

Texas Vaccines for Children (TVFC) and Adult Safety Net (ASN) Programs VACCINE BORROWING REPORT

Facility Name: _____

PIN #: _____

☐ TVFC Program
 Check the box if this is for: ☐ ASN Program

All TVFC/ASN providers are expected to manage and maintain an adequate inventory of vaccine for both their TVFC/ASN and non-TVFC/ASN-eligible patients. Vaccine supplied by the TVFC/ASN Programs cannot be provided to a non-TVFC/ASN-eligible patient. **Planned borrowing of TVFC/ASN vaccine including the use of TVFC/ASN vaccine as a replacement system for a provider's privately purchased vaccine inventory is not permissible.** Undocumented borrowing and administering of TVFC/ASN vaccines to a non-TVFC/ASN patient is considered fraud.

In addition, borrowing between TVFC and ASN requires a vaccine borrowing report. Planned borrowing between the TVFC and ASN programs is not permitted.

TVFC/ASN providers cannot use TVFC/ASN vaccine as a replacement system for filling the vaccine needs of a non-TVFC/ASN privately insured patient. If a TVFC/ASN dose(s) is accidentally administered to a non-TVFC/ASN-eligible patient, the provider must complete the TVFC/ASN Borrowing Report Form (EC-67) and replace the vaccine immediately.

COMPLETE THIS FORM WHEN:

- A dose of TVFC vaccine is administered to a non TVFC-eligible child.
 - A dose of privately-purchased vaccine is administered to a TVFC-eligible child or an ASN-eligible adult.
 - A dose of ASN vaccine is administered to a TVFC-eligible child.
 - A dose of ASN vaccine is administered to a non ASN-eligible adult.
 - A dose of TVFC vaccine is administered to an ASN-eligible patient.
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- Enter information on each dose of vaccine borrowed in a separate row in the Vaccine Borrowing Report Table.
 - All columns must be completed for each dose borrowed.
 - The provider must sign and date at the bottom of this report.
 - Enter the corresponding reason code in column F of the Borrowing Report Table on page 2.
 - Enter details of reason in Column F if an Other code (9 Other or 16 Other) is entered in the Vaccine Borrowing Reportable.

Reason for Vaccine Borrowing and Replacement Coding Legend

Reason for Borrowing TVFC/ASN Dose	Code	Reason for Borrowing Private Dose	Code
Private vaccine shipment delay (vaccine order placed on time/delay in shipping)	1	TVFC/ASN vaccine shipment delay (order placed on time/delay in shipping)	10
Private vaccine not useable on arrival (vials broken, temperature monitor out of range)	2	TVFC/ASN vaccine not useable on arrival (vials broken, temperature monitor out of range)	11
Ran out of private vaccine between orders (not due to shipping delays)	3	Ran out of TVFC/ASN vaccine between orders (not due to shipping delays)	12
Short-dated private dose was exchanged with TVFC/ASN dose	4	Short-dated TVFC/ASN dose was exchanged with private dose	13
Accidental use of TVFC/ASN dose for a private patient	5	Accidental use of a Private dose for a TVFC-eligible patient	14
Accidental use of ASN dose for a TVFC patient.	6	Accidental use of a Private dose for an ASN-eligible patient.	15
Accidental use of TVFC dose for an ASN patient.	7	Other – Describe:	16 Other
Replacement of Private dose with TVF/ASN when insurance plan did not cover vaccine	8		
Other – Describe:	9 Other		

WHAT TO DO WITH THIS FORM:

- The Vaccine Borrowing Form must be kept as part of the TVFC/ASN Program records for a minimum five years and be made easily available.

TVFC/ASN VACCINE BORROWING REPORT (Continued)

Date Range of Vaccine Reporting (date of first dose borrowed to date of last dose borrowed): ____/____/____ to ____/____/____

VACCINE BORROWING REPORT TABLE

A Vaccine Type Borrowed	B Stock Used (TVFC, ASN, or Private)	C Patient Name	D Patient DOB (MM/DD/YYYY)	E Date Dose Administered (MM/DD/YYYY)	F Reason Appropriate Vaccine Stock Was Not Used (Use legend code on page 1 to mark one reason for each dose borrowed)	G Date Dose Returned to Appropriate Stock (MM/DD/YYYY)

I hereby certify, subject to penalty under the False Claims Act (31 U.S.C. § 3730) and other applicable Federal and state law, that TVFC/ASN vaccine dose borrowing and replacement reported on this form has been accurately reported and conducted in conformance with TVFC/ASN provisions for such borrowing and further certify that all TVFC/ASN doses borrowed during the noted time period have been fully reported on this form.

Provider Name:	Provider Signature:	Date:
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