



Department
of Health

Vaccines for Children (VFC) Program Training: VFC Program Background, Personnel, and Training Requirements

Division of Vaccine Excellence
Bureau of Vaccine Programs

SERIES 1



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Hello and welcome.

The objective of these trainings are to introduce providers to the New York State Vaccines for Children or VFC program. We will begin the training by covering the background and history of the VFC Program. This training will also emphasize the importance of identifying and training key staff as required by the New York State Department of Health Vaccines for Children Program and to describe the responsibilities of each key role. Lastly, we will review all of the New York State VFC training requirements.

THE NEW YORK STATE VACCINES FOR CHILDREN (VFC) PROGRAM

- Federally supported program providing vaccines at no cost to the families of eligible children
- Publicly-funded childhood vaccines include:
 - Federal VFC vaccine
 - New York State-funded vaccine
 - New York State Child Health Plus (CHIP)



VFC is a federal entitlement program that began in 1994. After the introduction of VFC, vaccine coverage rates for all children the United States increased rapidly. The program removes financial barriers hindering vaccination of VFC eligible children.

The New York State VFC Program provides federally-supported vaccines to eligible children. The vaccines are distributed to enrolled VFC providers at a variety of clinical settings including private medical practices, hospitals, local health departments, federally qualified health centers, etc., and they are then administered to eligible children.

Providers may also obtain other publicly-funded vaccines to serve children eligible under other criteria.

Types of publicly-funded childhood vaccines include: Federal VFC vaccine, New York State-funded vaccine, and CHIP or Children's Health Insurance Plan- funded vaccine.

WHO IS ELIGIBLE TO RECEIVE VFC OR OTHER PUBLICLY FUNDED VACCINE?*

	VFC-Funded	State-Funded	CHIP-Funded
Medicaid-Eligible	YES	NO	NO
Uninsured (No health insurance)	YES	NO	NO
American Indian/Alaskan Native	YES	NO	NO
Underinsured (Vaccines not covered or only certain vaccines covered) <i>*Does not include insured patients who are out of provider network, with high deductibles or co-pays</i>	YES, but only for the specific vaccine not covered by insurance and if vaccinated at a Federally Qualified Health Center (FQHC)	YES, but only for the specific vaccines not covered by the insurance and if vaccinated at a provider other than a FQHC	NO
State Children's Health Insurance Program (CHIP) (NOT Medicaid Managed Care)	NO	NO	YES

*Only available to children under 19 years old



VFC providers must screen all patients birth through 18 years of age for VFC eligibility and document the eligibility status at each immunization encounter.

Who is eligible to receive VFC and other publicly-funded vaccine?
To start, only children under 19 years of age are eligible for VFC and other publicly-funded vaccine.

The column under the “VFC-Funded” in this chart displays the eligibility criteria for VFC-funded vaccines. A child is eligible for VFC vaccine the child is under 19 years of age and:

- The child is enrolled in Medicaid (this includes both fee-for-service and managed care plans) OR
- The child is uninsured OR
- The child is underinsured (e.g. a child who has commercial insurance which doesn’t include vaccine coverage, only includes select vaccines, or caps vaccine coverage). Underinsured children are eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC)

OR lastly, the child is eligible to receive VFC vaccine if the child identifies as American Indian or Alaska Native.

The “State-funded” column in this chart displays the eligibility criteria for state-funded vaccines.

A child is eligible for state-funded vaccines if he or she is younger than 19 years of age, is underinsured and is being vaccinated at a provider other than a Federally Qualified Health Center (FQHC). New York State allows private providers to vaccinate underinsured children using state-funded vaccine.

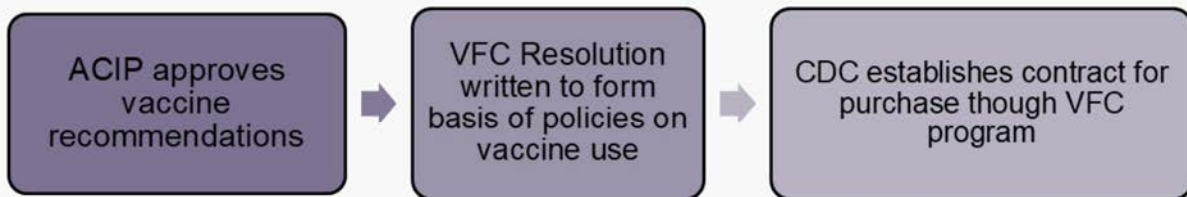
The “CHIP-funded” column in this chart depicts the eligibility criteria for CHIP-funded vaccines. A child is eligible for CHIP-funded vaccine if he or she is under 19 years of age and enrolled in the Children's Health Insurance Program (or CHIP).

