transition.

Q Will their current inventory be considered all VFC or both VFC & 317?

A All existing inventory (with a few exceptions) will be considered as “VFC Funded” given that mostly VFC funds were used to purchase doses.

Private Vaccines and State Funded Vaccines: Although privately purchased vaccines (including county-purchased vaccines and State General Funded Tdap and flu vaccines) were already clearly labeled and stored in pre-designated areas prior to this transition, new designated areas may be identified based on rearrangement of VFC and 317 vaccines. Label them Private or State GF.

VFC and 317 Funded Vaccines: Prior to this transition, there was no separation of VFC and 317 doses. These doses were purchased with a combination of VFC/317 funds, where the greatest percentage of funding was VFC. Therefore, as inventory is reorganized and labeled, most of these doses will be considered as “VFC Funded.” Label them VFC.

Outbreak Response/Prevention Vaccines: Any inventory of vaccine doses received from the State Immunization Branch for Outbreak prevention and/or response (e.g., Hepatitis A adult doses distributed in response to the Costco berry outbreak), and adult MCV vaccine doses are considered 317 funded vaccines. Label them 317.

Q Will they be starting fresh and not held accountability for missing doses?

A Vaccine accountability is a very important component of overall vaccine management. With initial 317 orders, inventory and vaccine usage will be
reported as -0-. Because in reality, you have not received any 317 funded doses yet. So accounting and tracking for doses will happen once doses are received. However, clinics still have to account for existing inventory doses. Given that most existing inventory will be converted to VFC, all vaccine doses used since the last order submission cycle will be reported on your VFC order. Also, converted inventory will have to be reported in the VFC order.

**Q** Providers haven’t been given any guidance on ordering 317, if they order too many doses, how will they or LACIP determine if it is an appropriate amount?

**A** Initial orders will be reviewed making sure they are appropriate and based on their historical 317 reported usage. Here are a few tips to place initial orders:

- Review the updated Vaccine Eligibility Guidelines to determine what vaccines you can order from 317 funds.
- Determine the number of doses that you will need to order for each vaccine. Consider the following factors when determining your order:
  - The average number of doses administered to 317-eligible patients for each vaccine in the past ordering cycle
  - The volume and types of populations that your clinic serves

If you have received approval from your Immunization Field Representative to convert a limited number of doses from VFC to 317, please have this information ready to enter in the order form. Important Note: Only limited number of doses that were purchased with a combination of funding may be converted to 317. Please refer to your packing slips to determine if you have received vaccines from 317 funds.

**Q** Should providers be told to check physical inventory against CAIR inventory to ensure all vaccine is on CAIR prior to the 8/1 start date? If they don’t, will entering missed vaccine lots later be a problem?

**A** Yes.

**Q** If a provider is on hold/suspended, how will this affect them on 8/1? Will they be able to order 317?
Providers whose account are on hold or suspended will not be able to submit initial orders until the account is restored to active.