



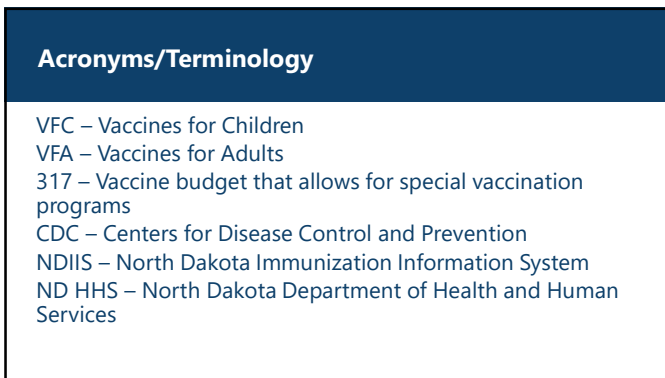
**Vaccines for Adults (VFA)
Program Overview**

December 8, 2025

Jenny Galbraith
Adult Immunization Manager

NORTH
Dakota | Health & Human Services
Be Legendary.

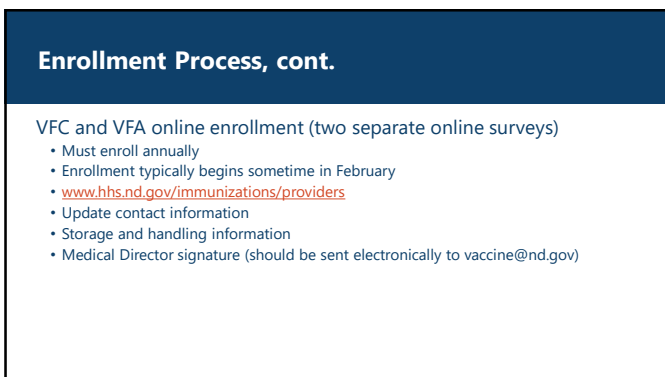
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Acronyms/Terminology

VFC – Vaccines for Children
VFA – Vaccines for Adults
317 – Vaccine budget that allows for special vaccination programs
CDC – Centers for Disease Control and Prevention
NDIIS – North Dakota Immunization Information System
ND HHS – North Dakota Department of Health and Human Services

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Enrollment Process, cont.

VFC and VFA online enrollment (two separate online surveys)

- Must enroll annually
- Enrollment typically begins sometime in February
- www.hhs.nd.gov/immunizations/providers
- Update contact information
- Storage and handling information
- Medical Director signature (should be sent electronically to vaccine@nd.gov)

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North Dakota Vaccines for Adults (VFA) Program

- Provides select vaccines at no cost to adults 19 years and older who are:
 - Uninsured
 - Underinsured

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VFA Program Eligibility

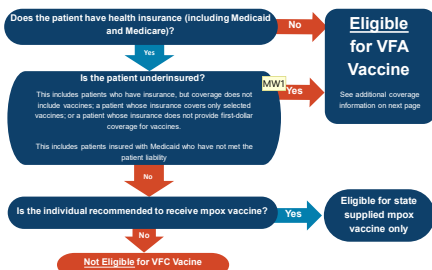
Underinsured definition:

- Patients who have insurance, but coverage does not include vaccines; patients whose insurance covers only selected vaccines; or patients whose insurance does not provide first dollar coverage for vaccines.

– Includes patients insured with Medicaid who have not met the patient liability

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Vaccines for Adults (VFA) Patient Eligibility Screening Flowchart (19+ years)



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Slide 6

MW1 Should the arrows coming off the 'Is the patient underinsured?' box be switched? If you answer 'No' that means the patient is not underinsured and would not be eligible for VFA vaccine. The patient would be eligible if you answer 'Yes' the patient is underinsured.

