

CONNECTICUT VACCINE PROGRAMS

FINANCIAL RESTITUTION POLICY

Revised March 5, 2024



The Financial Restitution Policy was developed in accordance with the Connecticut Vaccine Program (CVP) and the Connecticut Vaccine for Adults (CVFA) program for the purpose of replacing vaccine wasted or spoiled due to negligence and/or failure to properly store, handle, or rotate vaccine inventory. The policy has been updated to address the increased costs of replacing wasted, expired or spoiled vaccines provided through the CVP and CVFA. The policy also includes a provision that providers who notify the CVP or CVFA of vaccine they will not be administering four months or more prior to expiration will not be financially liable for replacing any doses that ultimately expire. When reporting wastage of any kind, providers should document the staff's use of the practice's Back-Up Protocol For Vaccine Recovery Plan.

DEFINITIONS

Wasted	Any vaccine that cannot be used. This includes expired, spoiled and lost vaccines.
Expired	Any vaccine with an expiration date that has passed.
Spoiled	Any vaccine that exceeds the limits of the approved cold chain procedures or is pre-drawn / reconstituted and not used within acceptable time frames. Always consult with the State Immunization Program before determining if a vaccine is non-viable.
Lost	Any vaccine ordered but not delivered (or not delivered in a timely manner) by McKesson resulting in lost and/or spoiled vaccine.

SITUATIONS REQUIRING FINANCIAL RESTITUTION

The following situations are examples of negligence that may require financial restitution. This list is not exhaustive:

- Failure to rotate vaccine that results in expired doses
- Handling and storage negligence by provider or office staff
- Refrigerator left unplugged or electrical breaker switched off
- Refrigerator door left open or ajar by provider staff, contractors, or guests
- Refrigerator/freezer equipment problems where proof of repair or equipment replacement is not provided to the Immunization Program within 30 days from the date the problem is identified
- Situations in which health care providers must re-vaccinate due to previous administration of non-viable vaccine (i.e. spoiled or expired) or improper administration. Provider will be responsible for the cost of vaccine for re-vaccination.
- Ordering habits resulting in overstock that lead to expiration of vaccines
- Delivery of vaccine during the provider's stated business hours but the office is closed resulting in the loss of vaccine product

EXAMPLES OF SITUATIONS NOT REQUIRING FINANCIAL RESTITUTION

The following examples are situations considered to be out of the providers' control, and generally do not require financial restitution. **This list is not exhaustive, the Vaccine Coordinator makes the final determination for all restitution situations.** Providers should always contact DPH for a determination regarding the viability of suspect vaccine.

- Vaccine shipped from McKesson that is damaged, improperly stored during transit, or not delivered to the provider in a timely manner
- A provider moves vaccine to a location with a secure power source due to anticipated inclement weather, but power is lost at that location
- Partially used multi-dose vials, this does not apply to vials wasted due to a temperature excursion
- Vaccine drawn up but not administered due to a parent changing their mind
- A vial that is accidentally dropped or broken by a provider
- Vaccine that a provider transfers to another provider four months or more prior to expiration
- Vaccine accepted by a provider that expires in four months or less
- Vaccine returned to the immunization program for redistribution to another provider four months or more prior to expiration
- Expired doses of influenza or COVID-19 vaccine
- Extraordinary situations not listed above which are deemed by the DPH to be beyond the provider's control.

WASTAGE ALLOWANCE

All practices will be allowed a "one strike" credit towards vaccine wastage up to a limit of \$1300. On the first instance of vaccine wastage the CVP or CVFA will absorb the cost of vaccine replacement up to \$1300; any vaccine wastage totaling over \$1300 will result in the provider being responsible for replacing the vaccine **on a dose for dose basis at their own cost.** Any subsequent occurrences will require that the provider replace all wasted doses again at their own cost. Providers will not be allowed to order additional doses of vaccine until they submit to DPH an invoice showing that they have replaced all wasted doses.

PROCEDURE FOR FINANCIAL RESTITUTION

This policy applies to any vaccine reported to DPH as wasted on or after May 1, 2011.

- Each incident reported will be reviewed on a case-by-case basis by DPH to determine whether restitution will be required or if extenuating circumstances prevail.
- The provider will be required to submit an invoice to DPH showing they have privately purchased the vaccine reported as wasted.
- Failure to replace any wasted vaccine will result in a delay or forfeiture of future program enrollment for the practice.

PROCEDURE FOR RETURNING VACCINE

- Call the vaccine manufacturer as soon as you suspect vaccine may be spoiled to determine viability status.
- If the vaccine is deemed to be non-viable due to a temperature excursion, or has expired, complete a [Vaccine Return](#) directly in CT WiZ. You will receive a prepaid shipping label via email.
- Once the mailing label is received the provider will return all **unopened vials & pre-filled syringes** of wasted vaccine to McKesson.
- Any vaccine that is wasted i.e. broken vial syringe or vaccine drawn but not administered should not be mailed back to McKesson. These doses should be disposed of properly and adjusted out of your inventory in CT WiZ with a comment explaining what happened.