

California COVID-19 Vaccination Program Provider FAQs

For Prospective, Newly Enrolled, and Current California COVID-19 Vaccine Providers. Providers may also visit [California COVID-19 Vaccination Program](#) for information and updates.

Directions: Click on a category to be directed to related FAQs.

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1. TPA, My Turn



1.1 Q: What is a third-party administrator?

A: A third-partner administrator (TPA) is an entity that selects and manages the network responsible for the delivery of health care or other services on behalf of a group of people. Blue Shield of California was selected as the TPA for the State of California to coordinate COVID-19 vaccine delivery efforts. The State will provide distribution criteria to Blue Shield to ensure equitable, safe, and efficient vaccine allocation. Please click on the link to read [TPA Letter to COVID-19 Vaccine Providers](#).

1.2 Q: Why is the state of California contracting with Blue Shield of California as a TPA?

A: Blue Shield of California (BSC) is a California-based non-profit health plan with a provider network that covers all 58 California counties. It is the only health plan on Covered California that has a Preferred Provider Organization (PPO) network covering every residential zip code in the state. BSC was selected to be the TPA for the State of California because of its robust network management expertise and its experience as a health plan administrator for large employers, including large state accounts.



1.3 Q: What is the role of Providers now that Blue Shield of California is acting as California's TPA?

A: As a current or prospective California COVID-19 Vaccination Provider, Providers should be able to commit to volume requirements and to comply with Provider reporting requirements defined in the Provider agreements. Providers must also commit to closing equity gaps and meeting equity goals for vaccine administration and agree to provide vaccine administration services to any resident of California who is eligible for vaccination and for whom vaccination is medically appropriate, regardless of ability to pay, health plan or insurance status, or type of coverage, if any, and regardless of whether there is any previously existing patient or member relationship with the COVID-19 vaccine Provider. For further information, you may view TPA presentation slides from the February 26th Provider Office Hours at [Accelerating Vaccine Distribution and Administration for Californians](#).



1.4 Q: What is My Turn?

A: My Turn is a new system for Californians to learn when they are eligible to be vaccinated, a place to make an appointment when eligible, and a mechanism to easily track vaccination data. Through My Turn, individuals can sign up for a notification when they are eligible to make an appointment and schedule one when it is their turn. A My Turn presentation can be viewed at [My Turn You Tube Presentation](#). For further information and My Turn onboarding materials, visit [EZIZ My Turn](#).

1.5 Q: Are local health departments and approved COVID-19 vaccine Providers required to use My Turn?

A: All local health departments and approved Providers are required to either administer vaccines via the My Turn scheduling system or an electronic health record (EHR) with an automatic data feed into the state's system. This will reduce data lags and give the state real time information on vaccines at the local and statewide levels.

1.6 Q: How can Providers help patients register with My Turn?

A: Providers can help patients register by directing them to [My Turn COVID-19 Vaccine Eligibility](#) or by calling the California COVID-19 vaccine hotline (1.833.422.4255). The hotline's hours are M-F 8AM-8PM, and S-S 8AM-5PM.

1.7 Q: What is My Turn Volunteer?

A: My Turn Volunteer is a digital platform designed to register Californians as volunteers in support of statewide COVID-19 vaccination efforts. Through My Turn Volunteer, Clinic Vaccination Directors can recruit, vet, match, and request both medical and general support volunteers to support their event needs. Further information can be found at [My Turn Volunteer](#) and questions may be addressed to [Email My Turn Volunteers](#).



2. Provider Eligibility and Enrollment

 Updated

2.1 Q: Who is eligible to become a Provider in the California COVID-19 Vaccination Program?

A: The state of California has signed a new Third Party Administrator contract with Blue Shield of California who will be working closely with local health departments to identify prospective COVID-19 vaccine Providers. All current and prospective COVID-19 vaccine Providers must hold the appropriate credentials and licensing in the jurisdiction where vaccination would take place, meet federal and state requirements, and have the capacity to properly maintain and administer the COVID-19 vaccine. To learn more about becoming a California COVID-19 Vaccine Provider, please visit [Before You Enroll](#) to learn about the enrollment process and requirements.