Woinarowicz, Mary A., 2025-12-05T20:10:04.448

Common Eligibility Misconceptions

- Out of network
 - Not VFA eligible
- High deductible
 - VFA eligible (if deductible has not been met)
- Christian based cost sharing plan (example: Medi-share)
 - VFA eligible – ^{MW1}not considered insurance
 - Questionable insurance? – Insurance commissioner's office
- Medicaid
 - Not VFA Eligible unless patient liability has not been met

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Patient Eligibility Screening

- Every patient must be screened at every immunization encounter for every immunization being given.
- Patient insurance changes constantly and it is important to make sure the clinic has the most up-to-date insurance information.
- The VFA program does not cover all adult immunizations. Patients may need more than one immunization during a single encounter that may not all be eligible under the VFA program. ^{MW1}
- All demographic information should also be verified at every immunization encounter

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Recommended Adult Immunization Schedule (cdc.gov)

Using the schedule to make vaccination recommendations, healthcare providers should:

1. Determine needed vaccines **based on age**
2. Assess for **medical conditions and other indications**
3. Review **special situations**
4. Review **contraindications and precautions to vaccination**

	18-24 years	25-64 years	65+ years	Special Situations
COVID-19	1 or more doses of 2024-2025 season (see CDC)	1 or more doses of 2024-2025 season (see CDC)	1 or more doses of 2024-2025 season (see CDC)	1 or more doses of 2024-2025 season (see CDC)
Influenza (inactivated split-virus, cell-based, recombinant, or live-attenuated)	1 dose annually	1 dose annually	1 dose annually	1 dose annually
Measles-mumps-rubella (MMR)	MMR1 (see CDC)	MMR1 (see CDC)	MMR1 (see CDC)	MMR1 (see CDC)
Measles-mumps-rubella (MMR2)	MMR2 (see CDC)	MMR2 (see CDC)	MMR2 (see CDC)	MMR2 (see CDC)
Poliovirus (inactivated)	2 doses (see CDC)	2 doses (see CDC)	2 doses (see CDC)	2 doses (see CDC)
Tetanus, diphtheria, and pertussis (Tdap)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)
Tetanus, diphtheria, and pertussis (Td)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)
Whooping cough (pertussis)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)
Human papillomavirus (HPV)	2 or 3 doses (see CDC)	2 or 3 doses (see CDC)	2 or 3 doses (see CDC)	2 or 3 doses (see CDC)
Shingles (zoster)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)
Yellow fever	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)	1 dose (see CDC)

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Slide 7

MW1 Should this be VFA eligible?

Woinarowicz, Mary A., 2025-12-05T20:11:18.256

Slide 8

MW1 Check my wording here. I wanted to get across that a single patient may end up getting a mix of private and public vaccine based on what is covered by the VFA program even if they are uninsured/underinsured.

Woinarowicz, Mary A., 2025-12-05T20:15:04.453

North Dakota VFA Program

Vaccine Availability on Vaccine Coverage Table.

Availability based on:

1. Age
2. Risk Factor

317 Vaccine (regardless of state of residence)		
Vaccine	Age Covered	Eligibility Criteria
Adult Hepatitis A	18 years and older	<ul style="list-style-type: none">• Available for uninsured and underinsured high-risk adults (must have a risk factor listed below)• Not available for adults whose sole purpose for vaccination is occupational travel or employment• Persons at high risk for hepatitis A infection include:<ul style="list-style-type: none">◦ Any drug user (injection or non-injection)◦ Have had tattoos or body piercings in unsterile environments◦ Have received blood clotting factors before 1987◦ Have HIV or AIDS◦ Have had sex with an HIV-infected individual◦ Have unexplained liver problems◦ Have received donated blood or organs before 1992• Are on long-term hemodialysis• Men who have sex with men (MSM)• Those experiencing homelessness or unstable housing
Adult Hepatitis B	18 years and older	<ul style="list-style-type: none">• Available for uninsured and underinsured high-risk adults (must have a risk factor listed below)• Not available for adults whose sole purpose for vaccination is occupational travel or employment• Persons at high risk for hepatitis B infection include:<ul style="list-style-type: none">◦ Any drug user (injection or non-injection)◦ Have had tattoos or body piercings in unsterile environments◦ Have received blood clotting factors before 1987◦ Have HIV or AIDS◦ Have had sex with an HIV-infected individual◦ Have unexplained liver problems◦ Have received donated blood or organs before 1992• Are on long-term hemodialysis• Men who have sex with men (MSM)• Register B to a 2-dose series for adults 18 years and older
Adult Hep B/ Hep A	18 years and older	<ul style="list-style-type: none">• Available for uninsured and underinsured high-risk to hepatitis B

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Section 317 Program

- Launched in 1963 under Section 317 of the Public Health Service Act to support program operations and vaccine purchase
- Section 317 amount is determined annually by Congress through the federal budgeting process

SECTION 317 TOTAL U.S. BUDGET (IN MILLIONS)