Providers must be enrolled in the NYS Department of Health VFC Program to receive VFC and any other publicly funded vaccines.

ADVISORY COMMITTEE ON IMMUNIZATION PRACTICE (ACIP)'S ROLE IN VFC

Group of medical and public health experts who develop recommendations on vaccine use in the United States

- Establishes list of vaccines, number of doses, immunization schedules and vaccine contraindications for the VFC program and the general public.
- CDC establishes a contract for the purchase of vaccine through the VFC program
- [ACIP Vaccine Recommendations](#)



The Advisory Committee on Immunization Practice (or ACIP) is a group of medical and public health experts who develop recommendations on vaccine use in the United States.

ACIP's statutory authority is to develop recommendations for U.S. immunizations, including ages when vaccines should be given, number of doses, time between doses, and precautions and contraindications. ACIP also approves and determines the specific recommendations to include a vaccine in the VFC program. These recommendations are written in the form of a VFC resolution. VFC resolutions passed by ACIP form the basis for VFC program policies on vaccine availability and use.

After the VFC resolution is in place, the Centers for Disease Control and Prevention (or CDC) establishes a contract for the purchase of the vaccine through the VFC program.

While VFC vaccine is provided at no cost to enrolled providers and eligible children, it should never be considered "free". Funding for the VFC program is allocated through the Centers for Medicare & Medicaid

Services (CMS) to the CDC. CDC buys vaccines at a discount and distributes them to grantees (such as New York State) which in turn distributes them at no charge to enrolled VFC providers.

ACIP COMPLIANCE

- NYS VFC Providers comply with the ACIP Guidelines, dosages, and contraindications ([ACIP Immunization Schedule](#))
- The only exception is a child who has a medical contraindication to a vaccine
- VFC Providers must offer all ACIP-recommended vaccines for the population(s) they serve



Providers who participate in the VFC Program must comply with the ACIP Immunization Schedule, dosages, and contraindications. The only exception is in the provider's medical judgment, and in accordance with accepted medical practice, the provider deems such compliance to be medically contraindicated for the child. NYS VFC providers must offer all ACIP-recommended vaccines for the populations they serve.

The link on this slide and on the resources document included with this training will bring you directly to the ACIP Immunization schedule.

STAFFING AND TRAINING REQUIREMENTS

Each provider must designate key staff, including:

- Medical Director (or equivalent)
- Primary Vaccine Coordinator
- Back-up Vaccine Coordinator



These staff need to be on site most days to effectively complete their tasks

Providers must make any changes in these key staff by updating their provider agreement in NYSIIS within 48 hours of change

- The staff listed in the provider agreement are the primary contacts for the NYS VFC program, and will receive VFC communications, so it is very important to update this as changes occur

Providers must complete annual VFC trainings as part of the recertification process



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Each enrolled VFC provider must identify staff in key roles. These include the Medical Director, primary vaccine coordinator, and backup vaccine coordinator.

In the upcoming slides, we will review the responsibilities associated with each role—but first, it's important to note that the staff in these roles are the primary contacts for the NYS VFC Program. Therefore, the NYS Department of Health must always have a current full name, phone number and email address on file for the staff person assigned to each role. If there are changes to staffing or contact information, you must update your Provider Agreement in NYSIIS.

Providers must complete Annual VFC trainings as part of the annual recertification process.

MEDICAL DIRECTOR (OR EQUIVALENT)



- Defined as a “practitioner authorized to administer pediatric vaccines under state law”
- Must be aware of all NYS Department of Health Vaccination Program requirements
- Oversees or is directly involved in the clinical aspects of Vaccination Program activities
- Understands the clinical implications of mismanaged storage units and/or vaccines
- Is accountable for the entire provider location’s compliance, including site visit participation and educational requirements



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Now, let’s take a closer look at each of our three key roles, beginning with the Medical Director (or equivalent).

