# 2026 Requirements at a Glance

**Instructions**: See "Requirement" column for itemized requirements from the **VFA Provider Agreement (PDF)** and California VFA Program **Provider Agreement Addendum (PDF)**. Refer to the **Section 317 Program Requirements Lesson (PDF)** for detailed coverage of policies, best practices, and guidance to comply with requirements.

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## Enrollment & Recertification

| Category | Requirement |
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| **Provider Profile** | • Designate the on-site Provider of Record Designee, who is authorized to sign VFA Program documents and assume responsibility for VFA-related matters in the absence of the Provider of Record. (VFA "Provider Agreement" #1) **(New)**<br>• Designate the on-site Provider of Record Designee, who is authorized to sign VFA Program documents and assume responsibility for VFA-related matters in the absence of the Provider of Record. (California VFA Program "Provider Agreement Addendum" #1A)<br>• Designate the on-site **Vaccine Coordinator and Backup Vaccine Coordinator (PDF)**, who are responsible for updating and implementing the practice's **vaccine management plan (Word)**. (P.A.A. #1B)<br>• Immediately report in myCAvax any changes to key practice staff roles (Vaccine Coordinator or Backup, Provider of Record or Designee); any changes to the Provider of Record or Designee require an electronic signature by the Provider of Record. (P.A.A. #1C)<br>• Immediately report to the VFA Program changes to the practice address or account ownership, which may require additional follow-up. (P.A.A. #1D)<br><br>Definitions:<br><br>• **Provider of Record (POR):** The on-site physician-in-chief, medical director, or equivalent, who signs the VFA "Provider Agreement" and the California VFA Program "Provider Agreement Addendum" and is ultimately accountable |

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| | for the practice's compliance. Must be a licensed MD, DO, NP, PA, pharmacist, or a Certified Nurse Midwife with prescription-writing privileges in California. <br>• **Provider of Record Designee:** On-site staff designated by the Provider of Record with sufficient authority to assume responsibility for VFA-related matters in their absence. <br>• **Vaccine Coordinator:** An on-site employee who is fully trained and responsible for implementing and overseeing the practices vaccine management plan. The **Vaccine Coordinator (PDF)** might be responsible for all vaccine management activities, including training other (especially new) staff. This role might be filled by medical assistants, LVN, RN, office manager, or other trained staff. <br>• **Backup Vaccine Coordinator:** On-site staff who is fully trained in and fulfills the responsibilities of the Vaccine Coordinator in their absence. <br><br>Optional Roles <br><br>• **Organization Vaccine Coordinator:** Large organizations may assign this role to coordinate communications across locations and ensure staff are properly trained to implement their vaccine management plan. This role must complete all required training for the Vaccine Coordinator role. <br>• **Additional Vaccine Coordinator:** Add an additional vaccine coordinator to share vaccine management responsibilities if needed. This role must complete all required training for the Vaccine Coordinator role and should be on-site when feasible. <br>• **Immunization Champion:** A staff member who goes above and beyond their normal duties to promote immunizations to patients and in the community. |
| **Training** | Providers may take the **required EZIZ lessons** that satisfy educational requirements for enrollment and annual recertification once announced, typically around mid-December. For recertification, look for annual program communications that announce any available training test-out options. <br><br>• Anyone acting in VFA roles (Provider of Record and Designee, Vaccine Coordinator and Backup, or the optional Organization Vaccine Coordinator and Additional Vaccine Coordinator roles) must complete the **required EZIZ lessons** when hired and annually thereafter; staff must demonstrate competency in their assigned VFA roles. (California VFA Program "Provider Agreement Addendum" #3A) <br>• Any clinician who administers VFA-supplied vaccines must be knowledgeable of and familiar with all recommendations and guidance from the California Department of Public Health on immunizations, including schedules, indications, dosages, and new products. (P.A.A. #3B) **(Updated)** <br>• All staff who conduct VFA Program eligibility screening, documentation, and billing (e.g., front- or back-office staff) must be knowledgeable of all VFA eligibility categories, documentation, and billing for administration and general billing guidelines. Ensure proper training of personnel, including admitting and billing personnel, on processes for screening and billing for administration fees. (P.A.A. #3C) **(Updated)** |

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| | • All staff and supervisors who monitor storage unit temperatures or sign off on temperature logs must complete the related EZIZ lesson when hired and annually thereafter; they must be fully trained on use of the practice's data loggers and actions required after a temperature excursion is discovered. (P.A.A. #3E)<br>• Train staff who are authorized to accept packages to immediately notify the Vaccine Coordinator when VFA-supplied vaccines are delivered. (P.A.A.#3F)<br>• Conduct vaccine transport and temperature excursion response drills annually or more frequently as needed (e.g., when hiring new staff or staff errors are discovered) to maintain competency and readiness for emergencies. (P.A.A. #3F) **(Updated)** |

