

COVID-19 Vaccine Program Provider Fraud Policy

This policy provides programmatic direction to limit fraud in the Centers for Disease Control and Prevention (CDC) COVID-19 Vaccine Program (Program). Providers who enroll in the Program are required to adhere to all the requirements outlined in the Program Provider Enrollment Agreement (Agreement).

COVID-19 vaccines supplied through the Georgia Department of Public Health Georgia Immunization Program (DPH/GIP) are funded through the Program, and are administered in accordance with federal and state laws, regulations and issued guidance as follows:

Program Providers must administer vaccine in accordance with the DPH published COVID-19 Vaccination Plan (Plan), found at: https://dph.georgia.gov/document/document/georgia-covid-19-vaccine-plan/download. Providers with questions about the Plan, including questions about the current phase or populations eligible to receive vaccine under this phase should consult with DPH/GIP staff prior to administering vaccine.

Program Providers are prohibited from selling Program vaccines, receiving any inducement, whether direct or indirect, for vaccinating (or providing Program vaccine to be used for vaccinating) any individual who is not currently eligible to receive Program vaccine as a member of a group currently authorized under DPH's Plan, or otherwise diverting Program vaccine from the Program. Such use constitutes fraud, is a violation of the terms of the Agreement, and shall be cause for immediate termination from the Program and criminal or civil prosecution for violation of 18 U.S.C. § 1001 or other relevant federal statutes.

Individuals becoming aware of any potential violations of these requirements are encouraged to report them to the Office of the Inspector General, U.S. Department of Health and Human Services at 1-800-HHS-TIPS or TIPS.HHS.GOV.

Individuals should also report to DPH/GIP via email to DPH-ReportFraud@dph.ga.gov. Reports should include (as applicable):

- Provider name and address;
- Source of the allegation;
- Date allegation reported to the immunization program;
- Source's name, address, and telephone number (if available);
- A description of the reason for the report (suspected misconduct/violation);
- Specific COVID-19 vaccine requirements violated;
- Value of vaccine involved (if available); and
- If the report was initiated in response to a complaint, a copy and/or summary of the complaint and the complainant's name, address and telephone number will be necessary for appropriate follow-up; and

The DPH/GIP Deputy Director will review all information submitted and initiate an internal investigation on all reported cases. If the Deputy Director is not available, the Program Enrollment Coordinator will assume responsibility. If neither of these individuals is available, the Program Director will assume responsibility.

The DPH/GIP Deputy Director will provide program managers and staff annual educational updates on identification, investigation, and resolution of Program fraud. Information supporting an allegation will be based on COVID-19 site visits or reports and information from other sources.

Providers perform vital functions within the COVID-19 Vaccination Program (Program) including properly storing, handling, and managing vaccine supply as well as administering vaccine to intended vaccine recipients efficiently.

The Georgia Immunization Program (GIP) for the Georgia Department of Public Health (DPH) has developed and implemented an Accountability and Waste Avoidance Policy (Policy) for Providers enrolled in the Program, documenting the requirements for continued Program enrollment, based on: the Provider Enrollment Agreement; DPH's COVID-19 Vaccine Plan, found at

https://dph.georgia.gov/document/document/georgia-covid-19-vaccine-plan/download; applicable federal and state laws; and guidelines for vaccine management, including waste avoidance.

Program Violations

At the discretion of the Commissioner, DPH may assess penalties and/or require corrective action for the following:

- Administering COVID-19 vaccine to recipients outside of the current phase, as those phases are identified on DPH's website.
- Failing to monitor dose vaccine vials daily to track expiration.
- Failing to administer COVID-19 vaccine to a recipient to avoid waste as follows, with all steps documented:
 - If a vaccine dose is within one (1) hour of expiration and there are no scheduled appointments, contact locations that employ the current phase of eligible individuals per the state guidelines;
 - If no individuals in the current phase can be identified at these employment locations, contact the current phase of eligible individuals on the Provider's waitlist who can arrive within 30 minutes;
 - If no waitlist individuals on can be identified, contact internal staff who have expressed interest in receiving a vaccine;
 - If unable to identify a recipient, administer to other individuals interested in receiving the vaccine regardless of phase eligibility; and
 - If no recipient can be identified, proceed with the waste instructions and recording.
- Administering COVID-19 vaccine to a vaccine recipient who is not a Georgia resident, unless said vaccine recipient claims to live or work in Georgia;
- Refusing to administer COVID-19 vaccine to a vaccine recipient who does not reside in the Provider's county;
- Selling or otherwise misdirecting COVID-19 vaccine:
- Billing a vaccine recipient or third party for COVID-19 vaccine, constituent products, or ancillary supplies;
- Billing a vaccine recipient for a COVID-19 administration fee not otherwise covered by insurance;
- Failing to preserve all records related to COVID-19 vaccine management for a minimum of three
 (3) years;
- Failing to enter into GRITS the required information within the required timeframes related to vaccine inventory, time of receipt of vaccine, doses administered, and vaccine waste;
- Failing to monitor and comply with COVID-19 vaccine expiration dates;
- Failing to monitor and comply with storage unit temperature requirements;

