Kansas Immunization Program Policy

Federal 317 Vaccine and Fully Insured Persons

The Centers for Disease Control (CDC) and its oversight agency, The Centers for Medicare and Medicaid Services, has issued a directive on use of federal 317* vaccine which states:

Effective October 1, 2012, 317 vaccines may no longer be used to vaccinate fully insured individuals.

Fully insured is defined as: "Anyone with insurance that covers the cost of vaccine, even if the insurance includes a high deductible or co-pay, or if the claim for the cost of the vaccine and its administration would be denied for payment by the insurance carrier because the plan's deductible had not been met."

Underinsured is defined as: "A person who has insurance but the coverage does not include vaccines or a person whose insurance covers only selected vaccines or has a cop on vaccine coverage. Children who are underinsured for selected vaccines or have met their capped coverage amount are VFC-eligible to receive VFC vaccines only through a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) or under an approved deputization agreement. "

What does this mean to Kansas VFC providers?

- 1. Providers must plan to have sufficient privately purchased vaccine inventory on hand to vaccinate their insured clients.
- 2. Local health departments (LHDs) may need to communicate to insured persons that effective October 1, 2012, the LHD cannot provide immunization services to them unless the health department stocks private vaccine and can bill the insurance company for the service.
- All VFC providers are required to screen and document the VFC eligibility of each person at every immunization visit and to document this in the permanent record of that person.
- 4. Borrowing VFC vaccine to immunize a fully insured person should only occur on an emergency basis. Failure to stock adequate privately purchased vaccine is not an emergency.
- 5. Local health departments may need to have discussions with non-immunizing providers in their county and explain they can no longer vaccinate insured persons if the health department does not carry all vaccines in their private stock, is not a contracted provider with the insurance company in question, or the person is enrolled in a

- managed care product which requires they seek service from a designated primary care provider.
- 6. Accurate accountability by VFC providers, for each dose of vaccine supplied by the Kansas Immunization Program, is paramount to assuring continuation of 317 funding.
- 7. S-CHIP children (Health Wave 21) are insured therefore, they are not VFC-eligible rather their vaccines are funded by state dollars. The person's eligibility at the time of service determines the funding source used to pay for the vaccines at each immunization visit.
- 8. Eligibility for VFC vaccine may be determined several ways (this list is not all inclusive):
 - a) Check KMAP (Medicaid web site) for HW 19 or 21 document or copy the card and information from the web site;
 - b) Contact the insurance company of the insured, ask for written confirmation of the coverage for vaccines, and document with whom who you spoke, what was said and date of the call;
 - c) Copy the insurance card and place in the person's permanent record- update this at each visit;
 - d) Document the person's status at every immunization visit in the permanent record;
 - e) Report all persons served with program vaccine by age and eligibility on the monthly immunization report (MIR) or in KSWebIZ. Please note- HL7 providers need to complete and submit paper monthly immunization reports.
- 9. VFC eligibility and vaccine availability is determined by the accuracy of the data submitted by VFC providers.
- 10. Submit monthly immunization reports or KSWebIZ reconciliations by the 10th of the month following service.

*317 Vaccine is vaccine purchased by the CDC under a Congressional discretionary budget approval process each year. These vaccines are allocated to state immunization programs to help immunize designated people who are not VFC-eligible. VFC-eligibility includes the Uninsured, Medicaid or Health Wave 19, American Indian/Alaskan Native, and Underinsured, when served at a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC), or approved deputized provider.

A non-comprehensive list of 317 eligible and non-eligible is attached.

Persons NOT Eligible for 317-Funded Vaccine in Kansas (these lists are not all inclusive):

Fully insured children and adults seen in public clinics.

Fully insured children and adults seen in private provider offices.

Adults on Medicare Part B or Medicaid.

Fully insured adults seen in STD/HIV clinics or drug treatment centers.

Fully insured parents of newborn infants participating in Tdap cocooning projects.

Fully insured adults at high risk for acquiring Hepatitis A.

Fully insured children and adults with a high co-pay or deductible.

Vaccines for college entry given at Public Health Clinics or College health facilities to

fully insured students.

Fully insured children and/adults in low medical access areas.

Fully insured adults in LTCs/eldercare.

Fully insured children in school-based health centers or clinics.

Fully insured "high risk" occupational groups (e.g. EMS, first responders, health care

workers) for hepatitis A or B or other diseases.

Fully insured adults and children receiving vaccines as part of a community wide

outreach event (including mobile vans and health fairs).

Children who are insured by SCHIP standalone programs.

Children or adults who see out-of network providers as stipulated in their insurance contract.

Persons Eligible for 317-Funded Vaccine under the Kansas Immunization Program:

Newborns receiving the birth dose of hepatitis B prior to hospital discharge that are covered under bundled delivery or global delivery package (no routine services can be individually billed) that does not include hepatitis B vaccine.

Uninsured adults.

Public health response activities: outbreaks, post-exposure prophylaxis, disasters.

Underinsured VFC-eligible children immunized in a FQHC, RHC or approved deputized Local Health Department.

317-KIP Policy: August 2012