# Vaccine Management

| Category | Requirement |
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| **Vaccine Management Plan** | • Maintain a current and complete **vaccine management plan (Word)** for routine and emergency situations that includes practice-specific, vaccine-management guidelines and protocols, names of staff with temperature monitoring responsibilities, and required EZIZ lesson completion dates for all key practice staff. (California VFA Program "Provider Agreement Addendum" #2A)<br>• Staff with assigned vaccine-management responsibilities must review, sign, and date the vaccine management plan annually and each time it is updated, when VFA/ LHD 317 Program requirements change, and when staff with designated vaccine-management responsibilities change. (P.A.A. #2B) **(Updated)**<br>• Follow emergency guidelines to prepare for, respond to, and recover from any vaccine-related emergencies. (P.A.A. #2C)<br>• Store or post the vaccine management plan in a location easily accessible by staff, ideally near the vaccine storage units; and ensure relevant staff are trained to follow guidance when needed. (P.A.A. #2D)<br><br>**Resources: Mobile Vaccine Management Plan (PDF)** |
| **Vaccine Storage Units** | Participating providers agree to store all VFA vaccines, including those stored in separate units than VFC vaccines, in refrigerators and freezers that meet California VFA Program storage requirements. Adherence to these requirements is certified as part of annual provider recertification and during both routine and unannounced site visits.<br><br>• Do not store vaccine in dormitory-style units at any time. (VFA "Provider Agreement" #6B) **(New)**<br>• Store vaccine under proper storage conditions at all times. Refrigerator and freezer vaccine storage units and temperature monitoring equipment and practices must meet California Department of Public Health Vaccines for Adults Program storage and handling recommendations and requirements. (P.A. #6C) **(New)** |

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| | • Have refrigerators and freezers that comply with CA VFA Program's **storage unit requirements:** Very high-volume provider locations must use purpose-built (pharmacy-, biologic-, or laboratory-grade) refrigerators. Other provider locations may use refrigerators and freezers that are purpose-built (preferred) or commercial grade (acceptable). Household-grade, stand-alone refrigerators are discouraged. Purpose-built combination units, including auto-dispensing units without doors, are allowed. Notes: (1) Ultra-low temperature freezers are allowed for storage of Pfizer COVID-19 vaccines but are not required. (California VFA Program "Provider Agreement Addendum" #4A)<br>• Manual-defrost freezers are allowed for use if the practice has access to an alternate storage unit when defrosting the freezer (Note: Defrost manual-defrost freezers only when frost exceeds 1cm or the manufacturer's suggested limit). The alternate storage unit must have appropriate freezer temperatures and be monitored using a **CA VFA-compliant digital data logger**. Never store VFA-supplied vaccines in a cooler while defrosting a manual defrost freezer. (P.A.A. #4B) **(Updated)**<br>• Never use any of the following for routine vaccine storage: household-grade, combination refrigerator-freezers; compact, household-grade, stand-alone refrigerators with capacity 11 cubic feet or less; dormitory-style or bar-style combination refrigerator/freezers; manual-defrost refrigerators; convertible units; cryogenic (ultra-low) freezers; or any vaccine transport unit (including coolers and battery-operated units). (P.A.A. #4C)<br>• Purchase new refrigerators (purpose-built) or freezers (any grade) if existing storage units malfunction frequently or experience frequent temperature excursions; update new equipment information in myCAvax and your vaccine management plan. (P.A.A. #4D) **(Updated)** |
| **Storage Unit Configuration** | • **Prepare vaccine refrigerators and freezers (PDF)** following CA VFA Program requirements. (California VFA Program "Provider Agreement Addendum" #5A)<br>• Place water bottles (in refrigerators) and ice packs (in freezers only) to stabilize temperatures. (Exception for pharmaceutical grade and purpose-built, auto-dispensing units without doors. Follow manufacturer's guidance.) (P.A.A. #5B)<br>• Place data logger buffered probes vertically in the center of refrigerators and freezers near vaccines. (Exception for purpose-built, auto-dispensing units without doors. Follow manufacturer's guidance.) (P.A.A. #5C)<br>• Place data logger digital displays outside vaccine storage units to allow temperature monitoring without opening vaccine storage unit doors. (Exception for purpose-built, auto-dispensing units without doors.) (P.A.A. #5D)<br>• Plug in only one storage unit per electrical outlet that does not have built-in GFI circuit switches and is not controlled by light switches; never plug vaccine storage units into extension cords, or power strips or surge protectors with an on/off switch. (P.A.A. #5E)<br>• Post **Do Not Unplug (PDF)** signs on electrical outlets and circuit breakers to prevent interruption of power. (P.A.A. #5F)<br>• **Set up vaccine refrigerators and freezers (PDF)** following CA VFA Program requirements. (P.A.A. #5G)<br>• Clearly identify unit space or containers that will store VFA-supplied and privately purchased vaccines. (P.A.A. #5H)<br>• Group vaccines by pediatric, adolescent, and adult types. (P.A.A. #5I) |