- Failing to use proper equipment to store and handle COVID-19 vaccine, including cold chain conditions and chain of custody at all times in accordance with the Emergency Use Authorization (EUA) or vaccine package insert, manufacturer guidance, and CDC guidance in the Vaccine Storage and Handling Toolkit;
- Misrepresenting cold-chain capacity within the Provider's facility;
- Failing to provide vaccine recipients or caregivers the correct EUA Fact Sheet, a completed/updated vaccination records care, and v-safe information when the vaccine is administered:
- Failing to report adverse vaccine reactions to Vaccine Adverse Event Reporting System (VAERS);
- Ordering COVID-19 vaccine or reporting vaccine usage in quantities or patterns that do not match provider profile or otherwise involve over-ordering of COVID-19 vaccine doses;
- Waste of COVID-19 vaccine due to negligence, recklessness, or intentional actions; and/or
- Failing to comply with any other requirements of DPH or in the CDC COVID-19 Provider Agreement.

Penalties and Corrective Action

DPH may impose penalties as a result of and/or require Providers to take action to correct identified/detected abuse and/or waste if the abuse and/or waste is confirmed as a result of an investigation DPH/GIP conducts. The DPH/GIP Director or Deputy Director will review the investigative findings and make a recommendation on penalties and/or corrective action to the DPH Commissioner.

The penalties and/or corrective action may include:

- For Providers who vaccinate outside of Georgia's current phase as reflected on DPH's website, except as set forth in the Accountability and Waste Avoidance Policy to avoid wasting vaccine:
 - First Offense -- 45 day suspension from the Program and DPH will collect the Providers existing vaccine inventory within 72 hours for redistribution to enrolled Providers within the county. Sufficient inventory will be left with the suspended Provider for second dose vaccine recipient needs.

Note: The phased approach to vaccine rollout is managed by the State office of the Georgia Department of Public Health. All Providers in the state of Georgia must adhere to the plan as set by DPH. Inquires related to the phases shall be directed to the State DPH office DPH-COVID19Vaccine@dph.ga.gov.

- Second Offense -- Immediate Termination from the Program.
- For Providers who fail to report vaccine administration data into GRITS within 24 hours of administration:
 - First Offense Written warning from DPH; however, if reporting is not corrected within 7 calendar days, a two-week moratorium on additional vaccine shipments shall be imposed and a corrective action plan developed and implemented to prevent future violations.
 - Second Offense Two-week moratorium on additional vaccine shipments, as well as correction of reporting along with development and implementation of a corrective action plan to prevent future violations.
 - Subsequent Offenses to be determined by the Commissioner of the Georgia Department of Public Health.
- For Providers who knowingly vaccinate recipients who do not live or work in Georgia:
 - First Offense Written warning from DPH.
 - Second Offense Two-week moratorium on additional vaccine shipments, as well as development and implementation of a corrective action plan to prevent future violations.
 - Subsequent Offenses to be determined by the Commissioner of the Georgia Department of Public Health.

- For Providers who refuse to administer vaccine to recipients who live outside the county:
 - First Offense -- Written warning from DPH.
 - Second Offense -- Two-week moratorium on additional vaccine shipments, as well as development and implementation of a corrective action plan to prevent future violations.
 - o Subsequent Offenses to be determined by the Commissioner of Public Health.
- For Providers who fail to use all reasonable efforts to administer a second dose to vaccine recipients who received a first dose from the Provider:
 - First Offense -- Written warning from DPH.
 - Second Offense Referral to the Provider's professional licensing Board.

