



**VFA Program
Webinar Q&A Session
March 29, 2023**

I. Program Updates

1. Q: When does the next ordering period open?

A: April 4, 2023 – April 19, 2023. Please refer to this [VFA Ordering Announcement](#) for more details.

2. Q: Are orders still capped at 10-20 doses?

A: Since the last 2 ordering cycles were lower than projected, the caps have been increased for this ordering cycle.

3. Q: Is supplemental ordering available for VFA providers?

A: The VFA Program does not offer VFA supplemental orders.

4. Q: Will the VFA Program add Meningococcal B vaccine to the order form?

A: Not at this time. Because the program has limited funding, not all vaccines are made available for routine ordering.

5. Q: Who receives the IIS/CAIR Data Reports showing documented/submitted doses to CAIR as “317?”

A: Historically, the reports were sent to the Provider of Record. We are working on posting the reports directly to the clinic's myVFC/VFA account Main Page for easy access to key practice staff (Provider of Record, Vaccine Coordinator, Back Up Vaccine Coordinator, VFA Contact, and Provider of Record Designee).

6. Q: If a patient has Medicare Part D, do they qualify for the Zoster vaccine?

A: If the patient has Medicare Part D alone, they would not qualify for the Zoster vaccine through VFA. They should be covered with their plan and with the new Inflation Reduction Act, have no out-of-pocket costs. Please refer to the [Eligibility Based on Insurance](#) guide.

7. Q: When is the next enrollment period for current non-VFA providers?

A: The VFA program is not currently accepting applications for enrollment at this time. A notification will be given to eligible providers when program enrollment re-opens.

8. Q: Why is it that VFA will no longer carry Pneumo23 (PPSV23)?

A: VFA program vaccines are purchased with limited federal funds called Section 317 funds. The updated CDC pneumococcal vaccine guidance treats PCV20 alone and the series of PCV15 with PPSV23 as equivalent clinical options for the vaccination of eligible adults. After a careful review of the available clinical evidence and program considerations, the VFA program determined that offering PCV20 alone is the best option to maximize limited resources to immunize as many eligible uninsured or underinsured California adults as possible. The [Pneumococcal Timing Guide](#) reflects this offering.

9. Are there plans to add PCV20 to VFA?

A: Yes. PCV20 is now available to order through VFA ordering.

10. Q: Is Hepilisav-B an option brand to order?

A: Yes. Hepilisav-B is available through VFA ordering.

11. Q: If we use our EMR or CAIR to document VFA eligibility is that fine instead of using the VFA eligibility forms?

A: Yes, that should suffice. Please make sure that your EMR system is able to capture the 3 main documentation elements of eligibility screening:

- Date of Screening/Service,
- If they are VFA eligible (Y/N)
- If yes (eligible for VFA), then document the patient's specific eligibility category - *uninsured OR underinsured*.

12. Q: Can you clarify what 317/VFA vaccines can be used for individuals with ADAP? Is ADAP considered uninsured or underinsured?

A: ADAP is not considered an insurance. If a patient is enrolled in ADAP and is either uninsured or underinsured, they can qualify for VFA vaccines. However, we do encourage clinics to use the ADAP benefit first. Access the ADAP Immunization Formulary online for more information.

13. Q: Are VFA vaccines covered through the Family PACT Program?

A: Family PACT is not considered insurance. If a patient is enrolled in Family PACT and is either uninsured or underinsured, they can qualify for VFA vaccines. However, we do encourage clinics to use the Family PACT benefit for HPV vaccination when eligible. Please contact the Family PACT program (Family.Pact@dhcs.ca.gov or 916-650-0414) with questions.

14. If we maintain inventory and usage on our CAIR or EMR systems, are we required to use the 317/VFA forms?

A: No, it is acceptable to use your systems to capture inventory and usage information.

15. Q: Does VFA/317 cover vaccines for patients that don't have private insurance, but make too much money for MHLA or Medical Programs?

A: If the patient is uninsured/underinsured, they qualify for VFA vaccines. Patients who receive primary care through [County Safety Net](#) (Excel file) programs are considered uninsured. We strongly encourage you to utilize vaccine benefits through County Safety Net Programs for VFA-eligible patients as VFA vaccines are available in limited quantities.

16. Q: Will VFA provide flu vaccines for this coming season?

A: The VFA program operates through the 317 budget. Flu vaccine for the uninsured and underinsured population is provided by State General Funds (SGF) as indicated on our [Eligibility Guidelines](#). VFA eligible patients can work with their [Local Health Department](#) to request flu vaccines.

II. CAIR and Digital Vaccine Record (DVR)

1. Q: Does AB 1797 include vaccinations administered in pharmacies?

A: Yes, this includes vaccinations administered in pharmacies.

2. Q: Are there plans for additional languages beyond English?

A: The DVR supports several other languages: Spanish, Chinese, Korean, Arabic, Tagalog, Tien Viet.

3. Q: Is there a way for someone to share their digital vaccine record (DVR) with others easily via email perhaps?

A: Yes. They can download their DVR as a PDF, then share the PDF as desired. The vaccine record can also be saved in Apple Health. Unfortunately, those are the only options available right now. There are plans to add vaccines to Google Health (when it's available).

4. Q: What is the best way to reach out to data exchange? What type of information should we provide to the CAIR data exchange contacts?

A: CAIRDataExchange@cdph.ca.gov. To get started with Data Exchange, please visit [4 Steps to Data Exchange \(ca.gov\)](#) instructions.

5. Q: Are pharmacies now required to participate in the CAIR?

A: Yes, pharmacies are required to be enrolled in CAIR and enter administered immunizations.

6. Q: If a patient's titers results require for the patient to be revaccinated for Hep B, is there a feature on CAIR to restart the Hep B series to reflect doses due?

A: There's no feature in CAIR to "restart" a series. If no doses have been given, then the CAIR system will prompt the start of the Hepatitis B series.

III. ACIP Updates

1. **Q: What if a patient does not know what type of pneumococcal vaccine they have received in the past?**

A: If previous pneumococcal vaccine status is unknown, the [Pneumococcal Timing Guide](#) will provide two options for recommendation.

IV. Resources

1. **Q: Will slide deck for this presentation be provided to attendees?**

A: Yes. After this webinar, the recording and slides will be available on the [VFA Resources Page](#).

2. **Q: Where can I find the new Hepatitis B Screening Guide (IMM-1453)?**

A: It is published on the new [Hepatitis B Resources Page](#), and there is this direct link: <https://eziz.org/assets/docs/IMM-1453.pdf>

3. **Q: Do you have the 317 Eligibility Screening Form (IMM-1226) in Spanish?**

A: Yes! Here is the direct link: <https://eziz.org/assets/docs/IMM-1226S.pdf>

4. **Q: What was the American Academy of Family Physicians (AAFP) assessment app for phones?**

A: Here is the link to the [AAFP app](#) to help you assess patients for needed vaccines.

5. **Q: Does the Hep B resource address accelerated schedule for travel?**

A: The new job aid does not address this in specific detail, but guidance is available on [CDC's Traveler's Health webpage](#).

6. **Q: Can you provide the link to the CDC PCV Timing resource?**

A: <https://www.cdc.gov/vaccines/vpd/pneumo/downloads/pneumo-vaccine-timing.pdf>