



## TEXAS DEPARTMENT OF STATE HEALTH SERVICES

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COMMISSIONER

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**TO:** Texas Vaccines for Children (TVFC) Providers

**FROM:** Saroj Rai, Ph.D.   
Immunization Branch Manager

**DATE:** October 15, 2013

**SUBJECT:** TVFC Program Changes: Vaccine Orders, Shipments and Storage

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Effective October 1, 2013, the TVFC Program implemented changes in order to comply with federal requirements.

### Vaccine Orders

- As of October 1, 2013 each publicly purchased vaccine must be assigned to a funding source and will be noted on vaccine packing slips:
  - **VFC** for federally VFC eligible children ages 0-18 years
    - **Medicaid**
    - **Uninsured**
    - **Alaskan Native/American Indian**
    - **Underinsured** (federally eligible only at an FQHC, RHC, or deputized public health clinics)
  - **PUBLIC** for Texas VFC (TVFC) eligible children ages 0-18 years
    - Federal **317** for underinsured children ages 7-18 years
    - **State** for underinsured children ages 0-6 years
    - **State** for uninsured adults served at Adult Safety Net (ASN) Sites
    - **CHIP** for children enrolled in the Children's Health Insurance Program

Please see the enclosed TVFC Vaccine Eligibility by Funding Sources and Provider Type.

- The fund source breakdown is based on patient population data that was reported by your office in the Patient Profile Section of your TVFC Enrollment Form.
- Providers will continue to submit orders through the Electronic Vaccine Inventory (EVI) system.
- A sample packing slip is attached.

### Vaccine Shipments

- Packing slips sent from McKesson have been modified and now reflect the funding source used to purchase all publicly purchased vaccines (as described above).
- Providers who identify funding source discrepancies on the packing slips that do not match their client population should notify their Local Health Department (LHD) or Health Service Region (HSR) immediately. For example, a provider receives State pediatric doses but does not administer vaccines to underinsured children ages 0-6 years.

### Vaccine Storage

- Providers must keep the federal VFC supply of vaccines stored separately from all other publicly purchased or privately purchased vaccines. The vaccine tray storing VFC vaccine should be labeled **VFC**.
- The remaining TVFC funding sources (317, State, and CHIP) may all be stored together in the same vaccine tray and labeled **PUBLIC**.
- Both vaccine trays, **VFC** and **PUBLIC**, can be stored in the same refrigerator/freezer. Each tray must be clearly labeled.

If you have questions, please contact your DSHS Health Service Region or TVFC Regional Consultant. The Regional Consultant contact information is included below.

Health Service Region	Consultant	Phone	Email
Region 1, 4/5N, 6/5S, and 7	Joshua Hay	(512) 776-6496	<a href="mailto:Joshua.Hay@dshs.texas.gov">Joshua.Hay@dshs.texas.gov</a>
Region 8, 11, 25, and 00 (City of Houston and City of San Antonio)	Alma Chavez	(956) 421-5554	<a href="mailto:Alma.Chavez@dshs.texas.gov">Alma.Chavez@dshs.texas.gov</a>
Region 2, 3, 9, and 10	Shirley Rocha	(512) 776-3417	<a href="mailto:Shirley.Rocha@dshs.texas.gov">Shirley.Rocha@dshs.texas.gov</a>



## VACCINE ELIGIBILITY BY FUNDING SOURCE AND PROVIDER TYPE

A Guide to McKesson Packing Slips for TVFC Providers as of October 1, 2013

Funding Source as Shown on Packing Slip	VFC	PUBLIC			
	VFC	317	State	State	CHIP
Population Served by Funding Source		Pediatric Vaccines for Underinsured Children* 7-18 Years of Age	Pediatric Vaccines for Underinsured Children* Birth through 6 Years of Age	Adult Vaccines for Uninsured Adults	Children Birth through 18 Years of Age Enrolled in CHIP.  <b>Provider must bill CHIP</b>
<b>PROVIDER TYPE</b>					
Private Provider					
Public Health Clinic with Delegated Authority Agreement	 **Includes VFC for underinsured				
Public Health Clinic without Delegated Authority Agreement	 May not serve underinsured children with any publicly purchased vaccine (VFC, 317 or State)				
Federally Qualified Health Center (FQHC)	 **Includes VFC for underinsured				
Rural Health Clinic (RHC)	 **Includes VFC for underinsured				
Adult Safety Net (ASN) Site					

\* Underinsured means the child has health insurance, but it doesn't cover vaccines, or doesn't cover certain vaccines.