The Commissioner of the Georgia Department of Public Health shall have the authority to assess penalties and/or require other corrective action for other Program abuse and/or waste, up to and included termination from the Program based on the egregiousness of the abuse and/or waste. Other penalties and/or corrective action to address identified abuse and/or waste that may be imposed or required include, but is not limited to:

- Participation in education, in person or online, individually or in a group, to help Providers meet Program requirements;
- Modification of Supply;
- Cessation of Supply;
- Heightened Monitoring through on-site visits to confirm implementation of a Corrective Action Plan;
- Required submission of documentation of corrective action and cessation of vaccine ordering pending receipt of required documentation;
- Suspension from Program (minimum of 45 day suspension required for vaccinating outside of the current phase);
- Return of vaccine inventory during suspension period; and
- Termination from Program.

Should a Program Provider be suspended or terminated from the Program, said Provider shall, within 72 hours of receipt of the Notice of Suspension/Termination, voluntarily allow DPH staff entry to the facility to take possession of all vaccine previously delivered to the Program, except inventory needed for second dose vaccine recipient needs.

The DPH Commissioner will make the Final Determination regarding the Penalties assessed and/or Corrective Action required.

DPH/GIP Compliance Review:

DPH will confirm compliance with Program requirements by:

- Reviewing Georgia Registry of Immunization Transactions and Services (GRITS) for proof of reporting of Vaccine Inventory, Doses Administered, and Waste;
- Monitoring Provider Profiles, Inventory Levels, and Waste;
- Comparing COVID-19 Redistribution Agreement with Vaccine Redistribution; and
- Investigating complaints of abuse and/or waste as submitted to DPH-ReportFraud@dph.ga.gov, or through other channels.

Reviewing GRITS for Proof of Reporting of Vaccine Inventory, Doses Administered, and Waste. DPH/GIP staff review GRITS to assess whether Providers are entering into GRITS the following information within the time specified:

- 1. Current vaccine inventory daily.
- 2. Vaccine inventory received upon receipt of delivery or within 24 hours of delivery.
- 3. Doses administered within 24 hours of administration.
- 4. Waste due to failure to administer, temperature fluctuations, spoilage, and/or expiration within 24 hours.

Monitoring of Provider Profiles, Inventory Levels, and Waste

DPH/GIP staff:

- Review Provider profiles, which reflect an estimate of the number of COVID-19-eligible vaccine recipients the Provider expects to serve under each active phase (e.g., Phase 1A, Phase 1A+, Phase 1B, etc.) and are uploaded into the Centers for Disease Control and Prevention (CDC) developed Vaccine Tracking System (VTrckS).
- 2. Review Provider profiles to assess whether Providers represent having appropriate vaccine storage and handling capacity.
- May review a random Provider sample intermittently to compare data on vaccine ordered and/or doses administered and on hand inventory data against providers most recent submitted profile estimates.
- 4. May contact Providers that exceed profile amounts to determine if distribution of additional vaccine is justified, or if adjustments to the profile are needed. GIP staff contact providers that exceed profile amounts to determine if distribution of additional vaccine is justified, or if adjustments to the profile are needed.
- 5. May review Provider reporting regarding waste to confirm action taken to reduce waste includes, but is not limited to, administering all doses within a vial even if Provider must administer to vaccine recipients in accordance with the waste avoidance section of this policy.

Detection of Provider Abuse and/or Waste

DPH/GIP staff detect and/or prevent abuse and/or waste of vaccine supply by:

- Intermittently cross-checking Provider information against the List of Excluded Individuals/Entities
 on the Department of Health & Human Services (HHS) Office of Inspector General website, as
 individuals or entities on the List of Excluded Individuals/Entities shall be excluded from the
 Program.
- 2. Reporting to the DPH/GIP Deputy Director unexplained amounts of inventory, doses administered, and waste, as trained DPH/GIP Program staff review vaccine administration reports for excessive use, underreporting, and other activities that may look out of the ordinary.

Any individual, group, or Provider who wants to report a suspected case of abuse and/or waste, should send an email to DPH-ReportFraud@dph.ga.gov with the following information:

- 1. Name of Provider (Medicaid ID if known) suspected of abuse and address;
- 2. Source of the allegation:
- 3. Source's name, address, and telephone number (if available)
- 4. A description of the reason for the report (i.e., suspected abuse)
- 5. Specific COVID-19 vaccine management requirement violated;
- 6. Value of vaccine involved (if available); and
- 7. A copy and/or summary of the complaint and the complainant's name, address and telephone number.

The DPH/GIP Deputy Director will review all reports submitted and, within five business days of the report, initiate a DPH/GIF staff investigation for all cases with sufficient evidence of abuse.



