

FAQ on Changes in the NC Immunization Program (NCIP)
**Information for Local Health Departments (LHDs), Private Providers, Federally
Qualified Health Centers (FQHCs), and Rural Health Centers (RHCs)**

RECENT CHANGES IN THE NCIP

What changes have occurred in the state program?

Several changes were made to the North Carolina Immunization Program (NCIP) based on federal requirement changes at the Centers for Disease Control and Prevention (CDC). They are listed below. More detailed explanation is provided throughout this document:

Effective Oct. 1, 2012

- **Serving Underinsured Children:** Private providers will no longer be able to provide VFC (state-supplied) vaccine to underinsured children. Underinsured children will be able to receive VFC vaccine at FQHCs, RHCs, and LHDs, and a few select private providers meeting specific geographic criteria to improve access to vaccines. For FQHCs, RHCs and LHDs, business will continue as usual.
- **Elimination of Vaccine for Insured Patients:** With very few exceptions, which are outlined in our NCIP Coverage Criteria, fully insured patients of any age will no longer be eligible for any vaccines provided by the NCIP.

When will the changes take place?

These changes will take place on Oct. 1, 2012.

Why did these changes take place?

The primary rationale provided by the CDC for this federal change is that the Affordable Care Act will mandate insurance companies to cover the cost of immunizations by January 1, 2014. However, the CDC is restricting the use of vaccines beginning October 1, 2012 citing the purpose of publicly funded vaccines: to provide vaccines to individuals without any insurance.

What is the impact of these changes?

With few exceptions, vaccines will no longer be provided by the state universally. All recommended vaccines will continue to be provided by the state for children who qualify for the federal Vaccines for Children (VFC) program and in other unique situations outlined in the coverage criteria.

Are there any exceptions that will allow me to provide vaccines to fully insured individuals?

Yes, in the following, limited circumstances:

1. Any patient, regardless of insurance, who has a valid contraindication to pertussis vaccine may receive state-supplied DT from any provider.
2. The birth dose of Hepatitis B vaccine will be provided universally to infants born in North Carolina
3. Hepatitis B vaccine will be provided universally by local health departments only to any individual who was exposed to hepatitis B or is a close contact to an infected individual.
4. 2012-2013 Influenza Coverage Criteria will not be changed on Oct.1
5. Local Health Departments will be able to provide some vaccines universally for the purpose of post-exposure disease management.

VACCINES FOR CHILDREN (VFC)

It is important to understand that the VFC program is a component of North Carolina's medical assistance plan and is considered a Title XIX Medicaid program. Section 1928 of the Social Security Act (42 U.S.C. §1396s) provides for purchase of vaccine for administration to VFC-eligible children using federal funds. The VFC program is a unique component of the federal Medicaid program. In addition to having different eligibility criteria, the VFC program provides services not only to Medicaid-eligible children but also to VFC-eligible children who are not otherwise eligible for Medicaid. Similarly, the VFC program enrolls providers who are not Medicaid providers but who provide immunizations to those who qualify under certain other criteria as defined federally.

What is the Vaccines for Children (VFC) program?

The Vaccines for Children (VFC) program is a federally funded vaccine program for eligible children, age 18 and below. VFC is administered at the national level by the CDC which contracts with vaccine manufacturers to buy vaccines at reduced rates. The North Carolina Immunization Branch, within the North Carolina Department of Public Health, administers this program on a state level. The Branch enrolls physicians into the VFC program as part of the NCIP program. To qualify for enrollment, physicians must serve eligible patients up to and including 18 years of age and provide routine immunizations.

Who is eligible to receive vaccine through the VFC program?

Children through 18 years of age that meet at least one of the following criteria are eligible for VFC vaccine:

- Medicaid eligible,
- Uninsured,
- American Indian or Alaskan Native,
- Unaccompanied minors without proof of insurance presenting to local health department Title X clinics: or
- Underinsured: These are children who have insurance on the date of service, but the insurance does not cover vaccine services for any of the three reasons listed below
 - There is no wellness plan included in the benefits, that is, no preventive services are covered; or,
 - There is a wellness plan, but it has a limit (cap) on services, and that limit has been met; or,
 - The insurance plan "picks and chooses" the vaccines it will cover. For the vaccines not covered, the child may be considered underinsured.

Note: Children whose insurance has an unmet deductible, or whose insurance covers a certain percentage of the vaccine cost (for example, 80%) are considered insured, and are therefore not VFC eligible. Insured children should receive purchased vaccine.

Because of the wellness provisions of the ACA, there will be fewer children whose insurance does not cover vaccine services, thereby reducing the number of underinsured children over the next few years.

Note: Children whose health insurance covers vaccinations are not eligible for VFC vaccines, even when 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 or because the insurance did not cover the total cost of the vaccine.

Which children will still be covered under the VFC program through a private provider?