 Updated

2.2 Q: Can you provide information on the myCAvax vaccine management system?

A: The myCAvax vaccine management system, formerly known as CalVax, simplifies and streamlines vaccine management processes. The myCAvax system offers enhanced reporting, ordering, and inventory services to improve the online experience with a fully centralized vaccine management system. COVID-19 vaccine Providers can login into myCAvax at [myCAvax website](#). If you have not received a log-in email from myCAvax, or are having other technical issues, please contact myCAvax.HD@Accenture.com or 833-502-1245 option 2 to be connected directly to the technical help team. For further questions, please refer to [myCAvax FAQs](#).

 New

2.3 Q: Can you explain the difference between an application and an account in myCAvax?

A: To use the myCAvax system, organizations and locations must submit an application and meet CDPH guidelines to participate in the California COVID-19 Vaccination Program. Organizations will set up their account by completing the application in the myCAvax system (organizations should use Section A and locations should use Section B). Once the application is submitted, no changes can be made to the application. When the application is submitted, an account is created by the system; however, the account status remains pending and is not active until the application has been reviewed and approved by the CDPH Enrollment Team. Once it is approved, the application status changes to approved and the application is archived as historical information in the system. No changes can be made to the application. Once the account is established as active, transactions and updates are made through the account by the location coordinator in myCAvax. If additional assistance is needed, please contact the COVID-19 Provider Call Center by email at covidcallcenter@cdph.ca.gov or by telephone at (833) 502-1245 Monday through Friday, 8am to 8pm.



**2.4 Q: *Where can I access support tools for myCAvax enrollment and other functions?***

A: Once enrolled, COVID-19 vaccine Providers may access a variety of resources and training materials such as job aids, videos, weekly Office Hours, and recorded demos to support system users as they navigate through the myCAvax platform. Information and resources may be found at [myCAvax](#).

2.5 Q: *Do we need to enroll in myCAvax if we are receiving doses from the federal government?*

A: No. Only COVID-19 vaccine Providers receiving doses from the State or their local health department are required to enroll in myCAvax. If you are an approved COVID-19 vaccine Provider receiving doses from the federal government, contact them for enrollment questions and instructions.

2.6 Q: *Why am I having issues when entering my license for verification in myCAvax?*

A: When entering your license number, enter numbers only. For example, license number A12345 should be entered as 12345. For technical issues with myCAvax, email Helpdesk.CalVax@calvax.accenture.com or 833-502-1245 extension #3 to be connected directly to the technical help team.

2.7 Q: *What is VaccineFinder and where can I get enrollment assistance?*

A: VaccineFinder is a system run by the Centers for Disease Control and Prevention (CDC) and uses provider organization and location emails submitted during provider enrollment. Onboarding to VaccineFinder is currently a manual process and invitation emails are not automatically generated. Please refer to Provider Enrollment and Reporting Inventory at [Provider Enrollment](#) in VaccineFinder for assistance with initial onboarding, as well as daily reporting of doses on hand. This job aid includes links to a training video that addresses account setup and reporting.

If your location has received or is expecting to receive COVID-19 vaccine in the next two weeks but has not received the initial email to complete onboarding, please email eocevent522@cdc.gov for assistance with manual onboarding.

For technical assistance, once onboarding is complete, email vaccinefinder@castlighthealth.com or call 855.886.4317 for assistance with account login issues, password resets, file upload errors, and more.

To change an organization's contact information or location in VaccineFinder, contact the COVID Call Center at covidcallcenter@cdph.ca.gov to update the Section A or Section B emails of the CDC Provider Agreement. Once the data is forwarded to the CDC, VaccineFinder will be updated with the new emails and the former email accounts will become inactive.



3. Allocation

3.1 Q: Who determines Provider eligibility and allocation to receive the COVID-19 vaccine?

A: Local health departments determine Provider eligibility and allocation of the COVID-19 vaccine. With the current vaccine supply being very limited, local health departments are working diligently to allocate COVID-19 vaccine doses to Providers as they become available. For daily updates on doses shipped and administered, visit the CA Department Public Health at [COVID-19 Vaccine Progress Dashboard](#).

3.2 Q: Is the COVID-19 vaccine allocation distinguished by first and second doses?

A: A COVID-19 vaccine dose is a dose. Providers should not distinguish between vials as first and second doses. Inventory should be managed to ensure Providers have doses required to meet second dose scheduling. Any remaining COVID-19 vaccine balance can be used for first dose administration.

