

CHIP Vaccine Program

VFC Guidance for the CHIP Program

The Children's Health Insurance Program (CHIP) provides health coverage to eligible children, through both Medicaid and separate CHIP programs. CHIP is administered by states, according to federal requirements. The program is funded jointly by states and the federal government.

Eligibility

The Children's Health Insurance Program (CHIP) serves uninsured children up to age 19 in families with incomes too high to qualify them for Medicaid. States have broad discretion in setting their income eligibility standards, and eligibility varies across states.

Screening Patients for Eligibility

At each immunization encounter, VFC clinics are required to screen patients and document eligibility status. Before administering vaccines, VFC clinic staff must check the eligibility status in the MEDI system (or an equivalent system receiving HFS 270/271 electronic transaction data).

If the MEDI system shows:

- **Title XIX (19)** coverage for the date of service, the child is eligible for VFC vaccines. The VFC eligibility must be documented as "Eligible-Medicaid/Medicaid Managed Care [V02]."
- **Title XXI (21) or State funded** coverage for the date of service, the child is **NOT** eligible for VFC vaccines and must receive CHIP vaccines. The VFC eligibility must be documented as "CHIP [V22]."

Screening to determine a child's eligibility to receive vaccines through the VFC program must take place with each immunization visit.

Vaccine Ordering

The Centers of Disease Control and Prevention (CDC) requires that all VFC programs determine individual provider populations served and associated vaccine need by fund type. Illinois is required to establish a process for collecting and validating provider populations to ensure publicly purchased vaccines are distributed in amounts representing the provider population served and to adjustments if the population served changes.

Patient Population:	< 1 Year Old	1-6 Years	7-18 Years	TOTAL
Enrolled in Medicaid:	193	1,286	945	2,424
No Health Insurance:	35	85	97	217
American Indian/Alaskan Native:	0	1	2	3
Underinsured (FQHC/RHC)(Disabled for non-FQHC/RHC Facility Type):	0	1	17	18
TOTAL VFC:	228	1,373	1,061	2,662
Insured (private pay/health insurance covers vaccines):	0	0	0	0
Other Underinsured:	0	0	0	0
Children's Health Insurance Program (CHIP):	8	112	133	253
TOTAL NON-VFC:	8	112	133	253
TOTAL PATIENTS:	236	1,485	1,194	2,915

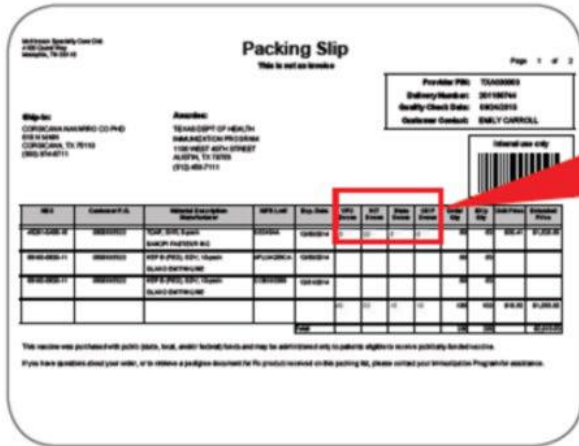
Source of Data: Registry

In this example, the sample clinic has 253 CHIP-children receiving vaccines in the previous 12 months out of their total patient population of 2,915 patients. Approximately 9% (253 out of 2,915 children) of this sample clinic's patient population is CHIP-eligible. Their VFC vaccine order will include approximately 9% of vaccines for the CHIP population and 91% for the VFC population.

Receiving the CHIP Vaccine Order

When the CHIP vaccine order arrives, VFC clinics need to identify these vaccines as for CHIP patients' use only, and maintain them separately from VFC vaccines. These vaccines may be stored within the same unit, but clearly identified.

The packing list included in the vaccine order will identify the number of doses by funding type (see image below).

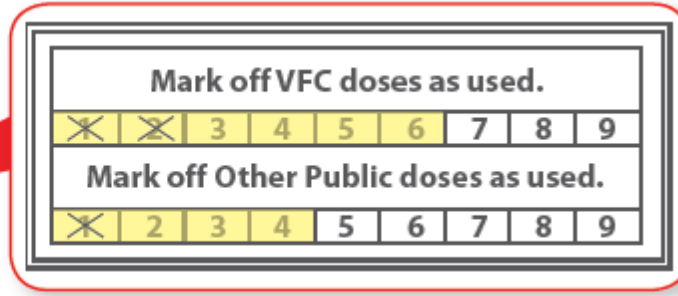
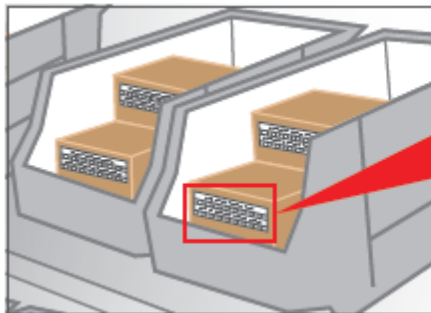


VFC Doses	317 Doses	State Doses	CHIP Doses
20	0	15	5

Vaccine Storage

VFC clinics must develop a method for maintaining these doses separately to ensure VFC and State doses are only used for VFC eligible children and CHIP doses are only used on CHIP children.

How to store vaccine with more than one fund type in a box:



To keep track of your use:

1. Label the box of single-dose or multi-dose vaccines.
2. Highlight the number of doses from each funding type.
3. Mark off vaccines administered by funding type as it is used.

Inventory

VFC clinics will see additions to the inventory types in I-CARE to designate the vaccines for the CHIP funding type and the State purchased vaccines for VFC children.

Select View: →

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Patient Record & Accountability

Clinics transmitting patient records from an electronic medical record (EMR) via HL7 transmission to I-CARE will need to verify the following with their EMR vendor.

- The clinic's EMR can send all VFC and CHIP (V22) shot records.
- The clinic's EMR can send the proper VFC eligibility status codes and not just VFC: yes or no.

The VFC eligibility status codes are:

- V00: Eligibility not determined/unknown
- V01: Not VFC eligible
- V02: Medicaid/Medicaid Managed Care
- V03: Eligible-Uninsured
- V04: Eligible-American Indian/Alaska Native
- V05: Eligible-Federally Qualified Health Center patient (under-insured)
- V07: Local program eligibility (not used by Illinois VFC)
- V22: CHIP (the previous code was V06, but has been replaced by V22)
- V23: 317
- V24: Medicare
- V25: State program eligibility (not used by Illinois VFC)