

Providers of Pediatric Services: How to Enroll in the California COVID-19 Vaccination Program

California Department of Public Health
May 11, 2021



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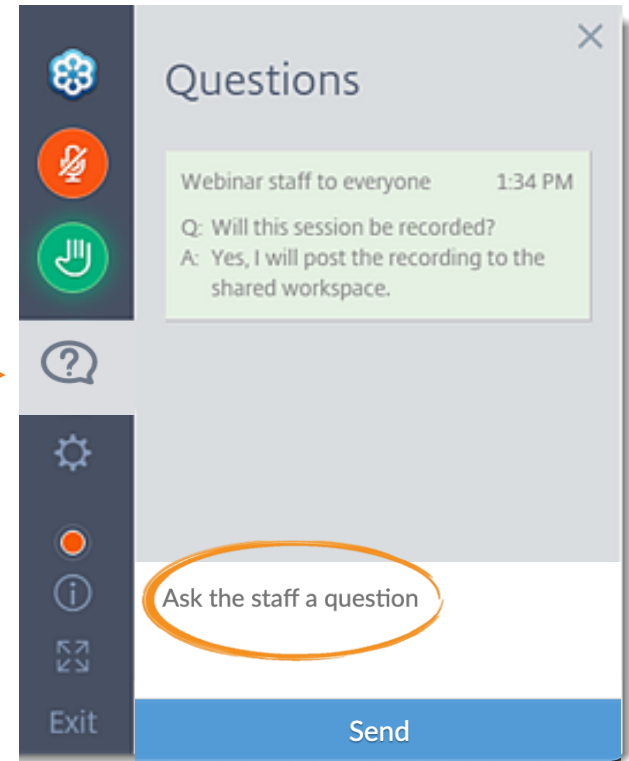
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Questions & Answers

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Webinar Objectives:

- Explain the role of Providers of pediatric services in ending the COVID-19 pandemic.
- Describe the process and requirements for enrolling in the California COVID-19 Vaccination Program.
- Share resources for Providers and your patients.



Agenda

Role of Providers of Pediatric Services in Ending the Pandemic

Tom Boo, MD, FAAFP

Medical Officer, Immunization Branch

California Department of Public Health

How to Enroll in the CA COVID-19 Vaccination Program

Nisha Gandhi, MPH

Adult Immunization Coordinator, Immunization Branch

California Department of Public Health

Questions & Answers

Moderator: Leslie Amani

We Appreciate Your Feedback!

A short survey will automatically launch in your web browser at the conclusion of our presentation today. Please take a moment to rate today's webinar and let us know what you'd like to hear in future webinars.



Role of Providers of Pediatric Services in Ending the Pandemic

Tom Boo, MD

CDPH

Why is it important for providers of pediatric services to join the program?

- COVID vaccination in children will prevent uncommon severe pediatric cases and deaths
- Protects families (vulnerable relatives)
- Essential for return to normal school operations, allowing more parents to return to work
- Safer return to social activities
- Sufficiently high-population immunity is essential to ending the epidemic



Role of Providers of Pediatric Services in Ending the Pandemic

- Pfizer-BioNTech vaccine authorization for adolescents expanded from 16-17 years to ages 12 years and up.
- Many parents will rely on guidance from their primary care providers and prefer vaccination in trusted medical home.
- Advantages to getting all recommended vaccinations from primary care providers:
 - One stop
 - Many children have gotten behind on routine immunizations during the pandemic.
 - Recommendation to avoid other immunizations within 2-weeks of COVID-19 vaccination is expected to be changed soon.

