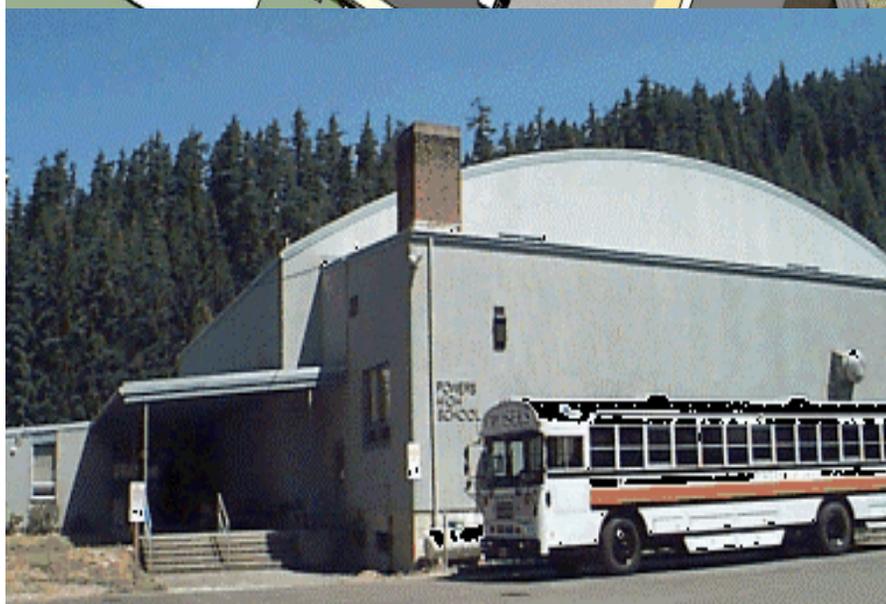


School Based Health Centers- Vaccines For Children Update: 2014-15

Susan Weiner, MSW
Oregon Immunization Program

VFC & SBHC: Hand in Hand



Vaccine Eligibility Coding

Eligibility Codes	Definition	Fund Source
N	No Insurance, Ages 0 through 18	VFC
M	OHP/Medicaid, Ages 0 through 18	VFC
A	American Indian/Alaskan Native, Ages 0 through 18	VFC
F	Underinsured, Ages 0 through 18	VFC
O	Uninsured and under-insured adults (Public Sites Only)	317
B	Billable, All Ages	State
L	Locally Owned, All Ages (Privately Purchased Vaccine)	Private
S	Special Projects, All Ages	State



Coding

VFC-Eligible Kids

Receive **VFC** flu vaccine and are coded:

M Medicaid 0 through 18

N No Insurance

A Native American/Alaskan Native

F Under-insured (Only in publicly-sponsored sites)



Coding

Fully Insured Kids & Adults

Receive **Privately Purchased** flu vaccine and coded:

L (Publicly Sponsored SBHC)

B (Privately Sponsored SBHC)

Uninsured Adults & Other Eligible Groups seen in **Publicly-Sponsored Clinics**

Receive **Flu Pool** vaccine and doses coded:

S

Remember: Patients on MEDICARE are privately insured

Reminder - Recall

Brings students and the community into your center!

- Report are run in ALERT: simple & straightforward
- Patients can't remember their immunization hx
- Complete vaccine series
- Administer booster doses
- Raise protective coverage rates
- Inactivate patients no longer seen in your practice

The screenshot shows the ALERT web application interface. The top navigation bar includes links for home, manage access/account, forms, related links, logout, and help desk. The user is identified as Susan Weiner, a State Immunization Staff member at MERLO STATION SBHC - WASH CO. The main content area is titled "Reminder/Recall Request" and contains several sections:

- Create New List ...**: Includes radio buttons for "Enter new Reminder Recall Request Criteria" (selected) and "Use a previous Reminder Recall Request Criteria". A text input field for "List Name" is present.
- Indicate the Tracking Schedule ...**: Includes radio buttons for "Use Tracking Schedule Associated with Each Patient" (selected) and "Use Tracking Schedule Selected for All Patients".
- Select the Vaccine Group To Report on ...**: Includes radio buttons for "Use All Vaccine Groups" (selected), "Use Vaccine Groups Selected", "Vaccines Due Now", "Vaccines Past Due", and "Both". A list of vaccine groups (Adeno, Anthrax) is shown with "Add" and "Remove" buttons.
- Select Subpotent Recall ...**: Includes a checkbox for "Use Subpotent Vaccinations".
- Select the School & Primary Care Provider ...**: This section is partially visible at the bottom.

