



# Vaccine Management

Proper vaccine management is essential for appropriate vaccine ordering and stock rotation, and ensures your facility has the vaccines your patients need.

## Vaccine management plan

VFC providers are required to maintain a current and complete vaccine management plan that includes routine and emergency storage and handling processes. The plan must include:

- Current coordinators' names and contact information.
- Documentation of primary and back-up coordinator training along with key staff, if applicable.
- Proper storage and handling practices.
- Plan for receiving vaccines.
- Emergency planning.
- Vaccine ordering and inventory management practices.
- How to handle wastage or expired vaccines.
- Date it was updated and signed.

At a minimum, the plan must be updated annually; however, the plan should be updated anytime there are changes to coordinators or clinic procedures. It is recommended to keep the vaccine management plan in a location that is easily accessible by staff, ideally on or near the storage units. VFC providers should use the [WI VFC Vaccine Management Plan Template](#).

## Ordering and receiving

### Vaccine ordering

All vaccine orders must be made in the Wisconsin Immunization Registry (WIR) unless otherwise specified.

Before placing an order, perform a physical inventory of all vaccines in stock and update WIR accordingly. Not completing this step could lead to delays and denied orders. When ordering VFC vaccines, keep the following in mind:

- Order only the actual amount of vaccine needed.
- Avoid stockpiling or build-up of excess vaccine inventory.
- Do not exceed a five-week supply of vaccine inventory.
- Do not rely on borrowing practices to supplement ordering issues.

#### Ordering influenza vaccine:

Seasonal VFC flu vaccine is pre-booked during January or February. An email notice with instructions will be sent out to all VFC coordinators. The pre-book order is placed in WIR.

All VFC providers are expected to order VFC flu vaccine for VFC-eligible children 6 months and older as recommended by the Advisory Committee on Immunization Practices (ACIP).

## Vaccine receiving

When receiving VFC vaccines, complete the following steps:

1. Inspect shipment and open package immediately.
2. Check the temperature monitor(s) included in the vaccine shipment. If any monitor indicates a temperature excursion, notify the VFC Program immediately.
3. Check the vaccine in the shipment against the packing slip. Compare lot numbers, doses, and funding source. If there are any discrepancies, notify the VFC program right away.
4. Store vaccines in the appropriate storage unit.
5. Accept the vaccine transfer in WIR upon receipt of each shipment.
6. Retain the vaccine-packing slip(s) for 3 years.

This image is an example of a packing slip you will see with your vaccine delivery. When verifying the contents of your delivery, it is important to pay attention to the Material Description, Manufacturer, MFR Lot #, Expiration Date, and dose type (VFC Doses in the above example).

McKesson Specialty Care Dist.  
8245 Forest Hill Drive, Suite 105  
Clove Branch, MS 38654

**Packing Slip**  
This is not an invoice

Page 1 of 2

Ship-to:	Awardee: WISCONSIN STATE DIVISION OF PUBLIC P.O. BOX 2659 MADISON, WI 53701 (608) 266-1506	Provider PIN: Delivery Number: 227836872 Quality Check Date: 12/18/2023 Customer Contact:																																																		
		Internal use only  227836872																																																		
<table border="1"><thead><tr><th>NDC</th><th>Customer P.O.</th><th>Material Description Manufacturer</th><th>MFR Lot#</th><th>Exp. Date</th><th>VFC Doses</th><th>317 Doses</th><th>State Doses</th><th>CHIP Doses</th><th>Order Qty</th><th>Ship Qty</th><th>Unit Price</th><th>Extended Price</th></tr></thead><tbody><tr><td>58160-0827-30 5015830</td><td>808543</td><td>MCV4; SDV;10-PACK GLAXO SMITH-KLINE</td><td>BLJES</td><td>12/31/2024</td><td>10</td><td>0</td><td>0</td><td>0</td><td>10</td><td>10</td><td>\$105.00</td><td>\$1,056.00</td></tr><tr><td colspan="12">Total</td></tr><tr><td colspan="12"></td></tr></tbody></table>			NDC	Customer P.O.	Material Description Manufacturer	MFR Lot#	Exp. Date	VFC Doses	317 Doses	State Doses	CHIP Doses	Order Qty	Ship Qty	Unit Price	Extended Price	58160-0827-30 5015830	808543	MCV4; SDV;10-PACK GLAXO SMITH-KLINE	BLJES	12/31/2024	10	0	0	0	10	10	\$105.00	\$1,056.00	Total																							
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This vaccine was purchased with public (state, local, and/or federal) funds and may be administered only to patients eligible to receive publically-funded vaccine.  
If you have any questions about your order please contact your Immunization Program for assistance.

