IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

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IMPORTANT MESSAGE FOR VFC PROGRAM

TO: VFC Providers
FROM: Linda Kasebier, MPH, MSHS, VFC Administrator
CC: VFC Compliance Staff, Immunization Leads, IDPH RHO's, LHD Immunization Directors – Statewide, and LHD Administrators
DATE: September 30, 2016
SUBJECT: TRANSITION PERIOD FOR CHIP VACCINES

As you are aware, the Illinois Department of Public Health announced a restructuring of the current program related to vaccines for children covered under the state's Child Health Insurance Program (CHIP). These changes were outlined in a memorandum to all Illinois VFC providers dated August 22, 2016. As a result of concerns raised by Illinois VFC providers, IDPH has obtained authorization from the Centers for Disease Control and Prevention (CDC) to utilize a limited supply of federal funds to purchase vaccines during an eight-week transition period to ensure that children in the CHIP program will have access to needed vaccines as providers change their processes to accommodate this program change. The Chicago Department of Public Health (CDPH) will notify provider systems in the city of Chicago of specific transitional procedures under a separate announcement.

The opportunity to utilize these vaccines is only available to currently enrolled Illinois VFC providers who have yet to purchase private stocks of vaccines to provide to children covered by CHIP. This will be a one-time opportunity to order vaccines for children covered by CHIP. Providers should order only enough vaccines to address the needs of their children covered by CHIP for the next eight weeks. IDPH is not able to guarantee availability and will not make substitutions for any requested vaccines that are no longer available.

Attached is the order form Illinois VFC providers should use in order to request vaccines for use on CHIP enrollees during this transition period. If you have already purchased private vaccine stock, you should follow procedures implemented by the Illinois Department of Healthcare and Family Services (HFS) for reimbursement and NOT place an order for these transitional supplies.

This ordering opportunity is available until November 26, 2016 or as long as funding is available. During this transition period, Illinois VFC providers should continue to implement the changes outlined in the IDPH August 22, 2016, letter to Illinois VFC providers. It is critically important that providers check the eligibility status of children in the HFS MEDI system (http://www.illinois.gov/hfs/MedicalProviders/EDI/medi/Pages/default.aspx) **at each immunization encounter.** Providers receiving the 317-funded vaccines for children covered by CHIP are required to enter or transmit the patient records to I-CARE showing how each dose was administered. The patient eligibility must be recorded as "V22 CHIP."

VFC providers are required to maintain these vaccines (317-funded vaccines) separately from their VFC and privately purchased vaccines. The vaccines must be clearly labeled and identified as 317-CHIP vaccines. **The 317-CHIP vaccines may only be administered to children through the age of 18 who have verified CHIP coverage in MEDI.** Dose-for-dose replacement with privately purchased vaccines will be required for any vaccines that are lost, wasted, inappropriately administered, or otherwise unaccounted for, as described in the Vaccine Loss and Replacement policy, and the provider's ordering privileges may be suspended until replacement is made.

We sincerely appreciate your continued assistance in ensuring that children who are covered under CHIP get the care they need. For assistance with the VFC program, please contact us at email DPH.Vaccines@illinois.gov or in I-CARE by clicking on "Contact Us" and select "VFC Illinois" as the category.

Please review and post all VFC notices so that all staff involved in vaccine administration, management, patient screening, and billing are aware and receive updated protocols as necessary to comply with VFC program requirements.

Illinois Department of Public Health

VACCINES FOR CHILDREN (VFC) PROGRAM - Phone: 217-786-7500
317 FUNDED VACCINE ORDER FORM
FAX: 217-786-7506 OR E-MAIL: DPH.VACCINES@ILLINOIS.GOV

DATE	VFC PIN NUMBER (6 digit)

VFC PROVIDER FACILITY NAME	VFC CONTACT

DELIVERY ADDRESS (Number and Street - No P.O. Boxes) MUST MATCH THE ADDRESS ON THE VFC ENROLLN	CITY	ZIP CODE

TELEPHONE	FAX	E-MAIL (REQUIRED)

DELIVERY: Complete all days and hours you may receive a vaccine delivery. If you are closed during lucnh hour, please specify.	**Mon**	From:	to:	Closed for lunch from:	to:
	Tue	From:	to:	Closed for lunch from:	to:
	Wed	From:	to:	Closed for lunch from:	to:
	Thur	From:	to:	Closed for lunch from:	to:
	Fri	From:	to:	Closed for lunch from:	to:

Please complete all sections on this order form in order for VFC to process your vaccine order.

	Vaccine	Doses Requested	Check preferred presentation
DTaP/ Hep B / IPV	Pediarix®		☐ 10-Pack SYR
DTaP/ IPV / HIB	Pentacel®		☐ 5-Pack SDV
DTaP / IPV	Kinrix®		☐ 10-Pack SDV
			☐ 10-Pack SYR
DTaP	Daptacel®		☐ 10-Pack SDV
DTaP	Infanrix®		☐ 10-Pack SDV
			☐ 10-Pack SYR
Hepatitis A	Havrix®		☐ 10-Pack SDV
			☐ 10-Pack SYR
Hepatitis A	Vaqta®		☐ 10-Pack SDV
Hepatitis B	Engerix B®		☐ 10-Pack SDV
			☐ 10-Pack SYR
Hepatitis B	Recombivax®		☐ 10-Pack SDV
Hib	ActHIB®		☐ 5-Pack SDV
Hib	PedvaxHIB®		☐ 10-Pack SDV
HPV	Gardasil®		☐ 10-Pack SDV
MEN (MCV4)	Menactra™		☐ 5-Pack SDV
MEN (MCV4)	Menveo®		☐ 5-Pack SDV

	Vaccine	Doses Requested	Check preferred presentation
MEN-B	Bexsero®		☐ 10-Pack SYR
			☐ 1-Pack SYR
MEN-B	Trumenba®		☐ 10-Pack SYR
MMR/VAR	ProQuad®		☐ 10-Pack SDV
MMR	MMR II®		☐ 10-Pack SDV
PNE	Pneumovax 23®		☐ 1-Pack SDV
PNE	Prevnar®		☐ 10-Pack SYR
POL	IPOL®		☐ 1-Pack MDV
ROT	Rotarix®		☐ 10-Pack SDV
ROT	Rotateq®		☐ 10-pack Oral Dose
Td	Tenivac®		☐ 1-Pack SYR
Tdap	Adacel®		☐ 10-Pack SDV
			☐ 5-Pack SYR
Tdap	Boostrix®		☐ 10-Pack SDV
			☐ 10-Pack SYR
VAR	Varivax®		☐ 10-Pack SDV

SYR=Syringe, SDV=Single Dose Vial, MDV=Multi-Dose Vial

REQUIRED FOR PROCESSING

SIGNATURE OF PHYSICIAN ON VFC ENROLLMENT REQUIRED

DATE

IDPH USE ONLY

Approved			Initials		
Entered			Provider Notified		

Allow 2-3 weeks for the processing and delivery of your vaccine order.
Notify us immediately by PHONE of any change of address or delivery hours/days: Phone 217-786-7500