2 Peachtree Street, NW, 15th Floor Atlanta, Georgia 30303-3142

dph.ga.gov

GEORGIA DEPARTMENT OF PUBLIC HEALTH ADMINISTRATIVE ORDER FOR VACCINE USAGE AND ACCOUNTABILITY

WHEREAS, on March 14, 2020, Governor Brian P. Kemp issued Executive Order 03.14.20.01, declaring a Public Health State of Emergency in Georgia due to the impact of Novel Coronavirus Disease 2019 (COVID-19); and

WHEREAS, on March 16, 2020, the Georgia General Assembly concurred with Executive Order 03.14.20.01 by joint resolution; and

WHEREAS, the Public Health State of Emergency has been extended as provided by law; and

WHEREAS, COVID-19 presents a severe threat to public health in Georgia;

WHEREAS, Providers who enroll in the COVID-19 Vaccination Program (Program) perform vital functions including properly storing, handling, and managing vaccine supply as well as administering vaccine to intended recipients;

WHEREAS, the Department of Public Health Georgia Immunization Program (DPH/GIP) has implemented a COVID-19 Vaccine Program Provider Accountability and Waste Avoidance Policy (Policy) to confirm Providers are complying with their obligations under the Program, the CDC COVID-19 Vaccination Program Provider Agreement, DPH's Vaccine Plan (https://dph.georgia.gov/document/document/georgia-covid-19-vaccine-plan/download), the DPH state office managed phased approach to vaccine rollout, to which all Providers must adhere and applicable federal and state laws and guidelines for vaccine usage; and

WHEREAS, DPH requires Providers enrolled in the Program to take action to correct identified/detected abuse and/or waste, as set forth in the Policy, if the abuse and/or waste is confirmed as a result of the investigation DPH/GIP staff conducts.

NOW, THEREFORE, in accordance with O.C.G.A. §§ 31-2A-4, 31-1-10, and 31-12-2.1(a) as well as Governor Kemp's Executive Orders,

IT IS HEREBY ORDERED as follows:

 As a condition of continued enrollment as a COVID-19 Vaccine Program Provider, each Provider is required to read and agree to the terms of the "COVID-19 Vaccine Program Provider Accountability and Waste Avoidance Policy." Each Provider's

¹ Inquiries related to the phases should be directed to the DPH state office at DPH-COVID19Vaccine@dph.ga.gov.

acceptance of the terms of said Policy will be evidenced by the Provider's authorized representative signing of the "Acceptance of COVID-19 Vaccine Program Provider Accountability and Waste Avoidance Policy," a copy of which is attached hereto, and electronically signed via DocuSign.

- 2. By reading and electronically signing via DocuSign, Program Providers acknowledge that compliance with Program requirements, as set forth in the Policy, is mandatory and that DPH may impose penalties and/or require corrective action for identified non-compliance, including but not limited to the following:
 - For Providers who vaccinate outside of Georgia's current phase as reflected on DPH's website, except as set forth in the Accountability and Waste Avoidance Policy to avoid wasting vaccine:
 - First Offense 45 day suspension from the Program and DPH will collect the Providers existing vaccine inventory within 72 hours for redistribution to enrolled Providers within the county. Sufficient inventory will be left with the suspended Provider for 2nd dose vaccine recipient needs.

Note: The phased approach to vaccine rollout is managed by the State office of the Georgia Department of Public Health. All Providers in the state of Georgia must adhere to the plan as set by DPH. Inquires related to the phases shall be directed to the State DPH office DPH-COVID19Vaccine@dph.ga.gov.

- Second Offense -- Immediate Termination from the Program.
- For Providers who fail to report vaccine administration data into GRITS within 24 hours of administration:
 - First Offense Written warning from DPH; however, if reporting is not corrected within 7 calendar days, a two-week moratorium on additional vaccine shipments shall be imposed and a corrective action plan developed and implemented to prevent future violations.
 - Second Offense Two-week moratorium on additional vaccine shipments, as well as correction of reporting along with development and implementation of a corrective action plan to prevent future violations.
 - Subsequent Offenses to be determined by the Commissioner of the Georgia Department of Public Health.
- For Providers who knowingly vaccinate recipients who do not live or work in Georgia:
 - First Offense Written warning from DPH.
 - Second Offense Two-week moratorium on additional vaccine shipments, as well as development and implementation of a corrective action plan to prevent future violations.
 - Subsequent Offenses to be determined by the Commissioner of the Georgia Department of Public Health.
- For Providers who refuse to administer vaccine to recipients who live outside the county:
 - First Offense -- Written warning from DPH.
 - Second Offense -- Two-week moratorium on additional vaccine shipments, as well as development and implementation of a corrective action plan to prevent future violations.
 - Subsequent Offenses to be determined by the Commissioner of Public Health.
- For Providers who fail to use all reasonable efforts to administer a second dose to vaccine recipients who received a first dose from the Provider:

- o First Offense -- Written warning from DPH.
- Second Offense Referral to the Provider's professional licensing Board.