## VFC shipping issues

If you receive a VFC vaccine delivery that is damaged or having temperature issues, store the vaccine appropriately, label it "do not use," and immediately contact the program at [VFC@wisconsin.gov](mailto:VFC@wisconsin.gov)

When contacting the program, have available:

- A picture of the top of the box with the shipping label visible.
- The packing slip.
- A picture of the temperature monitor if the shipment was out of range.

## Inventory

Inventory management is crucial to vaccine accountability and preventing missed opportunities. Clinics must have a process for inventory management that prevents vaccine wastage and borrowing. VFC vaccine inventory must be maintained in WIR. Providers can choose to manage their private vaccine inventory in WIR but is not a requirement of the VFC program.

Inventory management best practices:

- Ensure public and private vaccines are clearly labeled.
- Keep an organized storage unit. This will prevent confusion and make conducting inventory easier.
- Keep an adequate supply of public and private vaccine.

- Keep a four-week supply of vaccine on hand.
- Review stock weekly and place vaccines with the earliest expiration date in the front.
- Develop a system to ensure expired vaccines are removed immediately.
- Conduct a physical vaccine inventory once a month. Providers are required to conduct a physical inventory before ordering VFC vaccine.

## Returns

All VFC vaccines (including influenza) that expire or are spoiled and intact (not opened) must be returned. Instructions are available on the [Authorization to Return Vaccine form](#), page 2. Returns must be completed within six months of the expiration date or spoil date. Never store spoiled or expired vaccine in the storage unit. The vaccine should be removed immediately and stored outside the unit until the vaccine is returned.

IPOL (multi-dose vial) – IPOL may be used through the expiration date printed on the label as long as the vaccine is not contaminated. If the multi-dose vial is opened when the vaccine expires, it cannot be returned. Please dispose of the vial according to your clinic's policy and report the remaining doses to the program using the [Vaccine Wastage Form](#).

All public vaccine, including VFA, VFC, and mass clinic can be documented and returned using the [WI VFC Vaccine Return Form](#).

If you are returning vaccine because it is spoiled due to a temperature excursion or other similar situation, that vaccine will need to be documented on a separate [WI VFC Vaccine Return Form](#) from your expired vaccine. In this situation you will send in two vaccine return forms, one for expired vaccine and the second for spoiled vaccine. For spoiled vaccine, don't forget to adjust your inventory in WIR.

## Borrowing

Vaccine borrowing is when you use a privately purchased vaccine to immunize a VFC-eligible child or use a VFC-funded vaccine to immunize a privately insured patient in rare unplanned situations or to prevent missed opportunities. Borrowing should not become a routine practice. Every time a dose is borrowed it must be documented using the [WI Borrowing Form](#). The form captures all required information that needs to be documented when a dose is borrowed according the VFC requirements. The vaccine should be replaced as soon as possible (within 90 days is ideal). Proper inventory practices of both public and private vaccines should be implemented to prevent borrowing.

Borrowing is a tool to help prevent missed opportunities but should not be used to make up for poor inventory practices. It is recommended that providers review borrowing logs routinely to ensure doses being borrowed are paid back and review reasons for borrowing to identify areas for improvement.

# Availability

The Advisory Council on Immunization Practices (ACIP) advises CDC on immunization policies. It is a VFC program requirement that you offer all the ACIP-recommended vaccines based on the clinic's patient population. All routine vaccines should be kept on-hand at the clinic.

## Vaccines available in the VFC program

COVID-19	Hepatitis A	<b>Meningococcal B*</b>	Rotavirus
DTaP	HPV	MMR	Nirserimab
Polio	Influenza	Varicella	<b>Maternal RSV*</b>
Hepatitis B	Polio	Pneumococcal	<b>PPSV*</b>
Hib	Meningococcal ACWY	Tdap/Td	<b>Dengue*</b>

**\*Non-routine VFC Vaccines:** VFC Providers must ensure that VFC-eligible children have access to non-routine vaccines as needed. Non-routine vaccines may be ordered as needed.

## Vaccine accountability

VFC providers agree to operate their VFC program in a manner intended to avoid fraud and abuse.

Fraud	Abuse
Fraud is 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 occurs when provider practices are inconsistent with sound fiscal, business, or medical practices, and result in an unnecessary cost to the Medicaid program, (and/or including actions that result in an unnecessary cost to the immunization program, a health insurance company, or a patient); or in reimbursement for services that are not medically necessary or that fail to meet professionally recognized standards for health care. It also includes recipient practices that result in unnecessary cost to the Medicaid program.

## Examples:

- Providing VFC vaccine to a non-VFC-eligible patient and not completing required documentation.
- Providing VFC vaccine to clinics or persons for which it is not intended or to individuals not enrolled in the VFC Program.
- Selling or otherwise misdirecting VFC vaccine.
- Billing a patient or third party for VFC vaccine.
- Charging more than the established maximum vaccine administration fee for an eligible child.