4. Ordering

4.1 Q: When can I place a COVID-19 vaccine order through myCAVax?

A: Once their location is approved, COVID-19 Vaccine Providers can submit COVID-19 Vaccine order requests through myCAVax. Because the COVID-19 Vaccine supply is very limited, orders should be considered “requests” as local health departments work to allocate limited COVID-19 Vaccine doses. Note, that once an order is submitted in myCAVax, it cannot be changed. Once allocation is approved, Providers will receive a first notification from noreply@agreeya.com. A second notification of order processing will alert providers to expect COVID-19 vaccine shipments within 24 to 48 hours of the notice.

4.2 Q: Can California COVID-19 vaccine Providers change, update, or delete inventory information in myCAVax?

A: No. Inventory information can only be changed by contacting the myCAVax Help Desk at myCAVax.HD@accenture.com.

4.3 Q: Can I place an order in myCAVax for the COVID-19 vaccine if I don't have a frozen or ultra-cold storage unit?

A: Currently, the myCAVax system is programmed to reflect manufacturer specific cold storage requirements and will not allow orders to be placed without the required storage units.

4.4 Q: Can I request COVID-19 vaccine from a specific manufacturer through myCAVax?

A: Providers can request COVID-19 vaccine from a specific manufacturer when ordering through myCAVax. However, a selected choice is not guaranteed as COVID-19 Vaccine Provider storage capacities are considered and local health departments determine allocation from a currently very limited COVID-19 vaccine supply.



**4.5 Q: What is the minimum order request we can submit for the COVID-19 vaccine?**

A: The minimum order request varies by manufacturer. For Moderna, the minimum request is 100 doses. For Pfizer, the minimum request is 975 doses. For the Janssen COVID-19 vaccine from Johnson & Johnson, the minimum request is 100 doses. For manufacturer COVID-19 Vaccine Product details, view [Moderna COVID-19 Vaccine Product profile](#), [Pfizer-BioNtech Product Profile](#) and [Janssen COVID-19 Vaccine Product Profile](#).

4.6 Q: Do I need to order ancillary vaccination supplies?

A: It is anticipated that ancillary supplies will be provided for all allocation phases of the COVID-19 vaccine. Ancillary supplies will be packaged in kits and will be automatically ordered in amounts to match vaccine orders and shipped to the Provider. Because of cold chain requirements, kits will ship separately from the vaccine, but should arrive before or on the same day as the vaccine.

4.7 Q: What ancillary supplies will be provided in the supply kits?

A: The federal government has updated the ancillary supply kits to include enough supplies for a sixth dose. The kits include needles of various sizes for the population served, syringes, alcohol prep pads, surgical masks, face shields for vaccinators, COVID-19 vaccination record cards for vaccine recipients, vaccine needle length and guide, diluent, and mixing supplies based on the vaccine product. Ancillary kits do not include N-95 masks, sharps containers, gloves, and bandages.

4.8 Q: Can we request more vaccination record cards or can we make copies if we run out?

A: Currently, there is no method for the California Department of Public Health to provide additional ancillary supplies, including vaccination record cards. In the short term, Providers may make copies of vaccination record cards. Specifications for vaccine card printing include using 120 lb. cover paper, sized to 4.25" x 3.5", 2-sided printing, in black and white print.

4.9 Q: What should we do if we never received our ancillary supplies?

A: Ancillary supplies are shipped separately from the COVID-19 vaccine and will arrive within 24 hours of vaccine delivery. If you did not receive the ancillary supplies, report this using the following form: [Report Shipment Incident](#).



5. Distribution/Redistribution



5.1 Will COVID-19 vaccine Providers receive a notification from McKesson when an order is approved and shipped?

A: The COVID-19 vaccine Provider will receive a new order acknowledgement email from McKesson once an order is received into the McKesson system. When the order is shipped from the McKesson depot, McKesson will send a second email with an advance shipment notification that includes carrier tracking details. It is recommended that Providers whitelist CDCNotifications@McKesson.com to ensure emails are received.

5.2 Q: What are the guidelines and resources for receiving a shipment of the COVID-19 vaccine?

A: When the COVID-19 vaccine is distributed, maintaining the cold chain is the critical first step in vaccine inventory management. Vaccine deliveries should only be scheduled at times when staff will be present because vaccines must never be left unattended. To support efficient distribution of the COVID-19 vaccine, full day receiving hours should be available. When that is not possible, locations receiving vaccine and ancillary supply shipments must be available during a four-hour window on a weekday other than Monday. All COVID-19 vaccine and ancillary kit deliveries will require a signature. For detailed guidance, please refer to the CDC's [Vaccine Storage and Handling Toolkit](#). For storage and handling for current COVID-19 vaccines, also refer to [Pfizer-BioNTech](#) and [Moderna](#) guidance.