Children through 18 years of age that meet at least one of the following criteria are eligible for VFC vaccine through a private provider.

- Medicaid eligible
- Uninsured

- American Indian or Alaskan Native

How do I determine VFC status?

Please refer to [Determining Eligibility for VFC Vaccines Flow Chart](#) on the Immunization Branch website.

INSURANCE

How do you know if a patient's insurance covers vaccines?

Providers are required by their contracts to screen patients at every visit for VFC eligibility. This includes determining if the insured patients are underinsured. Underinsured patients (as defined below) may receive state-supplied vaccines in any provider's office until October 1. After that time, only FQHCs, RHCs, LHDs and select private providers may serve underinsured children.

What is the definition of underinsured?

The following children are considered underinsured if:

- they have commercial (private) health insurance but the coverage does not include vaccines*,
- their insurance covers only selected vaccines (in this scenario, only non-covered vaccines may be provided through VFC),
- or their insurance caps vaccine coverage at a certain amount – once that coverage amount is reached, these children are categorized as underinsured.

* Note: Children whose health insurance covers vaccinations are not eligible for VFC vaccines, even when 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 or because the insurance did not cover the total cost of the vaccine.

If a child has to pay a co-pay or meet a deductible, is this considered underinsured?

No.

Are children with the Health Choice plan considered VFC-eligible?

No. North Carolina Health Choice (NCHC) is North Carolina's State Children's Health Insurance Program (SCHIP) program. Children enrolled in this program are considered insured. The only category of children receiving NCHC who are VFC eligible are American Indian/Alaska native. Any patient who self-declares AI/AN status may be administered VFC vaccine, regardless of insurance status, including those with NCHC.

Are all children who have Medicaid as a secondary insurance considered VFC-eligible?

Yes. All children who have Medicaid as a secondary insurance are covered by VFC.

If an American Indian/Alaska Native has insurance that covers vaccines (in full or partially) are they considered VFC-eligible?

Yes. American Indian/Alaska natives are eligible to participate in the VFC program regardless of their insurance coverage.

Are children who are insured and receive services outside of their provider network considered underinsured?

No. If a child's insurance covers all vaccines at an in-network provider, that patient would not be considered underinsured regardless of where they receive services.

Who determines underinsured status of a patient? The patient, parent or the provider?

Providers should work closely with their patients to determine the level of vaccine coverage provided by their insurance policy. Providers should work closely with insurance companies to determine if they are in-network providers and the vaccination coverage provided per policy.

If a patient has insurance and it covers a portion of the vaccine cost, are they considered underinsured?

No. If a patient's insurance covers vaccine, they are considered insured, even if that coverage is less than the cost of the vaccine. The patient must receive vaccine from your private supply.

If the insurance pays for females to get HPV but not males, are the males considered "underinsured?"

Yes. If a male patients' insurance will not cover the cost of HPV, they would be considered underinsured for HPV only. If you have the authority to administer vaccine to underinsured patients, you may administer a dose of state-supplied HPV in this circumstance, but the patient must receive vaccine from your private supply for all other vaccines that the insurance covers. If you are not authorized to administer vaccines to underinsured patients then you should refer the client to an authorized agency (such as LHDs, FQHCs and RHCs) for HPV vaccine.

If a patient reports themselves as "insured" and a non-deputized provider vaccinates with their private supply and finds out later that the patient's insurance does not cover vaccines, may the provider charge the patient out-of-pocket for those vaccines or does the provider have to absorb the cost?

The child is not VFC eligible at the time of the visit since they presented with insurance or when it was determined they were underinsured (VFC eligible). Because the provider is not deputized to vaccinate the underinsured then the provider could choose to bill the parent or waive the fee.

If a patient states that they are underinsured, does the provider need to verify that answer?

No. State-supplied vaccine can be provided based on a patient's statement of their eligibility.

Can health departments administer state-supplied vaccine to individuals if the health department is unable to bill insurance for vaccines?

Unfortunately, no. We will not be able to provide vaccine for insured patients under these circumstances.

Can a patient who has insurance but does not want to use it qualify for state-supplied vaccine?

Unaccompanied minors through age 18 are considered uninsured by the CDC and allowed to receive VFC vaccine. Adults 19 years or older may not receive state-supplied vaccine if they have insurance, even if they choose not to use it.

Can insured American Indian/Alaskan Native adults receive state-supplied vaccine?

No. All insured adults should receive private vaccine regardless of race and ethnicity.

How does NCIP define adult women of "child bearing age?"

Women aged 19 years to 44 years. (Women or girls aged 18 years or younger are subject to VFC eligibility.)

Do providers have to screen a woman of childbearing age for a hysterectomy or tubal ligation in order to give state-supplied MMR's?

No any uninsured woman of child bearing age qualifies for two doses of MMR at the local health department.