Benefits for Patients & Providers

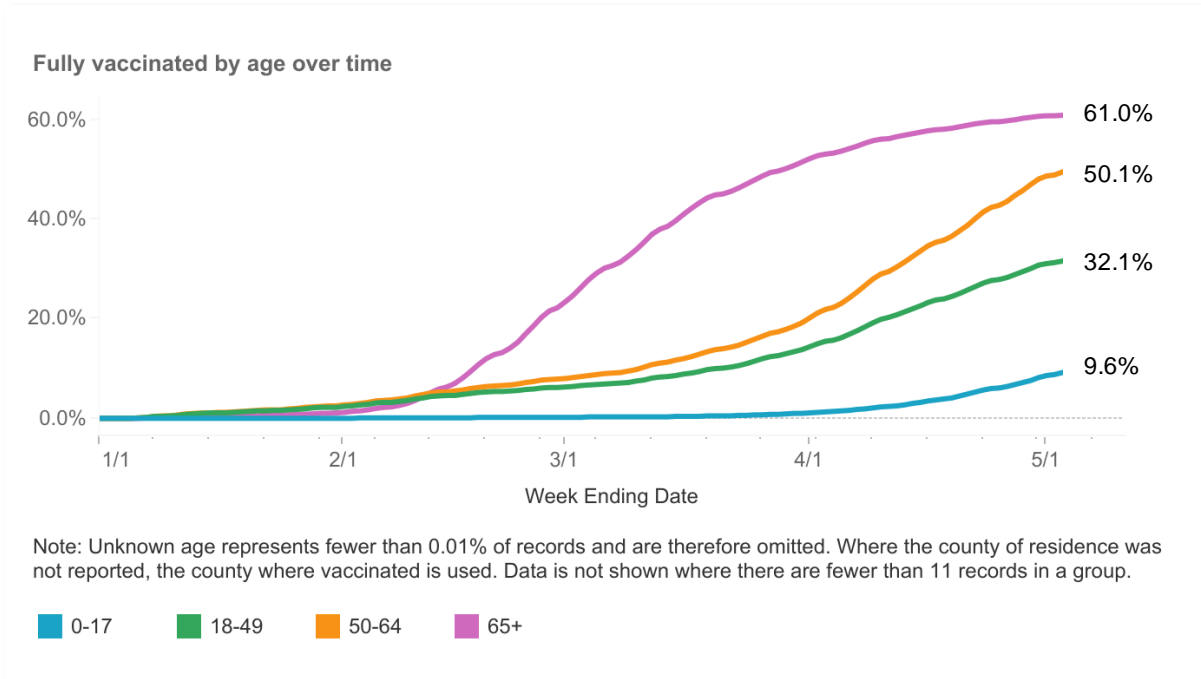
- Safely return to in-person school and extra-curricular activities
- Protect vulnerable people in families and the community
- Meet immunization requirements of many colleges, some camps, and other extracurricular activities
- Social gatherings and events
- Generous Vaccines for Children (VFC) reimbursement rate for COVID-19 vaccine administration



It's Time for Pediatric Vaccination in CA

As of May 9, 2021:

- 14,361,281 (45.1%)
People fully vaccinated
- 5,321,693 (16.7%)
People partially vaccinated
- 32,669,323 doses
administered



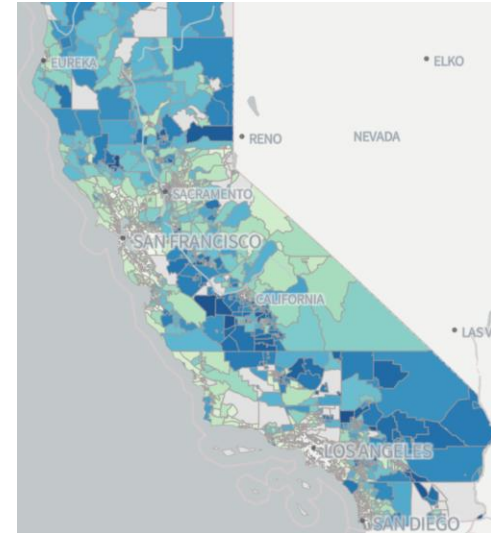


Reaching Pediatric Populations

- Providers of care to children
- School-based clinics
- Community/mass vaccination sites
- Community Health Centers
- Pharmacies

