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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Provider FAQs on EZIZ, Updated Weekly

New and Updated FAQs

Updated ***Q: Can COVID-19 vaccine Providers offer the Janssen COVID-19 vaccine?***

A: Based on CDC's recommmendations, COVID-19 vaccine Providers should start a two-dose mRNA COVID-19 vaccine series even if there is uncertainty about how the patient will receive their second dose. However, the Janssen (Johnson & Johnson) COVID-19 vaccine may be offered in the situations described below:

- There is a contraindication to mRNA COVID-19 vaccines (e.g., severe allergic reaction after a previous dose or to a component of an mRNA COVID-19 vaccine).
- A person would otherwise remain unvaccinated for COVID-19 due to limited access to mRNA COVID-19 vaccines.
- A person wants to receive the Janssen (Johnson & Johnson) COVID-19 Vaccine despite the safety concerns identified.

It is contraindicated to administer Janssen (Johnson & Johnson) COVID-19 vaccine to people with a history of thrombosis with thrombocytopenia syndrome (TSS).

For detailed information, please review Updated Recommendations from the CDC Advisory Committee on Immunization Practices for Use of the J&J COVID Vaccine.

Pediatric Providers

1.1 Q: Is the Pfizer-BioNTech COVID-19 vaccine recommended for children aged 5-11?

A: Yes. The CDC's Advisory Committee for Immunization Practices (ACIP) and the Western States Scientific Safety Review Workgroup (WSSSRW) recommend the Pfizer COVID-19 vaccine for children aged 5-11 as a two-dose primary series, given 3 weeks apart. For further information, please visit Clinical Considerations for COVID-19 Vaccination in Children Aged 5-11 and FDA Provider Fact Sheet.

1.2 Q: Can COVID-19 Providers use the Pfizer (12+ years, purple cap) vaccine formulation to administer a dose to to a child aged 5-11?

A: No. The Pfizer pediatric (5-11 years, orange cap) vaccine is a different vaccine formulation from the Pfizer (12+ years, purple cap) vaccine, with new packaging, new product configuration (10-dose vial), different dosage and injection volume, and a new National Drug Code (NDC). To access a visual aid of the COVID-19 vaccine formulations, please visit COVID-19 Vaccine Product Guide.

1.3 Q: Should COVID-19 vaccine Providers consider a child's weight and height when determining which Pfizer formulation to administer to a child?

A: No. COVID-19 vaccine Providers should select the appropriate Pfizer formulation based on the child's age at date of vaccination. For further information, please visit Clinical Considerations for COVID-19 Vaccination in Children.

1.4 Q: For Pfizer pediatric (5-11 years, orange cap) vaccine administration, can one vial of diluent be used to dilute multiple vials of vaccine?

A: No. One vial of diluent can only be used to dilute one vial of vaccine. The remainding diluent in the vial should be discarded. For further information, please visit Pfizer Pediatric (5-11 Years) Vaccine EUA.

1.5 Q: How should COVID-19 vaccine Providers dilute Pfizer pediatric (5-11 years, orange cap) vaccine with a 5 mL syringe?

A: CDC does not have official guidance on this topic but has relayed the following information to CDPH: Pfizer diluent should be drawn between 1.2 mL and 1.4 mill If a COVID-19 vaccine Provider has syringes with smaller graduations, they may use these syringes to administer vaccine and replace syringes from their private supply with those from the ancillary supplies kit. Pfizer recommends the use of syringes with appropriate graduations to dilute with the directed 1.3 mL of saline. The impact to the final dose with a 1.2 mL or 1.4 mL dilution volume would be within 4% of the target dose. This suggests that using syringes with 0.2 mL graduations and estimating the 1.3 mL volume will not significantly impact the intended dose.

1.6 Q: How long can the Pfizer pediatric (5-11 years, orange cap) vaccine be stored at room temperature?

A: The Pfizer pediatric (5-11 years, orange cap) vaccine can be stored for 12 hours at room temperature prior to puncturing the vial and 12 hours after puncturing the vial. CDC does not recommend using the full 24 hours and recommends using the vaccine within the working day. For further information, please visit Pfizer Pediatric (5-11 Years) Vaccine EUA.

1.7 Q: How can COVID-19 vaccine Providers maximize the number of doses drawn from a COVID-19 vaccine vial while avoiding contamination?

A: COVID-19 vaccine Providers should use low dead-volume syringes and/or needles to maximize the number of doses extracted from a vaccine vial. Due to risk of contamination, COVID-19 vaccine Providers should not use vial adaptors or spikes to extract doses from a vial or extract multiple COVID-19 vaccine doses from one syringe/needle. For further information, please visit Injection Safety for Providers and Optimizing COVID-19 Vaccine Preparation and Safety.

1.8 Q: Can the Pfizer pediatric (5-11 years, orange cap) vaccine be stored in a standard freezer?

A: No, the vaccine should not be stored in a standard freezer. The Pfizer pediatric (5-11 years, orange cap) vaccine should be stored only in ultracold storage or in the refrigerator. If a Provider accidently freezes the product, they should immediately label the product "DO NOT USE" to prevent administration, contact the manufacturer to see if vaccine may be used, and report the temperature excursion in myCAvax with the manufacturer's resolution. To access a visual of the COVID-19 storage requirements, please visit COVID-19 Vaccine Product Guide.

1.9 Q: Which Pfizer COVID-19 vaccine formulation should COVID-19 vaccine Providers use to administer a dose to a child who turns 12 years old between their first and second dose?

A: If a child turns 12 years old between their first and second dose, COVID-19 vaccine Providers should administer the Pfizer (12+ years, purple cap) vaccine formulation for their second dose. To access a visual of the COVID-19 vaccine formulations, please visit COVID-19 Vaccine Product Guide.

1.10 Q: What is the difference between the California COVID-19 Vaccination Program and the Vaccines for Children (VFC) Program?

A: Each program has its own separate enrollment and ordering processes, provider management systems, and call centers. To learn more about each program, please visit Vaccines for Children (VFC) and California COVID-19 Vaccination Program.

