




Indiana
Department
of
Health



Eric J. Holcomb
Governor

Lindsay M. Weaver, MD, FACEP
State Health Commissioner

Title: Borrowing Vaccine	Policy #: IDOH Immunization Division Policy 18
Effective dates: 01-Jan-25 to 31-Dec-25	Approvals:  Dave McCormick, Immunization Director January 1, 2025 Date

Policy Statement

Providers that care for publicly funded and privately insured patients must maintain two separate inventories of vaccines:

- One inventory of privately purchased vaccine for the provider's privately insured patients
- One inventory of publicly funded vaccine supplied to the provider for administration to VFC (Vaccines for Children) state vaccine-eligible children, and/or adult 317 eligible patients (if applicable)

Borrowing VFC or 317 vaccines for fully insured patients must be due to rare and unforeseen delays or circumstances surrounding the vaccine that was ordered.

Borrowing occurs when privately purchased vaccine is given to a VFC/317 eligible patient, or VFC/317 vaccine is given to a privately insured child, whether accidentally or intentionally.

- Publicly funded vaccine cannot be used as a replacement system for a provider's privately purchased vaccine inventory
- The provider must ensure that borrowing publicly funded vaccine will not prevent a VFC/317 eligible patient from receiving a needed vaccination
- Documentation must occur when any vaccine is borrowed, regardless of inventory origin
- Borrowing between the two inventories of vaccines may occur in specified situations but must be rare
- Vaccine from the incorrect supply may be administered to a patient in need of that immunization if the vaccine will expire within one month. For example, a provider can vaccinate a privately insured patient with a VFC/317 dose if it expires in the next week.



This policy is designed to prevent wastage of both private and publicly purchased vaccine. The dose may then be replaced with a longer-dated dose from the other stock.

- Vaccine from the incorrect supply may be administered to a patient if the provider has run out of vaccine from the correct supply between orders. This is meant to be used in rare occasions to prevent a missed vaccination opportunity.
- A VFC/317 dose can be borrowed to replace a private stock dose if a patient was immunized with private stock and the insurance plan refuses to cover the vaccination

The provider must always document the type of vaccine borrowed, from which stock it was borrowed, the patient's name, the patient's date of birth, the date the dose was administered, an approved reason for borrowing, and the date the corresponding replacement dose was returned to the appropriate stock on the Borrowing Report.

Please note: For seasonal influenza vaccine, providers may use private stock seasonal influenza vaccine to vaccinate VFC/317 eligible patients if VFC/317 seasonal influenza stock is not yet available. Those private stock doses used on VFC/317 eligible patients can be replaced later when VFC/317 stock becomes available. This one-directional borrowing exception is unique to seasonal influenza vaccine. Borrowing from VFC/317 seasonal influenza stock to vaccinate fully insured children is not permissible since there is no guarantee that the influenza vaccine can be replaced within the same season.

Completed Vaccine Borrowing Reports must be submitted monthly to the Immunization Division Ordering and Accountability Specialist. Borrowing activities will be monitored as part of the VFC/317 provider compliance visit. Follow-up and/or corrective actions may be taken when excessive or inappropriate borrowing activities are noted.

- **Step 1:** Provider borrows a dose of vaccine from one stock to administer to a patient who is eligible to receive vaccine from the other stock
- **Step 2:** The Borrowing Report MUST be completely out for each borrowing occurrence
 - Each vaccine a patient receives must be listed on a separate row
- **Step 3:** As soon as the borrowed dose of vaccine is replaced in the appropriate vaccine stock, the provider will enter the date on the Borrowing Report
- **Step 4:** The provider will submit a copy of the Borrowing Report to the Immunization Division monthly and will make the report available to the Immunization Division during the site visit. Reports should be maintained for three years.



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Policy 18

Current Version: 01/01/2025

Effective Date: 07/17/2012

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Date Range of Vaccine Reporting (date of first dose borrowed to date of last dose borrowed): 11 / 01 / 2014 to 11 / 30 / 2014

VACCINE BORROWING REPORT TABLE						
A Vaccine Type Borrowed	B Stock Used (VFC or Private)	C Patient Name	D Patient DOB (XX/XX/XXXX)	E Date Dose Administered (XX/XX/XXXX) AND Lot#	F Reason Appropriate Vaccine Stock was not Used (Use legend code on page 1 to mark one reason for each dose borrowed)	G Date Dose Returned to Appropriate Stock (XX/XX/XXXX) AND Lot #
DTap	VFC	Elsa Princess	05/03/2014	11/05/2014 AC14B177AA	1- Private vaccine shipment delay	11/12/2014 C4214BA
MMR	VFC	Anna Princess	11/25/2009	11/05/2014 J003790	1- Private vaccine shipment delay	11/12/2014 J013431
Varicella	Private	Shirley Temple	10/31/2013	11/10/2014 J009004	4- Private dose was short dated	11/12/2014 K002920
I hereby certify, subject to penalty under the False Claims Act (31 U.S.C. § 3730) and other applicable Federal and state law, that VFC vaccine dose borrowing and replacement reported on this form has been accurately reported and conducted in conformance with VFC provisions for such borrowing and further certify that all VFC doses borrowed during the noted time period have been fully reported on this form.						
Provider Name: Dr. Sam Who			Provider Signature: <i>Dr. Sam Who</i>			Date: 11/30/2014