VFC Update June 2016

317 Frequently Asked Questions

We carry adult vaccines for a fee, why should we still offer 317 vaccines?

Even though everyone *should* have insurance does not mean everyone *does* have insurance or that their insurance covers vaccines, so you may still have adults who are uninsured or underinsured who qualify for the vaccine.

We only see children so why should we carry 317 vaccines for adults?

Children who qualify for the VFC program may have adult family members who are uninsured or underinsured and need to be vaccinated. If you have WIC, STD, or Family Planning Clinics that service adults, they may be eligible for 317 vaccines.

What is the definition of underinsured?

The CDC defines underinsured as a person who has health insurance, but the coverage does not include vaccines or a person whose insurance covers only selected vaccines. Children who are underinsured for selected vaccines are VFC-eligible for non-covered vaccines only. Underinsured children are eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC), or an LPHA. Those individuals with a high deductible health care plan do NOT meet the definition of underinsured. They are considered fully insured.

What is the definition of fully insured?

The CDC defines fully insured as anyone with insurance that covers the cost of vaccine, even if the insurance includes a deductible or co-pay, or if a 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.

How do I know if an individual who wants to be vaccinated is insured or not?

If you ask the individual if they are insured and they answer no, then you document them as uninsured and give them 317 vaccine. CDC does not need proof of an individual being uninsured. You may ask them to sign the documentation that they are uninsured.

Can we use our 317 adult vaccine for immigrants and refugees?

Immigrants and refugees fall under the same guidelines as other adults in the state. They can only receive 317 adult vaccine if they are uninsured or underinsured.

Can we charge for 317 vaccines?

Yes, you may charge an administration fee of up to \$21.53/ per stick but you may not charge for the vaccine itself as it is provided free of charge.

Can I take my 317 vaccine out to do an Influenza clinic at a local shelter?

Yes, you can take your 317 vaccine out to do a clinic, as long as proper cold chain is followed. The people who receive the vaccines must be uninsured or underinsured adults, unless it is a mass vaccination effort that has been approved by the Bureau of Immunizations.

We get a lot of adults who have Medicaid and Medicare, what do each of those plans cover?

According to the Missouri Department of Social Services, MOHealthNet Division, Medicaid ME 82 (Rx only) and ME 80 or 89 (Family Planning Waiver) do <u>not</u> cover vaccines (unless the individual is a pregnant woman). Those adults **would not be insured for vaccines through Medicaid**, so they would qualify for 317 vaccines because they would be underinsured adults.



VFC Update June 2016

317 Frequently Asked Questions

What does Medicare Part A cover?

Medicare Part A only covers hospital stays, so an individual with only Medicare Part A is not covered for vaccinations so they are **underinsured** for vaccinations and could receive 317 vaccine.

What does Medicare Part B cover?

Medicare Part B only covers the hepatitis B vaccine for high-risk individuals, Tdap/Td for wounds, flu and both pneumococcal vaccines. If an individual only has Medicare Part B, that individual is only covered for those vaccines. That **individual is underinsured** for all the other vaccines and can receive 317 vaccine for those not covered.

What does Medicare Part C cover?

Medicare Part C (Advantage Plan) is an HMO or PPO and includes Medicare A, B and D plans. It is purchased through an insurance company. You would have to call the person's Medicare Advantage plan to see what, if any, vaccinations are covered.

What does Medicare Part D cover?

Medicare Part D should cover all vaccines not covered by Part B. Medicare Part D is an optional program that individuals have to buy separately. You may contact Part D plan information by calling 1-800-MEDICARE to find out if an individual's Part D plan covers the vaccine. If it does not cover the vaccine, that individual is underinsured and can have 317 vaccine. If Part D covers that vaccine, then the individual would be fully insured.

A 22-year old individual came in with a dog bite. Their last Tdap vaccine was 11 years ago. They are fully insured. Can I give them a 317 tetanus vaccine? Which tetanus vaccine can I give them?

Because they have a wound from a dog bite and their last tetanus was more than 10 years ago, they can have a 317 tetanus vaccine. If the individual has already received a Tdap, they should just receive a Td vaccine, but if your agency does not have any Td vaccine, administer the Tdap vaccine.