1.11 Q: Can the COVID-19 vaccine be co-administered with routine immunizations for children?

A: Yes. The American Academy of Pediatrics (AAP) recommends vaccination for eligible children ages 12 and older with the federally authorized COVID-19 vaccine and supports co-administration of the COVID-19 vaccine with routine immunizations. Further details can be found at American Academy of Pediatrics Vaccine Co-administration Press Release and Healthy Children Article for Parents.

1.12 Q: Now that Pfizer COVID-19 vaccine eligibility has expanded to children aged 5-11, have minor consent requirements changed?

A: No, minor consent requirements have not changed. Minors still need the consent of the parent or legal guardian to receive the COVID-19 vaccine. An emancipated minor (a minor with legal independence from their parents or guardians) may consent for their self. Allowable consent includes:

- A parent or legal guardian accompanies the minor in person.
- A signed written consent if the parent or legal guardian cannot accompany the minor. The written consent must verify the parent or legal guardian has been provided the Pfizer EUA Fact Sheet.
- Phone or video consent if the parent or legal guardian confirms that they have been provided the Pfizer EUA Fact Sheet or the Fact Sheet is read to them.

COVID-19 vaccine Providers are responsible for verifying that informed consent has been obtained, either in person or in writing. For further information, please visit Pfizer Vaccine Minor Consent Guidance.

1.13 Q: Can pediatric Providers also vaccinate family members of pediatric patients?

A: Yes. Although not required, pediatric Providers are encouraged to vaccinate family members of pediatric patients. Pediatric Providers must report all vaccine administration data to the immunization registry (IIS) through My Turn or the California Immunization Registry (CAIR). For more information about enrolling with a local registry, please visit Steps to Enrollment.

Vaccine Program Management

2.1 Q: How can COVID-19 vaccine Providers make requests for supplemental vaccine staff, including clinic supervisors, at no cost to support vaccination needs?

A: To support vaccination needs, COVID-19 vaccine Providers can make requests for supplemental staff at no cost through the following programs:

- Submit a request for state-funded vaccination staff for COVID-19 vaccination clinics to your local Medical Health Operational Area Coordination (MHOAC) program. Find your local contact using the MHOAC contact list.

- Recruit volunteers to assist with your COVID-19 vaccination clinics by using one of the volunteer services listed in this Volunteer Services Quick Reference Guide.

Please note: The My Turn Volunteer program ended on December 31, 2021.

2.2 Q: Are all California health care workers, including those working in adult care/direct care facilities and correctional/detention facilities, required to receive COVID-19 vaccine booster doses?

A: Yes. On December 22, 2021, a new California Public Health Order requires all health care workers, adult care facility and direct care workers, and state and local correctional facility and detention center health care workers to receive COVID-19 vaccine booster doses by February 1, 2022 (or within 15 days of becoming eligible for a booster if they are not eligible as of February 1), unless exempt. The Public Health Order also requires weekly COVID-19 testing for unvaccinated, exempt workers and booster-eligible workers who have not received their booster dose. Facilities must begin testing of all booster-eligible workers who have not yet received their booster dose by December 27, 2021, and be in full compliance by January 7, 2022. To read the State Public Health Orders, please visit Health Care Worker Vaccine Requirement, State and Local Correctional Facilities and Detention Centers Health Care Worker Vaccine Requirement, and Adult Care Facilities and Direct Care Worker Vaccine Requirement. For further information, please visit COVID-19 Vaccine Requirement Questions & Answers.

2.3 Q: Where can COVID-19 vaccine Providers find information on the COVID-19 vaccine school vaccination requirement?

A: A new State Order requires students to receive the COVID-19 vaccine for in-person leaning starting the term following the FDA's full approval of the vaccine for their grade span (7-12 and K-6). To read the full announcement and for further information, please visit California COVID-19 Vaccine Requirements for Schools.

2.4 Q: Do COVID-19 vaccine recipients need to provide government identification, proof of citizenship, or health insurance information to receive the COVID-19 vaccine?

A: No. COVID-19 vaccine recipients do not need to provide government identification, proof of citizenship, or health insurance to receive the COVID-19 vaccine.

2.5 Q: What are acceptable forms of proof of COVID-19 vaccination?

A: Acceptable forms of proof of COVID-19 vaccination are:

- An immunization history report from the individual's medical provider.
- A physical CDC COVID-19 Vaccinatation Record Card.
- A digital vaccine record, which can be requested here.

2.6 Q: Where can COVID-19 vaccine recipients access digital COVID-19 vaccine records?

A: COVID-19 vaccine recipients can access digital COVID-19 vaccine records through the Digital COVID-19 Vaccine Record Portal after their COVID-19 vaccination information is submitted to the California Immunization Registry. The portal provides the COVID-19 vaccine recipient with a QR code to access their digital vaccination record on their mobile device. Further information and support can be found at Digital COVID-19 Vaccine Record Frequently Asked Questions. Providers can send questions and requests regarding digital vaccine records to DCVRRemediation.Requests@cdph.ca.gov.

2.7 Q: What steps should COVID-19 Providers take to collect and maintain accurate Immunization Information System (IIS) data so that individuals can obtain their digital vaccine records?

A: A new State Public Health Order requires COVID-19 vaccine Providers to request patients' mobile phone numbers and email addresses and submit them, if known, to the IIS. Patients are not required to provide their phone numbers and email addresses to receive the COVID-19 vaccine. For detailed information, please visit State Public Health Order: Requirement to request patients' email addresses and phone numbers. COVID-19 vaccine Providers can also help maintain accurate IIS data by updating patients' incomplete contact information and submitting missing vaccination records.

2.8 Q: Where can COVID-19 vaccine Providers find a weekly calendar of California COVID-19 Vaccination Program trainings, webinars, and office hours?

A: COVID-19 vaccine Providers can find a weekly calendar of California COVID-19 Vaccination Program trainings, webinars, and office hours at Webinars and Training for Providers.

