DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, Maryland 21244-1850



Center for Medicaid and State Operations

SMDL #04-008

December 14, 2004

Dear State Medicaid Director:

The purpose of this letter is to clarify the procedures for assuring that Medicaid enrolled children who are eligible for the Vaccines for Children (VFC) Program (i.e., children younger than 19 years of age) receive their influenza shots. We want to stress that Medicaid providers should be vaccinating high priority VFC-eligible, Medicaid enrolled children with influenza vaccine they have on hand, regardless of whether the vaccine is available under the VFC program, when children present themselves at the provider's office. We also want to assure that Medicaid providers are appropriately reimbursed for the flu vaccines they provide to VFC-eligible, Medicaid enrolled children and that State Medicaid agencies receive federal reimbursement at the usual matching rate when appropriate.

The Advisory Committee on Immunization Practices (ACIP), an advisory committee to the Secretary of Health and Human Services and the Centers for Disease Control and Prevention (CDC), has identified the following high priority children to be vaccinated against influenza this year under the VFC Program:

- Children aged 6 months through 23 months.
- Children and adolescents aged 2 through 18 years with chronic disorders of the pulmonary or cardiovascular systems, including asthma.
- Children and adolescents aged 2 through 18 years who have required regular medical follow-up or hospitalization during the preceding year because of chronic metabolic diseases (including diabetes mellitus), renal dysfunction, hemoglobinopathies, or immunosuppression (including immunosuppression caused by medications or by human immunodeficiency virus [HIV]).
- Children and adolescents aged 2 through 18 years who are receiving long-term aspirin therapy and may therefore be at risk for developing Reye syndrome after influenza.
- Children and adolescents aged 2 through 18 years who are residents of nursing homes and other long-term care facilities that house persons at any age who have chronic medical conditions.
- Adolescent females aged <19 years who will be pregnant during the influenza season.
- Children and adolescents aged 2 through 18 years who are household contacts or out-of-home caregivers of children aged <6 months.

Page 2 – State Medicaid Director

Many Medicaid providers will receive influenza vaccine from both the VFC Program and private sources. Medicaid providers with vaccine from both sources should take care to use the VFC vaccine only for federally vaccine-eligible high priority children and privately purchased vaccine for non-VFC-eligible high priority children. However, in the event a Medicaid provider does not have VFC supply on hand to vaccinate a high priority VFC-eligible Medicaid enrolled child, the provider should use vaccine from private stock, if available. The provider should not turn away, refer or reschedule that child for a later date, if vaccine is available. In instances where a VFC-eligible Medicaid child is vaccinated from private stock, the provider could either provide a replacement dose if VFC vaccine becomes available on a timely basis during this influenza season or, if no future VFC shipments are expected on a timely basis, bill the state Medicaid program directly for the vaccine itself and for administering the vaccine. The state Medicaid program will reimburse the Medicaid provider for both the vaccine as well as for administering the vaccine to high priority VFC-eligible Medicaid enrolled children and the Centers for Medicare & Medicaid Services (CMS) will match the state's expenses at the usual federal matching rate. Please note that Medicaid payment applies to vaccinations received by VFC-eligible Medicaid enrolled children but not to other federally vaccine-eligible children (i.e., American Indians/Alaska Natives, uninsured, and underinsured children served in a federally qualified health center or rural health center) who are not also enrolled in Medicaid.

There may be some instances where a Medicaid provider needs to borrow vaccine from VFC stock in order to vaccinate high priority, privately insured children. The VFC Program has a policy of allowing VFC/Medicaid providers to borrow limited VFC influenza vaccine doses to vaccinate such individuals as long as such loan/borrowing is adequately documented and the doses are replaced on a timely basis. Therefore, it is important that a Medicaid provider should only vaccinate a high priority, privately insured person using VFC vaccine, if the provider expects a shipment of private vaccine in the coming weeks that will replace the VFC vaccine borrowed and the provider has enough VFC doses available to assure that no VFC-eligible children will be turned away in the meantime.

Providers with insufficient influenza vaccine supply to vaccinate their high priority Medicaid children should contact their state and local health departments to determine if additional vaccine is available to order and to seek guidance regarding any efforts to reallocate vaccine among providers. If these providers are out of all vaccine stock, they should refer their Medicaid enrolled patients to other Medicaid providers in the community if they know these providers have influenza vaccine in stock.

Because there is increased demand for influenza vaccine this season, Medicaid providers should: ensure that parents/guardians and patients are educated about the benefits and risks of vaccination in a culturally appropriate manner and in understandable language; follow appropriate procedures for vaccine storage, handling, and documentation of vaccine administration; have systems in place to outreach to high priority Medicaid

Page 3 – State Medicaid Director

enrolled children; and remind parents/guardians of high priority children due for vaccination, including children requiring a second dose of influenza vaccine.

Medicaid enrolled children under the age of 19 are VFC-eligible and are the focus of the above discussion. However, under the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services/benefit, Medicaid enrolled children under 21 years of age are required to be vaccinated based on the ACIP recommendations. Therefore, States also must cover and reimburse for influenza vaccinations provided to Medicaid enrolled children ages 19 and 20 years of age who fall into an ACIP high priority group. (CDC's Web site at www.cdc.gov/nip/flu identifies the high priority groups of children and adults recommended by the ACIP for influenza vaccination this season.) Note also that states that cover influenza vaccinations for adults 21 years of age or older as an optional Medicaid benefit should refer to the CDC website. Except as noted previously, private vaccine stock should be used to vaccinate high priority Medicaid enrolled persons who are not eligible for the VFC Program.

Please address any questions to Ms. Jean Sheil, Director of the Family and Children's Health Program Group at 410-786-5647. Please note that CDC has concurred with the contents and message in this letter.

Sincerely,

/s/

Dennis G. Smith Director

cc:

CMS Regional Administrators

CMS Associate Regional Administrators for Medicaid and State Operations

Kathryn Kotula Director, Health Policy Unit American Public Human Services Association

Joy Wilson Director, Health Committee National Conference of State Legislatures

Matt Salo
Director of Health Legislation
National Governors Association

Page 4 – State Medicaid Director

Brent Ewig Senior Director, Access Policy Association of State and Territorial Health Officials

Jim Frogue Director, Health and Human Services Task Force American Legislative Exchange Council

Trudi Matthews Senior Health Policy Analyst Council of State Governments