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VFC Update Community Vaccination Program IQIP Help Box Education & Training Registry/HIR



A PUBLICATION OF THE HAWAII DEPARTMENT OF HEALTH'S IMMUNIZATION BRANCH

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"Hawaii VFC News" is a quarterly publication distributed to all participating Vaccines for Children (VFC) providers. Its purpose is to address VFCrelated issues, provide general immunization information, and keep you up to date with the latest program changes.

current VFC/COVID updates >>>

COVID-19 FAQs



How are VFC COVID-19 vaccines being distributed?

3.

Moderna and Novavax vaccines are distributed by McKesson. Pfizer vaccines are supplied via direct shipment from Pfizer, similar to current distribution of Varicella and MMRV vaccines directly from Merck.



Are VFC Providers required to order and administer the new 2023-24 COVID-19 vaccines?

Yes! According to the VFC Provider Agreement (see excerpt, below), VFC providers must offer and administer all ACIP-recommended vaccines included in the VFC program, unless they are considered a "Specialty Provider" that 1) Serves a defined patient population due to practice specialty (e.g., OB/GYN, STI Clinic, Family Planning) or 2) Serves a specific age group within the general population of children ages 0-18 (e.g., birthing hospitals serving newborns only).

For the vaccines identified and agreed upon in the provider profile, I will comply with immunization schedules, dosages, and contraindications that are established by the Advisory Committee on Immunization Practices (ACIP) and included in the VFC program unless:

- a) In the provider's medical judgment, and in accordance with accepted medical practice, the provider deems such compliance to be medically inappropriate for the child;
 - b) The particular requirements contradict state law, including laws pertaining to religious and other exemptions.

Are there any "extra" requirements for COVID-19 vaccinations distributed through the VFC program such as separate screening forms, additional documentation, wastage

No. The 2023-24 COVID-19 vaccines are fully incorporated into the VFC program as routine vaccinations for administration to VFC-eligible patients. The same VFC requirements that apply to all other vaccines distributed through the VFC program will apply. There is no separate COVID-19 vaccine agreement, eligibility criteria, or other documentation requirements.

2023-24 COVID-19 vaccines will be supplied **without** accompanying ancillary supplies, including COVID-19 Vaccination Record Cards. CDC has emphasized that the 2023-24 COVID-19 vaccines should be incorporated into routine practice so providers may document administration in the same manner as all other routinely administered VFC vaccines. COVID-19 Vaccination Record cards do not need to be issued to patients/parents

COVID-19 FAQs (contd)

How do I dispose of expired/wasted COVID-19 vaccines?

COVID-19 vaccines distributed through the VFC program may be returned in the same manner as all other VFC-distributed vaccines. spoiled/expired vaccines) should be reported via HIR or the VFC Vaccine Loss Reporting form and may be returned to the CDCcontracted vaccine distributor (McKesson). Opened vials (e.g., partially used multidose vials) should be reported as wastage (either via HIR or the VFC Vaccine Loss Reporting Form) and disposed of at your office/facility. McKesson will not accept returns of opened/used vials.



My office is concerned about wastage of COVID-19 vaccines supplied in multidose vials (e.g., Pfizer 6m-4y vaccine supplied in 3dose vials) – any advice for providers?

CDC is aware of the limitations of vaccines supplied in multidose vials (MDVs) and will not penalize providers for wastage related to partially used MDVs. Providers are encouraged not to miss an opportunity to vaccinate, even if it means just one

dose from an MDV will be used. Your patient's health and protection are more important than a wasted vial. Note, when planning vaccinations, providers

may elect to group patients on certain days/times in the effort to maximize doses drawn from MDVs. If wastage remains a concern, another option could be to only stock and administer COVID-19 vaccines that are supplied in single-dose vials.

Are VFC Providers required to observe patients for 15-30 minutes after administering COVID-19 vaccinations?

According to <u>Clinical Guidance for COVID-19 Vaccination | CDC</u> (see excerpt, below), vaccination providers are encouraged to "consider" observing vaccine recipients following vaccination for 15-30 minutes. It is not an absolute so you may decide to implement at your own discretion, i.e., as you have for all other routinely administered VFC vaccines.

Post-vaccination observation period

Syncope (fainting) might occur in association with any injectable vaccine, especially in adolescents. In accordance with General Best Practice Guidelines, vaccination providers, particularly when vaccinating adolescents, should consider observing vaccine recipients for 15 minutes after vaccination.