2.9 Q: Where can Providers find an overview of electronic systems used in the California COVID-19 Vaccination Program?

A: Providers may access a comprehensive electronic system overview at California COVID-19 Vaccination Program System Overview.

2.10 Q: Where can Providers find information about the My Turn Vaccine Clinic Translation Line?

A: The Vaccine Clinic Translation Line (VCTL) enables My Turn Clinic Providers to communicate and provide vaccinations and related care to residents who need translation services. Service includes translations in over 150 languages and there is no cost to Providers and vaccine recipients. Translation service is available M-F 8AM-8PM, and S-S 8AM-5PM by calling 833.980.3933.

Provider Enrollment

3.1 Q: Who is eligible to enroll as a COVID-19 Provider in the California COVID-19 Vaccination Program?

A: All current and prospective COVID-19 vaccine Providers must hold the appropriate credentials and licensing in the jurisdiction where vaccination will take place, meet federal and state requirements, and have the capacity to properly maintain and administer the COVID-19 vaccine. The California Department of Public Health is working with Local Health Jurisdictions and the California Medical Association to ensure that all eligible Providers can receive and administer COVID-19 vaccines. To learn more about becoming a California COVID-19 Vaccine Provider, please visit California COVID-19 Vaccination Program Enrollment Requirements. Providers can find an updated guide to the COVID-19 Vaccination Program enrollment process at Enrollment Kit: A Resource Kit for Prospective and Enrolled Providers.

3.2 Q: Who should Providers contact for assistance with the California COVID-19 Vaccination Program enrollment process?

A: To receive assistance with the California COVID-19 Vaccination Program enrollment process, Providers can email Clinic Operations at myCAvaxinfo@cdph.ca.gov, or contact the COVID-19 Provider Call Center via email at covidcallcenter@cdph.ca.gov, or by phone at 833.502.1245, M-F, 8AM-6PM.

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

A: VaccineFinder is a system operated by the U.S. Centers for Disease Control and Prevention (CDC) to track vaccine inventory. Onboarding to VaccineFinder is currently a manual process. 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 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 a Provider'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 email information in the CDC Provider Agreement. Once the data is forwarded to the CDC, VaccineFinder will be updated with the new email.

3.4 Q: Can COVID-19 vaccine Providers activate their locations on VaccineFinder's public-facing map?

A: Yes. Provider locations have the option to be activated on VaccineFinder's public-facing map so patients can locate COVID-19 Vaccines. Provider locations will also appear in Google and Facebook searches and will be translated into Spanish. Providers can activate their profile and provide updates by referring to our Manual log-in or File Upload quick-start guides. Updates submitted before 7:00AM will display the same day. Please visit the VaccineFinder Provider Portal for additional training videos and documents.

Ordering

4.1 Q: When will the Pfizer Tris-sucrose (12+ years, gray cap) vaccine be available for ordering in myCAvax?

A: The Pfizer Tris-sucrose (12+ years, gray cap) vaccine is now available for Standard Orders in myCAvax in quantities of 300 doses and Small Orders with a mimum order of 30 doses. COVID-19 vaccine Providers may continue to request Small Orders of the Pfizer 1170 (12+ years, purple cap) vaccine until their local health jurisdiction supplies are depleted. For further information, please visit Transitioning to Pfizer's Comirnaty Gray Cap Formulation and Receiving & Storing Pfizer/Comirnaty Vaccines. Please visit COVID-19 Vaccine Product Guide for a visual aid of COVID-19 vaccine products.

4.2 Q: When should COVID-19 vaccine Providers submit their twice-weekly vaccine order requests in myCAvax?

A: COVID-19 vaccine Providers should submit twice-weekly vaccine order requests by Monday at 5pm and Wednesday at 5pm. Providers can submit order requests after these times, but vaccine shipments may be delivered later. For further information, please visit Ordering & Distribution Cadence.

4.3 Q: Can COVID-19 vaccine Providers order small quantities of vaccine in myCAvax?

A: Eligible COVID-19 vaccine Providers in participating Local Health Jurisdictions can order small quantities of vaccine if they do not have the need or capacity to store vaccines in the standard lot size. For further information, please visit Updates for Providers: Small Ordering and Receiving Redistributed Small Orders.

4.4 Q: Where can COVID-19 Providers go to receive vaccine quickly?

A: If COVID-19 Providers would like to receive vaccine quickly, typically within 48 hours, they should request vaccine through the Vaccine Marketplace on myCAvax. Additional information is available here: Vaccine Marketplace.

4.5 Q: When placing COVID-19 vaccine order requests, should Providers order first and second doses together?

A: Yes. A dose is a dose. When placing COVID-19 vaccine order requests through the new ordering system, Providers should order first and second doses together. It is recommended that Providers only order doses that can be administered within 1-2 weeks.

4.6 Q: Can a COVID-19 vaccine order request be edited in myCAvax?

A: No. Order requests cannot be edited in the myCAvax system. However, users may submit another vaccine order request through myCAvax with the correct information. The new order request will then replace the first request, as only the most recently submitted order request in myCAvax is considered for COVID-19 vaccine allocation.

Distribution/Redistribution

5.1 Q: Where can I find information on AmerisourceBergen, the state's Third-Party Redistributor (TPR)?

A: AmerisourceBergen redistributes small orders of Pfizer vaccine and Pfizer pediatric (5-11 years, orange cap) vaccine in minimum quantities of 30, including ancillary supplies. Providers who have been selected by their Local Health Jurisdictions (LHJs) will see the Small Order option when filling out vaccine order requests. LHJs may choose to send small orders through the TPR or redistribute vaccine from their own supplies. For information on receiving shipments from the TPR, please visit Receiving Redistributed Small Orders and Receiving TPR Shipments Video.

5.2 Q: What is the Vaccine Marketplace in myCAvax?

A: The Vaccine Marketplace in myCAvax allows Providers to post excess COVID-19 vaccine inventory available to other COVID-19 vaccine Providers and request short-dated COVID-19 vaccine. Please note: The Vaccine Marketplace does not replace the current Transferring Vaccines processes.