5.3 Q: I need to redistribute COVID-19 vaccines, but don't have approval. What should I do?

A: You must submit a signed [CDC Redistribution Agreement](#) and a [Redistribution Vaccine Management Plan](#) to the CA Department of Public Health and receive a notice of approval prior to redistributing vaccines. This is a one-time application to routinely redistribute vaccines and you may only redistribute to other fully enrolled COVID-19 Vaccination Providers. Please see the [Guide to Redistribution, Repositioning, or Transfer](#) for examples of redistribution events.

5.4 Q: What is the turnaround time to approve Redistribution Agreements and Vaccine Management Plans?

A: Once everything is submitted, it is currently taking approximately three days to review and approve. Notification of approval will be sent via email. Redistribution of the COVID-19 vaccine must not begin until approved.



5.5 Q: I received redistribution approval for the COVID-19 vaccine. Now what?

A: You do not need additional approval prior to each redistribution event. Report all vaccine redistribution or transfer events to the CA Department of Public Health within 24 hours of the event using the [Report Vaccine Redistribution or Transfer](#) e-form. It is the responsibility of the sending site to report redistribution events. Additional redistribution information can be found [here](#).

5.6 Q: What should I do if I need to transfer doses of a COVID-19 vaccine?

A: Because the COVID-19 vaccine supply is currently very limited, transfer of doses of vaccine should be a last resort. To prevent waste and minimize transfers, identify, and vaccinate additional individuals that meet current eligibility guidelines at your location. If doses remain, contact your local health department to initiate a transfer. Additional information is located here: [COVID-19 Vaccine Transfer](#).

5.7 Q: After vaccinating all our healthcare workers who wished to be vaccinated, we have COVID-19 vaccine remaining. How do we return unpunctured, unused vaccine?

A: Contact your local health department to coordinate a plan.

6. Vaccine Storage & Handling

6.1 Q: Can Providers transport punctured COVID-19 vaccine vials to homebound patients?

A: Yes. A punctured COVID-19 vaccine vial may be transported from one homebound location to another by the same healthcare professional if the cold chain is properly maintained. However, a partially used vial cannot be transferred from one provider to another or across state lines. For detailed guidelines see [Vaccinating Homebound Persons With COVID-19 Vaccine](#).

6.2 Q: Where can I find detailed information on storage and handling of the COVID-19 vaccine?

A: For detailed guidance of storage and handling for the COVID-19 vaccines currently available, please refer to the CDC's [Vaccine Storage and Handling Toolkit](#) and to [Pfizer-BioNTech](#) and [Moderna](#) guides.

6.3 Q: How do I monitor temperature with Controlant?

A: Please read and respond to the Controlant email upon receipt of the Pfizer vaccine. If you will store the COVID-19 vaccine in thermal shippers, activate continued temperature monitoring of the shipping container. If you will store COVID-19 Vaccine in an ultra-low freezer, please communicate that you will not need Controlant to monitor thermal shipper temperatures to avoid false alarms.

6.4 Q: What are the guidelines for monitoring storage unit temperatures?

A: Storage unit temperatures must be checked and recorded twice daily to help prevent the loss of vaccines and the potential need for revaccination of patients. Any out-of-range temperatures must be documented and immediately reported. First complete the [Report Temperature Excursion Worksheet](#) to gather the information the vaccine manufacturer will need to determine whether doses may be administered. Then contact the manufacturer and report the excursion and stability determination to the COVID Call Center using the [Report Temperature Excursion e-form](#). See [Reporting Temperature Excursions](#) for additional guidance.

6.5 Q: How do I return Vaccine Shippers?

A: Please return the Pfizer thermal shipper and temperature monitoring device within 30 days of delivery. Return instructions are providing in the [Shipping & Handling Guidelines](#) brochure, which ships with vaccines. For Moderna vaccine, follow the [McKesson Vaccine Shipper Return Instructions](#).

7. Phases & Tiers

7.1 Q: What are the current Phase and Tier guidelines to administer the COVID-19 Vaccine?

A: On February 4, 2021, California issued updated [COVID-19 Phase and Tier Guidelines](#) to accelerate the pace of COVID-19 vaccinations: *California will prioritize vaccinating health care personnel, including vaccinators, and all persons 65 years of age or older.* Please refer to [California's Vaccination Plan](#) for detailed information.