| Category | Requirement |
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| | • Allocate enough space to position vaccines or baskets 2-3 inches away from walls, storage unit floor, and other baskets to allow space for air circulation. (Exception for purpose-built, auto-dispensing units without doors.) (P.A.A. #5J)<br>• Post CDPH **universal temperature log (PDF)** on vaccine storage unit doors or in an easily accessible location. (P.A.A. #5K) |
| **Digital Data Loggers (DDLs)** | Continuous temperature monitoring is an essential component of each provider's vaccine management plan. All staff and supervisors who monitor storage unit temperatures or sign off on temperature logs must be properly trained in the use of the practice's digital data loggers.<br><br>• Store vaccine under proper storage conditions at all times. Refrigerator and freezer vaccine storage units and temperature monitoring equipment and practices must meet California Department of Public Health Vaccines for Adults Program storage and handling recommendations and requirements. (VFA "Provider Agreement" #6C) **(New)**<br>• Equip all refrigerators and freezers (primary, backup, overflow, or any other temporary unit) storing VFA-supplied vaccines with **CA VFA-compliant digital data loggers**. (For purpose-built, auto-dispensing units without doors: Built-in, internal data loggers must meet VFA Program requirements—except for buffered probes, which are not required.) (California VFA Program "Provider Agreement Addendum" #6A)<br>• Only use data loggers that include the following minimum features: a digital display of current, minimum, and maximum temperatures; minimum accuracy of ±1.0°F (0.5°C); a buffered temperature probe (only use the probe that comes with the device) immersed in a vial filled with up to 60mL liquid (e.g., glycol, ethanol, glycerin), loose media (e.g., sand, glass beads), or a solid block of material (e.g., Teflon®, aluminum); an audible or visual out-of-range temperature alarm; logging interval of 30 minutes; a low-battery indicator; and memory storage of 4,000 readings or more. A battery source is required for backup devices used during vaccine transport. **Note**: Ultra-low temperature freezers are not required but must be equipped with an air-probe or a probe designed specifically for ultra-cold temperatures. (P.A.A. #6B) **(Updated)**<br>• Digital data loggers, including backup digital data loggers, must be able to generate a summary report of recorded temperature data since the device was last reset; summary reports must include minimum and maximum temperatures, total time out of range (if any), and alarm settings. Devices that only generate CSV data files or Excel spreadsheets are not acceptable. (P.A.A. #6C)<br>• Keep on hand at least one backup, battery-operated, digital data logger for use during recalibration, when primary device breaks, when primary device does not meet calibration requirements, or during emergency vaccine transport. Depending on size of the practice, additional devices might be needed. (P.A.A. #6D) **(Updated)**<br>• Digital data loggers must have a current and valid **certificate of calibration (PDF)**, including backup digital data loggers. (P.A.A. #6E)<br><br>**Resources: Pre-Purchase Worksheet (PDF)** • **Data Logger Feature Comparison Guide** |

**VFA** California Vaccines for Adults Program

| Category | Requirement |
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| **Data Logger Configuration & Maintenance** | • **Configure key settings (PDF)** for primary and backup digital data loggers, including device name, low and high temperature alarm limits, immediate notification of out-of-range temperatures, and a maximum logging interval of 30 minutes. (California VFA Program **"Provider Agreement Addendum"** #7A)<br>• Store the backup data logger's buffered probe in the vaccine refrigerator and keep its digital display separately in a cabinet; document the device's location on the practice's **vaccine management plan (Word)**. (Exception for purpose-built, auto-dispensing units without doors: Store the entire device in a cabinet.) (P.A.A. #7B)<br>• Calibrate primary and backup devices (both device and probe together) every two to three years or according to the manufacturer's suggested timeline—ideally by a laboratory with accreditation from an International Laboratory Accreditation Cooperation (ILAC) Mutual Recognition Arrangement (MRA) signatory body. Notes: If the manufacturer supplies a pre-calibrated replacement probe upon device calibration expiration, the device and probe do not need to be calibrated together. (P.A.A. #7C)<br>• Certificates issued by non-accredited laboratories must meet CA VFA Program **requirements for certificates of calibration (PDF).** (P.A.A. #7D)<br>• Calibrate primary and backup devices on different schedules to ensure all refrigerators and freezers storing VFA-supplied vaccines are equipped with data loggers at all times. (P.A.A. #7E)<br>• Keep certificates of calibration on file and make available to the VFA Program upon request. (P.A.A. #7F)<br>• Purchase a new data logger if existing device or probe malfunctions, is damaged, or if device provides repeated, inaccurate temperature readings. (Exception for replacement probes recommended and replaced by the device manufacturer.) Update new device information in myCAvax and the provider's vaccine management plan. (P.A.A. #7G) **(Updated)**<br><br>**Resources**: **Data Logger Setup & Use (PDF)** • **Certificate of Calibration Quick Guide (PDF)** • **Find a Laboratory** |
| **Vaccine Orders & Accountability** | Providers submit vaccine order requests in **myCAvax** for all available vaccines including RSV and COVID-19. Product offering may be impacted by vaccine supply. Vaccine orders should be carefully timed to minimize under-ordering (insufficient inventory to meet demand) and over-stocking (preventable loss if doses expire before use).<br><br>• Order vaccine and maintain appropriate vaccine inventories. (VFA **"Provider Agreement"** #6A) **(New)**<br>• Doses administered reported with each VFA order must match doses recorded in an immunization information system (CAIR or CAIR/Healthy Futures) as "317." Registry data will be used to approve vaccine orders. (P.A. #10) **(Updated)**<br>• Standards for vaccine ordering, reporting and management will be followed as outlined in the **VFA Program Provider Agreement Addendum (PDF)**. Detailed information on ordering can be found at **California Vaccines for Adults Program**. (P.A. #12)<br>• Order vaccines according to the quarterly VFA order frequency; providers who have not ordered vaccines in the past calendar year may be terminated from the VFA Program. (P.A. #13) |