5.3 Q: Where can COVID-19 Providers access myCAvax Vaccine Marketplace training materials?

A: Please visit Vaccine Marketplace Job Aid and Vaccine Marketplace Training for myCAvax Vaccine Marketplace training materials. The password for the training is myCAvax2021!

5.4 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. To support efficient distribution of the COVID-19 vaccine, Providers should be available throughout the full business day to receive vaccine. When that is not possible, locations receiving vaccine and ancillary supply shipments must be available during a four-hour window Monday through Friday. 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, refer to Moderna, Pfizer-BioNTech, and Janssen guidance.

5.5 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 CDPH 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. Redistribution of the COVID-19 vaccine must not begin until approved. Please see the Guide to Redistribution, Repositioning, or Transfer for examples of redistribution events.

Vaccine Administration

6.1 Q: What are the recommended time intervals between the Pfizer and Moderna COVID-19 primary vaccination series and the booster dose?

A: The CDC recommends a shortened booster interval to 5 months after completion of the Pfizer COVID-19 primary vaccination series for people 12 years and older and 5 months after completion of the Moderna COVID-19 primary vaccination series for people ages 18 years and older.

6.2 Q: Can COVID-19 vaccine Providers attend Pfizer COVID-19 Vaccine Training Sessions to learn about the Tris-sucrose (12+ years, gray cap) vaccine?

A: Yes. COVID-19 vaccine Providers can access all Pfizer COVID-19 vaccine training sessions here.

6.3 Q: Should COVID-19 vaccine Providers vaccinate individuals during quarantine or immediately after a known COVID-19 exposure?

A: No. CDC does not recommend COVID-19 vaccination during quarantine or immediately after a known COVID-19 exposure. However, COVID-19 vaccine Providers can consider vaccination during quarantine to avoid missed opportunities for vaccination. For example, COVID-19 vaccine Providers may vaccinate if the individual is likely to have repeated COVID-19 exposures because they are unable to effectively quarantine, will have limited access to vaccination after their quarantine period has ended, or are unlikely to otherwise seek vaccination after their quarantine period has ended. For further information, please visit Interim Clinical Considerations for Use of COVID-19 Vaccines.

6.4 Q: Where can COVID-19 vaccine Providers find information on the COVID-19 Omicron variant?

A: COVID-19 vaccine Providers can find information on the COVID-19 Omicron variant by viewing the CDC Science Brief: Omicron Variant, CDPH Fact Sheet: Omicron Variant, CDPH Statement: Omicron Variant.

6.5 Q: Can COVID-19 vaccine Providers administer both the Pfizer (12+ years, purple cap) vaccine and the Pfizer tris-sucrose (12+ years, gray cap) vaccine at the same time?

A: No. CDC does not recommend administering both products at the same time. COVID-19 vaccine Providers should carry only one Pfizer adult formulation in inventory at a time.

6.6 Q: Should the Pfizer tris-sucrose (12+ years, gray cap) vaccine be diluted prior to use?

A: No. Unlike the Pfizer (12+ years, purple cap) COVID-19 vaccine, the Pfizer tris-sucrose (12+ years, gray cap) vaccine should not be diluted prior to use. For further information, please visit Pfizer COVID-19 Vaccine EUA. To access a visual of the vaccine product differences, please visit COVID-19 Vaccine Product Guide.

6.7 Q: Can COVID-19 vaccine Providers "mix and match" the Pfizer (12+ years, purple cap) vaccine and the new Pfizer tris-sucrose (12+ years, gray cap) vaccine, or administer one formulation for the first dose and the other for the second dose?

A: Yes. While the Pfizer (12+ years, purple cap) vaccine is being phased out, COVID-19 Providers can "mix-and-match" the Pfizer (12+ years, purple cap) and the Pfizer tris-sucrose (12+ years, gray cap) vaccine.

6.8 Q: How should COVID-19 vaccine Providers extract Moderna booster doses in syringes that have 0.2 mL graduation lines?

A: CDC does not have official guidance on this topic but has relayed the following information to CDPH: Providers are advised that when using syringes that have graduation lines at 0.2 mL intervals, they should use their best judgment to draw up half-way between the graduation lines to extract the proper volume (.25 mL).

6.9 Q: What is the maximum number of primary series doses COVID-19 vaccine Providers can extract from a Moderna vial?

A: When extracting only primary series doses, a maximum of 11 doses may be extracted from the vial containing 5.5 mL or a maximum of 15 doses may be extracted from the vial containing 7.5 mL. For further information, please visit Moderna EUA Fact Sheet.

6.10 Q: Where can COVID-19 vaccine Providers find guidance on the full approval of the Pfizer tris-sucrose (12+ years, gray cap) vaccine?

A: The FDA granted full approval for the Pfizer-BioNTech COVID-19 vaccine for use as a two-dose series in individuals 16 years of age and older. The Pfizer-BioNTech COVID-19 vaccine continues to be available under emergency use authorization (EUA), for individuals 5 through 15 years of age. For further information, please visit FDA Approves First COVID-19 Vaccine and Pfizer FDA Approval.

6.11 Q: How should COVID-19 vaccine Providers prepare to administer COVID-19 vaccines?

A: Because COVID-19 vaccine products may have different preparation requirements it is important that Providers follow vaccine preparation instructions located in the Moderna, Pfizer-BioNTech, and Janssen COVID-19 vaccine Emergency Use Authorization Fact Sheets or the COVID-19 vaccine package insert. Please note: The CDC recommends a preference for mRNA vaccines (Pfizer and Moderna) over the Janssen vaccine.

6.12 Q: Can COVID-19 vaccine Providers offer flu vaccine clinics to patients through My Turn?

A: COVID-19 vaccine Providers can offer flu vaccine clinics to patients through My Turn Flu. Please note: Flu vaccine is not available for order in myCAvax. If a COVID-19 vaccine Provider is seeking flu vaccine, the following link includes distributors with supply: Influenza Vaccine Availability Tracking System. Providers who are enrolled in the Vaccines for Children Program can order flu vaccine through VFC Program Provider Site. For additional information on My Turn Flu, including demos, please visit My Turn Flu EZIZ Page.

