

A National Review of Successes and Barriers to Pharmacists' Participation in the Vaccines for Children (VFC) Program

INTRODUCTION

Pharmacies serve as an important community-based access point for vaccinations and have the potential to better serve children by participating in the federal Vaccines for Children (VFC) program. While all 50 states allow for pharmacists to vaccinate adults, not all states allow pharmacies to participate in the VFC program, limiting some patients' ability to easily access the benefits of vaccination. Further, additional barriers such as differing state laws and regulations, retail pharmacy policies and pharmacists scope of practice can limit a state's ability to deliver vaccinations to VFC-eligible children through pharmacies.

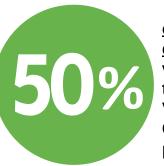
As of <u>August 2021</u>, the Public Readiness and Emergency Preparedness (<u>PREP</u>) <u>Act was amended</u> to allow pharmacists the ability to vaccinate children down to the age of 3 with ACIP recommended vaccines. However, for this to reach its potential impact, pharmacists must be enrolled and able to provide vaccinations to VFC enrolled children. This would not only help to increase access to routine vaccines but help to gain back some routine vaccination ground that was lost as a result of the COVID-19 pandemic.

The purpose of this document is to summarize common successes and challenges experienced across the U.S. regarding pharmacists' participation in VFC and delivery of VFC vaccines. Given additional barriers to seeking care due to the COVID-19 pandemic, improving accessibility to vaccination through all pharmacies can be an important step towards preventing additional infectious disease outbreaks.

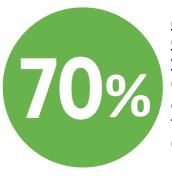
MAJOR FINDINGS



states allow pharmacists to participate in VFC



<u>of American</u> <u>children</u> receive vaccines through the Vaccines for Children (VFC) program



or more of COVID-19 vaccines delivered were administered through community pharmacies



FACTORS FOR SUCCESS

Universal Purchase (UP) | States that have adopted UP and the bulk purchasing of vaccines can reduce the burden on providers who have to finance the up-front vaccine costs. Through <u>UP bulk purchasing programs</u>, providers relish in the benefits of a streamlined vaccine delivery chain and having financially risk-free vaccines, which enhances a provider's ability to offer more vaccinations to vulnerable populations who utilize the VFC program.

Lowered Age Restrictions | In 27 states, pharmacists can administer vaccinations at any age, allowing pharmacists to vaccinate younger children. As of August 2021, <u>all 52 states</u> can administer CDC recommended vaccines to children down to the age of 3. <u>In Alaska</u>, pharmacists can prescribe and administer all CDC recommended vaccinations without a protocol or prescription to any age group, resulting in higher overall immunization rates.

BARRIERS TO SUCCESS

Financial Costs | Participating in VFC is often not a financially viable option for pharmacies. Across the country, many VFC providers report that Medicaid reimbursement is inadequate to cover the costs of administering a VFC vaccine. Pharmacists often only receive reimbursement for the drug itself, and state and federal systems <u>typically pay physicians more</u> for vaccinations in a primary care setting versus at a pharmacy. For each vaccine, VFC providers lose approximately <u>\$5-15 dollars</u>.

Administrative Barriers | The high administrative burden of enrolling and participating in VFC can often prevent pharmacists from participating in the program. Once enrolled, pharmacists are required to comply with strict mandates surrounding vaccine storage and reporting. In a 2013 survey, <u>30% of Kansas VFC providers</u> reported that the high administrative burden and cost of maintaining a separate VFC vaccine stock prevented their continued enrollment in VFC. For pharmacists to be able to give VFC-enrolled children the COVID-19 vaccine, they must <u>enroll in both the VFC program and the COVID-19</u> vaccination program and follow each program's requirements, which vary slightly from program to program. This creates an additional challenge for pharmacists because of the increased complexity of having to enroll and follow the requirements of each individual program.

State Limitations | Part of the VFC Program requirements is that pharmacy sites must have provider visits to document compliance. This makes it more difficult for states because they often do not have enough personnel to be able to keep up with the <u>VFC-required compliance visits</u>. If VFC program expansion and uptake were to increase, some states may have a substantially harder time keeping up compliance visits if the number of VFC providers were to dramatically increase. States would need additional resources given to them in the form of <u>additional personnel</u> or via contractors to support an increase in VFC providers. In addition, individual states often have separate rules and regulations for pharmacies that operate in multiple states to stay in compliance with each <u>individual state's regulations</u>.

NEXT STEPS



Open Collaboration

Increasing collaboration between state organizations including state Medicaid and state immunization programs is essential to making the VFC program successful



Ensure Reimbursement

Coordinate with State VFC and Medicaid to to ensure adequate reimbursement for services for pharmacists

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Streamline Enrollment

Develop clear guidelines and support for pharmacies as they enroll in the VFC program



Engage the Community

Increase demand for pharmacydelivered vaccinations by advertising VFC vaccination services to families in local communities

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Respond Now

Pharmacies can help combat decreasing vaccination rates due to COVID-19 by offering another option for receiving VFC vaccines in their local communities