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**VFA** | California Vaccines for Adults Program

| Category | Requirement |
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| | • Order only one brand and formulation for each vaccine to avoid administration errors. Notes: (1) Under limited circumstances, providers may be allowed to order more than one brand or formulation with VFA Program approval. (2) Any changes to vaccine brand ordering will require a submitted a **vaccine brand change request form (PDF)**. (California VFA "Provider Agreement Addendum" #8A)<br>• Order all vaccine doses in sufficient quantities to last until the next order period; order quantities must factor in VFA vaccine doses administered (since the previous order) as reported to the California Immunization Registry (CAIR or CAIR/Healthy Futures) and the VFA doses on hand (at the time of the order). Order approval will factor limited doses available through the VFA Program. (P.A.A. #8B)<br>• Order vaccines according to the provider location's assigned frequency (VFA: quarterly). Provider locations who have not ordered and administered in the past 12 months will be terminated from the VFA Program. Notes: (1) Vaccines ordered solely to prevent account termination and are lost due to expiry will be considered a negligent loss. (2) Newly enrolled providers must order within 3 months to maintain their active enrollment in the VFA Program. (P.A.A. #8C)<br>• Order vaccines using the approved practice address for the provider PIN (P.A.A. #8D)<br>• Account for every dose of VFA-supplied vaccine ordered and received by the provider location. Note: Doses administered reported with each VFA order must match doses recorded in an immunization information system (CAIR or CAIR/Healthy Futures) as "317." (P.A.A. #8E).<br>• Report all VFA vaccine doses administered (since the previous order) and doses on hand (at the time of the order) on each vaccine order. Vaccine doses administered must be based on actual **vaccine administration logs (PDF)** or registry/EMR administration summary reports. (P.A.A. #8F)<br>• Maintain accurate and separate stock vaccine records (e.g., purchase invoices, receiving packing slips) for privately purchased vaccines if vaccinating non-VFA patients with ACIP-recommended vaccines and make records available to the VFA Program upon request. (P.A.A. #8G) **(Updated)**<br><br>**Resources**: **Influenza Product Guide (PDF)** • **COVID-19 Product Guide (PDF)** • **Vaccine Fact Sheets** |
| **Receiving Vaccine Deliveries** | • Never reject vaccine shipments. (California VFA Program "Provider Agreement Addendum" #9A)<br>• Receive, inspect, and store vaccines and diluents within manufacturer-recommended ranges immediately upon delivery. (P.A.A. #9B)<br>• Immediately report any shipment incidents in myCAvax; providers are encouraged to use the **Vaccine Receiving Checklist (PDF)** to gather the necessary reporting data. (P.A.A. #9C)<br>• Keep packing slips for all vaccine shipments received, including publicly funded and private vaccine shipments. (P.A.A. #9D)<br>• The provider location must be open with staff available to receive vaccines at least one day a week (other than Monday) and for at least four consecutive hours. (P.A.A. #9E)<br><br>**Resources**: **TagAlert Cooler Insert (PDF)** • **Dry Ice Safety (PDF)** |

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| **Vaccine Storage** | • Store vaccine under proper storage conditions at all times. Refrigerator and freezer vaccine storage units and temperature monitoring equipment and practices must meet California Department of Health Vaccines for Children Program storage and handling recommendations and requirements. (VFA "Provider Agreement" #6C) **(New)**<br>• Dedicate vaccine refrigerators and freezers to the storage of vaccines only; if storage of medications or biologics is necessary, store below vaccines on a different shelf. (California VFA Program "Provider Agreement Addendum" #10A)<br>• Store all frozen vaccines (Merck MMR, MMRV, Varicella, and Moderna COVID-19) between -58.0°F and 5.0°F (-50.0°C and -15.0°C) according to manufacturer recommendations. (P.A.A. #10B)<br>• Store all other refrigerated vaccines between 36.0°F and 46.0°F (2.0°C and 8.0°C) according to manufacturer recommendations. (P.A.A. #10C)<br>• Store vaccines in original packaging and allow space for air circulation. (P.A.A. #10D)<br>• Store VFA-supplied and privately purchased vaccines separately and grouped by vaccine type. (P.A.A. #10E)<br>• Do not store vaccines in doors, vegetable bins, floor, or near/under cooling vents. (P.A.A. #10F) **(Updated)**<br>• Place vaccines with the earliest expiration dates toward the front of vaccine storage units and use first. (P.A.A. #10G)<br>• Always store VFA-supplied vaccines at the approved location for the provider PIN. (P.A.A. #10H)<br><br>**Resources: [Inventory Stickers (PDF)](#)** |
| **Monitoring Storage Unit Temperatures** | Monitoring storage unit temperatures consistently and accurately plays an important role in protecting the vaccines that protect your patients. This is particularly critical if VFA vaccines are stored in separate units than VFC vaccines. Twice daily temperature monitoring helps to prevent loss of expensive vaccines and potential need for revaccination of patients by identifying out-of-range temperatures quickly and allowing for immediate corrective action.<br><br>• Record vaccine storage unit temperatures on the CDPH **universal temperature log (PDF)**. (California VFA Program "Provider Agreement Addendum" #11A)<br>• **Monitor and record (PDF)** current, minimum, and maximum temperatures twice each day: at the beginning and end of each business day. (P.A.A. #11B)<br>• Temperature logs must be legible and completed accurately and in ink. (P.A.A. #11C)<br>• Neatly cross out, correct, initial, and date any inadvertent documentation error immediately. (P.A.A. #11D)<br>• Download temperature data files, review, and respond to any unreported out-of-range temperatures at the end of every two-week reporting period. (P.A.A. #11E) **(Updated)**<br>• The supervisor must certify and sign that temperatures were recorded twice daily, staff printed names and initials, and any temperatures excursions were documented with corrective actions taken for each completed temperature log sheet. (P.A.A. #11F) **(Updated)**<br>• Replace vaccines (on a dose-for-dose basis) as instructed by the CA VFA Program if storage unit temperatures are not monitored and documented, if temperature logs or temperature data files are falsified, or if temperature logs or temperature data files are missing during a site visit. (P.A.A. #11G) |