6.13 Q: Can the COVID-19 vaccine be administered with other vaccines, including the influenza vaccine?

A: Yes. COVID-19 vaccines and other vaccines, including the influenza vaccine, may be co-administered. This includes simultaneous administration of COVID-19 vaccine and other vaccines in the same visit on the same day, as well as coadministration at any time. For further guidance and best practices for coadministration, see Coadministration with Other Vaccines and Interim Clinic Considerations for COVID-19 Vaccines. For coadministration information specific to the seasonal flu, please visit CDC Flu Recommendations. Please see COVID-19 Vaccine Coadministration Tips for a coadministration guide.

6.14 Q: Can the COVID-19 vaccine be administered with tuberculosis testing?

A: Yes. The COVID-19 vaccine can be administered before, after, or at the same time as tuberculosis testing. For further information, please visit Updated Guidance on TB Testing and COVID-19 Vaccination.

6.15 Q: Is COVID-19 vaccination recommended during pregnancy?

A: Yes. CDC recommends COVID-19 vaccination for persons who are pregnant, breasfeeding, trying to get pregnant now, or trying in the future. Providers can view The American College of Obstetricians and Gynecologists (ACOG) recommendations at ACOG COVID-19 and Pregnancy and view a conversation guide at ACOG Conversation Guide and an ACOG Message to Persons Pregnant and Breastfeeding in English, Spanish, and Arabic. Providers can also find information about the safety of the COVID-19 vaccine during pregnancy at Vaccination During Pregnancy Guidance. To access a fact sheet about the safety of the COVID-19 vaccine during pregnancy, please visit COVID-19 Vaccine and Pregnancy.

6.16 Q: Should COVID-19 vaccine Providers puncture a new vial to vaccinate a small number of patients when all doses cannot be administered?

A: Yes. The CDC recommends COVID-19 Providers administer the vaccine to all eligible patients at vaccination sites, even if this requires puncturing a new vial without administering all doses. Providers should minimize waste, when possible, and continue to report any waste. Please see Missed Vaccine Opportunities & Wastage and Identification, Disposal, and Reporting of COVID-19 Vaccine for complete guidance.

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

A: CDC has developed 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.

6.18 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.

6.19 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 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.

6.20 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.

6.21 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.

Additional Doses for Immunocompromised

7.1 Q: Who is eligible to receive additional doses of mRNA COVID-19 vaccines?

A: The CDC expanded their recommendation for an additional mRNA COVID-19 dose to all moderately or severely immunocompromised individuals ages 5 and older at least 28 days after their primary series.

7.2 Q: Can immunocompromised patients who received a COVID-19 vaccine additional dose receive a booster dose?

A: Yes. Moderately and severely immuncompromised people aged 18 and over who completed an mRNA COVID-19 vaccine primary series and received an additional mRNA vaccine dose (Pfizer-BioNTech or Moderna), may receive a single COVID-19 booster dose (preferably with an mRNA vaccine) at least 6 months after completing their additional dose. Moderately or severely immunocompromised people 16 or 17 years of age who received the Pfizer primary series and an additional primary series may receive a single Pfizer COVID-19 vaccine booster dose at least 6 months after completing their additional dose. For further information, please visit Clinical Clinical Considerations for COVID-19 Vaccine Booster Doses.

7.3 Q: Should the same mRNA vaccine as the initial vaccination series be given for additional COVID-19 doses?

A: Yes. The additional mRNA COVID-19 vaccine dose should be the same vaccine as the initial two-dose primary vaccination series (Pfizer or Moderna). If the mRNA COVID-19 vaccine product given for the first two doses is not available, the other mRNA COVID-19 vaccine product may be administered. A person should not receive more than three mRNA COVID-19 vaccine doses. For further information, please visit COVID-19 Vaccines for Moderately to Severely Immunocompromised People.

7.4 Q: What is the difference between an "additional dose" and a "booster dose?"

A: An additional dose of the COVID-19 vaccine is administered when the immune response following a primary vaccination series is likely to be insufficient. An additional dose is recommended for immunocompromised individuals at least 28 days after completing their initial mRNA COVID-19 vaccine series (Pfizer-BioNTech and Moderna vaccines). A booster dose is administered when the initial sufficient immune response to a primary vaccination series is likely to have waned.. To access a chart with booster dose and additional dose eligibility information, please visit COVID-19 Vaccine Eligibility Chart. Please note: The CDC recommends a preference for mRNA vaccines (Pfizer and Moderna) over the Janssen vaccine.

Booster Doses

8.1 Q: Who is eligible to receive a booster dose of the Pfizer-BioNTech vaccine, Moderna vaccine, and the Janssen by Johnson & Johnson vaccine?

A: The CDC and Western States Scientific Safety Review Workgroup recommend an mRNA booster dose for everyone aged 12 years and older at least 5 months after their initial vaccination series. However, only Pfizer COVID-19 vaccine is authorized and recommended for 12-to-17-year-olds. The CDC recommends that everyone aged 18 years and older should get an mRNA booster dose 5 months after their initial vaccination series. Please view the COVID-19 Vaccine Eligibility Chart to view a visual of vaccine eligibility. Please note: The CDC recommends a preference for mRNA vaccines (Pfizer and Moderna) over the Janssen vaccine.

8.2 Q: Can COVID-19 vaccine Providers provide a booster dose to any patient requesting one?

A: CDPH released booster messaging guidance stating that COVID-19 vaccine Providers should not turn any patient away who is requesting a booster dose, as long as the patient is 18 and over and has met the 6-month original vaccination series time period for the Moderna or Pfizer vaccine. The CDC has since recommended a Pfizer booster dose to individuals 12 and older and shortened the time interval to receive an mRNA booster dose from 6 months to 5 months. To read the letter clarifying the State's expectations, please visit CDPH Letter on COVID-19 Booster Messaging. Please note: The CDC recommends a preference for mRNA vaccines (Pfizer and Moderna) over the Janssen vaccine.