8. Vaccine Administration

**8.1 Q: Where can I find guidance for vaccinating homebound patients?**

A: CDC has developed new guidance on vaccination for homebound patients or for patients residing in small group settings such as a residential facilities or group homes. Detailed guidance and information can be found at [Vaccinating Homebound Persons](#).

**8.2 Q: Where can Providers find information about the Janssen COVID-19 vaccine from Johnson & Johnson?**

A: The Janssen COVID-19 vaccine from Johnson & Johnson is a single-dose vaccine authorized through an Emergency Use Authorization (EUA) issued by the Food and Drug Administration. Detailed information including safety, efficacy, storage, handling, administration and more can be found at CDC's [Janssen COVID-19 Vaccine Information](#).



**8.3 Q: How do we prepare to administer the COVID-19 vaccine?**

A: COVID-19 vaccine products may have different preparation requirements. It is important to follow vaccine preparation instructions located in the [Moderna](#) and [Pfizer-BioNTech](#) and [Janssen](#) COVID-19 vaccine product's Emergency Use Authorization Fact Sheets for Healthcare Providers or the COVID-19 vaccine package insert.

**8.4 Q: How long is the COVID-19 vaccine viable once the vial is punctured?**

A: The Moderna and Pfizer-BioNTech COVID-19 vaccines must be administered within six hours once the vial is punctured. For the Janssen COVID-19 vaccine vials from Johnson & Johnson, once punctured, the Janssen vaccine must be administered within six hours if maintained at appropriate refrigerated temperature and within two hours at room temperature. Please see detailed storage and handling information for each vaccine by clicking on the appropriate COVID-19 vaccine link: [Moderna](#), [Pfizer-BioNTech](#), and [Janssen](#).

8.5 Q: If a health care worker is eligible to receive the vaccine, do mass vaccination sites and multi-county entities (MCEs) require proof of health care worker status with badge or paystub before vaccine administration?

A: Many mass vaccination sites and MCEs are requiring proof of health care worker status before administering the vaccine to a health care worker. However, this is not a state requirement and it may vary from site to site.

8.6 Q: What does it mean to “zero out” COVID-19 vaccine doses each week?

A: To “zero out” means to use all vaccine doses each week so that there is no leftover balance remaining. Each week, COVID-19 vaccine Providers should plan to use all doses, or “zero out” inventory by the end of each 7-day period. The State will track the run-rate of vaccines that you are putting into arms daily to ensure Providers are tracking to zero out doses by the end of the week.

8.7 Q: Where can I find updated CDC Clinical Guidance for COVID-19 vaccine administration?

A: Please see [Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines](#).

8.8 Q: What is the time interval between first and second dose administration of the Moderna and Pfizer COVID-19 Vaccines?

A: Based on current data and science, the FDA strongly recommends that health care providers follow the FDA-authorized dosing schedule for each COVID-19 Vaccine. For the Pfizer-BioNTech COVID-19 Vaccine, the interval is 21 days (3 weeks) between the first and second dose. For the Moderna COVID-19 Vaccine, the interval is 28 days (4 weeks) between the first and second dose. If there is a compelling delay to the second dose administration of the Moderna vaccine beyond 28 days, according to the CDC, it can be given up to 6 weeks after the first dose. To learn more, visit [COVID-19 vaccine dosing schedules](#).



8.9 Q: Does the second dose of the Moderna or Pfizer COVID-19 vaccine administered need to be from the same manufacturer as the first dose administered?

A: Yes. After a person receives a first dose of the COVID-19 vaccine, the second dose administration of the COVID-19 vaccine must come from the same manufacturer.

8.10 Q: Can we provide the second dose of the COVID-19 vaccine if we did not administer the first dose?

A: Yes. Using the Immunization Information System (IIS), verify the brand used and date of the first dose of the COVID-19 vaccine. Once verified, document that you are administering the second dose using the same brand as the first dose.

8.11 Q: If our first dose supply of the COVID-19 vaccine is about to expire, can we open a public clinic to not waste the vaccine?

A: Every effort should be made to preserve the COVID-19 vaccine. If you have extra COVID-19 vaccine doses, please contact your local health department for assistance with finding people to vaccinate or to transfer the vaccine. If appropriate, you may also vaccinate people in the next tier to ensure vaccine is not wasted.

