

Shots of Knowledge

The Basics of Vaccine Programs

Presented by:

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PVP Education and Compliance Coordinator



**PUBLIC HEALTH
DIVISION**



**IMMUNIZATION
UNIT**

Today's Objectives

**Overview
of Public
Vaccine
Programs**

**Program
Enrollment**

**Patient
Eligibility**

**Quality
Assurance**

**Vaccine
Management**

**Fraud and
Abuse**

Overview of Public Vaccine Programs (PVP)



PUBLIC HEALTH
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PVP At-A-Glance



Vaccine For Children (VFC) Program

Wyoming Vaccinates Important People (WyVIP) Program

Adult Hepatitis Vaccine Program (AHV)

Adult Vaccine Initiatives

Vaccines For Children (VFC) Program

The Vaccines for Children (VFC) Program is a federally funded vaccine program

Vaccines covered by the VFC program are recommended by ACIP to protect infants, children, and teenagers from vaccine-preventable diseases

Vaccines For Children (VFC) Program

ACIP-Recommended Vaccines Covered by the VFC Program

COVID-19	HIB	PCV-20
DTaP	HPV	PPSV23
DTaP-Hep B-IPV	Influenza	Respiratory Syncytial Virus (RSV)
DTaP-IPV-HIB	Meningococcal Conjugate (Groups A, C, W and Y)	Rotavirus
DTaP-IPV	Meningococcal Conjugate (Groups A, C, Y and W-135)	Td
DTaP-IPV-HIB-HEPB	MENB-Meningococcal Group B	Tdap
IPV	MMR	Varicella
Hepatitis A Peds	MMR/Varicella	Chart Rev. 04/2025
Hepatitis B Ped/Adol	PCV-15	

Wyoming Vaccinates Important People (WyVIP) Program

The WyVIP Program is a state-funded vaccine program that provides affordable vaccines to children who are not VFC-eligible

WyVIP-eligible vaccines include most ACIP-recommended pediatric vaccines

Participation in the WyVIP Program is limited to Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHC's), and Public Health Nursing (PHN) Offices

Wyoming Vaccinates Important People (WyVIP) Program

Vaccines available
through the WyVIP
Program

DTaP	MMR/Varicella
DTaP-Hep B-IPV	PCV-15
DTaP-IPV-HIB	PCV-20
DTaP-IPV	PPSV23
DTaP-IPV-HIB-HEPB	Rotavirus
IPV	Td
Hepatitis B Ped/Adol	Tdap
HIB	Varicella
MMR	Chart Rev. 04/2025

Adult Hepatitis Vaccine (AHV) Program

The Adult Hepatitis Vaccine (AHV) Program is a state-funded vaccine program

The Adult Hepatitis Vaccine (AHV) Program allows Wyoming residents to receive hepatitis A and B immunizations at a low cost from participating providers

Participation is limited to Public Health Nursing (PHN) Offices and Correctional Facilities

