

**Arizona Vaccines for Children (VFC)  
VFC Eligibility and KidsCare Accountability Reporting Form**

PIN# \_\_\_\_\_ Provider \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Provider Contact: \_\_\_\_\_

Date Log Begins: \_\_\_\_\_ Date Log Ends: \_\_\_\_\_

**Step 1** In the table below:  
Report the total number of children vaccinated **with VFC vaccine only**, in each eligibility category during the above reporting period.

**VFC Eligibility**

VFC Code	VFC Classification	Number of Children Vaccinated
0	KidsCare	
1	AHCCCS	
2	Uninsured	
3	Native American/Alaskan Native	
4	Underinsured	

\*\* Only County Health Departments, birthing hospitals, and other public providers with walk-in clinics that VFC has approved-can administer VFC vaccine to Code 5 patients.\*\*

5**	Non VFC Eligible	
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**Step 2** In the table below:  
Report the total number of **each vaccine** administered to **only** KidsCare children during the reporting period.

**KidsCare Accountability By Vaccine Type**

Vaccine Type	Number of Doses
DTaP	
DTaP/IPV	
DTaP/IPV/HIB	
DTaP/IPV/HEPB	
IPV	
HIB	
PCV-13	
Rotavirus	
Hepatitis A	
Hepatitis B	
MCV	
MMR	
Td	
Tdap	
HPV	
PPV 23	
Varicella	
MMRV	
Flu .25 mL syringe	
Flu .5 mL syringe	
Flu .5 vial	
Flu 5.0 mL MDV	
Intranasal spray	

**Fax this form to the Vaccine Center (602-364-3276) monthly with your temperature log.** Your vaccine order will not be processed if monthly KidsCare & eligibility reports have not been submitted to the Vaccine Center.

Note: Reporting Eligibility and KidsCare doses administered is important for the VFC Program to ensure that sufficient doses of vaccine are available for your patients.