A Medical Director (or equivalent) defined as a “practitioner authorized to administer pediatric vaccines under state law” must be identified, and this will be the first person listed on the enrollment form and provider agreement. Any further references to the Medical Director in this, or any other VFC trainings, will refer to this definition.

This person signs the provider agreement and is aware of all NYS VFC Program requirements. This person oversees or is directly involved in the clinical aspects of vaccination activities and understands the clinical implications of mismanaged storage units and vaccines, and is accountable for the entire provider location’s compliance, including site visit participation and educational requirements

PRIMARY VACCINE COORDINATOR

- Has primary responsibility for all aspects of vaccine storage and handling and is an expert on standard operating procedures (SOPs)
- Should work **on-site** most clinic/business days
- Serve as the provider's contact for the Department of Health, including during site visits
- Participates in training on VFC Program requirements
- Trains all staff at the practice on proper vaccine handling and storage
- Obtains and maintain a NYSIIS account and completes required reporting in NYSIIS



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The primary vaccine coordinator has primary responsibility for all aspects of vaccine storage and handling and is an expert on all vaccine-related standard operating procedures (known as SOPs). They must read and be familiar with the information in the VFC Provider Agreement, the Vaccine Management Plan, resource materials posted on the NYS VFC website, and any other communications sent from the NYS VFC program via mail or email.

The primary vaccine coordinator should work on-site most business days, as this role requires daily temperature monitoring of vaccine storage units as well as other “hands-on” responsibilities, such as rotating and reconciling vaccine stock. They also act as the provider's contact for the NYS VFC program, including during site visits.

They must participate in training on VFC Program requirements and train all staff at the practice on proper vaccine handling and storage.

Coordinators are also expected to:

Obtain and maintain a New York State Immunization Information System

(NYSIIS) account and complete required reporting in NYSIIS.

PRIMARY VACCINE COORDINATOR



- Ensures that all necessary documentation and reporting is properly completed, including, but not limited to, eligibility screening and doses administered reporting
- Keeps the physician informed of VFC Program requirements and all compliance issues
- Notifies the Department of Health immediately if there are changes at the practice
- May personally perform all storage and handling tasks or delegate some tasks to other staff
- If delegating tasks, the vaccine coordinator must:
 - Train identified staff person for the specific tasks assigned
 - Document completion of this training including summary of training, date, and staff participating



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The primary vaccine coordinator ensures that all necessary documentation and reporting is properly completed, including, but not limited to, eligibility screening and doses administered reporting. Doses administered must be reported in NYSIIS within two weeks of administration per public health law.

The primary vaccine coordinator keeps the Medical Director (or equivalent) informed of VFC Program requirements and all compliance issues.

The also notify the NYS VFC Program immediately if there are changes at the practice (such as a change in the primary or back-up vaccine coordinator, practice name change, practice is moving to a new location, practice is being sold, physician is retiring, practice is merging with another practice or becoming part of a larger organization, patient profile changes).

The vaccine coordinator may delegate some tasks to other staff; in that case, the primary vaccine coordinator must train the identified staff on the delegated task(s) and document completion of this training. Please note that as trainings are now located in the New York State Learning

Management System (LMS), each additional staff member must complete their own training and retain copies of completion certificates.

PRIMARY VACCINE COORDINATOR



Responsibilities: Ordering and Receiving Vaccines

- Ordering vaccines
- Perform a physical inventory of all vaccines in stock
- Account for doses of returned or wasted vaccines since the last order
- Overseeing proper receipt and storage of vaccine deliveries
- Be present when vaccine is delivered and immediately process it into inventory
- Ensure that acceptable temperature ranges have been maintained
- Designate a substitute to handle deliveries if both primary coordinator are back-up coordinator are not available



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Ordering and receiving vaccines is a key responsibility for the primary vaccine coordinator. To place an accurate order, they must perform a physical inventory of all vaccines on hand, and account for doses of any returned or wasted vaccines since the last order.

Coordinators must be present when vaccine is delivered and immediately process it into inventory and ensure that acceptable temperature ranges have been maintained. If the primary or back-up coordinator is not available, they must designate a trained substitute to handle deliveries.

Refer to the training # 11 in this series for detailed information on vaccine ordering.