8.12 Q: If a patient has had COVID-19 should they receive the COVID-19 vaccine?

A: Defer the COVID-19 vaccination until the person has recovered from acute infection and met criteria to discontinue isolation. There is no minimum interval between infection and vaccination. Refer to [Vaccine Administration for persons infected or exposed](#) for further guidelines and information.

8.13 Q: Should a patient receive a second dose of the COVID-19 vaccine if they have a severe or immediate allergic reaction?

A: Persons with an immediate allergic reaction to the first dose of a COVID-19 vaccine should not receive additional doses of either of the COVID-19 vaccines. Providers should attempt to determine whether reactions reported following vaccination are consistent with immediate allergic reactions versus other types of reactions commonly observed following vaccination, such as a vasovagal reaction or post-vaccination side effects (which are not contraindications to receiving the second vaccine dose). Please refer to [Interim Clinical Considerations: Contraindications and Precautions](#).

8.14 Q: After administering the COVID-19 vaccine, how long should a patient be observed?

A: Persons with a history of an immediate allergic reaction of any severity to a vaccine or injectable therapy and persons with a history of anaphylaxis due to any cause should be observed for 30 minutes. All other persons should be observed for 15 minutes. For further details please visit [Interim Clinical Considerations: Contraindications and Precautions](#).



8.15 Q: What are required medications and supplies for the management of anaphylaxis after COVID-19 vaccination?

A: Appropriate medical treatment used to manage immediate allergic reactions must be immediately available in the event of an acute anaphylactic reaction following administration of the COVID-19 vaccine. Information on anaphylaxis management can be found in the interim considerations for the [Management of anaphylaxis following COVID-19 vaccination](#) and [Laboratory evaluation of persons who experience anaphylaxis after vaccination](#) and [Interim Clinical Considerations for Use of Pfizer-BioNTech COVID-19 Vaccine, all resources from the CDC](#).

9. Inventory

9.1 Q: Do I need to hold back some of my first dose COVID-19 vaccine inventory to use for second dose administration?

A: Do not retain your first dose COVID-19 vaccine allocation for second dose COVID-19 vaccine administration. Please coordinate with your local health department for second dose allocation. Further information is available at [Vaccine Allocation Guidelines](#).

9.2 Q: For inventory and reporting of the COVID-19 vaccine, do I count doses or vials?

A: Inventory reporting is based on **number of doses**, not the number of vials. Doses in inventory must be reported daily to the national [VaccineFinder](#) website, administered by the CDC.

9.3 Q: How do we account for additional volume in vaccine vials after proper reconstitution and administration of the indicated five doses?

A: The FDA advises that it is acceptable to use every full dose obtainable from each vial. However, because vials are preservative-free, any remaining liquid that does not constitute a full dose should not be pooled from multiple vials to create a dose of the COVID-19 Vaccine. Further information is available at [Accounting of additional COVID-19 Vaccine doses](#).

9.4 Q: How do I manually adjust inventory?

A: For any questions regarding manually adjusting inventory in CAIR, please contact CAIRHelpDesk@cdph.ca.gov. If you are submitting data to CAIR electronically, please contact CAIRDataExchange@cdph.ca.gov.

9.5 Q: How does VaccineFinder help with COVID-19 vaccine inventory?

A: VaccineFinder is a CDC system that helps the public find vaccine providers. As a COVID-19 Vaccination Provider, you are required to report on-hand COVID-19 vaccine inventory each day. More information can be found at [here](#).



10. Reporting

10.1 Q: Where can I find information, updates, and support for VaccineFinder?

A: For CDC reporting updates refer to [CDC VaccineFinder Updates](#). For **step-by-step reporting instructions**, please refer to [Reporting Inventory to VaccineFinder](#) and watch the VaccineFinder [training video](#).

10.2 Q: What are the major reporting requirements for COVID-19 Vaccine Providers?

A: Within **24 hours of administering** a dose of COVID-19 vaccine, Providers must:

1. Report COVID-19 **doses administered** to your local immunization registry (e.g., CAIR2, Healthy Futures, or SDIR).
2. Submit **race and ethnicity information** for every vaccinated patient.
3. Report COVID-19 vaccine **doses in inventory daily** to the [VaccineFinder](#) website.

