



VFC Eligibility, Screening and Documentation

VFC providers must screen every patient under 19 years old for program eligibility at each immunization encounter and document their eligibility status. VFC vaccines can only be administered to children who meet the eligibility criteria.

VFC eligibility

Children through 18 years of age (under 19) who meet at least one of the following self-reported criteria are eligible to receive VFC vaccine:

American Indian/Alaska Native

For the purposes of the VFC program, AI/AN is defined by the Indian Health Care Improvement Act [25 U.S.C. 1603]. AI/AN children are VFC-eligible under any circumstance. However, because VFC is an entitlement program, participation is voluntary.

When an AI/AN child also fits a second VFC eligibility category, the provider should always choose the category that will cost less for the family.

Medicaid-enrolled/eligible

Children who are eligible for the Medicaid program are VFC eligible. For the purposes of the VFC program, the terms "Medicaid-eligible" and "Medicaid-enrolled" are used interchangeably.

Medicaid as secondary insurance: Some children may have a private primary health insurance plan with Medicaid as their secondary insurance. These children are considered VFC-eligible because of their Medicaid enrollment.

Uninsured

Children not covered by any health insurance plan.

Underinsured

Underinsured means the child has health insurance, but the insurance policy either:

- Doesn't cover any ACIP-recommended vaccines.
- Doesn't cover all ACIP-recommended vaccines (underinsured for vaccines not covered).
- Does cover ACIP-recommended vaccines but has a fixed dollar limit or cap for payment.

Only available at Federally Qualified Health Centers (FQHC), or Rural Health Centers (RHC).

Insured (not eligible). Insured is defined as having health insurance that covers the cost of the vaccinations. This applies even for plans with a high deductible that has not yet been met along with copays, deductibles or other charges associated with the cost of vaccines.

VFC screening requirements

VFC providers must screen and document patient eligibility at each immunization visit.

- Document eligibility appropriately in the patient record which can be paper, EHR, or WIR.
- The provider must document by eligibility category such as Medicaid or Uninsured and not just “Yes” or “No.”
- The documentation must be at the dose level, not patient level.
- Providers should select the eligibility requiring the least out-of-pocket expense to the family.

Vaccine administration documentation requirements

Providers must follow federal requirements for documenting vaccines administered. For every vaccine administered, provider must document:

- Name of vaccine administered, manufacturer, and lot number.
- Address of the clinic where the vaccine was administered.
- Date when the dose was administered.
- Name and title of the individual administering the vaccine.
- Date when vaccine information sheet (VIS) was given and VIS publication date.
- Vaccine eligibility status.

Providers are required to distribute the [current VIS](#) for every vaccine before vaccine administration. For vaccines without a VIS, providers are required to distribute an Emergency Use Authorizations (EUA)/Emergency Use Instructions (EUI) fact sheet. Additionally, VFC providers are required to report all clinically significant adverse events to the [Vaccine Adverse Event Reporting System \(VAERS\)](#).

A note about nirsevimab – an Immunization Information Statement (IIS) must be provided prior to administration. Additionally, if nirsevimab is not co-administered with other vaccines, adverse reactions are to be reported to [MedWatch](#).

Eligibility chart and special situations

Insurance Status	VFC Eligible	VFC Eligibility Category
Enrolled in Medicaid	Yes	Medicaid
Has private insurance and enrolled in Medicaid	Yes	Medicaid: Individuals are not required to participate in the VFC program, choose the option that is most cost-effective.
Enrolled in a Health Care Sharing Ministry	Yes	Uninsured; Health Care Sharing Ministries are not considered insurance coverage in WI.
Does not have any health insurance coverage	Yes	Uninsured
Enrolled in Medicaid and is AI/AN	Yes	AI/AN or Medicaid: Choose the option that is most cost-effective.
Has private insurance and is AI/AN	Depends	AI/AN or Insured: Individuals are not required to participate in the VFC program, choose the option that is most cost-effective.
Has private insurance	No	Insured
Has private insurance that covers vaccines but has not yet met deductible	No	Insured: This applies even when the primary insurer would deny reimbursement for the cost of the vaccine and its administration because the plan's deductible has not been met.
Has private insurance that covers vaccines but has not yet met deductible and enrolled in Medicaid	Yes	Medicaid
Has private insurance but does not cover all or some vaccines	Yes	Underinsured: Individuals can only receive vaccines not covered by the plan.
Has insurance covering all vaccines, but the plan has a fixed dollar limit or cap on amount that it will cover	Depends	Insured until the fixed dollar limit is met. Underinsured after the fixed dollar limit is reached.
Incarcerated at a juvenile detention center or correctional facility and lost insurance or Medicaid coverage	Yes	Uninsured