Fiscal Year	Budget (Millions)
FY2012	\$517.8
FY2013	\$512.8
FY2014	\$610.8
FY2015	\$610.8
FY2016	\$609.6
FY2017	\$606.1
FY2018	\$609.9
FY2019	\$607.7
FY2020	\$613.6
FY2021	\$612.9
FY2022	\$600.8
FY2023	\$661.2
FY2024	\$681.9

Sources: Jarvis & Dolan; The 317 Coalition; CDC

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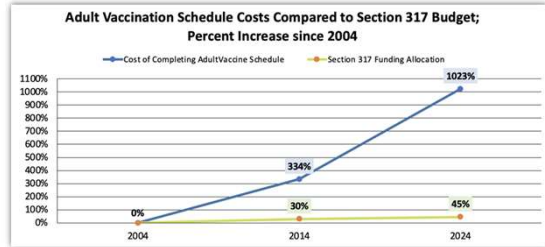
Section 317 Program

- In the last 10 years...
(from March 2014 to March 2024)
 - The adult influenza vaccine cost increased **136.73%**
 - The **cost** of purchasing every recommended ACIP adult vaccine dose increased **158.55%**
 - Section 317 funding only increased **11.6%**
- In the last 20 years...
(from March 2004 to March 2024)
 - 9 new vaccine doses were added as adult recommended ACIP vaccines
 - The **cost** of purchasing every adult recommended ACIP vaccine dose increased **1023.23%**
 - Section 317 funding only increased **45.6%**

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Adult Vaccine Schedule



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Increase in Doses

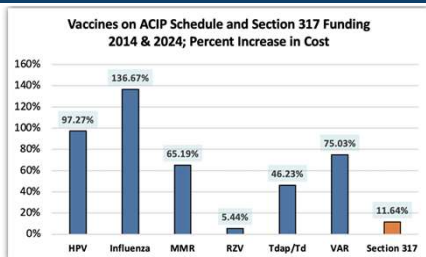
- Part of this increase is due to additional vaccines being added to the routine adult schedule

March 2004
• Total # of Vaccine Doses on Adult Schedule: 6*
• Total Cost: \$134.95
Section 317 Total U.S. Budget: \$468.8 million
March 2014
• Total # of Vaccine Doses on Adult Schedule: 10*
• Total Cost: \$586.36
Section 317 Total U.S. Budget: \$610.8 million
March 2024
• Total # of Vaccine Doses on Adult Schedule: 15*
• Total Cost: \$1,515.80
Section 317 Total U.S. Budget: \$681.9 million

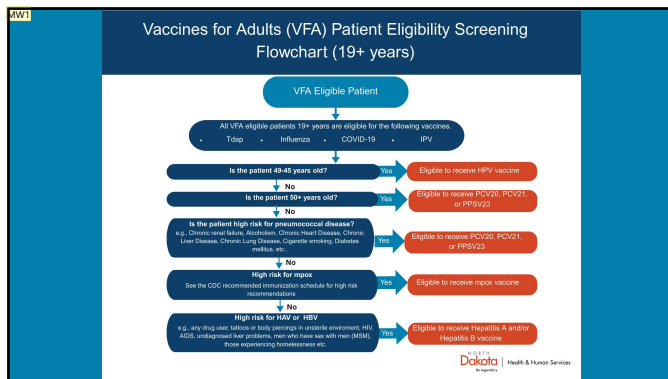
NUMBER OF VACCINES RECOMMENDED			
Vaccine	2004	2014	2024
COVID-19	0	0	1
HepB	0	0	3
HPV	0	3	2
Influenza	1	1	1
MMR	1	1	1
PCV	0	0	1
PPSV23	1	1	0
RZV	0	0	1
RZV	0	1	2
Tdap/Td	1	1	1
VAR	2	2	2
Total	6	10	15

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Increase individual costs vs. Section 317



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Adult Hepatitis A

- Ages 19 years and older
- Must meet a high-risk condition (not available for travel or employment)
- Persons at high risk for hepatitis A infection include:
 - Any drug user (injection or non-injection)
 - Have had tattoos or body piercings in unsterile environments
 - Have received blood clotting factors before 1987
 - Have HIV or AIDS
 - Have had sex with an HIV-infected individual
 - Have undiagnosed liver problems
 - Have received donated blood organs before 1992
 - Are on long term hemodialysis
 - Men who have sex with men (MSM)
 - Those experiencing homelessness or unstable housing.