Additionally, providers should consider observing people with the following medical histories for 30 minutes after COVID-19 vaccination to monitor for allergic reactions:

- Allergy-related contraindication to a different type of COVID-19 vaccine
- Non-severe, immediate (onset within 4 hours) allergic reaction after a previous dose of COVID-19 vaccine

• Anaphylaxis after non-COVID-19 vaccines or injectable therapies See also <u>Contraindications and precautions</u>.





When will there be a VIS for Comirnaty (Pfizer for ages 12 years and older) and Spikevax (Moderna for ages 12 years and older)?

At this time we do not have an anticipated timeline for a VIS for the COVID-19 vaccines for ages 12 years and older (Comirnaty and Spikevax). It is possible, particularly for a newly-approved vaccine, that the vaccine could become available before a VIS can be produced. The law does not require that a vaccine be withheld if a VIS for it does not yet exist.

Until a VIS is available for a particular vaccine, a provider may use the manufacturer's package insert, written FAQs, or any other document – or produce their own information materials – to inform patients about the benefits and risks of that vaccine. Once a VIS is available it should be used; **but providers should not delay use of a vaccine because of the absence of a VIS.** <u>Vaccine Information Statement | Frequently</u> <u>Asked Questions | VIS | CDC</u>

The following are alternate resources that providers may share:

- Moderna 12y+ (Spikevax): "Information for Recipients and Caregivers" <u>PPI-0017 Spikevax-</u> 2023-2024-Formula-Patient-Information-12y-US-English.pdf (modernatx.com)
- **Pfizer 12y+ (Comirnaty):** "Important Safety Information" <u>COMIRNATY® (COVID-19</u> Vaccine, mRNA) | Safety Info.

community vaccination program >>>

October 2023 Influenza Campaign

The best way to prevent influenza is by getting vaccinated. To combat the ever-changing influenza viruses, a yearly flu shot is recommended to keep up with the most current strain and boost your body's immunity to it! Flu season typically occurs during the Fall and Winter months of each year; this makes October the most optimal time to get the flu shot and kick-start this flu campaign.

The campaign aims to increase seasonal influenza vaccination rates specifically in high-risk groups such as adults aged 65 years and older, pregnant women, young children, health care workers and people with



underlying health conditions. Vaccination is the best defense we have againstlu flu-related illness, hospitalization, and death. Getting vaccinated helps protect **YOU**, your loved ones, and your community!

DOH is seeking Community Vaccination Provider participation in our October Flu Campaign. If interested, please e-mail or call our DOH Community Vaccination Program Specialist, Bridget Anthony. Email: <u>bridget.anthony.nsw@doh.hawaii.gov</u>/Phone: 808-927-9294



Level up your vaccination skills with IQIP – the Immunization Quality Improvement for Providers program. Join our super squad of experts, unleash your potential, and become the champion of immunization quality. It's time to save the day and make shots so smooth, even superheroes will envy your skills. After all, it's for our keiki!

Take this 1-minute survey to see where youstand with IQIP!

If you have any questions concerning the survey, or about the program in general, please email Danrie Miral at <u>danrie.miral.nsw@doh.hawaii.gov</u>



help box Running low on vaccines? Expecting an increase in patients? Need to place a new VFC vaccine order ASAP to make sure everything is readily in stock and available?

We are here to help!

To avoid delays, best practice is to submit your VFC vaccine order via Hawaii Immunization Registry (HIR).

If you haven't transitioned to placing VFC vaccine orders through HIR yet and still submit paper order forms, please ensure that the order forms are completed in their **entirety**. Please be sure to include: Organization name, VFC Provider Identification Number (PIN), and complete On-Hand Inventory.

If any key information is missing, it will delay processing.

If you have any questions or require further assistance, please send us an e-mail: <u>doh.hawaii.vfc@doh.hawaii.gov</u> or call (808) 586-8300 (Oahu) or 1-800-933-4832 (toll-free).



education & training

Lots of new things are happening in our Vaccine for Children's *Program! Please see below some educational resources that can help* guide you through the updates and changes.



VFC Administration Fee

Quick Links

Our VFC Toolkit is now online!

HDOH VFC Toolkit.