| Category | Requirement |
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| | • Retain temperature logs and temperature data files for three years—even if the provider is no longer participating in the CA VFA Program due to provider-initiated withdrawal or VFA-initiated termination. (P.A.A. #11H). **(Updated)**<br><br>**Resources**: **How to Record Temperatures (PDF), Reading a Digital Display (PDF)** |
| **Taking Action for Temperature Excursions** | Vaccines stored out of range might be deemed non-viable and considered a negligent vaccine loss. A temperature excursion does not automatically mean that exposed vaccines are non-viable or unusable. Staff must immediately prevent use of vaccines exposed to out-of-range temperatures and notify relevant staff. The data collected when reporting temperature excursions is used to determine whether a vaccine is likely to be viable and can be administered to patients.<br><br>• Take immediate action to prevent vaccine spoilage and correct any improper storage condition for all out-of-range storage unit temperatures. (California VFA Program "Provider Agreement Addendum" #12A)<br>• Respond to all data logger alarms and temperature excursions. Quarantine and do not administer vaccines exposed to out-of-range temperatures until vaccine viability has been determined. (P.A.A. #12B) **(Updated)**<br>• Identify and report in myCAvax every temperature excursion from any data logger that is recording temperatures for a unit storing VFA-supplied vaccines and comply with any instructions provided. Communicate temperature excursions to vaccine manufacturers if instructed by myCAvax. (P.A.A. #12C) **(Updated)**<br>• Never discard affected vaccines unless advised by vaccine manufacturers, the CA VFA Program, or Field Representatives. (P.A.A. #12D) **(Updated)**<br>• Transport vaccines in the event of extended power outages or unit malfunctions following the guidelines for proper **refrigerated (PDF)** and **frozen vaccine transport (PDF).** (P.A.A. #12E)<br><br>**Resources**: **How to Record Temperatures (PDF)** • **Do Not Use Vaccines (PDF)** • **Reporting Temperature Excursions** |
| **Vaccine Inventory Management** | Careful inventory management ensures providers maintain adequate vaccine supply for all patients represented in their profile. A physical vaccine count might be required if the number of VFA doses on hand doesn't match quantities reported on previous vaccine orders. Remove spoiled or expired vaccine immediately to minimize administration errors.<br><br>• Standards for vaccine ordering, reporting and management will be followed as outlined in the **VFA Program Provider Agreement Addendum (PDF)**. Detailed information on ordering can be found at **California Vaccines for Adults Program**. (VFA "Provider Agreement" #12)<br>• Vaccine purchased with Section 317 federal funds that are deemed non-viable due to provider negligence must be replaced on a dose-for-dose basis and/or require corrective actions. (P.A. #16)<br>• Conduct a physical vaccine inventory at least monthly, and before ordering vaccines, using the **Vaccine Inventory Form (PDF)** or equivalent electronic or paper form. (California VFA Program "Provider Agreement Addendum" #13A).<br>• Never borrow VFA-supplied vaccines to supplement private or other publicly funded vaccine stock, or vice versa. (P.A.A. #13B) **(Updated)** |

