



TOOLKIT

SECTION 3: BECOMING A VACCINATOR

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WHY VACCINATE?

We know that COVID-19 vaccines are safe, effective, and well-tested. Here are some of the leading organizations that have publicly endorsed COVID-19 vaccines:

- Academy of Managed Care Pharmacy
- American Academy of Ambulatory Care Nursing
- American Academy of Child and Adolescent Psychiatry
- American Academy of Family Physicians (AAFP)
- American Academy of Nursing
- American Academy of Ophthalmology
- American Academy of PAs (AAPA)
- American Academy of Pediatrics (AAP)
- American Association of Allergy, Asthma & Immunology
- American Association of Colleges of Pharmacy
- American Association of Clinical Endocrinology
- American Association of Neuroscience Nurses
- American College of Clinical Pharmacy (ACCP)
- American College of Physicians (ACP)
- American College of Preventive Medicine
- American College of Surgeons (ACS)
- American Epilepsy Society/American Medical Association (AMA)
- American Nursing Association (ANA)
- American Pharmacist Association (APhA)
- American Psychiatric Association (APA)
- American Public Health Association (APHA)
- American Society for Clinical Pathology
- American Society for Hematology (ASH)
- American Society for Radiation Oncology (ASTRO)
- American Society of Health-System Pharmacists (ASHP)
- American Society of Nephrology
- American Thoracic Society
- Association for Clinical Oncology (ASCO)
- Association of American Medical Colleges (AAMC)
- Association of Rehabilitation Nurses
- Council of Medical Specialty Societies (CMSS)
- HIV Medicine Association
- Infectious Diseases Society of America (IDSA)
- LeadingAgeNational Association for Home Care & Hospice
- National Association of Indian Nurses of America
- National Association of Pediatric Nurse Practitioners
- National Council of State Boards of Nursing (NCSBN)
- National Hispanic Medical Association (NHMA)
- National League for Nursing
- National Medical Association
- National Pharmaceutical Association (NPhA)
- Nurses Who Vaccinate
- Organization for Associate Degree Nursing (OADN)
- Pediatric Infectious Diseases Society (PIDS)
- Philippine Nurses Association of America, Inc (PNAA)
- Society of Gynecologic Oncology
- Society for Healthcare Epidemiology of America (SHEA)
- Society of Hospital Medicine
- Society of Interventional Radiology
- Texas Nurses Association
- The John A. Hartford Foundation
- Transcultural Nursing Society
- Virgin Islands State Nurses Association
- Wound, Ostomy, and Continence Nurses Society

WHY VACCINATE? (CONTINUED)

The medical community overwhelmingly agrees that the COVID-19 vaccine is vital to reducing COVID-19 related deaths and hospitalizations. Vaccinating also helps protect populations who cannot be vaccinated and those populations that remain at higher risk.

Vaccinating is also important because we know COVID-19 is here to stay. Getting vaccinated and keeping people up-to-date with vaccinations against COVID-19 will help decrease deaths, hospitalizations, and long-term complications caused by the virus. It will also help keep hospitals and other healthcare spaces adequately staffed and ensure resources available are available when needed.

Lastly, to quote Doctor Ngozi Ezike, former head of the Illinois Department of Public Health (IDPH), “The important thing is you can take advantage of a lifesaving shot. Come on in, roll up your sleeve, and let’s get it done. We know that the best way of staying ahead of this virus is to be ready. We need to be ready for whatever is around the bend. So we want to make sure that every single person that’s eligible has the optimal protection, not just for today, but for whatever is waiting for us in the future.”



“The important thing is you can take advantage of a lifesaving shot. Come on in, roll up your sleeve, and let’s get it done. We know that the best way of staying ahead of this virus is to be ready...”

Doctor Ngozi Ezike, former
Director Illinois Department
of Public Health (IDPH)

STATE REQUIREMENTS FOR VACCINATING

WHAT IS I-CARE?

The Illinois Comprehensive Automated Immunization Registry Exchange, or I-CARE, is a web-based immunization record sharing tool developed by IDPH. It allows healthcare providers in our state to access the immunization records of Illinoisans. Some information I-CARE captures includes:

- Patient demographic information
(name, date of birth, race, ethnicity, address, sex)
- Vaccine information
(CVX, lot number, vaccine expiration date)
- Patient reminders for second doses
- Assessment of immunization coverage levels by practice

Providers must be enrolled in I-CARE **and** complete additional paperwork to administer COVID-19 vaccines.

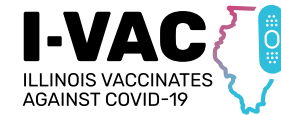
WHO CAN USE I-CARE?

Anyone in a medical clinic that the Medical Director approves can have access to I-CARE, except for **medical students** and **people working for less than a month** in the organization. These two groups cannot have access to I-CARE.



I-CARE REGISTRATION

Implementation support
available through I-VAC



HOW DO I REGISTER FOR I-CARE?