If a patient claims that they do not have insurance, but it is later determined that they do, does the practice have to pay back the state dose?

No. Patient report is the only requirement for vaccination.

MANAGING INVENTORY

Will state-supplied vaccine that is in stock on 10/1/12 be allowed to be given to underinsured children?

Yes. These changes affect all vaccine received in provider offices after Oct. 1, 2012. Vaccine that providers have on hand prior to Oct.1 may continue to be used according to the existing NCIP Coverage Criteria (dated July 24, 2012) until that vaccine expires or until Dec. 31, 2012, whichever comes first. After Dec. 31, all state-supplied vaccine must be used according to the coverage criteria dated Oct. 1 or later.

Will LHDs, FQHCs and RHC's be prepared to give vaccine to patients who have been referred from private offices?

All of these types of providers already carry state-supplied vaccine for this purpose. The underinsured population in North Carolina is estimated at 6%. We anticipate these agencies will do their best within existing policy to provide immunization services to the underinsured population.

If a private provider administers a private purchased vaccine to an underinsured patient can they replace their private supply with VFC vaccine?

No. Providers will no longer be able to replace doses of VFC vaccine into their private stock when they discover that a patient who has been given purchased vaccine is underinsured.

If I vaccinate a child with private vaccine and then later find out that they are uninsured or on Medicaid, may I pay my private stock back with a state vaccine?

Yes. All NCIP providers are able to provide uninsured and Medicaid patients with state-supplied vaccine. The payback should be documented on the Borrowing and Replacement Form.

If a private provider who is not deputized mistakenly vaccinates an underinsured patient with state-supplied vaccine, how should they correct the error?

To avoid this difficult situation, it is very important for patients and providers to understand the coverage offered by a broad range of insurance plans. Because they may not use state-supplied vaccine for underinsured patients, the provider would need to replace the state-supplied dose with a privately purchased dose of vaccine. The provider would need to contact the NCIP helpdesk to correct their NCIP vaccine inventory.

Am I obligated to refer an underinsured patient to a provider where they can obtain the vaccine free of charge?

No. If a provider or patient knows that the patient is underinsured, that patient should be told that they can receive state-supplied vaccine at other facilities within the state, but if the patient chooses to be vaccinated in their medical-home, providers are permitted to vaccinate from their private supply and bill the patient out-of-pocket for the cost of vaccine.

What if I have excess vaccine on December 31, 2012?

Providers should be ordering no more vaccine than they can use in three months, so this should occur very rarely. If, as December approaches, you find that you have more vaccine than can be used before it expires under the new coverage criteria, please contact the Immunization Branch.

PROVIDER INFORMATION

Where can the names, locations and contact information of LHDs, FQHCs and RHCs be located?

A list will be provided on the Immunization Branch as it becomes available. The address is www.immunize.nc.gov

Who are the select private provider offices?

This list will be provided on our website at www.immunize.nc.gov as soon as it becomes available. Providers will be deputized based largely on geographic variances that create pockets of need within the state, not the number of underinsured patients seen at any particular provider. If you feel that your practice can provide services to patients that would otherwise be unable to reach an appropriate provider, you may contact imminfo@dhhs.nc.gov to be considered for deputization by NCIP and the CDC.

Am I an FQHC/RHC?

If you are unsure if you are an FQHC/RHC, please contact the Immunization Branch Help Desk at 1-877-873-6247.

How can our office become a FQHC or RHC?

For FQHC information, contact Centers for Medicare and Medicaid Services at 1-800-MEDICARE (800-633-4227).

For RHC information, contact NC DHHS Office Rural Health and Community Care at (919) 733-2040.

SPECIFIC VACCINES**Can I give state supplied vaccine to an adult on Medicaid?**

No. The NCIP will not provide vaccines to adults on Medicaid unless a specific exception is stated on our coverage criteria or coverage is listed as “universally provided”.

Can adults with Medicaid or Medicare or underinsured adults receive state-supplied vaccine?

No. These groups do not currently qualify for state-supplied vaccine.

Who can administer State-Supplied vaccine to adults?

Uninsured adults may receive specified state-supplied vaccines under certain circumstances as described on the NCIP coverage criteria.

Will Tdap continue to be universal after October 1st?

No. After October 1st, Tdap will only be available for uninsured individuals. There is currently no post-exposure allowance of Tdap for insured patients.

Can Twinrix be given to insured individuals who fall into a risk group?

No. After October 1st, Twinrix will only be available for uninsured individuals who fall into Twinrix risk groups.

If a clinic does not screen for insurance can they provide Twinrix to all at-risk individuals?

No. All NCIP providers must screen 100% of patients before using state-supplied vaccine. Only uninsured adults and VFC-eligible 18 year olds may qualify for state supplied Twinrix.

Can Tdap be provided to insured postpartum women or new fathers?

No. After October 1st, Tdap will only be available for uninsured individuals.