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| | • For vaccines that will expire within 6 months and cannot be used, follow VFA Program requirements to notify and transfer short-dated doses to another active VFA provider to prevent a negligent vaccine loss. Note: For providers with expired vaccines who ordered the minimum quantity will not be considered a negligent loss. (P.A.A. #13C) **(Updated)** <br> • Remove spoiled, expired, deauthorized, and wasted vaccines from storage units to prevent inadvertent use. (P.A.A. #13D) **(Updated)** <br> • Monitor vaccine storage units regularly and purchase additional storage units if capacity cannot accommodate the inventory in a manner consistent with CA VFA Program requirements. (P.A.A. #13G) <br><br> **Resources**: **How to Do a Physical Inventory (PDF)** • **Prevent Vaccine Loss flyer (PDF)** |
| **Reporting Waste & Returns** | • Return all spoiled/expired public vaccines to CDC's centralized vaccine distributor within six months of spoilage/expiration. (VFA "Provider Agreement" #6D) **(New)** <br> • Report in myCAvax all spoiled, expired, or wasted doses of VFA-supplied vaccines prior to submitting a new vaccine order. (California VFA Program "Provider Agreement Addendum" #13E) **(Updated)** <br> • Confirm with vaccine manufacturers and/or the CA VFA Program before reporting any VFA- supplied vaccine as spoiled. (P.A.A. #13F) <br><br> **Resources**: **Reporting & Return of Nonviable Vaccines** |
| **Vaccine Transfers & Transports** | Vaccine transfer can be minimized by consistent inventory management, but providers might need to transfer vaccines to another active VFA providers if vaccines will expire within six months and are likely expire before administration or in the event of an emergency. <br><br> • Contact the Provider Call Center to obtain approval to transfer VFA-supplied vaccines; only transfer VFA vaccines to another active VFA provider. (California VFA Program "Provider Agreement Addendum" #14A) **(Updated)** <br> • Transfer VFA-supplied vaccines only when necessary. Vaccines should never be routinely transferred to and from an existing location. (P.A.A. #14B) <br> • Report in myCAvax all transfers in and out of inventory. (P.A.A. #14C) **(New)** <br> • Transport vaccines only when necessary and follow the guidelines for proper **refrigerated (PDF)** and **frozen vaccine transport (PDF)** each time vaccines are transported. (P.A.A. #14D) <br> • Complete a **vaccine transport log (PDF)** each time vaccines are transported. (P.A.A. #14E) <br> • In case of an emergency only, transport VFA-supplied vaccines to alternate storage locations equipped with **vaccine storage units** and **digital data loggers** that meet CA VFA Program requirements. Temporary storage of vaccines in a cooler is unacceptable. (P.A.A. #14F) **(Updated)** <br> • Never transport VFA-supplied vaccines to personal residences. (P.A.A. #14G) <br> • Use backup, battery-operated, digital data loggers to monitor temperatures during vaccine transport. (P.A.A. #14H) **(Updated)** |

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| | • If instructed by the CA VFA Program, agree to replace any vaccines that were transported without proper temperature monitoring documentation on a dose-for-dose basis. (P.A.A. #14I) **(Updated)** |

# Vaccine Administration

| Category | Requirement |
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| **Eligibility Screening & Documentation** | Follow program requirements for patient eligibility screening and documentation. Document all elements of the **317 Eligibility Screening Record (PDF)** including the screening date, VFA eligibility (Y/N), and any eligibility criteria if met.<br><br>• Section 317 vaccines will be administered to any individual aged 19 years and older who is uninsured or underinsured. Patients covered by Medi-Cal are considered insured and not eligible for the VFA Program. Staff will consult the **317 Eligibility Based on Insurance Status table (PDF)** as needed to determine specific vaccine eligibility for patients. Eligibility screening and documentation of eligibility status will be conducted at each immunization encounter and prior to the administration of vaccine doses. Verification of eligibility can be obtained verbally from the individual. All staff, including front office and billing staff, will be knowledgeable of VFA eligibility. VFA vaccines must be administered to adults who are 19 years of age or older who meet one of the following categories: A) Uninsured: Does not have (public or private) health insurance coverage. B) Are underinsured: A person who has health insurance, but the insurance does not cover any vaccines; a person whose insurance covers only selected vaccines; a person whose insurance does not provide first-dollar coverage for vaccines. C) Patients that do not meet the vaccine eligibility categories are not eligible to receive Section 317-purchased vaccines. (VFA "Provider Agreement" #2) **(Updated)**<br><br>**Resources**: **317 Eligibility Screening & Documentation Requirements** • **317 Eligibility Based on Insurance Status (PDF)** • **317 Eligibility Screening Record (PDF)** • VFA "Free Vaccines" poster in **English (PDF)** and **Spanish (PDF)** • **Vaccine Eligibility Guidelines for CHCs (PDF)** • **VFA FAQs Part II – Patient Eligibility** |
| **Vaccine Administration** | • Section 317 vaccines will be administered in compliance with the most recent immunization schedule, dosage, and contraindications based on guidance from the California Department of Public Health unless: a) in making a medical judgment in accordance with accepted medical practice, the provider deems such compliance to be medically inappropriate for the patient; or b) the patient declines particular immunizations. (VFA "Provider Agreement" #3) **(Updated)**<br>• Current Vaccine Information Statements (VISs) will be offered prior to each vaccination. Vaccine administration records will be maintained in accordance with the National Childhood Injury Act (NCVIA), which includes reporting clinically significant adverse events to the **Vaccine Adverse Event Reporting System (VAERS)** (vaers.hhs.gov). (P.A. #5) |