8.3 Q: Can COVID-19 vaccine Providers "mix and match" booster doses of COVID-19 vaccines, or administer a booster dose from a different COVID-19 vaccine brand than the brand used in the patient's primary vaccination series?

A: Yes. The CDC and the Western States Scientific and Safety Review Workgroup (WSSSRW)'s recommendations now allow for the administration of a booster dose from a different COVID-19 vaccine brand than the original brand used in the patient's primary vaccination series. For further information, please visit CDC Statement on Moderna and Janssen Booster Doses and WSSWR Statement on Moderna and Janssen Booster Doses. Please note: The CDC recommends a preference for mRNA vaccines (Pfizer and Moderna) over the Janssen vaccine.

8.4 Q: Can individuals who received a COVID-19 vaccine primary series that is not FDA-authorized or FDA-approved receive a Pfizer additional dose and/or booster dose?

A: Yes. CDC updated their guidance to state that people aged 12 and over who are moderately to severely immunocompromised and received a primary vaccine series that is not FDA-approved or FDA-authorized can receive a Pfizer additional dose at least 28 days after the completion of the initial COVID-19 vaccine series. People aged 16 and over who received a primary vaccine series that is not FDA-approved or FDA-authorized can receive a Pfizer booster dose at least 6 months after the completion of the initial COVID-19 vaccine series. For further information, please visit People Vaccinated for Prevention of COVID-19 Outside the United States.

8.5 Q: What is the maximum number of booster doses or a combination of primary series and booster doses COVID-19 vaccine Providers can extract from a Moderna vial?

A: When extracting only booster doses or a combination of primary series and booster doses, the maximum number of doses that may be extracted from either vial presentation should not exceed 20 doses. For further information, please visit Moderna EUA Fact Sheet.

8.6 Q: Can Providers extract primary series doses and booster doses from the same Moderna vial?

A: Yes. Primary series doses of 0.5 mL and booster doses of 0.25 mL may be extracted from the same Moderna vial. For further information, please visit Moderna EUA Fact Sheet.

8.7 Q: Is the Moderna COVID-19 booster dose volume different from the primary series dose volumes?

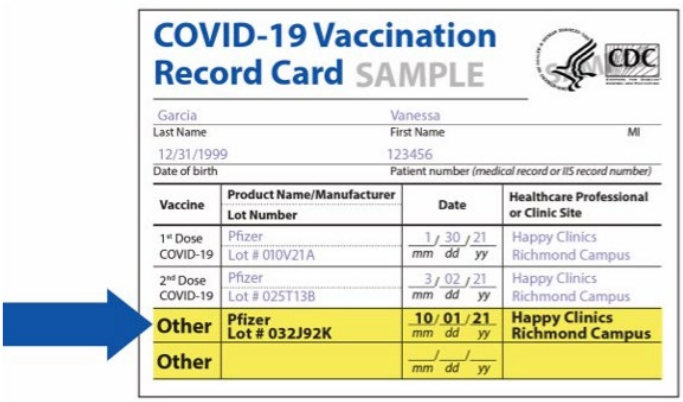
A: Yes. Moderna booster doses should be administered as half-doses (0.25 mL). Each dose of Moderna wastage should be reported only as a whole dose, whether it is a half dose or a full dose. To access a visual guide of the COVID-19 vaccine formulations, please visit COVID-19 Vaccine Product Guide, and for further information, please visit Moderna Wastage Guidance and Reporting Doses Spoiled, Expired, or Wasted.

8.8 Q: Where can COVID-19 vaccine Providers access a patient eligibility tool for additional doses and booster doses?

A: CDPH created a tool for COVID-19 vaccine Providers with patient eligibility information for primary, additional, and booster doses, including considerations for health, age, and social inequities. Please access the patient eligibility tool here: COVID-19 Vaccine Eligibility. For additional resources with specific eligibility criteria, please visit Guidance for COVID-19 Vaccine Administration.

8.9 Q: How should COVID-19 vaccine Providers record an additional or booster dose on the COVID-19 vaccination card?

A: An additional or booster dose should be documented in the same way as previous doses of COVID-19 vaccines. In the "other" or spare row on the vaccination record card, record vaccine administration information, such as date and formulation, for an additional or booster dose. The dose does not necessarily need to be labeled with the term "additional" or "booster."



COVID-19 Vaccination Record Card SAMPLE

CDC

Garcia (Last Name) | Vanessa (First Name) | MI

12/31/1999 (Date of birth) | 123456 (Patient number (medical record or IIS record number))

Vaccine	Product Name/Manufacturer Lot Number	Date	Healthcare Professional or Clinic Site
1st Dose COVID-19	Pfizer Lot # 010V21A	1/30/21 mm dd yy	Happy Clinics Richmond Campus
2nd Dose COVID-19	Pfizer Lot # 025T13B	3/02/21 mm dd yy	Happy Clinics Richmond Campus
Other	**Pfizer Lot # 032J92K**	**10/01/21 mm dd yy**	**Happy Clinics Richmond Campus**
Other		__/__/__ mm dd yy	

8.10 Q: How long should COVID-19 vaccine Providers observe patients after COVID-19 vaccine primary series administration and booster dose administration?

A: To monitor for rare severe allergic reactions, CDC recommends that people with a history of an immediate allergic reaction of any severity to a vaccine or injectable therapy, people with a history of anaphylaxis due to any cause, and people with a contraindication to a different type of COVID-19 vaccine be observed for 30 minutes. All other people should be observed for 15 minutes. For further details please visit Interim Clinical Considerations: Contraindications and Precautions.

Vaccine Storage & Handling

9.1 Q: When will the third-party redistributor (AmerisourceBergen) transition from frozen shipments to refrigerated shipments of COVID-19 vaccine?

A: The third-party redistributor (TPR), AmerisourceBergen, has begun transitioning from frozen to refrigerated shipments. The transition will continue over the next couple of weeks. Please note: Pfizer pediatric (5-11 years, orange cap) and Pfizer Tris-sucrose (12+ years, gray cap) vaccine must be refrigerated at 2°C to 8°C upon receipt. Once stored, vaccine cannot be stored at ultra-cold or frozen temperature ranges. For further information, please visit Receiving Small Orders from TPR.