Prioritization for Enrollment & Allocation

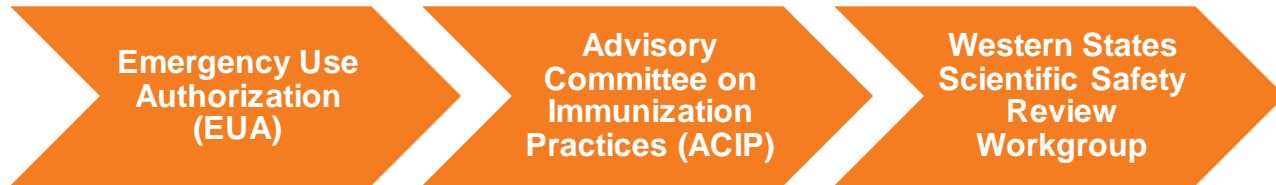
- While vaccine supply is limited and provider network is expanding, CDPH and Local Health Departments will prioritize enrollment and allocation for higher volume providers serving more vulnerable communities.
- VFC Providers (storage standards and socioeconomic equity rationale)



<https://healthyplacesindex.org/map/>

Expanded EUA Authorization

- Pfizer-BioNTech vaccine is well-tolerated, has excellent safety profile in 16-to-17-year-olds
- Expanded eligibility for 12-to-15-year-olds based on small Phase III trial:
 - 2,260 adolescents 12 to 15 years of age
 - 100% efficacy and robust antibody responses
 - Well-tolerated with side effects similar to participants 16 to 25 years old



How to Enroll in the CA COVID-19 Vaccination Program

Nisha Gandhi, MPH

CDPH

CA COVID-19 Vaccination Program

Where we are now:

- Launched in mid-November
- Over 6,000 approved Providers in the program
- Program participants include Local Health Departments, large health systems, Federally Qualified Health Centers

Now we are ready to enroll Providers who have patient populations 12-to-18-years-old.



Before You Enroll

- ✓ Step 1: Review Program Requirements including CDC Provider Agreement
- ✓ Step 2: Immunization Information System (IIS)
- ✓ Step 3: Storage & Handling Guidelines
- ✓ Step 4: Enrollment Worksheet
- ✓ Step 5: Responsible Officers
- ✓ Step 6: Complete Required Training
- ✓ Step 7: CDC Provider Agreement in myCAvax
- ✓ Step 8: Blue Shield's TPA Agreement*
- ✓ Step 9: Onboard to My Turn*

Provider Enrollment: Before You Enroll

California COVID-19 Vaccination Program



Providers with an active license in California and who possess and administer vaccines are eligible to enroll in the California COVID-19 Vaccination Program. To receive State doses, local providers, medical groups, health systems, multi-county entities, pharmacies, and [HRSA community health centers](#) will enroll in myCAvax. Your application will be reviewed and verified by CDPH prior to approval.

Section A: Provider Requirements & Legal Agreement

Organization Coordinator is the Point of Contact who enrolls the provider organization in myCAvax. This role will complete Section A, identify affiliated locations (under the same CEO) who are to receive or administer COVID-19 vaccines, register with VaccineFinder and determine whether Organization or Locations will report inventory daily, and monitor all program communications.

Who signs? Organization's Chief Medical Officer (or equivalent medical official) and Chief Executive Officer (or chief fiduciary/legal official) must agree to the conditions of program participation and DocuSign the CDC Provider Requirements & Agreement on behalf of your Organization.

Section B: Provider Profile Information

Each location must have an **on-site** primary and backup **Location Coordinator**, typically filled by vaccine coordinators. This role will enroll the provider location in myCAvax; receive vaccines, monitor temperatures, and manage vaccine inventory; receive emails regarding allocations, shipments, and temperature monitoring; may be delegated to report inventory to VaccineFinder; and may transport vaccines for mass vaccination clinics. The Location Coordinator completes Section B and submits the application to CDPH for review.

