

# **PROVIDER ENROLLMENT**

Immunization Section—Vaccines for Children Program

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# MODULE 3: Provider Enrollment

## Who May Enroll

Providers enrolling to receive vaccine from the Florida VFC Program must hold a license in Florida, have prescribing authority for vaccines, and be a person (or persons) who will be responsible (and liable) for the conditions outlined in the provider enrollment agreement for the facility or organization. Qualifying providers include: Medical Doctor (MD), Doctor of Osteopathy (DO), Advanced Registered Nurse Practitioner (ARNP), or Physician Assistant (PA) with their signing collaborating physician. Organizations self-identifying as a Federally Qualified Health Center (FQHC) or Rural Health Center (RHC) must include a copy of their federal documentation each year with annual enrollment that validates their FQHC or RHC designation.

**Please note:** Providers enrolling in the Florida VFC Program to receive vaccines agree to all conditions contained in this handbook and the Provider Agreement signed by the licensed provider.

## Initial Enrollment & Annual Enrollment Process

Annually all providers are required to complete the Florida VFC Provider Agreement in order to participate in the VFC Program. The initial forms are the Florida VFC Program Provider Agreement and the Florida VFC Program Provider Profile/Update Form; they will be emailed upon enrollment request. Send an email to <u>FloridaVFC@FLHealth.gov</u> to receive further information and enrollment paperwork. As of April 2015, all currently enrolled VFC providers are required to complete the Annual Enrollment process within Florida State Health Online Tracking System (SHOTS).

Further instructions, are located on the Immunization Section website at: www.floridahealth.gov/programs-and-services/immunization/vaccines-forchildren/enrollment.html and http://www.floridahealth.gov/programs-andservices/immunization/vaccines-for-children/reenrollment.html.

#### To initially enroll:

- Send an email to <u>FloridaVFC@FLHealth.gov</u> requesting enrollment information.
- Complete the *Florida VFC Provider Agreement* and the *Florida VFC Program Provider Profile/Update form* received via email and email it to the VFC Program.
- If your facility is a FQHC or RHC, scan/email the additional federal documentation validating your designation.
- Must have proper vaccine storage equipment (see Module 5b) and submit copies of the certificate of calibration for each thermometer.
- Must submit one week of twice a day temperature readings for the refrigerator and freezer vaccine storage units. The provider must record temperature readings from a certified calibrated thermometer for the refrigerator and freezer on the *Temperature Log for Vaccines* form (Fahrenheit forms located at: Appendix 3 and www.floridahealth.gov/programs-and-services/immunization/vaccines-forchildren/\_documents/temp-logs-color-f-web.pdf. Celsius forms located at: Appendix 3 and www.floridahealth.gov/programs-and-

services/immunization/vaccines-for-children/\_documents/temp-logs-color-c-

**web.pdf**). As of **January 1, 2015**, providers are required to enter their twice a day temperature readings for each storage unit into Florida SHOTS.

- The refrigerator units must maintain the recommended temperatures of 35° to 46°F (2° to 8°C). The freezer compartment must maintain temperature of 5°F (-15°C) or colder.
- The enrolling provider, vaccine coordinator and the back-up coordinator must complete the CDC "You Call the Shots" training found at <a href="http://www.cdc.gov/vaccines/ed/youcalltheshots.htm">http://www.cdc.gov/vaccines/ed/youcalltheshots.htm</a> and send in certificates of completion.
- Complete an Orientation Site Review (OSR) performed by your local Area Immunization Consultant that includes:
  - Review of the VFC Program requirements.
  - Review of vaccine storage and handling procedures.
  - Verification that provider's office has proper refrigerator/freezer vaccine storage units with a certified calibrated thermometer(s).
  - Answer provider or staff questions
- Upon completion of the OSR, the VFC Program will assign a Provider Identification Number (PIN). The PIN is a unique six-digit number per site location that should be used in all interactions with the VFC Program. Referencing the provider PIN in the subject line of any correspondence with the VFC Program staff will help expedite the processing of your information.
- Also upon completion of the OSR, the VFC Program will contact the provider to have ten doses of hepatitis B or Tdap vaccine shipped to the provider's office. This shipment is intended to confirm the provider's shipping location information is valid. As soon as the provider receives this shipment, they must contact the VFC Program at 1-800-483-2543 to receive the following form:
  - VFC Order Worksheet. The provider will choose their preferred vaccine brand and packaging to get them started in the VFC Program. The VFC Program representative will determine the preliminary number of doses of each vaccine type indicated to be shipped.