Adult Hepatitis Vaccine (AHV) Program

**Vaccines available
through the AHV
Program**

Hepatitis A

Hepatitis B

Hepatitis A & B Combo

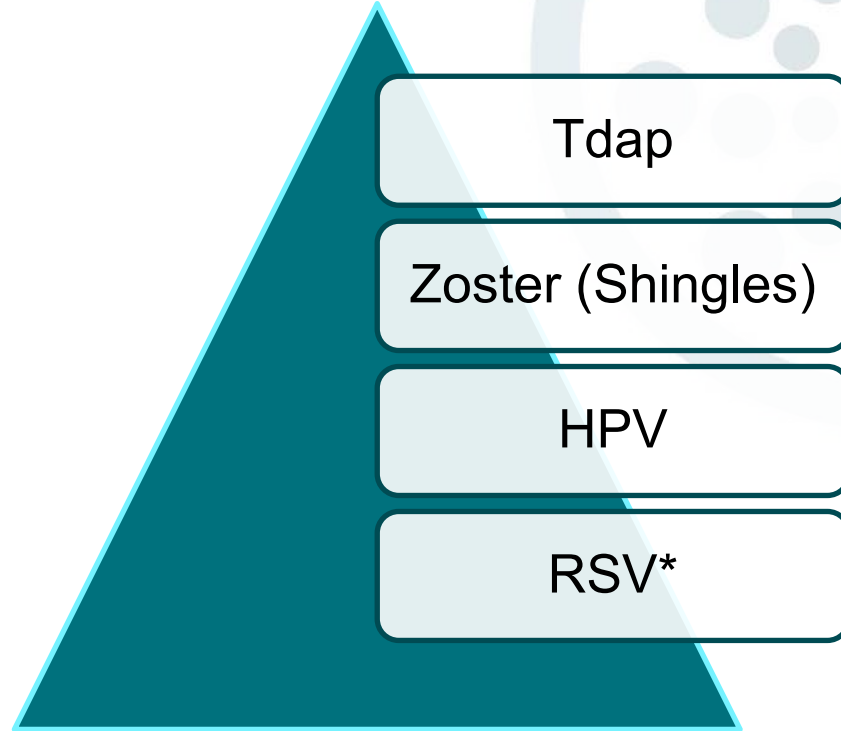
Adult Vaccine Initiative

The Adult
Vaccine
Initiative is a
state funded
vaccine
program

Participation is
open to all
providers who
have the patient
population to
support
enrollment

Adult Vaccine Initiative

Vaccines available
through the Adult
Vaccine Initiative





Patient Eligibility



Patient Eligibility

VFC

0-18 years
old, and:

American
Indian or
Alaska Native

Medicaid
Eligible

Uninsured

Underinsured
at
FQHC/RHC
or at a
deputized
provider

Patient Eligibility

WyVIP

0-18 years
of age, and:

Wyoming
resident

Not VFC-
eligible

Patient Eligibility

AHV

19 years and
older, and:

Wyoming
resident

Uninsured

Underinsured

No history of
previously
completed
vaccination
series

Patient Eligibility

Adult Vaccine Initiative

**19 years and
older, and:**

**Wyoming
resident**

Uninsured

Underinsured

Patient Eligibility

Administration Fees

Providers MAY:

Charge for the administration of the vaccine



Providers MAY NOT:

Charge for the
vaccine

Exceed allowable
fee

Refuse patients
for inability to pay

Patient Eligibility

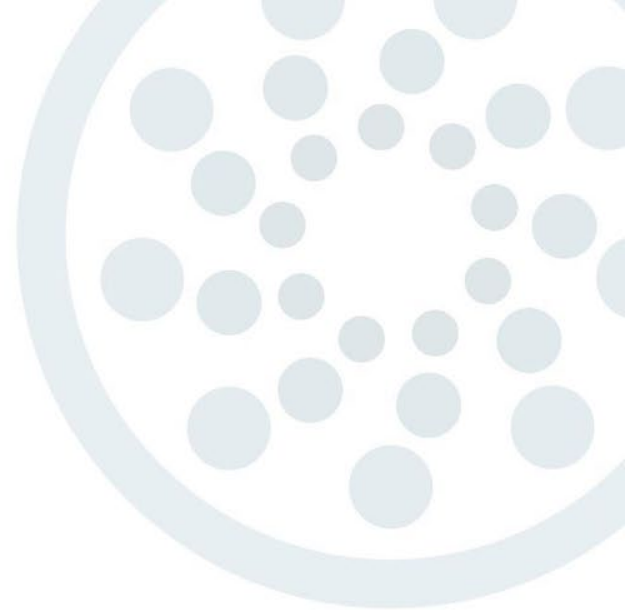
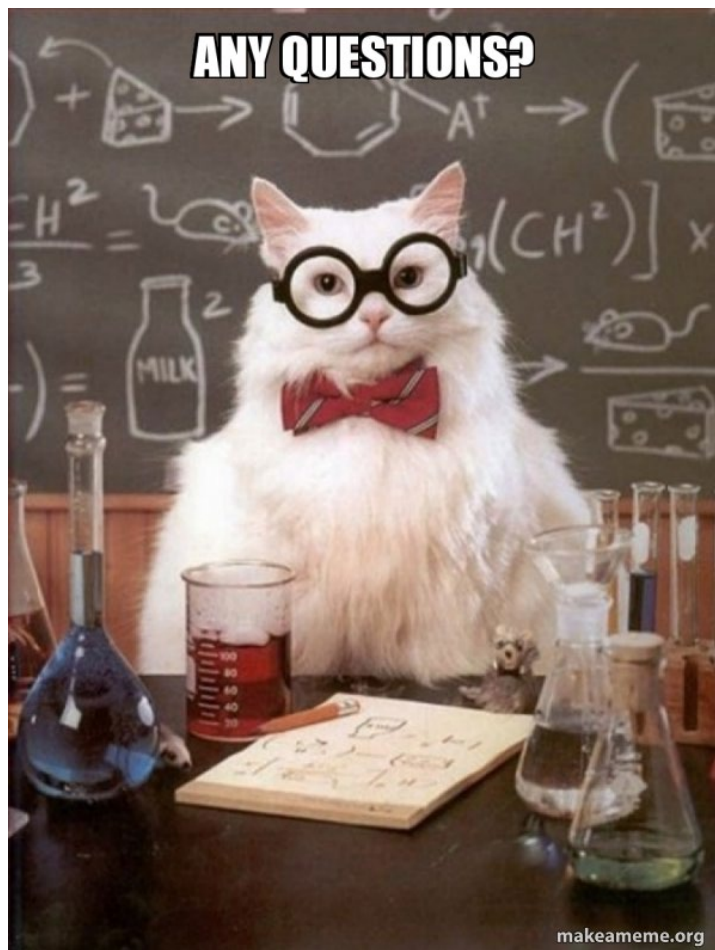
Administration Fees