Who signs? Medical or Pharmacy Director (or Vaccine Coordinator) responsible for location's adherence to CDC Provider Agreement terms must DocuSign Section B.

Step 1: Review Program Requirements

Review [CDC Provider Agreement](#) to ensure your facility can meet all program requirements. Go to [Program Enrollment](#) to review Steps to Participation (in the TPA Network) to ensure you are willing to participate in order to receive vaccine. (Providers of pediatric services may opt out.)

Step 2: Enroll in IIS

Each vaccination location must be enrolled in the California Immunization Registry (CAIR) and have their own unique IIS Registry ID (e.g., CAIR Org Code); locations may not share the Organization's IIS ID. If your facility is not currently enrolled, please [enroll in your local registry](#) now. If your location is already enrolled in CAIR2/SDIR/RIDE and has its own unique IIS ID, do not enroll again; use your existing CAIR Org Code.

Step 1: Review Program Requirements

- Review CDC COVID-19 Vaccination Program Provider Agreement (page 3)
- Requirements include:
 - EUA agreement
 - Storage & handling
 - Vaccine documentation and reporting



Step 2: Enroll in IIS*

- Each vaccination location must be enrolled in the California Immunization Registry (CAIR) and have their own unique IIS Registry ID (e.g., CAIR Org Code).
 - Locations may not share the Organization's IIS ID
 - Must submit data to IIS if opting not to onboard to My Turn
 - Submitting via Prep Mod or Mass Vax Module is not allowed
- If your provider location is already enrolled in CAIR2/SDIR/RIDE and has its own unique IIS ID, do not enroll again; use your existing CAIR Org Code.

Step 3: Confirm Storage & Handling Equipment Complies with CDC

- Purpose-built or pharmaceutical-grade units designed for storage of vaccines
 - Compact or large
 - Designed for refrigerated and frozen temperatures
 - Household standalone units are also acceptable
- Must be equipped with digital data logger (DDL)
 - Devices with buffered probe provide more accurate measurements
 - With current and valid Certificate of Calibration Testing

Non-compliant equipment will delay application approval!

Step 4: Complete Provider Enrollment Worksheet

Section A: Provider Requirements & Legal Agreement

Section B: Provider Profile Information

CDC COVID-19 Vaccination Program Provider Agreement



Please complete Sections A and B of this form as follows:

The Centers for Disease Control and Prevention (CDC) greatly appreciates your organization's (Organization) participation in the CDC COVID-19 Vaccination Program. Your Organization's chief medical officer (or equivalent) and chief executive officer (or chief fiduciary)—collectively, Responsible Officers—must complete and sign the CDC COVID-19 Vaccination Program Provider Requirements and Legal Agreement (Section A) in myCAvax. In addition, the CDC COVID-19 Vaccination Program Provider Profile Information (Section B) must be completed for each vaccination location (Location) covered under the Organization listed in Section A.

Section A. COVID-19 Vaccination Program Provider Requirements and Legal Agreement

Organization Identification

Organization's legal name: _____

Number of affiliated vaccination locations covered by this agreement: _____

Organization telephone: _____

Email: _____ (must be monitored and will serve as dedicated contact method for the COVID-19 Vaccination Program)

Street address 1: _____ Street address 2: _____

City: _____ County: _____ State: _____ ZIP: _____

Responsible officers

For the purposes of this agreement, in addition to Organization, Responsible Officers named below will also be accountable for compliance with the conditions specified in this agreement. The individuals listed below must provide their signatures after reviewing the agreement requirements.

