



Vaccines for Children (VFC) Program Patient Eligibility Screening Record Form

A record of all children 18 years of age or younger who receive immunizations must be kept in the health care provider's office for 3 years or longer depending on state law. The record may be completed by the parent, guardian, individual of record, or by the health care provider. VFC eligibility screening and documentation of eligibility status must take place with each immunization visit to ensure the child's eligibility status has not changed. While verification of responses is not required, it is necessary to retain this or a similar record for each child receiving vaccine. Providers using a similar form (paper-based or electronic) must capture all reporting elements included in this form.

1. Child's Name: _____ 2. Child's Date of Birth: ____/____/____
Last Name First Name MI

3. Parent/Guardian/Individual of Record: _____
Last Name First Name MI

4. Provider's Name: _____
Last Name First Name MI

5. To determine if a child (0 through 18 years of age) is eligible to receive publicly funded vaccine through the VFC or state programs, at each immunization encounter/visit enter the date and mark the appropriate eligibility category. *If Column A-D is marked, the child **are** eligible for the VFC program. If column E, F or G are marked the child is **not** eligible for federal VFC vaccine*.*

	Eligible for VFC Vaccine				Not eligible for VFC Vaccine		
	A	B	C	D	E	F	G
Date of Immunization visit	Medicaid Enrolled (VFC stock)	No Health Insurance (VFC stock)	American Indian or Alaska Native (VFC stock)	VFC ¹Underinsured served by FQHC, RHC or deputized provider (VFC stock)	Has health insurance that covers vaccines (Private stock)	²SC State Underinsured, Served by Non-FQHC/RHC (State stock)	³SC State Insured, Insured Hardship (State stock)

¹**Underinsured** includes children with health insurance that does not include vaccines or only covers specific vaccine type or children who have health insurance, but there is a fixed dollar limit or cap for vaccines. Children are only eligible for vaccines that are not covered by insurance. In addition, to receive VFC vaccine, underinsured children must be vaccinated through a **Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) or under an approved deputized provider**. The deputized provider must have a written agreement with an FQHC/RHC and the state/local/territorial immunization program in order to vaccinate underinsured children.

²**SC State Vaccine Program Underinsured:** These children are underinsured but are not eligible to receive federal vaccine through the VFC program because the provider or facility is not an FQHC/RHC or a deputized provider. However, these children may be served with state vaccine program vaccine to cover these non-VFC eligible children. Only providers enrolled in the SC State Vaccine Program are eligible to serve this population. You must have SC State Vaccine program vaccine stock prior to seeing this patient population.

³**SC State Vaccine Program - Insured and Insured Hardship:** These children are considered insured and are not eligible for vaccines through the VFC program. However, these children may be served state vaccine program vaccine to cover these non-VFC eligible children. Insured Hardship is defined as "Health Insurance deductible is greater than **\$500.00** per child or **\$1000.00** per family (Eligible for state vaccine only if the deductible has not been met and the family cannot afford to pay for vaccine)." Only providers enrolled in the SC State Vaccine Program are eligible to serve this population. You must have SC State Vaccine program vaccine stock prior to seeing this patient population.

***Note:** For the purposes of the VFC program, the term 'vaccine' is defined as any FDA-authorized or licensed, ACIP-recommended product for which ACIP approves a VFC resolution for inclusion in the VFC Program.

South Carolina Department of Health and Environmental Control

Vaccines For Children (VFC) Program Patient Eligibility Screening Record Form

Purpose:

The purpose of this form is to provide screening and documentation of the eligibility status at each immunization encounter (visit) for the Vaccines for Children (VFC) program for children 18 years of age or younger, prior to administration of vaccine(s). In addition, screening and documenting eligibility status for the state vaccine eligible child through the South Carolina State Vaccine Program at each immunization encounter (visit) is also required. This form captures the documentation for screening all categories of VFC and non-VFC eligible children seen in the VFC provider's office during immunization encounters (visits). Screening and Documentation of eligibility statuses is a requirement for all providers enrolled in the vaccine programs. All information must be entered into SIMON no later than 10 business days from date of administration of vaccine per S.C. Code Ann. § 44-29-40 and the South Carolina Immunization Registry Regulation, S.C. Code Ann.Regs. 61-120 (Supp. 2013).

General Instructions for Use:

The Vaccines for Children (VFC) Patient Eligibility Screening Form will be completed by the parent, guardian, individual of record, or healthcare provider staff prior to administration of vaccine(s) for every immunization encounter (visit).

Item-By-Item Instructions:

- Complete the Child's Name, Child's Date of Birth, Parent/Guardian/Individual of Record, and Provider's Name.
- Assess client's eligibility for appropriate funded vaccine. All fields must also be entered in SIMON to be compliant with VFC Requirements.
 - Record the date of immunization encounter (visit).
 - Providers entering by direct data entry **must** select all appropriate eligibility fields in SIMON (patient VFC Eligibility, Dose Eligibility, and Funding Source for administered vaccine).
 - Providers entering via HL7 **must** select the following eligibility fields via the EHR/EMR (patient VFC Eligibility, Dose Eligibility, and Funding Source for administered vaccine).
- After determination of eligibility category, mark the appropriate column or field within providers EHR/EMR or SIMON if direct data entry:

Eligible for VFC Vaccine:

- A) Medicaid-Enrolled (VFC Stock)
- B) No Health Insurance (VFC Stock)
- C) American Indian or Alaska Native (AI/AN) (VFC Stock)
- D) ¹Underinsured, served by FQHC, RHC or deputized provider (VFC Stock)

Not Eligible for VFC Vaccine:

- E) Has Health Insurance that covers vaccines (Private Stock)
- F) ²SC State Underinsured, served by Non-FQHC/RHC (State Stock)
- G) ³SC State Insured, Insured Hardship (State Stock)

Office Mechanics and Filing:

The completed Vaccines For Children (VFC) Patient Eligibility Screening Record Form must be kept for (3) years from most recent date of immunization visit in the providers office.

Under Retention schedule 15726 Record Group Number 169
Retention: 3 years, destroy