VFC, AHV & Adult
Vaccine Initiative

\$21.72 PER
SHOT

WyVIP

\$21.72 PER
ANTIGEN



Program Enrollment



PVP Program Enrollment

VFC and WyVIP Program providers must:

- ❖ Be licensed to administer vaccines to children 18 years and younger
- ❖ Be willing and able to follow all program requirements, policies, and procedures
- ❖ Have the capacity to order, receive, manage, store, and monitor the temperature of public vaccines
- ❖ Be open at least 4 consecutive hours on a day other than a Monday to receive VFC vaccines
- ❖ Must carry all ACIP-recommended vaccines for the population served

PVP Program Enrollment

AHV Program providers must:

- ❖ Be licensed to administer vaccines
- ❖ Be willing and able to follow all AHV Program requirements, policies, and procedures
- ❖ Have the capacity to order, receive, manage, store, and monitor the temperature of public vaccines
- ❖ Be open at least 4 consecutive hours on a day other than a Monday to receive AHV vaccines

Provider Re -Enrollment

- ❖ Enrolled providers must complete re-enrollment by submitting an updated Provider Agreement and Provider Profile once annually
- ❖ Re-enrollment was conducted in 2023 and will be conducted again by the end of 2024

Staffing and Role Requirements

Primary
Physician/
Practitioner

Two (2)
Vaccine
Coordinators
(VC)

Staffing and Role Requirements

- ❖ The responsible physician must be licensed to administer vaccines to children aged 18 and younger
- ❖ Must have the authority to enter into a legally binding agreement for the organization
- ❖ Responsible and liable for the conditions outlined in the Provider Enrollment Agreement
- ❖ NOT recommended as a Vaccine Coordinator; must have prior approval from the Immunization Unit if this is necessary

Primary
Physician/
Practitioner

Staffing and Role Requirements

- ❖ Two VC's are required by the CDC; Both VC's must know how to perform all functions of the Public Vaccine Program
- ❖ The role of the VC should not be vacant for more than two weeks at any given time
 - If a VC is out on extended leave, the role must be filled until the individual returns
- ❖ VC's must complete the Vaccine Coordinator Training Program (VCTP) within 30 days of assuming the role
- ❖ Only two (2) individuals will have VC access within the WylR, including ordering permissions

Vaccine
Coordinators
(VC)

Staffing and Role Requirements

When updating Vaccine Coordinators for your facility:

1. Contact the WylR Help desk and inform them of the change
2. Complete the [WylR User Access Request Form](#)
3. Complete the Vaccine Coordinator Training Program within 30 days

Additional information needed when updating VC:

- ❖ Name of person no longer in the role of VC
- ❖ Name of the person assuming the role of VC
- ❖ Email address of the person assuming the role of VC
- ❖ Phone number of the person assuming the role of VC
- ❖ Indicate whether this person will be administering vaccine

Vaccine
Coordinators
(VC)