Chief Medical Officer (or Equivalent) Information

Last name: _____ First name: _____ Middle initial: _____

Title: _____ Licensure state: _____ Licensure number: _____

Telephone: _____ Email: _____

Street address 1: _____ Street address 2: _____

**Data Gathering Worksheet
DO NOT SUBMIT**

CDC COVID-19 Vaccination Program Provider Agreement

Section B. CDC COVID-19 Vaccination Program Provider Profile Information

If you are enrolling on behalf of one or more other affiliated Organization vaccination locations, collect information for each location. Each individual Organization vaccination location must adhere to the requirements listed in Section A.

Organization Identification for individual locations

Organization location name: _____ Will another Organization location order COVID-19 vaccine for this site? ☐ If YES, provide Organization name: _____

Contact information for location's primary COVID-19 vaccine coordinator

Last name: _____ First name: _____ Middle initial: _____

Telephone: _____ Email: _____

Contact information for location's backup COVID-19 vaccine coordinator

First name: _____ Middle initial: _____

Email: _____

Location address for receipt of COVID-19 vaccine shipments

Street address 1: _____ Street address 2: _____

City: _____ County: _____ State: _____ ZIP: _____

Telephone: _____ Fax: _____

Organization address of location where COVID-19 vaccine will be administered (if different from receiving location)

Street address 1: _____ Street address 2: _____

City: _____ County: _____ State: _____ ZIP: _____

Telephone: _____ Fax: _____

Days and times vaccine coordinators are available for receipt of COVID-19 vaccine shipments

Monday	Tuesday	Wednesday	Thursday	Friday
AM: _____	AM: _____	AM: _____	AM: _____	AM: _____
PM: _____	PM: _____	PM: _____	PM: _____	PM: _____

Step 5: Notify Responsible Officers

Section A: Responsible Officers and Provider Agreement

Identify your Organization's responsible officers:

- Chief Medical Officer (CMO) and Chief Executive Officer (CEO) must DocuSign the Agreement* on behalf of the Organization.
 - An Organization can identify the same person as CMO and CEO.

Section B: Adding Vaccination Locations

Identify # of affiliated vaccination sites to the enrolling Organization. For each location:

- Identify Medical or Pharmacy Director or Vaccine Coordinator responsible for location's adherence to Agreement* terms.
- Identify Provider(s) with prescription privileges licensed in California who will oversee/ administer vaccine.

Step 6: Complete Required Training

- Providers and key practice staff who are managing, handling, or administering COVID-19 vaccines must complete the required training before you submit enrollment:
 - Organization and Location Coordinators must complete the training in myCAvax.
 - Other staff should access the [COVID-19 Required Training](#) website.

Step 7: Complete CDC Provider Agreement in myCAvax (<https://mycavax.cdph.ca.gov/s/>)



[Home](#)



[Log In](#)

Thank you for joining
California's fight against
COVID-19

Before you can start the enrollment process, please complete the Preparing for Enrollment section at the bottom of this page. Staff **must complete required training** before your organization can start enrollment.

[Prepare for enrollment](#)



Preparation & Training



Organization



Locations



State Review



Complete



The progress bar tracks the overall status of the enrollment. To see the specific status of a location, please refer to the Location tab

Preparing for Enrollment

Step 8: Sign Blue Shield's TPA Agreement (optional)

- Once enrollment is approved, Providers will be given the option to join the Third Party Administered (TPA) agreement.
- Questions about the TPA agreement can be directed to TPA_Inquiry@blueshieldca.com (Note the underscore “_” between TPA and allocations)

Step 9: Onboard to My Turn Platform (optional*)



My Turn Platform (My Turn Public and My Turn Clinic) gives Providers the opportunity to have an all-in-one application for clinic management, dose accountability & reporting, public eligibility, public scheduling, and walk-in registration for vaccine clinics.

Why join My Turn?

- ✓ It's user friendly and has a network of trainers and technical assistance behind it to help you.
- ✓ Providers can set up and advertise (to their patients and/or family members) COVID-19 vaccine-specific clinics and send reminders/messages via text or email.
- ✓ All doses administered via My Turn system end up in CAIR – this enables providers to ensure doses get into the IIS if the EHR is not currently communicating with the registry AND allows for vaccination documentation of family members/patients who are not enrolled as patients.