The left sidebar contains a menu with the following items: Production Region 3.8.0, Query Only, view patient report, Reports (circled in red), reminder / recall, check reminder status, check reminder list, manage custom letters, cocasa extract, check request status, doses administered, group patients, check group status, vaccine eligibility, check vaccine elig status, assessment report, check assessment benchmark report, check benchmark ad hoc list report, ad hoc count report, ad hoc report status, billing report request, check billing report provider report, check provider status, accountability report request, and check vaccine.

Reminder - Recall

Report run on: 10/08/2014 10:29 AM

Patient Query Listing

Page 1 of 1

Patient Name (F M L)	Phone Number	Address	City/State/ZIP
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ANI	LE - 01/31/1996	4875 SW	# 16	BEAVERTON, OR 97005						
Tracking Schedule: ACIP										
<table border="1"><thead><tr><th>Vaccine</th><th>Immunizations Due</th><th>Immunization Dates</th></tr></thead><tbody><tr><td>HPV</td><td>01/31/2005</td><td></td></tr></tbody></table>					Vaccine	Immunizations Due	Immunization Dates	HPV	01/31/2005	
Vaccine	Immunizations Due	Immunization Dates								
HPV	01/31/2005									

THEC	LEZ - 11/16/1996	10324	ENTER	BEAVERTON, OR 97008						
Tracking Schedule: ACIP										
<table border="1"><thead><tr><th>Vaccine</th><th>Immunizations Due</th><th>Immunization Dates</th></tr></thead><tbody><tr><td>HPV</td><td>02/11/2014</td><td>1) 12/11/2013</td></tr></tbody></table>					Vaccine	Immunizations Due	Immunization Dates	HPV	02/11/2014	1) 12/11/2013
Vaccine	Immunizations Due	Immunization Dates								
HPV	02/11/2014	1) 12/11/2013								

Reminder-Recall Guru:
Scott Jeffries
971 673-0316

What's Missing From Your VARs

Required by Federal Law:

- Vaccine Name
- Date Vaccine Administered
- Vaccine Manufacturer
- Lot Number
- VIS Publication Date
- Date VIS Given/Offered
- Name & Title of Immunizer
- Name & Address of Clinic

Vaccine Management Guide

Required for all SBHC clinics

- All staff involved with vaccine must read & sign off YEARLY
- Update/review annually
- Includes sections on:
 - Emergency Procedures
 - Inventory Management
 - Staff Training
 - Storage & Handling
 - VFC Requirements

oregon
vaccines for children

VACCINE MANAGEMENT GUIDE
Brought to you by Oregon Immunization Program

As a Vaccines for Children clinic you must designate primary and backup staff to manage routine and emergency vaccine handling.

Primary responsible staff: _____

Backup responsible staff: _____

Oregon Immunization Program Health Educator:

Name: _____

Telephone: _____

Fax: 971-673-0278 or 971-673-2401

Email: _____

Oregon Health | Oregon Immunization Program | ALERT
IMMUNIZATION & INFECTIOUS DISEASE SYSTEM

**BY JAN. 1, 2015
UPGRADE FROM THIS**

Thermometers

TO ONE OF THESE



Old datalogger becomes the back-up



Glycol/Probes in the middle of middle shelf



Contact Your OIP Public Health
Educator For More Information

OREGON IMMUNIZATION PROGRAM

VACCINES FOR CHILDREN

ALERT IIS REGISTRY

971 673-0300