Registration for I-CARE includes three required forms:

- 1 The IDPH Web Portal Form.** This form will give you access to the IDPH Web Portal where I-CARE is located. Every person who is using I-CARE must fill out this form. When filling out the form, make sure you check the box at the bottom marked 'I-CARE/ Immunization Registry'. At the bottom of the form, you'll see a box labelled 'Portal Registration Authority (PRA)'. This refers to the person in your office or practice who is the vaccine coordinator.

Type in the name of your organization into the search bar and select your coordinator. If you do not have a PRA assigned, you can search IDPH and select IDPH Security.

After you've selected your PRA, click submit and you will be redirected to a user agreement form that must be signed and sent to your PRA. If you selected IDPH, you can fax the form to 217-524-0967.

You will get an email when your account is approved. After approval, you will be able to access I-CARE.

- 2 The I-CARE Provider Site Enrollment form.** This only needs to be completed once per site.
- 3 The I-CARE User Enrollment form.** Each provider must complete one.

After completing and uploading these three forms to I-CARE, IDPH will review the documents and grant access within 7-10 days. Contact dph.icare@illinois.gov to check the status of an enrollment application.

If your site is a Vaccines for Children (VFC) provider, you already have access to I-CARE. Learn more about the VFC program in section eight—Additional Considerations, page 8-1.

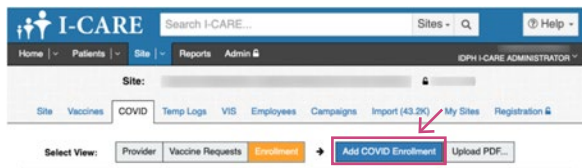
VACCINE PROVIDER ENROLLMENT IN I-CARE

Once you have I-CARE access, you will need to enroll to become a COVID-19 provider. Here are the steps:

1 Locate your site on the I-CARE website and click on the COVID tab

2 Click Enrollment and then select Add COVID Enrollment

If you do not see the COVID tab, you may not have the correct permissions in I-CARE. Contact DPH.ICARE@illinois.gov for further support with permissions.



3 Fill out the Organization Identification, Chief Medical Officer, and Chief Executive Officer fields

4 Enter CMO and CEO signatures and dates
Signatures are mandatory for approval. Signatures may be obtained digitally or manually when the completed enrollment form is downloaded or printed.

5 Complete the CDC COVID-19 Vaccination Provider Profile information section

If your site is a current VFC provider, the Location VFC PIN and Location COVID ID will be listed. If your site is not a current VFC provider, the PIN and complete COVID ID will be assigned when your enrollment is approved.

6 Enter organization name

If another organization location will be ordering COVID-19 vaccines for your site, select YES and list that organization name.

7 Enter contact information for your primary and secondary (backup) COVID-19 Vaccine Coordinators

8 Complete the shipping information fields
Make sure you type all information correctly!

ENROLLMENT (CONTINUED)

9

If you are receiving the vaccines at a different location, complete the COVID-19 administration address field. If not, leave blank.

10

Enter the dates and times your site is available to receive vaccine shipments

These must be listed in military time. Both AM and PM must have time ranges.

11

Select your COVID-19 vaccine provider type for this location

You only need to make one selection from the drop-down.

12

Select all location types where the vaccines will be administered

13

Enter the number of patients served by your location

Enter the number of patients/clients served by this location as well as the Influenza vaccination capacity for this location. "Unknown" and "zero" are acceptable answers if this site was not previously vaccinating patients.

14

Enter all populations served by your location

15

Indicate your vaccine reporting status for IIS

Indicate if this organization is currently reporting in I-CARE. If currently reporting, the IIS Identifier is I-CARE.

16

Estimate the site's storage capacity

List the number of 10-dose multidose vials the location can store during peak vaccination periods at the listed temperatures.

17

List your storage unit details

18

Complete the date and signature

Medical/pharmacy director or location's vaccine coordinator signature date:



Date only here.

Medical/pharmacy director or location's vaccine coordinator signature will be obtained digitally or manually after the completed enrollment form is downloaded or printed.

ENROLLMENT (CONTINUED)

19

List the providers practicing at this site

List the primary prescribing provider(s) at this location and their license number(s). At least one prescribing provider is required.

20

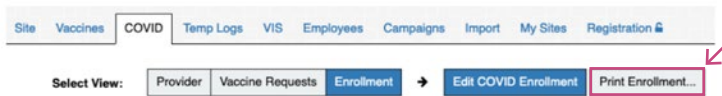
Save the enrollment

CONTINUE TO THE NEXT STEPS. YOUR ENROLLMENT IS NOT COMPLETE YET.

21

Print or download and send for signatures

Return to the top of the page, print the PDF, and obtain signatures (either electronically or in print).