My Turn Options



Closed Clinics

- Option 1: EHR able to send data to CAIR for child and parent: done
- Option 2: EHR able to send data to CAIR for child, not parent
 - Use EHR for child.
 - Use My Turn Clinic Walk-in for parents – indefinitely open for the pediatrician.
- Option 3: No System (Unable to send data to CAIR)
 - Use My Turn Clinic for parents and child.

Open Clinics

- Option 4: Providers wants to advertise to the public
 - 4a: My Turn proper – clinic open on My Turn public
 - 4b: EHR track for Epic or Cerner Providers

Providers Participating in the Vaccines for Children Program (VFC)

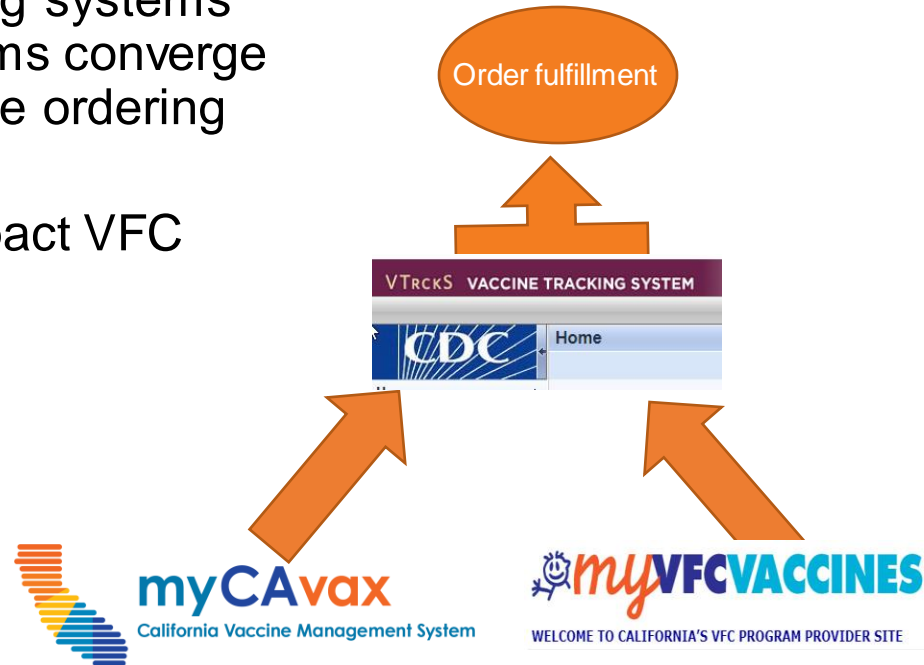
- Enrollment is separate from the VFC Program
 - VFC providers will need to enroll in the COVID-19 Vaccination Program, complete a federal participating agreement, and provide clinic information.
 - Vaccine orders will be submitted in a different system.
 - A call center is available for Providers in the COVID-19 Vaccination Program.

Key Enrollment Tips for VFC Enrolled Sites

Although vaccine enrollment & ordering systems differ from VFC's systems, both systems converge account information into CDC's vaccine ordering system (VTrckS).

Any changes to the info below will impact VFC shipments as well:

- Vaccine delivery address
- Vaccine Coordinators
- Coordinator contact information
- Shipping hours



Resources

Job Aids

Ready to get started?

- [Before You Enroll](#) (sets expectations)
- [Provider Enrollment Worksheet](#) (gather required provider data)
- [Enrolling Provider Organizations](#) (walks you through Section A)
- [Enrolling Provider Locations](#) (walks you through Section B)
- [Enrolling Community Health Centers](#) (HRSA)

Application Approved?

