



2015 State-supplied Vaccine Eligibility for Children 0 through 18 Years of Age



The Alaska Immunization Program uses multiple funding sources to procure childhood vaccines, which are distributed to providers enrolled in the Alaska Vaccine Distribution Program. At each immunization visit, accurate eligibility screening and documentation is required to ensure accountability and ongoing availability of each funding source.

Providers **must** submit all vaccine administration data to VacTrAK within **14 days** per Alaska Administration Code 7 AAC 27.650 (a).

The table below includes the Vaccines for Children (VFC) Program and the Alaska Vaccine Assessment Program (AVAP) eligibility categories, definitions, and billing information. If a child meets more than one eligibility category (i.e., Alaska Native and insured), providers must refer to excerpts from CDC's *The Vaccines for Children Operations Guide*, www.epi.hss.state.ak.us/id/iz/VFCOperationsGuide.pdf.

VacTrAK Eligibility Category 0 through 18 years	Definition	HL7 Eligibility Mapping Code	Administration Fee Bill To	Vaccine Administration Fee Cap	Vaccine Cost Bill To
VFC Medicaid Eligible	<ul style="list-style-type: none"> A child who is either Medicaid eligible OR Medicaid enrolled A child who is insured and Medicaid enrolled If an AI/AN child is Medicaid eligible, select "VFC Medicaid Eligible" 	V02	Medicaid	Determined by Medicaid *	Do <u>not</u> bill (State-supplied)
VFC Uninsured	<ul style="list-style-type: none"> A child who has no health insurance 	V03	Patient†	\$27.44	Do <u>not</u> bill (State-supplied)
VFC American Indian/Alaska Native (AI/AN)	<ul style="list-style-type: none"> A child who is AI/AN If an AI/AN child is Medicaid eligible, select "VFC Medicaid Eligible" 	V04	Patient†	\$27.44	Do <u>not</u> bill (State-supplied)
VFC Underinsured (FQHC) This category may be used only by a Federally Qualified Health Center (FQHC) or a deputized provider. Other types of providers may use the "State Vaccine (AVAP)" eligibility category below or refer patients to an FQHC or deputized provider.	<ul style="list-style-type: none"> A child who has health insurance, but the coverage does not include vaccines; OR A child whose insurance does not cover all Advisory Committee on Immunization Practices (ACIP)-recommended vaccines. The child would be eligible to receive those vaccines not covered by the insurance; OR A child whose insurance caps the cost for vaccine coverage is eligible to receive VFC vaccines only after the insurance cap has been reached 	V05	Patient†	\$27.44	Do <u>not</u> bill (State-supplied)
State Vaccine (AVAP) May appear as "state-specific" or "local-specific" eligibility in Electronic Health Records.	<ul style="list-style-type: none"> Any child who does not meet VFC eligibility categories listed above and for whom state vaccine is used 	V07	Insurance	Determined by insurance	Do <u>not</u> bill (State-supplied)
Ineligible (Private Vaccine)	<ul style="list-style-type: none"> When privately purchased vaccine is used 	V01	Insurance	Determined by insurance	Insurance

*Medicaid determined Administration Fee Schedule - <http://manuals.medicaidalaska.com/medicaidalaska/providers/FeeSchedule.asp>

†Provider must not deny administration of a VFC vaccine to an established patient whose parent/guardian/individual of record is unable to pay the administration fee.

Alaska Immunization Helpline contact:

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