**VFA** California Vaccines for Adults Program

| Category | Requirement |
|---|---|
| | • Administer all VFA-supplied vaccines at the approved practice address for the provider PIN; do not refer patients to other facilities where they might be charged for vaccine administration. (California VFA "Provider Agreement Addendum" #15A) **(New)**<br>• Acknowledge and follow VFA Program and manufacturer guidance, including revaccination, if nonviable vaccines have been administered to patients. (P.A.A. #15B) **(New)**<br>• Report all VFA-supplied vaccine doses administered to the California Immunization Registry (CAIR or Healthy Futures/RIDE) under the Registry ID for the corresponding provider PIN receiving vaccines; data must include all required VFA screening and administration elements. (P.A.A. #15C) **(Updated)**<br>• Record information about each immunization given, including: (1) the name of the vaccine, (2) the date it was given, (3) the route and administration site, (4) the lot number and manufacturer, (5) the name and title of the person who administered it, (6) the practice's name and address and (7) the VIS publication date and date VIS was provided. (National Vaccine Injury Compensation Program)<br><br>**Resources**: **CDC Adult IZ Schedule** • **Instructions for Using VIS (PDF)** • **CDC VISs** • **VAERS, VERP and MedWatch flyer (PDF)** • **Immunization Record (PDF)** • **My DVR** • **Administration Job Aids** |
| **Reporting Doses Administered/ CAIR Documentation** | Follow program requirements for documenting patient immunization information into an immunization registry. Providers should have a backup system when conducting off-site clinics or any time the reporting system is not accessible. Providers may use the **vaccine usage logs (PDF)** to collect administration data for later entry into CAIR.<br><br>• Organization will be enrolled in a local immunization information system (CAIR or CAIR/Healthy Futures). (VFA "Provider Agreement" #7)<br>• Enter all VFA vaccines doses administered in the practice, regardless of patient's age or eligibility status, into the California Immunization Registry (CAIR), or an approved Immunization Information system, in accordance with all specified elements of AB 1797. Vaccine administration submission shall include specifics about the vaccine (including manufacturer, lot number, and NDC), funding source, patient's eligibility category by dose, and should occur within the same day of administration, but no later than 14 days, and prior to submission of vaccine orders. Doses administered reported as part of vaccine ordering should match quantities reported to the immunization registry. (P.A. #8) **(Updated)**<br>• Immunization of VFA-eligible patients will be documented in or submitted through data exchange as "317 Vaccine Eligibility or Vaccine Eligibility Category (HL7) Code V23" doses to the local immunization information system (CAIR or CAIR/Healthy Futures) and documented in an Electronic Health Record (EHR). The total number of patients immunized with Section 317 vaccines and inventory on hand will be reported to the California Department of Public Health (CDPH) according to reporting guidelines. Review doses reported in the immunization information system periodically, or at a minimum of every 3 months. (P.A. #9) **(Updated)**<br>• Enter all immunization administration data as well as a patient's race and ethnicity into a California immunization registry (CAIR or CAIR/Healthy Futures) per CA **AB 1797**. (California VFA "Provider Agreement Addendum" #16A) |

**California Department of Public Health**

**VFA** California Vaccines for Adults Program

| Category | Requirement |
|---|---|
| | • Report all VFA vaccine doses administered to an immunization registry (CAIR or CAIR/Healthy Futures); data must include all required elements of eligibility screening (including eligibility code and funding source), NDC and vaccine administration elements. (P.A.A. #16B) **(Updated)**<br>• Report doses administered under the Registry ID for the corresponding VFA PIN receiving vaccines. (P.A.A. #16C)<br>• Doses administered reported with each VFA order must match doses recorded in an immunization information system (CAIR or CAIR/Healthy Futures) as '317.'" Registry data may be used to approve vaccine orders. (P.A.A. #16E)<br><br>**Resources**: **Reporting Doses Administered** • **AB 1797 Immunization Registry FAQ** • **Local CAIR Reps** • **CAIR** • **CAIR/Healthy Futures** |
| **Billing for Vaccine Administration** | To reduce financial barriers for patients and ensure that VFA-eligible patients will not incur additional costs outside of any routine copay for the clinic visit, providers must follow program requirements. **Post a sign (PDF)** clearly visible to patients which communicates that "Free vaccines are available to adult patients who are uninsured or have insurance that doesn't cover (certain) vaccines. We do not charge these patients for getting the vaccine or for the cost of the vaccine."<br><br>• Patients immunized with Section 317 vaccines will not be billed for the cost of the vaccine nor be charged an administration fee. All systems will be checked to ensure patients are not charged and vaccine cost will not be billed. (VFA **"Provider Agreement"** #4)<br>• **For VFA Providers:** For uninsured/underinsured eligible adults, never bill for the cost of the vaccine and the administration fee**. (California VFA Program "Provider Agreement Addendum" #15D)<br><br>**Resources**: **Billing Resources** • "Free Adult Vaccines" poster in **English (PDF)** and **Spanish (PDF)** |