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Adult Hepatitis B

- Ages 19 years and older
- Must meet a high-risk condition (not available for travel or employment)
- Persons at high risk for hepatitis B infection include:
 - Any drug user (injection or non-injection)
 - Have had tattoos or body piercings in unsterile environments
 - Have received blood clotting factors before 1987
 - Have HIV or AIDS
 - Have had sex with an HIV-infected individual
 - Have undiagnosed liver problems
 - Have received donated blood organs before 1992
 - Are on long term hemodialysis
 - Men who have sex with men (MSM)
 - Those experiencing homelessness or unstable housing.

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Slide 16

MW1 Should the second orange box list PCV20? Right now it says PCV2-
Woinarowicz, Mary A., 2025-12-05T20:21:34.730

Slide 18

MW1 This is the exact same list as the previous slide. Are they the same list? Just making sure.
Woinarowicz, Mary A., 2025-12-05T20:22:56.394

JG1 0 Verified, yes they are the same list
Galbraith, Jennifer, 2025-12-05T20:39:34.440

Adult Hepatitis B/ Hepatitis A

- Ages 19 years and older
- Must meet a high-risk condition (not available for travel or employment)
- Persons at high risk for hepatitis A and hepatitis B infection include:
 - Any drug user (injection or non-injection)
 - Have had tattoos or body piercings in unsterile environments
 - Have received blood clotting factors before 1987
 - Have HIV or AIDS
 - Have had sex with an HIV-infected individual
 - Have undiagnosed liver problems
 - Have received donated blood organs before 1992
 - Are on long term hemodialysis
 - Men who have sex with men (MSM)

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COVID-19

- Ages 19 years and older
- Most Important For:
 - Everyone 65 years and older
 - Individuals 6 months – 64 years with a high risk condition
- Medicare Part B covers COVID-19 vaccine. Adults who have Medicare Part B and most Medicare Advantage plans are considered insured and publicly supplied vaccine cannot be used.

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HPV9

- Ages 19-45 years
- Routine Vaccine: 19-26 years
- Shared Clinical Decision Making: 27-45 years

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Influenza

- Ages 19 years and older
- Medicare Part B covers influenza vaccine. Adults who have Medicare Part B and most Medicare Advantage plans are considered insured and publicly supplied vaccine cannot be used.

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IPV (Polio)

- Ages 19 years and older
- Adults known or suspected to be unvaccinated or incompletely vaccinated should complete a 3-dose primary series.
- Unless there are specific reasons to believe they are not vaccinated, most adults who were born and raised in the United States can assume they were vaccinated against polio as children.

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Meningococcal Conjugate (MCV-4)

- Ages 19 years and older
- Travel in countries with hyperendemic or epidemic meningococcal disease or for microbiologists routinely exposed to *Neisseria meningitidis*
- Anatomical or functional asplenia (including sickle cell diseases), HIV infection, persistent complement component deficiency, complement inhibitor
- First-year college students who live in residential housing (if not previously vaccinated at age 16 years or older) or military recruits

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MMR

- Ages 19 years and older
- All adults with no evidence of immunity
 - Evidence of immunity: Born before 1957 (except for health care personnel) documentation of receipt of MMR vaccine, laboratory evidence of immunity or disease

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MPOX (Jynneos)

- Ages 19 years and older
- Available for uninsured and underinsured adults. Limited quantities are also available for commercially insured patients.
- Must meet risk recommendation. Not for purpose of international travel without risk group
- Risk Factors:
 - Gay, bisexual, or other MSM, or a person who has sex with gay, bisexual, or other MSM who in the past 6 months have had one of the following.
 - A new diagnosis of at least 1 sexually transmitted disease
 - More than one sex partner
 - Sex at a commercial sex venue
 - Sex in association with a large public event in a geographic area where monkeypox virus transmission is occurring
 - Persons who are sexual partners of the persons described above
 - Persons who anticipate experiencing any of the situations described above

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PCV20, PCV21, PPSV23

- Ages 19 years and older
- Available for uninsured and underinsured adults 50+
 - Medicare Part B covers pneumococcal vaccine. Adults who have Medicare Part B and most Medicare Advantage plans are considered insured and publicly supplied vaccine cannot be used.
- Available high risk uninsured and underinsured adults who are 19-49 and meet a risk criteria.

