



Dose for Dose Restitution Exception Form Guidance and Directions for use

Guidance:

This form **MUST BE COMPLETELY FILLED OUT** and **EMAILED** to ArizonaVFC@azdhs.gov within thirty (30) days from the date the initial Dose for Dose Replacement Form and Report Card email, that was sent to you in January. To help us track all Exception Request Forms, we ask that you use the following naming structure for the email subject line and attachments: PIN [VFC PIN] Exception request {example: PIN 9999 Exception request}.

Providers are encouraged to act quickly to submit requests in case additional information is needed.

The AIPO will reply to initial email requests within five (5) business days and let you know if additional information is needed.

Requests will not be reviewed until all supporting/requested documents are received by the AIPO.

Once the AIPO has received all supporting/requested documents, the AIPO review team will make a determination if an exception will be granted. If the exception is denied, providers will be required to replace the doses as originally requested.

Exception forms will not be processed after February 2020.

If you have questions, please contact Terry Rinck (Terry.Rinck@azdhs.gov | 520-770-3103).

Directions for use of this form:

Filled-in by the Provider

A1: Organization (IRMS) and/or Facility Name of the provider, as in ASIIS

A2: PIN, as in ASIIS

A3: Date the form is filled out

A4: Name of the person filling out the form

B1: Overall wastage percentage from the last page on the 2019 CY Report Card

C1-4: Select the Exception Request type

D1: Provide justification for the exception

E1: Printed or typed name of the Signatory Physician

E2: Signature of the Signatory Physician

E3: Printed or typed name of the Primary Vaccine Coordinator

E4: Signature of the Primary Vaccine Coordinator

E5: Printed or typed name of the Backup Vaccine Coordinator

E6: Signature of the Backup Vaccine Coordinator

Filled-in by AIPO

F1-5: Official AIPO Use – Do not write anything in these fields

Dear AzAAP Members,

The Arizona Chapter of the American Academy of Pediatrics (AzAAP) works to support our members across Arizona and assist in the important work you do every day. Many of you are current Vaccines for Children (VFC) providers and provide this critical service to children who might not otherwise be vaccinated because of inability to pay. AzAAP works closely with the Arizona Department of Health Services Immunization Program Office that administers the Arizona VFC program, and we are committed to working together to ensure that Arizona children are vaccinated.

Recently, all Arizona VFC providers received a report card from the ADHS Immunization Program Office regarding the percentage of 2019 wastage of VFC vaccine in their practice and the need for dose for dose replacement if the practice had a 5% or higher wastage rate. AzAAP, our recently convened VFC Provider Committee, and the ADHS Immunization Program Office want to ensure that AzAAP members are aware of the opportunity that all VFC providers have to **request an exception from the dose for dose replacement**.

Any Arizona VFC provider who believes that their 5% or higher vaccine wastage was due to a circumstance that was out of their control should **complete the [attached exception form](#) and submit it to the Immunization Program Office for consideration by February 28, 2020**. The office will consider exceptions for circumstances that were outside of the provider's control that prohibited them from following the guidelines in the VFC Operations Guide and their signed provider agreement. **AzAAP strongly encourages our members** to consider completing and [submitting an exception form](#) if you believe this applies to your practice and you may be eligible to be excused from the dose for dose replacement.

AzAAP also encourages all VFC providers to connect with the Immunization Program Office to open a line of communication and to express your intent to submit an exception form. This essential, initial step will help create the cooperative and collaborative partnership that our members are looking for within the VFC program. The Immunization Program Office and the VFC program does not want to lose providers and will work diligently with you to create a plan going forward. A lack of communication, however, will hinder any ability to rectify the situation in a productive or timely manner in the future. AzAAP wants to ensure that our members are having the best provider experience possible through this program, and we are happy to assist in facilitating these conversations at our members' request.

If you have questions regarding the exception form or specifics of your provider agreement, please contact the Immunization Program Office directly at 602-364-3630.

If you have questions regarding AzAAP, our partnership with the Immunization Program Office, or our VFC Provider Committee, please contact AzAAP at leadership@azaap.org

AzAAP will continue to work on behalf of our members to improve the health of Arizona children and support the pediatric professionals who care for them. We thank you for participation in the VFC program and your dedication to ensuring that every child in Arizona is immunized from vaccine preventable diseases.

Arizona Chapter of the American Academy of Pediatrics