The Commissioner of the Georgia Department of Public Health shall have the authority to implement any of the foregoing, or any other penalty and/or corrective action for Program abuse and/or waste, up to and including termination from the Program, with the decision regarding the penalty to be assessed and/or corrective action to be imposed based on the egregiousness of the abuse and/or waste.

This Administrative Order is effective as of the date reflected hereon and shall remain in effect for ninety (90) days, with the option to renew, following the end of the Public Health State of Emergency declared in Executive Order 03.14.20.01 and as extended thereafter.

SO ORDERED, this 18th day of February, 2021.

Kathleen E. Toomey, M.D. M.P.H.

Hatuley & Sponegho

Commissioner, Department of Public Health State Health Officer



Acceptance of COVID-19 Vaccine Program Provider Accountability and Waste Avoidance Policy

Acknowledging that Providers perform vital functions within the COVID-19 Vaccination Program (Program) including properly storing, handling, and managing vaccine supply as well as administering vaccine to intended vaccine recipients to avoid waste, the Georgia Immunization Program (GIP) for the Georgia Department of Public Health (DPH) developed the "COVID-19 Vaccine Program Provider Accountability and Waste Avoidance Policy."

The undersigned $_$, in his/her capacity as	for	,* a	i
Program Provider,	hereby:			

- acknowledges having read the Policy,
- accepts that compliance with Policy requirements is mandatory; and
- acknowledges that if confirmed not to be in compliance with the Policy, penalties and/or corrective action may be assessed as follows in the sole discretion of the Commissioner of the Georgia Department of Public Health.

Penalties and/or Corrective Action

The penalties and/or corrective action may include:

- For Providers who vaccinate outside of Georgia's current phase as reflected on DPH's website. except as set forth in the Accountability and Waste Avoidance Policy to avoid wasting vaccine:
 - o First Offense -- 45 day suspension from the Program and DPH will collect the Provider's existing vaccine inventory within 72 hours for redistribution to enrolled Providers within the county. Sufficient inventory will be left with the suspended Provider for second dose vaccine recipient needs.

Note: The phased approach to vaccine rollout is managed by the State office of the Georgia Department of Public Health. All Providers in the state of Georgia must adhere to the plan as set by DPH. Inquires related to the phases shall be directed to the State DPH office DPH-COVID19Vaccine@dph.ga.gov.

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 - First Offense Written warning from DPH.
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 - o Subsequent Offenses to be determined by the Commissioner of the Georgia Department of Public Health.
- For Providers who refuse to administer vaccine to recipients who live outside the county:
 - First Offense -- Written warning from DPH.
 - Second Offense -- Two-week moratorium on additional vaccine shipments, as well as development and implementation of a corrective action plan to prevent future violations.
 - Subsequent Offenses to be determined by the Commissioner of Public Health.

- For Providers who fail to use all reasonable efforts to administer a second dose to vaccine recipients who received a first dose from the Provider:
 - o First Offense -- Written warning from DPH.
 - Second Offense Referral to the Provider's professional licensing Board.

Other penalties and/or corrective action to address identified abuse and/or waste that may be imposed or required includes, but is not limited to:

- Participation in education, in person or online, individually or in a group, to help Providers meet Program requirements;
- Modification of Supply;
- Cessation of Supply;
- Heightened Monitoring through on-site visits to confirm implementation of a Corrective Action Plan:
- Required submission of documentation of corrective action and cessation of vaccine ordering pending receipt of required documentation;
- Suspension from Program (minimum of 60 day suspension required for vaccinating outside of the current phase);
- · Return of vaccine inventory during suspension period; and
- Termination from Program.

Name:	
Capacity:	
Provider:	
Capacity:	
Signature:	
Date of Signature:	

Signed via DocuSign

* List all facilities/locations represented by the above signature