\*\* Underinsured children birth through 18 years of age may receive federal VFC vaccine if administered at an FQHC, RHC or deputized public health clinic

Top row indicates two distinct storage bins: VFC contains vaccines for federally-eligible children only. PUBLIC contains vaccines purchased with 317, State and CHIP funds.

Fully insured children are not eligible for any publicly purchased vaccines

Fully insured and underinsured adults are not eligible for any publicly purchased vaccines

Providers receiving CHIP vaccine must bill the appropriate CHIP plan.

# Packing Slip

This is not an invoice

**Ship-to:**

FAMILY MEDICAL CLN  
 618 N MAIN  
 TOMBALL, TX 75110  
 (512) 447-8941

**Awardee:**

TEXAS DEPT OF HEALTH  
 IMMUNIZATION PROGRAM  
 1100 WEST 49TH STREET  
 AUSTIN, TX 78756  
 (888) 777-5320

**Provider PIN:** TXA999999  
**Delivery Number:** 201186744  
**Quality Check Date:** 09/24/2013  
**Customer Contact:** EMILY SCHILLING

Internal use only



201186744

NDC	Customer P.O.	Material Description Manufacturer	MFR Lot#	Exp. Date	VFC Doses	317 Doses	State Doses	CHIP Doses	Order Qty	Ship Qty	Unit Price	Extended Price
49281-0400-15	0503965322	TDAP; SYR; 5-pack SANOFI PASTEUR INC	U3049AA	12/30/2014	25	20	5	0	50	50	\$30.41	\$1,520.50
58160-0820-11	0503965322	HEP B (PED); SDV; 10-pack GLAXO SMITHKLINE	AFLUA239CA	12/30/2014	25	20	5	0	50	50	\$30.41	\$1,520.50
58160-0825-11	0503965322	HEP A (PED); SDV; 10-pack GLAXO SMITHKLINE	CCB060283	12/31/2014	25	20	5	0	50	50	\$30.41	\$1,520.50
00006-4045-41	0503965322	HPV (PED); SDV; 10-pack MERCK	J006236	02/25/2016	50	40	10	0	100	100	\$10.93	\$1,093.00
<b>Total</b>									250	250		\$5,653.00

This vaccine was purchased with public (state, local, and/or federal) funds and may be administered only to patients eligible to receive publically-funded vaccine.

If you have questions about your order, or to retrieve a pedigree document for Rx product received on this packing list, please contact your Immunization Program for assistance.

# Packing Slip

This is not an invoice

**Ship-to:** FAMILY MEDICAL CLN

**Awardee:** TEXAS DEPT OF HEALTH

<b>Provider PIN:</b>	TXA999999
<b>Delivery Number:</b>	201186744
<b>Customer Contact:</b>	EMILY SCHILLING

**VFC Doses** - Federally funded vaccine - Vaccines For Children Program - Only children 0-18 years of age, Uninsured, Medicaid, Underinsured\* or American Indian or Alaskan Native are eligible.

**317 Doses** - Federally funded vaccine - administer only to patients eligible to receive.

**State Doses** - State and Local funded vaccine - administer only to patients eligible to receive.

**CHIP Doses** - Separate Children's Health Insurance Program - administer only to patients eligible to receive.

For questions about patient eligibility please contact your Immunization Program for assistance.

\*A child who has health insurance, but the coverage does not include vaccines; a child whose insurance covers only selected vaccine (eligible for non-covered vaccines only). VFC vaccine is eligible only through a Federally Qualified Health Center (FQHC), or Rural Health Clinic (RHC) or under an approved deputization agreement.

**\*\*\*IMPORTANT\*\*\***

Never reject vaccine delivery or discard vaccine shipments without first contacting your state/local immunization program.

Please carefully review this Packing Slip to make sure doses shipped match information stated on the slip.

**SHIPMENT DISCREPANCIES** - If an excess or shortage is noted, please contact your state/local immunization program listed above under "Awardee." Your state/local immunization program will work with McKesson to correct the issue.

Please have the following information ready when you call your state/local immunization program.

- Product name and description, Item NDC#, Excess or shortage amount, Delivery Number, Provider PIN #