



Washington State Department of Health
Office of Immunization and Child Profile

Patient Eligibility Screening Record

INSTRUCTIONS FOR EVERY HEALTHCARE PROVIDER ENROLLED IN THE WA STATE CHILDHOOD VACCINE PROGRAM:

- MUST conduct patient eligibility screening for EVERY child less than 19 years of age at EVERY immunization visit.
- MUST document eligibility status for EVERY child less than 19 years of age at EVERY immunization visit.
- MUST retain this information in every child's medical record for at least 6 years (WA State DOH minimum).
- MUST be completed by the parent, guardian, individual of record, or health care provider. Verification of responses NOT required.
- MAY use alternate form to screen & document patient eligibility (e.g., intake form, doses administered tracking form, EMR...), but MUST capture ALL reporting elements included in this form and meet ALL requirements listed above.

1. Child's Full Name: _____

Last Name First Name MI

2. Child's Date of Birth: ___/___/___ (mm/dd/yyyy)

3. Parent/Guardian/Individual of Record: _____

Last Name First Name MI

4. Primary Provider's Full Name: _____

Last Name First Name MI

5. For each immunization visit, mark date vaccine given & appropriate patient eligibility category (A-G) for that date.

Date Vaccine Given	Eligible for VFC-Funded Vaccine				Eligible for State-Funded Vaccine		
	A	B	C	D	E	F	G
	Medicaid Enrolled	No Health Insurance	American Indian or Alaskan Native	*Underinsured served by FQHC/RHC	Has health insurance that covers vaccines***	*Other Underinsured	**Enrolled in CHIP

* **Underinsured & Other Underinsured** – These children have health insurance, but it does not include all vaccines or only covers specific vaccine types. High co-pays or deductibles do not make a child underinsured for vaccine purposes. Washington is a universal vaccine state. We use federal and state funds to provide vaccine to all children. 'Underinsured' children may receive vaccine in their medical home.

- If your clinic is an FQHC/RHC, document these children as '**Underinsured**'
- If your clinic is NOT an FQHC/RHC, document these children as '**Other Underinsured**'

** **CHIP** – Children enrolled in the State Children's Health Insurance Program (CHIP) are insured by the State. They are not eligible for Medicaid. These children are eligible for State-funded vaccine.

*** **Has health insurance** - These children have private insurance that is paid for by an employer or subsidized by the State (e.g., benefit exchange). These children do not qualify for Medicaid or **CHIP**. These children are eligible for State-funded vaccine.

*** PLEASE CONTINUE ON REVERSE SIDE ***