PRIMARY VACCINE COORDINATOR



Responsibilities: Storing Vaccines

- Documenting vaccine inventory information (See training #10 “Managing Vaccine Inventory” for additional information on managing vaccine inventory)
- Organizing vaccines within storage units
- Rotate the vaccine inventory so that vaccines with shorter expiration dates are used first
- Ensure that there are no expired vaccines in the refrigerator or freezer
- Return or report as waste in NYSIIS as appropriate
- Keep VFC vaccine labeled and separate from private vaccine stock
- Perform routine cleaning of vaccine storage units



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The Primary Vaccine Coordinator is responsible for the storage, documenting and management of vaccine inventory. Managing Vaccine Inventory is covered in further detail in training #10 of this series.

Vaccines are to be kept appropriately in the correct storage units. Vaccine inventory must be rotated so that vaccines with shorter expiration dates are used first. VFC vaccine must be labeled and kept separate from private vaccine stock. The Primary Vaccine Coordinator must also ensure there are no expired vaccines in the units, and performing routine cleaning of vaccine storage units.

PRIMARY VACCINE COORDINATOR

Responsibilities: Vaccine Temperature Monitoring and Recording

- Set up temperature monitoring devices
 - Use a certified calibrated temperature monitoring device to review refrigerator and freezer temperatures
- Checking and recording yesterday's minimum/maximum temperatures at the start of each workday
- Reviewing and analyzing temperature data at least weekly for any shifts in temperature trends
- Responding to temperature excursions (out-of-range temperatures)
 - Take action to [report temperature excursions to vaccinetempexcursion@health.ny.gov](mailto:vaccinetempexcursion@health.ny.gov) immediately.



The primary vaccine coordinator is responsible for monitoring and recording vaccine temperatures. This includes the following duties:

Setting up and using a certified calibrated temperature monitoring device to review refrigerator and freezer temperatures

Checking and recording minimum and maximum temperatures at the start of each workday .

Reviewing and analyzing temperature data at least weekly for any shifts in temperature trends

Responding to temperature excursions, and taking immediate action to report temperature excursions to the NYS VFC program at vaccinetempexcursion@health.ny.gov

PRIMARY VACCINE COORDINATOR

Responsibilities: Vaccine Temperature Monitoring and Recording

- Maintaining all paper and electronic documentation, such as inventory and temperature logs, for a minimum of 3 years
- Overseeing proper vaccine transport (when necessary) per SOPs
- Overseeing emergency preparations per SOPs:
 - Tracking inclement weather conditions
 - Implement the emergency vaccine management plan, if necessary.
 - Ensuring appropriate handling of vaccines during a disaster or power outage



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and temperature logs, for a minimum of 3 years
Overseeing proper vaccine transport (when necessary) per SOPs
Overseeing emergency preparations per SOPs:
Tracking inclement weather conditions
Implement the emergency vaccine management plan, if necessary.
Ensuring appropriate handling of vaccines during a disaster or power
outage

BACK-UP VACCINE COORDINATOR



- Performs vaccine coordinator's duties when vaccine coordinator is absent, or as delegated by the vaccine coordinator
- Otherwise assists vaccine coordinator as needed
- Is trained and proficient in all areas for which the vaccine coordinator is responsible
- Is an expert on storage and handling SOPs
- Should work on-site most clinic/business days

The same person should *not* be identified as the vaccine coordinator or backup coordinator for multiple sites



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The backup vaccine coordinator performs the primary vaccine coordinator's duties when the primary vaccine coordinator is absent.. and otherwise assists the primary vaccine coordinator as needed. This person is trained and proficient in all areas for which the primary vaccine coordinator is responsible; is an expert on storage and handling standard operating procedures; and, again, should work on-site most days that the provider is open for business.

Please do not name the same staff person as the primary vaccine coordinator or backup vaccine coordinator for multiple sites, as the staff in these roles should be physically present most days to carry out their responsibilities.

ADDITIONAL STAFF TRAINING

- All staff receiving deliveries, handling, or administering vaccines must know proper vaccine storage and handling requirements
- It is encouraged for all staff at the site to complete the annual trainings and maintain documentation of trainings



Aside from the designated primary and back up vaccine coordinators, all staff receiving deliveries, handling and/or administering vaccines must know the correct vaccine storage and handling requirements. It is encouraged that all staff complete the annual trainings. All staff trainings must be documented.