Healthcare Provider COVID-19 Vaccine Training Module

COVID-19 Vaccine **Training Module** (cdc.gov)

Vaccine Expiration Date and Beyond Use Date or Time Video Series

 Vaccine Expiration Date and Beyond Use Date or **Time Video Series** (phf.org)

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VFC providers must not charge more than the administration fee cap of \$23.11. This is the maximum vaccine administration fee established for the State of Hawaii by the Centers for Medicare and Medicaid Services (CMS).

Storage & Handling

Needing to purchase a new storage unit for your VFC vaccine?

Prior to purchase, please contact the Hawaii VFC Program to ensure that your new unit meets VFC requirements. Once you have received your storage unit, we will also need 5 days of downloaded digital data logger (DDL) data showing stable temperatures prior to your using the new unit for VFC vaccine storage.

Currently using both sections of a household/commercial combination refrigerator/freezer unit to store your VFC vaccine?

Should you experience temperature excursions in the freezer section of your combo unit that can't be attributed to another cause (e.g., power outage), purchase of a stand alone freezer unit is required.

Providers enrolled after July 1, 2024, will not be allowed to use the freezer compartment of a household/combination unit to store vaccine.

VFC Dual-Coverage Eligibility/Billing

Child's Insurance Coverage	VFC Eligible?	VFC Eligibility Category
Enrolled in Medicaid	Yes	Medicaid
Private health insurance plan with Medicaid as secondary insurance	Yes	Medicaid
Private health insurance covers all vaccines, but has not yet met plan's deductible/paid for other services received at visit	No	Insured. This applies even when the primary insurer would deny reimbursement for the cost of the vaccine and its administration because the plan's deductible has not been met.
Private health insurance plan covers all vaccines, but has not yet met plan's deductible or paid for other services received at visit and has Medicaid as secondary insurance	Yes	Medicaid
Private health insurance plan covers all vaccines, but the plan has fixed dollar limit or cap on amount that it will cover	Yes	Insured until fixed dollar limit is met *Underinsured after the fixed dollar limit is reached
Private health insurance plan does not cover all ACIP-recommended vaccines	Yes	*Underinsured, Child can only receive vaccines not covered by the plan
Private health insurance plan, but plan does not cover any vaccines	Yes	*Underinsured. With implementation of Affordable Care Act (ACA), this situation should be rare.

*Underinsured children are eligible to receive VFC vaccines ONLY through an FQHC or RHC.

Option 1: The provider can administer VFC vaccines and bill Medicaid for the administration fee.

In most health care situations. Medicaid is considered the "payer of last resort." This means that claims must be filed with and rejected by all other insurers before Medicaid will consider payment for the service.

This is not true of the vaccine administration fee for Medicaid-eligible VFC children. Medicaid must pay VFC providers the administration fee because vaccinations are a component of the Medicaid Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program.

Option 2: The provider can administer private stock vaccines and bill the primary insurance carrier for both the cost of the vaccine and the administration fee.

If the primary insurer reimburses less than Medicaid for the vaccine administration fee, the provider can bill Medicaid for the balance, up to the amount Medicaid pays for the administration fee. If the primary insurer denies payment of a vaccine and the administration fee, such as in cases where a deductible must be met, the provider may replace the privately purchased vaccine with VFC vaccine and bill Medicaid for the administration fee. The provider must document this replacement on the VFC borrowing form.



Department of Health

Hawaii Immunization Registry

registry/HIR >>>

As a VFC provider, you might dread using HIR to update your inventory or place an order electronically month after month. You might have also run into issues when trying to navigate this

Over the course of the next three months, we will take HIR VFC providers on a journey to simplify the inventory and order management process. More specifically, our goal is to alleviate frustrations and prevent roadblocks providers have when trying to update inventory and place orders.

We'll be breaking down HIR into easy-to-digest steps. These steps will give providers a simple way to understand why updating orders in HIR is important, how everything works together, and the best way providers can save time and improve patient outcomes.

We hope that our VFC providers will join us at one of the sessions we have coming up on our training calendar. We will be reaching out to providers in waves to ensure all providers and facilities are retrained in HIR ordering/inventory input.

If you have already taken part in our first training session, we would love to receive

your feedback if you have not already done so through this **SURVEY**. Feel free to send any questions/concerns you may have to <u>macy.westbrook.nsw@doh.hawaii.gov</u>.

HAWAII DEPARTMENT OF HEALTH IMMUNIZATION BRANCH VFC PROGRAM

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