Additional information is available in the COVID-19 Vaccine [Reporting Requirements](#).

10.3 Q: Given the new reporting functionality in myCAvax, do I have to continue reporting my daily on-hand inventory in VaccineFinder?

A: Yes, it is a federal requirement that California COVID-19 vaccine Program Providers continue to report daily on-hand inventory in VaccineFinder. (VaccineFinder is a federal system and myCAvax is a state system.) Providers should update their inventory in myCAvax only when creating a new vaccine request, reporting waste and excursion, or initiating a transfer request.

10.4 Q: Do Providers need to report inventory of COVID-19 vaccine by doses or vials?

A: When reporting, Providers should report on-hand COVID-19 vaccine doses, not vials.



10.5 Q: When a Provider is able to extract an additional dose for Moderna and Pfizer COVID-19 vaccines, how do we report extra doses?

A: Providers should report Moderna vials as 10 doses. For Pfizer vaccine, federal systems are currently being updated to reflect 6-dose vials. Continue Pfizer reporting as 5 doses per vial for inventory already on hand or for orders approved before the federal system update on February 15. For orders submitted on or after February 16, please report Pfizer vials as 6 doses. Providers should consider labeling vial trays for orders submitted on or after February 16 to ensure accurate reporting of 6-dose vials.



10.6 Q: Do we need to report inventory on weekends?

A: Yes. To maintain visibility in national COVID-19 vaccine inventory levels, Providers must report on-hand doses seven days a week including non-operating days. Exceptions include holidays explicitly announced by the CDC. For VaccineFinder updates, please visit [VaccineFinder Updates](#).

10.7 Q: I have received the COVID-19 vaccine but when our daily on-hand inventory is unchanged or is at zero doses, do I still need to report inventory daily?

A: Yes. Even if your inventory is zero or unchanged, COVID-19 vaccine inventory must be reported daily. Providers will receive reminder emails if they fail to report. For VaccineFinder information and updates, please visit [VaccineFinder Reporting](#).

10.8 Q: Why is VaccineFinder sending reminder emails to report inventory when I have not yet received the COVID-19 Vaccine?

A: After providers report inventory for the first time in VaccineFinder, email reminders are automatically initiated. For instance, if you reported zero inventory once when testing the system, you will continue to receive email reminders. Please continue to report zero inventory until you receive COVID-19 vaccine. For VaccineFinder information and updates, please visit [VaccineFinder Reporting](#).

10.9 Q: What steps should be taken if we failed to report doses administered within 24-hours?

A: California COVID-19 Vaccination Program Providers who are not complying with the requirement to submit doses to their local Immunization Information System (IIS) within 24 hours of administration, may result in the clinic's expulsion from the California COVID-19 Vaccination Program. If you have unreported COVID-19 vaccine doses administered, make every effort to enter them into your local IIS immediately and bring your clinic into compliance.

10.10 Q: How do I report an adverse event to the COVID-19 vaccine?

A: Adverse reactions will continue to be reported through the Vaccine Adverse Event Reporting System (VAERS) by [Reporting an Adverse Event to VAERS](#).



10.11 Q: Is reporting COVID-19 vaccine daily inventory different than reporting redistributions?

A: Yes. The sending and receiving locations must ensure updated inventory counts are reflected in their daily reporting to VaccineFinder, a system run by CDC. There are two options when reporting on-hand inventory to VaccineFinder:

1. Centralized reporting - Organizations report doses on hand daily for all affiliated vaccination locations.
2. Location-level reporting - Organizations may delegate daily inventory reporting to their affiliated vaccination locations.

For CDC reporting updates refer to [CDC VaccineFinder Updates](#).

For **step-by-step instructions**, please refer to [Reporting Inventory to VaccineFinder](#) and watch the VaccineFinder [training video](#).

10.12 Q: How do I report a COVID-19 vaccine shipment incident?

A: Step 1: Complete and submit the [Report Vaccine Shipment Incident](#). You will receive an electronic copy of your report.

Step 2: Contact the shipper (McKesson or Pfizer) to resolve the incident directly. Keep all paper and electronic records for three years.

Pfizer Customer Service: 800-666-7248

McKesson COVID-19 Temperature Excursion Hotline: 833-272-6635

Moderna incidents: McKesson requires that you scan and send the packing list for all incidents to COVIDVaccineSupport@McKesson.com

If an incident pertains to 'Temperature Excursion', you must also send a picture of the TagAlert temperature monitoring device and its location in the shipping container in addition to the packing list.