VFC PROGRAM TRAINING REQUIREMENTS

- Newly enrolling providers must complete trainings as part of their enrollment
 - Trainings should be completed prior to the enrollment site visit
- Renewing providers must complete training annually
 - Within deadlines established by VFC program
- Anytime there is a change to existing VFC provider's vaccine coordinator, back-up coordinator or medical director (or equivalent), new staff in these roles need to take trainings
 - These changes must be reported to the VFC program
- Maintain documentation of training
 - Name of training, name of staff who participated, and date of training completion



Trainings must be completed by newly enrolling providers, each year for the annual provider recertification and anytime there is a change to the existing vaccine coordinator, back up coordinator or medical director. New staff in these roles must complete all the trainings.

The name of the trainings, staff who participated and dates of trainings must be documented and maintained by the provider.

Please note that all changes in staff must be reported to VFC program immediately.

VFC PROGRAM TRAINING REQUIREMENTS

Training Number/Title	Newly Enrolling Providers/Change In Staff	Annual Recertification
1. VFC Program Background, Personnel and Training	X	
2. VFC Provider Requirements	X	X
3. Vaccine Management Plans	X	
4. The Vaccine Cold Chain	X	X
5. Selecting Vaccine Storage Units	X	
6. Setting up Vaccine Storage Units	X	
7. Selecting Temperature Monitoring Equipment	X	
8. Temperature Monitoring Device Calibration	X	
9. Monitoring Vaccine Storage Unit Temperatures, Reporting Excursions, and Vaccine Transport	X	X
10. Managing Vaccine Inventory	X	X
11. Vaccine Orders	X	X
12. Accepting Vaccine Deliveries	X	
13. Vaccine Returns and Wastage	X	
14. Vaccine Preparation	X	



This slide displays which VFC trainings on the New York State Learning Management System (LMS) are required for newly-enrolling providers, changes in staff, and the annual recertification process.

NYSIIS TRAINING

- The Medical Director (or equivalent), Primary and Back-up Coordinators will need access to NYSIIS through Health Commerce System (HCS)
- The Medical Director (or equivalent), Primary Vaccine Coordinator and Back-up Coordinator should take both the NYSIIS Standard User and Administrative User trainings. All NYSIIS training is accessed through the [New York State Public Health Learning Management System \(LMS\)](#)
 - Follow the instructions in the [Quick Guide](#) to set up an account and enroll in classes
- Functions staff perform in NYSIIS include ordering vaccines, accepting shipments, monitoring vaccine inventory, entering doses administered, entering vaccine returns and wastage, and generating reports for internal review.
 - For help, email: NYVFC@health.ny.gov



The Medical Director (or equivalent), primary and back up vaccine coordinators all need Health Commerce System accounts and access to NYSIIS. After HCS access is granted, the medical director, primary and back up vaccine coordinators should take both the NYSIIS standard user and administrative user trainings to prepare them for ordering vaccines; accepting shipments; monitoring vaccine inventory; entering doses administered; entering vaccine returns and wastage; and generating reports for internal review. A NYSIIS training Quick Guide link can be found on this slide and in the resources document included with this training.

KEY MESSAGES

- Each VFC practice is responsible for designating a Medical Director, Primary Vaccine Coordinator and a Back-up Vaccine Coordinator
- Vaccine Coordinators are responsible for many vaccine inventory management activities including ordering, receiving, storing, and returning vaccine, monitoring storage unit temperatures, and maintaining up to date information in NYSIIS
- Each Medical Director, Primary Vaccine Coordinator and Back-up must complete annual VFC trainings to participate in VFC Program
- All staff who handle or administer vaccines must be adequately trained



The key messages of this training are:

Each VFC practice is responsible for designating a Medical Director (or equivalent), Primary Vaccine Coordinator and a Back-up Vaccine Coordinator.

Vaccine Coordinators are responsible for many vaccine inventory management activities, including ordering, receiving, and storing vaccine, returning vaccine, monitoring vaccine temperatures, and maintaining up to date information in NYSIIS

Each Medical Director, Primary Vaccine Coordinator and back-up must complete annual VFC trainings to participate in VFC Program.

All staff who handle or administer vaccines must be adequately trained as described.

Thank you!



NYVFC@health.ny.gov



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Thank you for participating in this introductory training to the New York State Vaccines for Children program. Any questions can be sent to nyvfc@health.ny.gov.