



DISCREPANCY OR MISUSE POLICY

Louisiana Vaccines for Children (VFC)

UPDATED NOVEMBER 2019



VACCINES FOR CHILDREN (VFC) DISCREPANCY OR MISUSE POLICY

The purpose of this procedures document is to outline the Louisiana Office of Public Health Immunization Program's responsibilities when occurrences of discrepancies and misuse are discovered within the Louisiana VFC program.

DEFINITIONS:

Discrepancy occurs when accountability data and other pieces of information indicate that vaccine may have been used for purposes other than the intended use. (sold, traded, discarded, etc.).

Misuse occurs when vaccine is knowingly given to patients for whom it is not intended or given to inappropriately. For example: giving DT vaccine to adults, using PCV-7 vaccine for fully insured children, etc.

The severity or the degree of the discrepancy and/or misuse may lead to further investigation by other agencies for fraud and/or abuse.

Fraud, as it is defined in 42 CFR 455.2, is "an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself / herself, or some other person".

Abuse is defined as provider practices that are inconsistent with sound fiscal, business, or medical practices. Consequently, these practices result in an unnecessary cost to the Medicaid program, or in reimbursement for services that are not medically necessary or that fail to meet the professionally recognized standard for health care.

The Centers for Disease Control and Prevention (CDC) grant mandates that states prevent fraudulent use of vaccines purchased with public funds. The federal grant further states that:

- Immunization programs have a prime responsibility to assure appropriate use of public vaccine and to vigorously enforce measures to prevent fraud and abuse of public vaccine at the provider level, and
- Louisiana must immediately report to CDC instances of possible fraudulent use of vaccine purchased with federal funds. Louisiana must work closely with Medicaid in VFC fraud investigations and complete a preliminary investigation within five (5) working days of the initial report.

POSSIBLE ORIGINS OF SUSPECTED DISCREPANCIES AND/OR MISUSE:

1. Outside call reporting a suspected discrepancy and/or misuse situation.

For example:

- a. A concerned patient or provider staff member may call Louisiana VFC.

2. Vaccine Administered Report (VAR) reviews.

For example:

- a. Provider VARs document PCV-7 vaccine given to ineligible patients.
- b. VAR review suggests a pattern of non-simultaneous vaccine administration.
- c. Provider not submitting monthly reports to Louisiana VFC.

3. Vaccine Orders.

For example:

- a. Order Entry staff notices that provider is ordering amounts inconsistent with usual ordering patterns and/or reported patient population distribution per funding source.

4. Routine VFC Site Visits.

- a. Conduct records reviews.
- b. Interview staff regarding administration fees and other charges.
- c. Interview staff regarding simultaneous vaccine administration.
- d. Patient chart review for documentation of VFC Screening and eligibility.
- e. Compare patient chart review data with VAR data.
- f. Compare recent VAR to patient record to ensure proper documentation of eligibility.
- g. Note excessive staff turnover.
- h. Note vaccine administration errors.
- i. Review vaccine storage and handling practices and note temperatures repeatedly documented outside the recommended range.

ACTIONS TO BE TAKEN:

Unintentional Discrepancies and/or Misuse of Louisiana Immunization Program, Vaccines for Children Program Policy and Vaccines.

If regional and/or central office staff determines the discrepancy or misuse to be **unintentional** and originating from lack of program knowledge, education is generally the reasonable course of action. If directed by the Vaccines Procurement Manager and/or Immunization Quality Improvement for Providers (IQIP) Coordinator, follow up by regional and/or central office staff in 30 to 90 days is generally recommended.

Education efforts include, but are not limited to, the following:

- Provide education at time of contact (i.e. during VFC site visit, per telephone conversation).
- If a discrepancy or misuses are noted during VFC site visit, a Provider Improvement Plan (PIP) needs to be completed by the Consultant and returned to

the VFC Program Office within 30 days of the site visit. The PIP should clearly state the actions required to be taken by the provider to adhere to the Louisiana VFC contract.

Need for a follow-up visits or phone calls will be determined on a case-by-case basis. Determinants for a follow-up may include:

- Failure to return a completed, signed PIP within 30 days.
- The severity of original misconduct.
- Recommendations from The Office of Public Health Immunization Program management.
- Suspicions that documented changes will not be implemented by provider.

Low performers will be placed on VFC site visit list for following year.

Intentional Discrepancies and/or Misuse of VFC Policy and Vaccines

- All Office of Public Health employees should immediately report any suspected discrepancies and/or misuse of VFC policy or vaccines situations to the Vaccines Procurement and Management Office and/or IQIP Coordinator.
- The origin of the suspected discrepancy and/or misuse should be documented.
- The Vaccines Procurement and Management Office and/or IQIP Coordinator will review the situation and if he/she deems it necessary will relay the information to the Office of Public Health Immunization Program.
- The Immunization Program will determine if the situation warrants further investigation.
- If it is deemed necessary, the Immunization Consultant or other appropriate Immunization Program staff will follow-up with the provider. Areas of concern will be further investigated. The Immunization Consultant will conduct a site visit and submit a report to the Immunization Program summarizing his/her findings and recommendations.

Referrals to Medicaid

Situations may occur where no further follow-up or other intervention beyond referral to the Medicaid Office exist. The Medicaid Office has several branches within their organization that work on suspected fraud and/or abuse situations. The Immunization Program would immediately report suspected discrepancies and/or misuse to the Medicaid Office if Medicaid regulations are in possible jeopardy. The Immunization Program will make referrals to Medicaid in writing. Such communications will include as much information as possible. The letter will go to the attention of:

Medicaid Health Standards Section
P.O. Box 3767
Baton Rouge, LA 70821

If deemed appropriate the Office of Public Health Immunization Program would report to CDC's Immunization Services Division any cases of suspected intentional discrepancies and/or misuse.

Referrals to the Commissioner of Insurance

Situations may occur where no further follow up or other interventions beyond the referral to the Insurance Commission exist. Communizations will go to the attention of:

Louisiana Commissioner of Insurance
1702 N. Third Street
P.O. Box 94214
Baton Rouge, LA 70802

If deemed appropriate the Office of Public Health Immunization Program would report to CDC's Immunization Services Division any cases of suspected intentional discrepancies and/or misuse.

Annual activities to be conducted by the Louisiana Immunization Program:

1. Contact Medicaid and ask to be routinely informed of individuals enrolled in Medicaid and are also enrolled in VFC and are being investigated for alleged malfeasance, and /or misfeasance.
2. Continue regular meetings with Medicaid.
3. Ensure Medicaid is up to date on all Louisiana VFC policies.
4. The Louisiana Office of Public Health Immunization Program will contact the Insurance Commission to see if there are any other activities we could collaborate on to ensure Louisiana VFC compliance.
5. Update CDC's Immunization Services Division on Louisiana VFC activity in this area.