# To annually enroll:

- Complete the Florida VFC enrollment within Florida SHOTS annually. The VFC Program will notify providers via email 60 and 30 days prior to their required annual enrollment deadline.
- The enrolling provider, vaccine coordinator and the back-up coordinator must complete the annual provider training. Each year the VFC Program will notify providers as how to meet the training requirement.
- Providers will be inactivated from the VFC Program if they do not complete the annual enrollment by the required deadline.

# **VFC Program Participation Requirements**

The requirements to participate in the VFC Program are listed in the VFC Provider Agreement. The enrolling provider is required to sign this form to consent to adhere to the requirements of the program.

The VFC Program requires providers to:

- Screen all children birth through 18 years of age for eligibility at each immunization encounter.
- Comply with ACIP approved immunization schedules, vaccine dosage, and vaccine contraindications unless:

- In the provider's medical judgment, and in accordance with accepted medical practice, the provider deems such compliance to be medically inappropriate.
- The particular requirements contradict state law, including those pertaining to religious and medical exemptions.
- Immunize eligible children with vaccine at no charge to the patient for the vaccine.
- Do not deny an eligible child vaccine due to the inability to pay the administration fee.
- The vaccine administration fee for non-Medicaid children receiving vaccine may not exceed the Regional Maximum Charge of \$24.01 per vaccine dose.
- Distribute the current Vaccine Information Statements (VIS) each time a provider administers a vaccine, and maintain records in accordance with the National Childhood Vaccine Injury Compensation Act (NCVIA), which includes reporting clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS) at: www.vaers.hhs.gov/.
- Comply with the requirements for vaccine ordering, vaccine accountability, vaccine management, and agree to operate within the VFC Program requirements in a manner intended to avoid fraud and abuse.
- The enrolling provider must sign the VFC Provider Agreement and complete the Florida VFC Program Provider Profile/Update form.
- The enrolling provider, vaccine coordinator, and the back-up vaccine coordinator must complete annual training.
- Providers are required to notify the VFC Program immediately of any change including, but not limited to: the enrolling provider, vaccine coordinator, and the back-up vaccine coordinator, mailing/shipping address, and vaccine delivery hours.

**Please note:** Beginning on March 1, 2016, providers will be required to use a continuous temperature monitoring device with a probe buffered material in all of their VFC vaccine storage units. The temperature readings are required to be uploaded into Florida SHOTS. The VFC Program is supplying providers with a Log Tag for each of their VFC vaccine storage units to meet this new requirement. If a provider would like to purchase their own continuous monitoring device they will need to contact the VFC Program for more information.

# **Termination of the VFC Provider Agreement**

The VFC Program, or the enrolled provider, may terminate this agreement at any time for personal reasons or failure to comply with these requirements. If the provider chooses to terminate the agreement, he or she agrees to transfer any unused and unexpired VFC vaccine. The provider should contact their VFC Area Immunization Consultant to assist in any vaccine transfers. The provider is responsible for completing and sending a copy of the *Florida VFC Program Disenrollment Form* (see **Appendix 3** or

http://www.floridahealth.gov/programs-and-services/immunization/vaccines-forchildren/\_documents/disenrollment-form.pdf) as a notification of the intent to terminate no later than 30 days prior to the actual dissolution to the VFC Program at

<u>FloridaVFC@FLHealth.gov</u>. As soon as the VFC Program receives a copy of the disenrollment form, a VFC Program representative will contact the provider regarding the transfer of any VFC vaccine.