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PCV20, PCV21, PPSV23

Chronic Risk Factors:

- Chronic Renal failure
- Nephrotic Syndrome
- Congenital or acquired immunodeficiency (including B- (humoral) or T-lymphocyte deficiency, complement deficiencies (particularly C1, C2, C3, and C4 deficiencies), and phagocytic disorders (excluding chronic granulomatous disease))
- Iatrogenic immunosuppression (including diseases requiring treatment with immunosuppressive drugs, including long-term systemic corticosteroids and radiation therapy)
- Generalized malignancy
- HIV
- Hodgkin disease
- Leukemia
- Lymphoma
- Multiple myeloma
- Solid organ transplant
- Congenital or acquired asplenia
- Sickle cell disease
- Other hemoglobinopathies
- Alcoholism
- Chronic heart disease (including congestive heart failure and cardiomyopathies)
- Chronic Liver Disease
- Chronic Lung Disease (including chronic obstructive pulmonary disease (COPD), emphysema and asthma)
- Cigarette smoking
- Diabetes mellitus
- Cochlear implant
- CSF leak

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Pneumococcal Vaccination

CDC recommends PCV15, PCV20, or PCV21 for adults who never received pneumococcal vaccine and are

- Ages 50 years or older
- Ages 19 through 49 years with certain risk conditions



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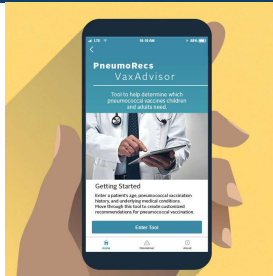
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PneumoRecs VaxAdvisor Mobile App

The **PneumoRecs VaxAdvisor mobile app** helps vaccination providers quickly and easily determine which pneumococcal vaccines a patient needs and when. The app incorporates recommendations for all ages so internists, family physicians, pediatricians, and pharmacists alike will find the tool beneficial. Users simply:

- Enter a patient's age.
- Note if the patient has specific underlying medical conditions.
- Answer questions about the patient's pneumococcal vaccination history.

Then the app provides patient-specific guidance consistent with the current routine adult immunization schedule



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Td/Tdap

- Ages 19 years and older
- Medicare Part D does cover Tdap. Adults who have Medicare Part D are considered insured and publicly supplied vaccine cannot be used.
- If a patient does NOT have Medicare Part D and only has Medicare Part B they would be considered underinsured and would qualify for publicly supplied Tdap.

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NDIIS Reporting Requirements

VFA signed agreement requires adult doses be entered into the NDIIS within four weeks of administration.

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NDIIS Reporting

- Other State Eligible:
 - uninsured/underinsured adults receiving publicly supplied vaccine
 - insured adults receiving publicly supplied mpox vaccine
- Not Eligible:
 - all other adults

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Billing for VFA Vaccine



- Never bill for the cost of the vaccine
- Vaccine provided to clinics at no charge
- Cannot bill more than \$20.99 per dose for an administration fee
- Cannot turn over to collections or turn patient away due to the inability to pay the administration fee

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Frequently Asked Questions

Which vaccines have to be separated based on whether they are used for VFC eligible children or VFA eligible adults?

- **Influenza** is the only immunization that need to be separated based on how they are ordered/prebooked. This is because they are prebooked or reserved by funding source in advance.

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Frequently Asked Questions

Are Medicaid eligible patients able to receive VFA vaccine?

- Medicaid patients should receive private vaccine. These individuals are only eligible for VFA vaccine if their patient liability has not been met.

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Frequently Asked Questions

MMIS is not updated real-time so it may show that a patient has an outstanding balance toward their liability. This means a provider cannot automatically use public vaccine.

Providers should use private vaccine for Medicaid enrolled adults and if it comes back as denied, it will be a borrow.

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Post-Test

Successfully complete the five-question post-test to receive your certificate for nursing credit using the link below:

https://ndhealth.co1.qualtrics.com/jfe/form/SV_bJHRXPEO0jwNV6C

- Credit for this session will be available until January 13, 2025.
- This presentation will be posted to our website at: www.hhs.nd.gov/immunizations

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Immunization Unit Staff Members

For general immunization questions: vaccine@nd.gov

For NDIIS-specific questions: NDIIS@nd.gov

Immunization Unit

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