9.2 Q: Where can COVID-19 vaccine Providers check COVID-19 vaccine expiration dates for the Moderna vaccine and the Janssen by Johnson & Johnson vaccine?

A: COVID-19 vaccine Providers can check COVID-19 vaccine expiration dates for the Janssen by Johnson & Johnson vaccine at Vial Expiration Date Lookup: Janssen and for the Moderna vaccine at Vial Expiration Date Lookup: Moderna. Providers can also reference a table of expiring lot numbers in Upcoming COVID-19 Vaccine Expiration Dates.

9.3 Q: What needles are included in the COVID-19 vaccine ancillary kits?

A: The COVID-19 Pfizer pediatric (ages 5-11, orange cap) vaccine ancillary kit includes 1-inch needles. COVID-19 vaccine ancillary kits for individuals ages 12 and over include 1-inch needles and 1.5-inch needles. Please note: ½-inch needles are too short for intramuscular injection and should not be used. If a COVID-19 vaccine Provider receives ½-inch needles in a vaccine ancillary kit, they should follow the guidelines for Reporting Shipment Incidents. For further information, please visit FAQ for Optimizing COVID-19 Vaccine Preparation and Safety.

9.4 Q: How can COVID-19 vaccine Providers check COVID-19 vaccine expiration dates for the Pfizer tris-sucrose (12+ years, gray cap) vaccine and the Pfizer pediatric (5-11 years, orange cap) vaccine?

A: To check the expiration date for the Pfizer tris-sucrose (12+ years, gray cap) vaccine and the Pfizer pediatric (5-11 years, orange cap) vaccine, COVID-19 vaccine Providers should add the expiration time to the manufacture date printed on the vial and/or on the shipping label. The expiration times for both vaccines have been extended to 9 months after the manufacture date printed on the vial for ultra-low temperature frozen inventories only. COVID-19 vaccine Providers can also visit the COVID-19 Vaccine Lot Number and Expiration Dates webpage to confirm the latest expiration dates of vaccine. For further information, please visit Receiving & Storing Pfizer/Comirnaty Vaccine Products, Pfizer Vaccine (Ages 12+) EUA, and Pfizer Vaccine (ages 5-11) EUA.

9.5 Q: How can COVID-19 vaccine Providers check COVID-19 vaccine expiration dates for the Pfizer (12+ years, purple cap) vaccine?

A: To check the expiration date for the Pfizer (12+ years, purple cap) vaccine, COVID-19 vaccine Providers should reference the expiration date displayed on each vial. Vials with an expiration date of July 2021 through February 2022 printed on the label may remain in use for three months beyond the printed date for ultra-low temperature frozen inventories only. COVID-19 vaccine Providers can also visit Upcoming COVID-19 Vaccine Expiration Dates and COVID-19 Vaccine Lot Number and Expiration Dates webpage to confirm the latest expiration dates of vaccine. For further information, please visit Receiving & Storing Pfizer/Comirnaty Vaccine Products.

9.6 Q: Can the Pfizer tris-sucrose (12+ years, gray cap) vaccine be stored in a standard freezer?

A: No, the Pfizer tris-sucrose (12+ years, gray cap) vaccine should not be stored in a standard freezer. The vaccine should be stored only in ultracold storage or in the refrigerator. For further information, please visit Pfizer COVID-19 Vaccine EUA.

9.7 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 Moderna, Pfizer-BioNTech, and Janssen guides.

9.8 Q: Where can COVID-19 vaccine Providers find storage and handling information for receiving small orders of vaccine doses?

A: COVID-19 vaccine Providers can find storage and handling information for receiving small orders of vaccine at Receiving Redistributed Small Orders.

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

A: COVID-19 vaccine storage temperatures must be monitored using a digital data logger and recorded twice daily to help prevent the loss of vaccines and the potential need for revaccination of patients. Any out-of-range temperatures are temperature excursions and may need to be identified as waste. If a temperature excursion occurs, 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 through myCAvax. See Reporting Temperature Excursions and Reporting Doses Spoiled, Expired, or Wasted for additional guidance.

9.10 Q: What supplies are included in the COVID-19 vaccine ancillary kits?

A: COVID-19 vaccine ancillary kits include needles, syringes, alcohol prep pads, surgical masks, face shields for vaccinators, CDC COVID-19 Vaccination Record Cards for vaccine recipients, a vaccine needle length guide, diluent, and mixing supplies based on the vaccine product. Ancillary kits do not include N-95 masks, sharps containers, gloves, and bandages.

9.11 Q: How do I return Vaccine Shippers?

A: Please return the 450-dose Pfizer thermal shipper and temperature monitoring device within 4 days of delivery and the 1,170-dose Pfizer within 30 days of delivery. Instructions are provided in the Shipping & Handling Guidelines brochure. For Moderna vaccine, follow the McKesson Vaccine Shipper Return Instructions. Providers are not required to return Janssen from Johnson & Johnson Vaccine Shippers. More information can be found at Receiving and Storing Janssen Vaccine.

Inventory

10.1 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.

10.2 Q: How do we account for additional volume in COVID-19 vaccine vials after proper reconstitution and administration of the indicated doses?

A: CDPH and CDC recommend 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. Please refer to fact sheets for Moderna, Pfizer-BioNTech, and Janssen and further information is available at Accounting of additional COVID-19 Vaccine doses.

10.3 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.

Reporting

11.1 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 for every vaccinated patient.
3. Report COVID-19 vaccine doses in daily inventory to the VaccineFinder website.

Additional information is available in the COVID-19 Vaccine Reporting Requirements.

11.2 Q: How should COVID-19 vaccine Providers report vaccine wastage?

A: COVID-19 vaccine Providers must report spoiled, expired, and wasted vaccines in myCAvax before disposing of COVID-19 vaccines. The report should include the product, lot number, and the expiration date. Daily reporting to VaccineFinder should be adjusted to include doses spoiled, expired, or wasted that are removed from inventory. For detailed information, please visit Vaccine Management Checklist and Reporting Doses Spoiled, Expired, or Wasted.