A 36-year old individual came in and requested the hepatitis A vaccine because they are a food service worker. They have insurance, but it only covers Tdap and Flu. Can I give them 317 hepatitis A vaccine because they are underinsured?

In order for an uninsured or underinsured adult to receive a hepatitis A vaccine, that adult must either be a caregiver who has contact with an infant who is 12 months old or younger, or must be a health care worker or getting the vaccine in response to an outbreak. You will need to ask the adult if they meet any of those criteria. If they are a caregiver who has contact with an infant less than 12 months old or if they have another job in the healthcare field where they are required to have the hepatitis A vaccine, and because they are underinsured, they can have 317 hepatitis A vaccine. In order to receive the hepatitis A vaccine in response to an outbreak, the Department of Health & Senior Services Communicable Disease Control & Prevention must have declared the outbreak.

Can an LPHA or pilot FQHC give HPV from Section 317 to a woman 19-26 years of age?

Yes, if the woman has not previously had 3 doses of HPV vaccine and if the woman meets the 317 criteria of uninsured or underinsured. The ACIP recommends males 19 through 21 get 3 doses of HPV vaccine. Males 22 through 26 years of age may get HPV vaccine. The 317 criteria uninsured or underinsured would apply.

A 19 year old, who is underinsured and will start college in the fall, comes in and wants Meningococcal B vaccine, can we give MenB vaccine from 317 funded vaccines?

No, 317 funded vaccines do not included meningococcal B vaccines at this time.



VFC Update June 2016

317 Frequently Asked Questions

A 20 year old uninsured person is enrolling in a Missouri public university that requires Meningococcal conjugate vaccine, can we give MenACWY from 317 funded vaccines?

Yes, the 20 year old qualifies for 317 funded MenACWY because he/she is uninsured and MenACWY is included in the 317 policy.

Can we provide hepatitis B vaccine for employees of facilities for developmentally disabled individuals/group homes?

Yes, if the employees are uninsured or underinsured; they qualify for 317 hepatitis B vaccine. The ACIP recommends hepatitis B for all adults in institutions and non-residential day care facilities for persons with developmental disabilities.

My adult 317 HPV vaccine will expire in 4 months and I just haven't had any adults coming in requesting HPV. What should I do?

You can contact other LPHAs to see if you can transfer the 317 adult HPV vaccine to them for adult use. If another LPHA doesn't want the vaccine you can move it from your 317 adult inventory to your VFC pediatric inventory to use for VFC eligible children.

I have Twinrix vaccine which is short-dated. What should I do with it?

Every attempt should be made to administer the 317 adult vaccine to eligible adults or transfer it at least 90 days before it will expire. Twinrix vaccine cannot be administered to VFC-eligible children and can only be transferred to another LPHA or an FQHC enrolled in our Vaccines for Adults program. The vaccine will need to be replaced by your clinic with private purchased vaccine if no attempt is made to transfer it before the expiration date.

A 65 year old woman with Medicare requested Zostavax. The client's Medicare information was entered into Transact. For Zostavax it indicated the client owes \$234 because her deductible had not been met and the reimbursement to the provider is \$0. We only bill for \$200. Is this person eligible for 317 Zostavax? She is not eligible for 317 vaccine because having a high deductible insurance plan where the deductible has not been met does not qualify an individual to receive 317 vaccine.

A 68 year old man with Medicare requested Zostavax. When his Medicare information is entered into Transact for Zostavax it says that we collect \$105.30 from the patient and the provider will be reimbursed \$125.75. Is he eligible for 317 Zostavax?

No, he is not eligible because his Medicare pays a portion of the vaccine. This would not meet the definition of uninsured or underinsured.

We administered private Zostavax vaccine to a 61 year old man with private insurance and billed his health insurance company. The insurance company has denied reimbursement because Zostavax is not covered under his health insurance. Is there anything we can do so we won't be out of the cost for the vaccination? Yes, because his health insurance said Zostavax is not covered under his plan, he would be considered underinsured for that vaccine. You can replace that private dose with a 317 dose of Zostavax and complete the Borrowing Report Form.