Staffing and Role Requirements

- ❖ Both VC's must be physically located at the facility at least part-time
- ❖ At least one VC must be a full-time employee
- ❖ Vaccine Coordinators can be any level of staff including front office staff, clinical staff, or others
 - It is recommended that at least one VC be an individual who works directly with the vaccine, but this is not required
- ❖ Both Vaccine Coordinators must know how to perform all functions of the PVP

Vaccine
Coordinators
(VC)

Staffing and Role Requirements

Vaccine Coordinator Responsibilities:

- ❖ Main points of contact for the facility
- ❖ PVP Oversight
 - ❖ Vaccine management
 - ❖ Vaccine storage
 - ❖ Vaccine temperature monitoring
 - ❖ Vaccine inventory management

Vaccine
Coordinators
(VC)



Vaccine Management

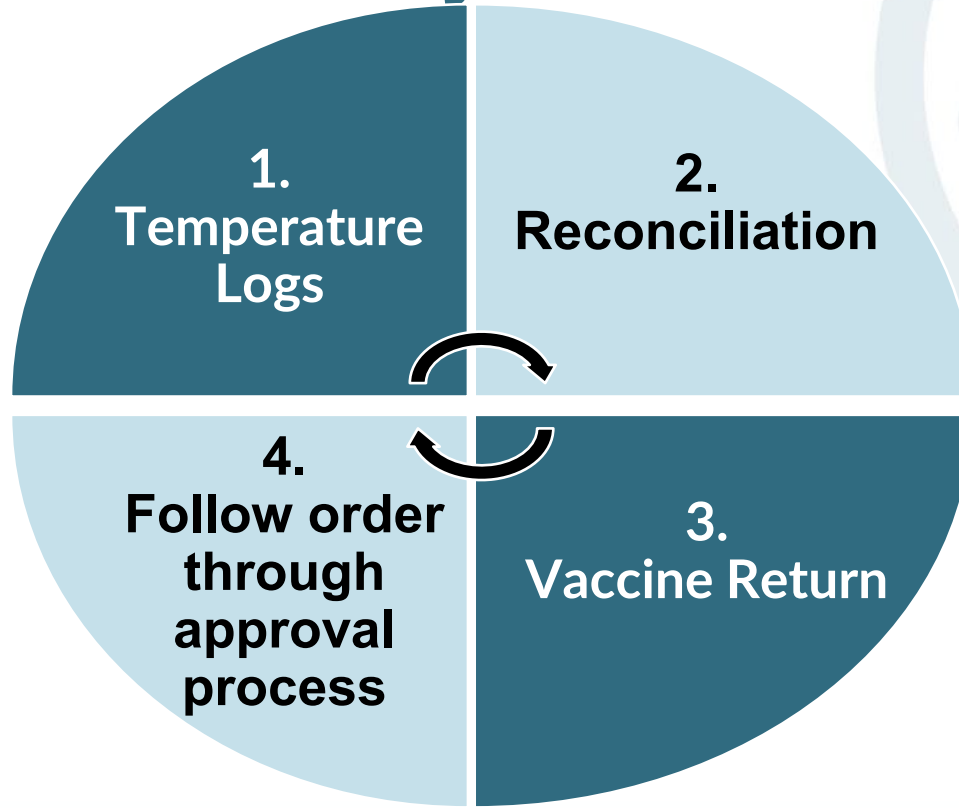


Vaccine Management

Order Cycle

- ❖ 1st-5th of each month, regardless of weekends or holidays
- ❖ It is recommended to keep 3 months' worth of public vaccine supply on hand in case of delays in shipping
- ❖ You can track the approval process of your order within VOMS

Vaccine Order Cycle



Vaccine Management

Order Cycle

3



Doses
Administered



Current
Inventory



Recommended
Monthly
Vaccine Order

Vaccine Management

Temperature Logs

- ❖ Submit monthly, regardless if you will be placing an order for the month
- ❖ Review your temperature logs for completion before submitting them
 - PIN number, facility name, and month
 - Be sure to note any days that the office is closed
 - If there is missing data and no note, we will reach out for additional information
- ❖ Submit a copy of the physical temperature logs, not the data logger file that you download (unless requested from the Immunization Unit)

Vaccine Management

Temperature Logs

- ❖ Always use the temperature log templates that are provided on the Immunization Unit website
 - ❖ [Refrigerator Temperature Log](#)
 - ❖ [Freezer Temperature Log](#)
 - ❖ [Ultra-Cold Freezer Temperature Log](#)