11.3 Q: What should COVID-19 vaccine Providers do if a vaccine administration error occurs?

A: If a vaccine administration error occurs, COVID-19 vaccine Providers should take the following steps:

1. Inform the recipient of the vaccine administration error.
2. Report the error to the Vaccine Adverse Event Reporting System (VAERS) unless otherwise indicated in Interim Clinical Considerations (Appendix A)
3. Contact the COVID Call Center if the Provider is unsure if the dose should be entered into CAIR.
4. Report the error to the Institute for Safe Medical Practices (ISMP) to help prevent future errors.

For resources to help prevent vaccine administration errors, please see Vaccine Administration Checklist and Preventing Administration Errors.

11.4 Q: How long must COVID-19 vaccine Providers keep COVID-19 and flu vaccine administration records?

A: COVID-19 vaccine Providers must maintain COVID-19 and flu vaccine administration records for a minimum of three years, or longer if it is required by local law. It is each clinic's responsibility to appropriately maintain these records for the three-year duration.

11.5 Q: Are COVID-19 Vaccine Providers required to report a patient's race and ethnicity?

A: Providers who administer the COVID-19 vaccine in California are required to record the race or ethnicity of everyone who receives COVID-19 vaccine. For tips to ensure California's race and ethnicity is accurate and consistent please see Tips for Reporting Race and Ethnicity.

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

A: Yes, it is a federal requirement that California COVID-19 vaccine Providers continue to report daily on-hand inventory in VaccineFinder.

11.7 Q: Do Providers need to report on-hand inventory on weekends?

A: Yes. To maintain 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. Even if your inventory is zero or unchanged, COVID-19 vaccine inventory must be reported daily. For VaccineFinder updates, please visit VaccineFinder Updates.

11.8 Q: Does My Turn Clinic interact with CAIR2?

A: Yes. My Turn Clinic automatically uploads COVID-19 vaccination data into CAIR2.

11.9 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.

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

A: Adverse reactions should be reported through the Vaccine Adverse Event Reporting System (VAERS) by Reporting an Adverse Event to VAERS.

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

A: Step 1: Log into myCAvax, and click "Vaccine Inventory" to access the "Shipment Incident" button. Create a new Shipment Incident by clicking the "New" button and completing all the fields in the pop-up window. 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. See Reporting Shipping Incidents for further information.

Costs & Reimbursement

12.1 Q: How can COVID-19 vaccine Providers avoid delays and denials when submitting COVID-19 vaccine administration claims for reimbursement?

A: COVID-19 vaccine Providers can avoid delays and denials when submitting COVID-19 vaccine administration claims for reimbursement by ensuring they are submitted appropriately. For a quick guide to COVID-19 vaccine reimbursement and billing, please see the California Medical Association's guide at COVID-19 Vaccine Reimbursement. For detailed guidance on COVID-19 vaccine reimbursement, billing, and coding, please visit the California Medical Association's toolkit at COVID-19 Vaccine Toolkit for Medical Practices.

12.2 Q: Where can COVID-19 vaccine Providers submit reimbursement claims for COVID-19 vaccine administration costs for uninsured individuals?

A: To submit reimbursement claims for COVID-19 vaccine administration costs for uninsured individuals, COVID-19 vaccine Providers can enroll in the Health Resources and Services Administration COVID-19 Uninsured Program.

12.3 Q: Can California COVID-19 Vaccine Providers charge a vaccine recipient for the cost of vaccine administration or related services?

A: No. California COVID-19 Vaccination Program Providers shall not under any circumstances bill, charge, collect a deposit from, impose a surcharge on, directly or indirectly seek compensation, remuneration or reimbursement from, or have any recourse against any vaccine recipient for the cost of vaccine administration or related services.

12.4 Q: What vaccine administration supplies do COVID-19 vaccine Providers need to provide?

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

Communication Resources

13.1 Q: How can COVID-19 vaccine Providers stay informed on California COVID-19 Vaccination Program updates, including clinical updates, myCAvax updates, and communication resources?

A: COVID-19 vaccine Providers can stay informed on California COVID-19 Vaccination Program updates by subscribing to the CDPH COVID Call Center's email listserv or by viewing EZIZ's Archived Communications. The Archived Communications page is a tab on the left side of the main eziz.org/covid page. If COVID-19 vaccine Providers are subscribed to the listserv and not receiving communications, they should check email their junk/spam folder for emails from COVIDCallCenter@cdph.ca.gov and save COVIDCallCenter@cdph.ca.gov in email contacts. To be added to the listserv, please email jane.gray@cdph.ca.gov.

13.2 Q: What is the 30 Conversations in 30 Days Campaign?

A: The 30 Conversations in 30 Days Campaign by Vaccinate all 58, in collaboration with #ThisIsOurShot and #VacunateYa, provides California's trusted medical professionals with tools and techniques to proactively talk with patients about COVID-19 vaccination. To access communication resources, including short training videos and archived webinars, please visit 30 Conversations in 30 Days.

13.3 Q: Where can I access COVID-19 vaccination data dashboards?

A: COVID-19 vaccination data dashboards are available at CDC COVID Data Tracker and California Vaccination Progress Data.

13.4 Q: Where can Providers access COVID-19 vaccine information to build public confidence in the vaccine?

A: To build and reinforce confidence in the COVID-19 vaccine, Providers can access COVID-19 vaccine information, including multi-lingual and special population resources, at Vaccinate with Confidence and Patient Communication Tools.

13.5 Q: Who should a Provider advise about misinformation related to the COVID-19 vaccine?

A: Providers that hear misinformation or disinformation related to the COVID-19 vaccine should contact the CDPH Trust and Safety team at rumors@cdph.ca.gov.

13.6 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, vaccine distribution, and the vaccine marketplace. To contact the COVID-19 Call Center for Providers send an email to covidcallcenter@cdph.ca.gov or call 833.502.1245 M-F, 8AM-6PM. 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.