10.13 Q: If a pharmacy is allocated COVID-19 vaccine from both the state and federal government, how should they report daily on-hand dose inventory to VaccineFinder?

A: Pharmacies must report an aggregate of state and federally allocated on hand doses by vaccine brand to VaccineFinder daily to ensure visibility of COVID-19 vaccine allocation. In other words, they must report vaccine received from both the state and federal government daily.

10.14 Q: How long must COVID-19 vaccine records be kept?

A: Providers must maintain COVID-19 vaccine administration records for a minimum of three years, or longer if it is required by local, state, or territorial law.



11. Costs & Reimbursement

11.1 Q: What are the costs for COVID-19 vaccine Providers?

A: Federally supplied COVID-19 vaccines, constituent products, and ancillary supplies will be distributed at no cost to approved COVID-19 Vaccination Program Providers. Providers will need to supply N-95 masks, sharps containers, gloves, and bandages and any additional supplies that may be needed.

11.2 Q: Can we sell or seek reimbursement for federally supplied COVID-19 Vaccination Program products and supplies?

A: Per the COVID-19 Vaccination Program Provider Agreement, a COVID-19 Vaccine Provider must not sell or seek reimbursement for COVID-19 Vaccine and any adjuvant, syringes, needles, or other constituent products and ancillary supplies that the federal government provides without cost to the Provider.

12. Communication Resources

12.1 Q: Are there Federal or California State requirements for individuals to sign a COVID-19 vaccine consent or declination form?

A: COVID-19 vaccine Providers may opt to use a consent or declination form at their discretion. The use of a consent form is not required for an Emergency Use Authorization vaccine. There are no Federal or State of California requirements for informed consent or declination specifically related to COVID-19 vaccine immunization. Neither is there a requirement for an employer or Provider to use such a form, nor a requirement for a person who declines to be immunized to complete a form. However, individual employers or immunizers may opt to use such a form, which can be a useful tool for tracking and documenting immunization status or the offer of immunization. Persons receiving immunization should receive the Emergency Use Authorization Fact Sheet for Recipients [COVID-19 Vaccine Facts Sheet for Recipients and Caregivers](#) and COVID-19 Vaccine Providers may also want to provide additional information from the CDC toolkit available at [Provider Communication Toolkit](#).

12.2 Q: What is V-safe and where can I find information to share with my patients?

A: V-safe is a smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after you receive a COVID-19 vaccination. Through V-safe, you can quickly tell CDC if you have any side effects after getting the COVID-19 vaccine. Depending on your answers, someone from CDC may call to check on you and get more information. V-safe will also remind you to get your second COVID-19 vaccine dose if you need one. To register, visit [V-safe Registration](#).

12.3 Q: Where can I direct patients looking for updated COVID-19 vaccine allocation and administration data?

A: Patients can access daily updated public information pertaining to COVID-19 vaccine allocation and administration data at [Vaccine Allocation Dashboard](#).

12.4 Q: Where can I get information about My Turn and getting vaccinated?

A: For questions regarding eligibility to receive the COVID-19 vaccine, visit [When can I get vaccinated?](#) Or call the COVID-19 Vaccine Hotline at 1-833-422-4255.

12.5 Q: Where can I find information and updates for COVID-19 Vaccine Providers?

A: Additional Information, including important website links and COVID-19 Call Center contact information is located at [EZIZ COVID-19 Information](#).

12.6 Q: Where can I find COVID-19 vaccine staff education resources?

A: Information developed by CDC can be found at [Staff Education Toolkit](#).

12.7 Q: Where can I find FAQs that are specific to vaccinating healthcare workers?

A: Healthcare worker specific FAQs can be found at [Educating Healthcare Worker FAQs](#).

12.8 Q: What is the COVID-19 Call Center for Providers?

A: The COVID-19 Call Center for Providers is dedicated to assisting COVID-19 vaccine Providers in California. The Call Center specifically addresses questions about program requirements, enrollment, and vaccine distribution. To contact the COVID-19 Call Center for Providers send an email to covidcallcenter@cdph.ca.gov or call (833) 502-1245 Monday through Friday, 8am to 8pm.

To receive provider updates from the CDPH COVID-19 Provider Call Center, send an email to COVIDCallCenter@cdph.ca.gov and request to be added to the distribution list.