Vaccine Management

Temperature Excursions

- ❖ Ensure that all vaccine exposed to improper temperatures is marked with “DO NOT USE” signage, notify relevant staff of the excursion and inform them not to use the vaccine
- ❖ Store the vaccine at appropriate temperatures
- ❖ Contact the Immunization Unit to report the temperature excursion immediately upon discovery by calling 307-777-7952 or emailing wdh.pvpreporting@wyo.gov

Note: vaccine cannot be administered until directed by the Immunization Unit staff

Vaccine Management

Inventory Reconciliation

- ❖ Vaccine reconciliation is the process in which physical inventory is reconciled against what is showing as on-hand inventory in the VOMS
- ❖ Both Vaccine Coordinators will have access to the inventory management tools within VOMS and are ultimately responsible for reconciling vaccine inventory
- ❖ Vaccine reconciliation must also occur prior to placing any public vaccine order in VOMS

Vaccine Management

Inventory Reconciliation

- ❖ Vaccine reconciliation must be completed at least once every 30 days, regardless of whether or not an order is being placed
- ❖ When the inventory is saved or submitted in VOMS, the person who is performing the action is attesting to the validity of the public vaccine inventory counts reflected

Vaccine Management

Inventory Reconciliation

- ❖ Maintain dose-by-dose accountability
- ❖ Reconcile inventory immediately upon expiration or determination that vaccines are non-viable
- ❖ Use the most appropriate category and reason

Vaccine Management

Returns

- ❖ Returns are processed once a week by the Immunization Unit.
 - You will receive a confirmation email once your return has been processed.
- ❖ After the return has been processed by the Immunization Unit, a return label will be emailed to the individual who submitted the return originally within VOMS and will be emailed from McKesson.
- ❖ If you need to reprint the Packing Slip for the Vaccine Return, you can do so within VOMS

Vaccine Management

Returns

Step One:
Remove
vaccine
and mark
“Do Not
Use”

Step Two:
Reconcile
vaccine
out of
inventory

Step Three:
Process
the return
VOMS

Step Four:
Inactivate
“0” lot
numbers

Vaccine Management

Transfers

- ❖ Vaccine can be transferred within a two (2) hour radius
- ❖ Open multi-dose vials cannot be transferred
- ❖ Transfers cannot be shipped
- ❖ The facility that is transferring the vaccine out will need to initiate the transfer within VOMS
- ❖ Vaccine CANNOT be transferred until the Immunization Unit has approved the transfer VOMS
 - Immunization unit approves transfers at least 3 times a day

Vaccine Management

Borrowing

Vaccine borrowing occurs when:

- ❖ Privately-purchased vaccine is administered to a patient who is eligible to receive publicly-supplied vaccine
- ❖ Publicly-supplied vaccine is administered to a patient who is NOT eligible for publicly-supplied vaccine and should receive private stock

Vaccine Management

Borrowing

IT IS THE EXPECTATION THAT VACCINE BORROWING SHOULD BE A RARE OCCURRENCE

- ❖ Borrowing should not be planned, except to prevent waste
- ❖ Public vaccine **MUST** be replaced
- ❖ Influenza and Nirsevimab **CANNOT** be borrowed
- ❖ A borrowing report form must be completed

Vaccine Management

Borrowing

DO borrow a vaccine when:

- ❖ A lack of appropriate stock occurs due to unexpected circumstances, such as a delayed vaccine shipment or to avoid a missed opportunity to vaccinate
- ❖ Vaccine is spoiled or broken in-transit to provider
- ❖ It will prevent vaccine waste due to expiration for either public or private vaccine stock

Vaccine Management

Borrowing

Do NOT borrow vaccine:

- ❖ If the borrowing of public vaccine will prevent a patient eligible for public stock from receiving a needed vaccine because the public vaccine was administered to a non-eligible patient
- ❖ When scheduling a mass-immunization clinic without having appropriate amounts of both public and privately purchased vaccines available on-hand for the expected participants
- ❖ As a replacement system for privately purchased vaccine inventory

Vaccine Management

Borrowing

Tips for success:

- ❖ Providers are expected to maintain adequate inventories of both public and private vaccine for the population served
- ❖ It is best practice to maintain a 3 month's supply of vaccine at all times
- ❖ Ensure staff are properly trained to screen for and document patient eligibility prior to administering vaccine to ensure the use of appropriate stock

Vaccine Management

Vaccine Advertisement

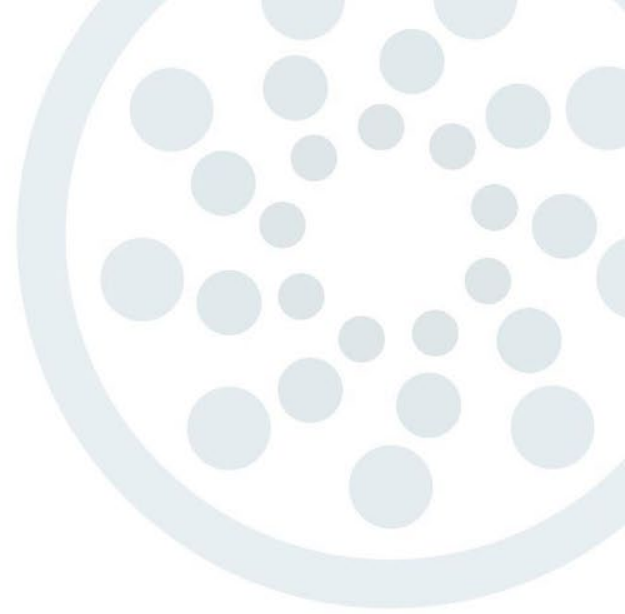
- ❖ Short-dated vaccine
 - Within 60-90 days of expiration
- ❖ Check advertisements before placing a vaccine order
- ❖ Low stock, needing a transfer
- ❖ Publicly-supplied vaccine ONLY

Vaccine Management

Waste

Ways to reduce waste:

- ❖ Proper ordering
- ❖ Vaccine transfers
- ❖ Utilizing vaccine advertisement
- ❖ Rotating vaccine stock
- ❖ Properly storing vaccine



Vaccine Management

W yIR Reports

Every dose of publicly-supplied vaccine must be accounted for in order to meet CDC's dose-for-dose accountability requirements

- ❖ Publicly-supplied vaccine inventory must be managed in VOMS
- ❖ Privately-purchased vaccine inventory may also be managed in VOMS but is not a requirement outside of enrollment to verify private vaccine inventory

Vaccine Management

WylIR Reports

The WylIR/VOMS has built-in inventory management tools to help manage public and private vaccine inventory

- ❖ In order for doses to accurately pull from WylIR/VOMS inventory, all public vaccine must be entered as “administered” and not as “historical” vaccinations
- ❖ The WylIR/VOMS automatically decrements (removes the dose from) vaccine inventory when an administered dose is added to a patient record

Vaccine Management

WylR Reports

Contact the WylR HelpDesk for assistance

- ❖ Email: wylr.helpdesk@wyo.gov
- ❖ Phone: 1-833-221-1451
- ❖ Chat: There is a chat module within the WylR that can be utilized

*Please allow 24-48 business hours for a response.