- [Next Steps](#) (critical systems & email senders, Pfizer shippers, dry ice issues)
- [Readiness Checklist](#) (prepare for initial vaccine shipment)
- [Provider FAQs](#)

Where can I go for support?

Type of Support

Description



COVID-19 Call Center for Providers/LHJs

The COVID-19 Call Center for Providers is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution.

- Email: covidcallcenter@cdph.ca.gov
- Phone: (833) 502-1245 (Monday through Friday from 8AM–8PM)



CMA Enrollment Support

To receive assistance with the enrollment process, contact CMA:

- Email: VaccineNetwork@cmadocs.org
- Phone: (800) 786-4262



myCAvax Help Desk

Dedicated staff provides up-to-date information and technical support through myCAvax help desk: myCAvax.HD@Accenture.com or (833) 502-1245, option 2.



My Turn / My Clinic Help Desk

For Onboarding (those in the process of onboarding): myturnonboarding@cdph.ca.gov

For Technical Support: MyTurn.Clinic.HD@Accenture.com; (415) 621-9494: Daily (including Saturdays and Sundays) 7AM–7PM

For job aids and demo and training opportunities: <https://eziz.org/covid/myturn/>



TPA general inquiry

For general questions about TPA enrollment, email: TPA_Inquiry@blueshielddca.com (Note the underscore “_” between TPA and allocations.)

Open Office Hours for myCAvax Enrollment Support



If you have any questions while enrolling for myCAvax, please join us for Office Hours:

Days: Wednesday, May 12 & Thursday, May 13

Time: 8:00 AM – 7:00 PM PST

Link to join: [Click here to join the meeting](#)

Phone number to call in:

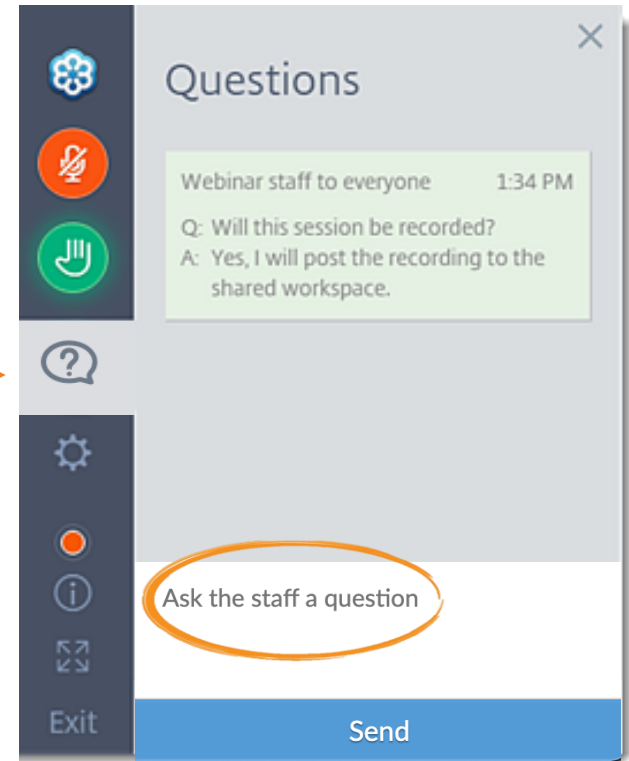
+1 872-215-2965 Phone Conference ID: 371 183 471#

Topics for the next webinar

- Clinical guidance
- Requesting doses
- Redistribution
- Reimbursement
- Reporting requirements (e.g., vaccine temperature excursions)

Questions & Answers

Submit questions via GoToWebinar
"Questions" pane.



Special Thanks to

Today's Presenters: Tom Boo, MD &
Nisha Gandhi, MPH

Content Support: Claudia Aguiluz, Troy Parrish,
& Amy Pine, MPH

Webinar Support: Victoria Travis & California Medical
Association



Thank you for your commitment to protect the health and well-being of all Californians



And for joining today's webinar!