# Program Integrity

| Category | Requirement |
|---|---|
| **Site Visits** | • Authorized representatives of the VFA Program will be permitted to visit the facility in order to review compliance with policies and procedures. Provider agrees to implement and complete corrective actions identified during the visit. (VFA "Provider Agreement" #15)<br>• Clinic staff must conduct themselves in an ethical, professional, and respectful manner in all interactions with CDPH Program staff. Providers agree to allow CDPH **Field Representatives** to conduct visits without requiring personal information. (California VFA Program "Provider Agreement Addendum" #17A) **(Updated)**<br>• Make all vaccine administration records (privately and publicly funded) available to representatives from the California Department of Public Health Immunization Branch and VFA Program. (P.A.A. #17C) |

| Category | Requirement |
|---|---|
| | • Comply with all mandatory corrective actions and the timeline provided by the VFA Program. Unresolved mandatory corrective actions may result in prevention of completion of recertification and/or placement on a conditional enrollment. Failure to complete required annual recertification may lead to program termination. (P.A.A. #17D)<br>• Acknowledge that failure to meet conditional enrollment conditions may lead to permanent termination from the VFA Program. (P.A.A. #17E) |
| **Fraud & Abuse** | • Organization will operate in a manner intended to avoid fraud and abuse of Section 317 vaccines. **Fraud**: an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person. It includes any act that constitutes fraud under applicable federal or state law. **Abuse:** provider practices that are inconsistent with sound fiscal, business, or medical practices and result in an unnecessary cost to the program or in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for healthcare. (VFA "Provider Agreement" #14) |
| **Record Retention** | • The patient's recorded 317 eligibility status, and all records related to the VFA Program will be retained for three (3) years. If requested, these records will be made available to the California Department of Public Health (CDPH). Records include, but are not limited to, vaccine administration documentation, billing records, medical records that verify receipt of vaccine, and vaccine temperature log records. Release of such records will be bound by federal and state privacy laws. (VFA "Provider Agreement" #11)<br>• Never destroy, alter, or falsify immunization VFA Program-related records (P.A.A #17B) |
| **Enrollment, Recertification & Termination** | Prospective providers must assign key practice staff to VFA roles, complete all required training, enroll in the California Immunization Registry, and comply with storage equipment requirements before enrolling in myCAvax. Enrolled providers are responsible for all VFA-supplied vaccines received in their practice.<br><br>**Recertification**. Providers must recertify their participation in the VFA Program each year by updating their information, completing or testing out of required EZIZ training, and signing new provider agreements. Failure to recertify will lead to termination from the VFA Program. A waiting period to request re-enrollment may apply.<br><br>**Termination**. Providers may voluntarily withdraw from the VFA Program, which may also terminate a provider's VFA "Provider Agreement" for failure to comply with program requirements. In both cases, the Provider of Record must return spoiled/expired vaccine or transfer all unused VFA-supplied vaccines to another active VFA provider.<br><br>• I understand that the CDPH Immunization Branch or my practice/organization may terminate this agreement at any time. If the agreement is terminated, any unused Section 317 vaccines will be properly returned to the CDPH Vaccines for Adult (VFA) Program. (VFA "Provider Agreement" #17)<br><br>**Resources**: **Participation Withdrawal Request Form (PDF)** • **VFA FAQs** • **Recertification FAQs (PDF)**. |

VFA | California Vaccines for Adults Program

# Temporary Mobile & Off-Site Clinics

| Category | Requirement |
|---|---|
| **Mobile Clinics**<br>**(New)** | • The CA VFA Program must approve use of mobile units administering VFA-supplied vaccines. (California VFA Program "Provider Agreement Addendum" #18A)<br>• Providers must designate a Vaccine Coordinator to travel with the mobile unit when it goes into the field. Vaccine Coordinators must complete all required training before traveling in mobile units. (P.A.A. #18B)<br>• Mobile clinics must maintain a current and complete **mobile vaccine management plan (Word)** and keep it in the mobile unit. (P.A.A. #18C)<br>• Providers must make mobile units and relevant equipment and documentation available during site visits. (P.A.A. #18D)<br>• Mobile clinics must monitor and record current, MIN, and MAX temperatures on the **universal temperature log (PDF)** at the beginning and end of each clinic day. (P.A.A. #18E)<br>• Mobile clinics must report temperature excursions in myCAvax as soon as possible and follow requirements for responding to excursions. (P.A.A. #18F)<br>• Mobile clinics must report doses administered to the regional immunization registry the same day but no later than 15 days after the end of the clinic. (P.A.A. #18G) |
| **Off-Site Clinics**<br>**(New)** | • Providers must obtain approval from the CA VFA Program at least four weeks **prior** to any off-site clinic. (California VFA Program "Provider Agreement Addendum" #18A)<br>• Off-site clinics must administer all VFA vaccines offered at the event for which the patient is eligible. Frozen vaccines may not be administered off-site unless there is prior approval from CA VFA Program. (P.A.A. #18B)<br>• Provider locations designated solely as mass vaccinators must use purpose-built, vaccine transport units for transport and on-site storage. (P.A.A. #18C)<br>• Off-site clinics must complete a **vaccine transport log (PDF)** every time vaccines are transported in and out of the stationary clinic. (P.A.A. #18D)<br>• Off-site clinics must use backup, battery-operated, digital data loggers to monitor temperatures—ideally using a portable vaccine refrigerator (if not available, use qualified containers and pack outs). (P.A.A. #18E)<br>• Off-site clinics must monitor and record current, MIN, and MAX temperature on the **hourly temperature log (PDF)** and every hour; attach data logger download or summary report to the vaccine transport log. (P.A.A. #18F)<br>• Off-site clinics must report temperature excursions in myCAvax as soon as possible and follow requirements for responding to excursions. (P.A.A. #18G)<br>• Off-site clinics must report doses administered to the regional immunization registry the same day but no longer than 15 days after the end of the clinic. (P.A.A. #18H) |