IWeb

Version: 5.100.1

Help Desk

1-833-221-1451

E-Mail

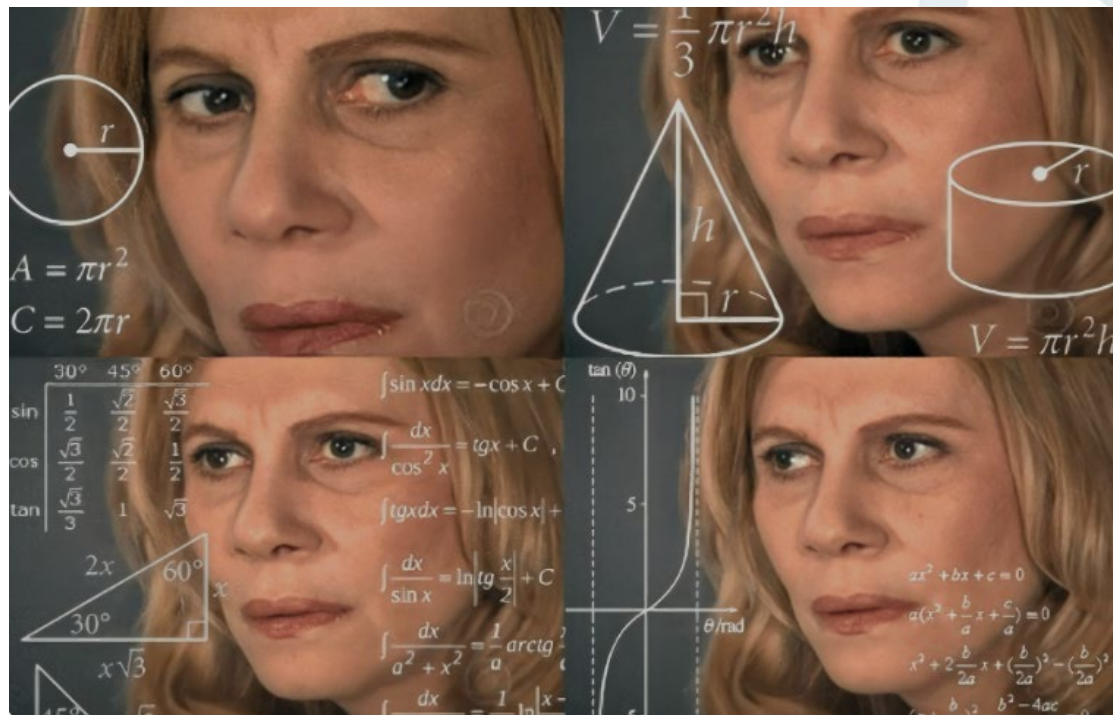
Training Library

**Quick
Reference
Guides
(QRG's)**

**WyIR/VOMS
Office
Hours**

**1:1
assistance
as
requested**

Questions?



Fraud & Abuse



Fraud & Abuse

- ❖ Providers that are not familiar with and do not ensure all staff are trained on program requirements can easily find themselves in a fraud or abuse situation
- ❖ Fraud or abuse of Public Vaccine Programs is most often unintentional. It is important to know what constitutes fraud or abuse and how to prevent it

Fraud & Abuse

Fraud is defined as the:

- ❖ Intentional deception or misrepresentation that results in some unauthorized benefit to the provider
- ❖ Any act that constitutes fraud under applicable federal or state law

Fraud & Abuse

Abuse involves practices that result in:

- ❖ An unnecessary cost to the Medicaid Program
- ❖ Actions that result in an unnecessary cost to the Immunization Program, a health insurance company, or a patient
- ❖ Reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for health care

Fraud & Abuse

- ❖ Charging an administration fee that is higher than allowed
- ❖ Administration of publicly-supplied vaccine to patients that are not eligible
- ❖ Billing for publicly-supplied vaccine
- ❖ Denying public vaccine to patients due to their inability to pay the administration fee
- ❖ Failure to screen for eligibility and document the eligibility status at every immunization encounter

YA'LL GOT ANY



QUESTIONS?



**PUBLIC HEALTH
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**IMMUNIZATION
UNIT**

Review



Ontario
Department
of Health



PUBLIC HEALTH
DIVISION



IMMUNIZATION
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Review

How often do
temperature logs
need to be
submitted to the
Immunization Unit
for review?

Once monthly or before placing a
vaccine order

Review

True or False?

Providers should send data logger files to the Immunization Unit for review once a month.

Data logger files should only be sent to the Immunization Unit if requested by the unit

Review

How long does a
new vaccine
coordinator have
to complete the
vaccine
coordinator
training program?

30 days from the day that they assume
the role

Review

When should an
expired “0” lot
number be
inactivated in the
WyIR?

After the vaccine has been processed
for a return and is out of your facility

Review

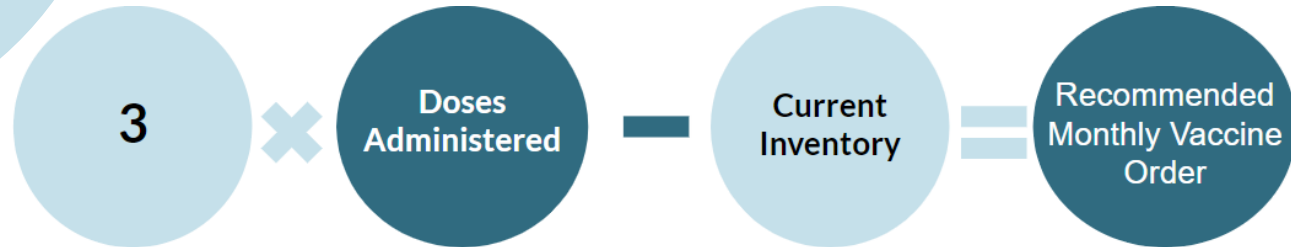
It is the 1st of the month and time to place your vaccine order for Tdap.

