

When initially invited, only one contact at your organization will have received a survey request from noreply@alchemer.com. Please contact the Immunization Program if you are unsure of your COVID-19 Enrollment Status.

Enrollment in the program does not mean you will receive COVID-19 vaccine immediately.

The Immunization Program will base the allocation of COVID-19 vaccine on availability and the Advisory Committee on Immunization Practices (ACIP) recommendations. The Immunization Program will communicate to you when the COVID-19 vaccine is available for your facility.

The agreement consists of two surveys: Survey 1 (Section A) and Survey 2 (Sections B, C and D).

Survey 1 (Section A – to be completed by umbrella organizations)

This section will ask for:

- organization information
- contact and licensure information for the Chief Medical Officer (CMO)
- contact information for the Chief Executive Officer (CEO) or Chief Fiduciary Officer (CFO).



The survey will then review the Provider Agreement Requirements and will next be routed via email to the CMO and CEO or CFO for review and digital signatures.

Survey 2 (Sections B, C and D – to be completed by any location receiving and administering vaccine)

These sections will ask for:

- location information (if data for a required field is unknown, enter “0”)
- contact information for the vaccine program coordinator and back-up coordinator
- contact information for the Medical Director
- contact information for the Chief Executive Officer (CEO) or Chief Fiduciary Officer (CFO).



The survey will then route via email to the Medical Director and CEO or CFO for review and digital signatures.

Completing CDC COVID-19 Vaccination Program Provider Agreement

- Review any pre-populated information carefully and make all necessary changes.
- Umbrella organizations receive Survey Section A and complete it on behalf of their locations.
- The CEO or CFO documented in Section A will be asked to complete the signature process of each location completing Sections B, C and D.
- If you have not received an email for the CDC COVID-19 Vaccination Program Provider Agreement Section A or Section B, C and D, and should have, please check your email junk folder first, and then contact AHS.VDHImmunizationProgram@vermont.gov.

After CDC COVID-19 Vaccination Program Provider Agreement is accepted

Once Sections A, B, C and D of the 2020 CDC COVID-19 Vaccination Program Provider Agreement are completed, facilities are required to complete training and demonstrate the ability to manage and administer the COVID-19 vaccines safely. A member of the Enrollment Team will contact your facility to:

- Provide the Vermont COVID-19 [Vaccine Program Training Guide](#).
- Assess units used to store COVID-19 vaccine and work with your facility to set up the state supplied temperature monitoring system or approve a monitoring system already in place.
- Explain requirements for temperature monitoring, including the use of our paper temperature logs, the temperature excursion reporting requirements, and offsite clinic guidance (if applicable).
- Provide a copy of the Vermont Immunization Registry (IMR) confidentiality agreement. Your facility will order the COVID-19 vaccine through the Vaccine Inventory Management System (VIMS), a part of the IMR.
 - Note: It is a requirement to send data to the Vermont Immunization Registry (IMR). If, after enrollment, the IMR determines that your facility cannot report, someone will be in communication with you.
- Once vaccine storage is approved and VIMS access is confirmed, a member of the Ordering Team will reach out.
 - While doses are limited your COVID-19 vaccine orders may be placed for you by the Vaccine Program, or you may be provided instructions to complete a COVID-19 only order request.
 - You will be required to reconcile your inventory once a week and report usage in VIMS.
- Further required training materials and resources will be made available through the primary and back-up contacts listed in the enrollment forms.

For assistance with completing the CDC COVID-19 Vaccination Program Provider Agreement, including survey login and password questions, please contact AHS.VDHImmunizationProgram@vermont.gov.