Doses administered last month: 15
Current inventory: 10

Based on the information provided, how much vaccine should be ordered?

$$3 \times 15 - 10 = 35 \text{ doses}$$

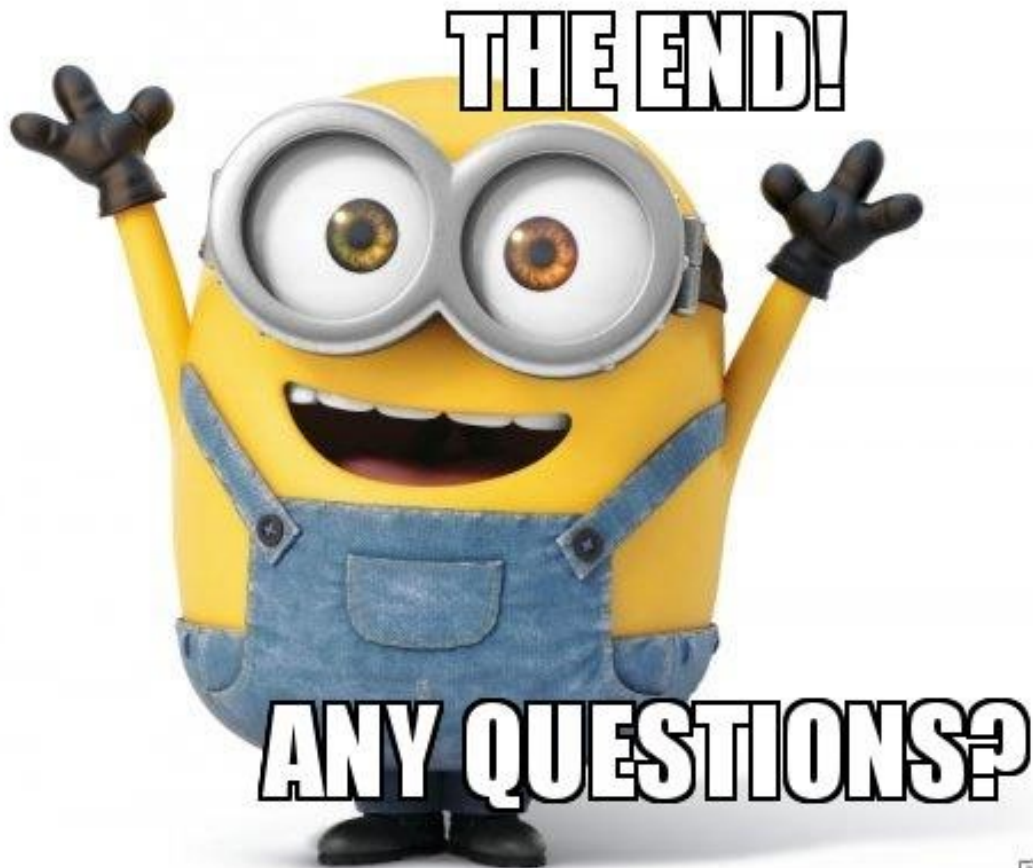
This vaccine is available in increments of 10. Round up to 40!



Review

How far can a
vaccine be
transferred?

Within a two (2) hour radius



makeameme.org



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IMMUNIZATION
UNIT

Thank you!

Sierra Gonzales

PVP Education and Compliance Coordinator

Wyoming Department of Health, Immunization Unit

sierra.gonzales-salinas@wyo.gov

307-777-6519

Resources

WylR Help Desk Contact Information:

Email: wylr.helpdesk@wyo.gov

Phone: 1-833-221-1451

Immunization Unit Website:

immunizewyoming.com

PVP Escalation/Temperature Logs

wdh.pvpreporting@wyo.gov

[VFC Operations Guide](#)

(Can be found on the CDC website.

Google “VFC Ops Guide”)



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