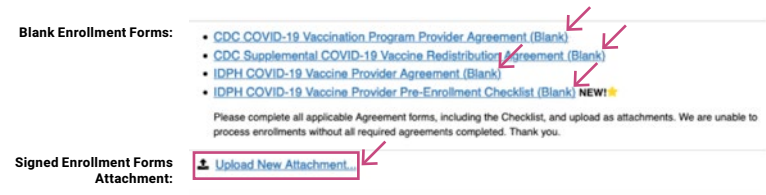


Example places for signatures on a pdf form:

Organization Medical Director (or equivalent)		
Last name:	First name:	Middle initial:
Signature:		Date:
Chief Executive Officer (chief fiduciary role)		
Last name:	First name:	Middle initial:
Signature:		Date:
For official use only:		
IIS ID, if applicable:		
Unique COVID-19 Organization ID (Section A)*:		
<small>*The jurisdiction's immunization program is required to create a unique COVID-19 ID for the organization named in Section A that includes the awardee jurisdiction abbreviation (e.g., an organization located in Georgia could be assigned "GA123456A." This ID is needed for CDC, to match Organizations (Section A) with one or more Locations (Section B). This unique identifier is required even if there is only one location associated with an organization.</small>		

22

Upload all signed documents back to I-CARE



23

Save and change your status to "Requested"

Choose "Requested" from the dropdown. Scroll to the bottom and select "Save."

24

Complete the final checklist on page 3-10.

ENROLLMENT (CONTINUED)

HAVE YOU:

- Completed all required fields in the enrollment form
- Signed and attached the completed Provider Enrollment form
- Completed, signed, and attached the CDC COVID-19 Vaccination Program Provider Agreement
- Completed, signed, and attached the CDC Supplemental COVID-19 Vaccine Redistribution Agreement
- Completed, signed, and attached the IDPH COVID-19 Vaccine Provider Agreement
- Completed, signed, and attached the IDPH COVID-19 Vaccine Provider Pre-Enrollment Checklist
- Attached Certificates of Calibration for data loggers used in your vaccine storage units
- Completed and attached “You Call the Shots” training certificates for the vaccine coordinators listed in your CDC Agreement

Please do not fax or email these documents, they must be uploaded into I-CARE under the COVID tab. If you are not able to upload, please email dph.immunizations@illinois.gov and they will check your I-CARE access rights.

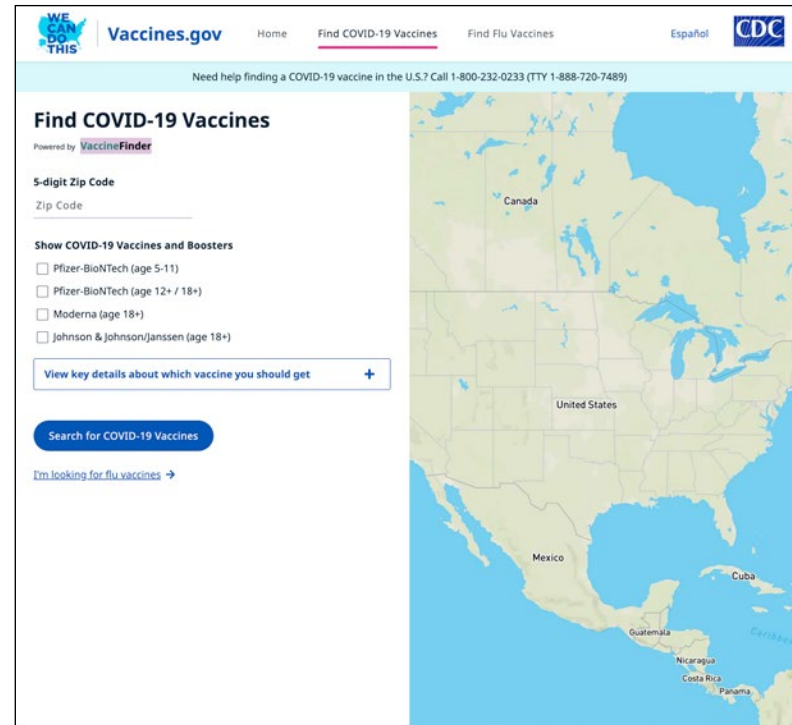
Your enrollment status will change from “Requested” to “Complete” when enrollment is completed. If your enrollment status is “Draft”, this indicates that your COVID enrollment is incomplete, and has not been saved in “Requested” status. Please make sure all required documents are completed and uploaded and all fields in I-CARE are complete, which should allow the status to save as “Requested.”

OTHER VACCINATOR REQUIREMENTS

Illinois vaccinators are also required to sign up for Illinois Health Alert Network (HAN/SIREN) alerts. These are news alerts that help providers stay up-to-date with vaccine information.



The CDC requires all vaccine providers to enroll in [VaccineFinder](#), a website that logs vaccine inventory. The CDC and IDPH use it to track how many COVID-19 vaccines are in a certain area. For more information on the [VaccineFinder](#) and other ordering tips, please see section four—Vaccine Order, Storage, and Handling, page 4-7.



TRAINING STAFF

Before ordering COVID-19 vaccines, all staff must be trained and familiar with COVID-19 vaccines. IDPH requires COVID-19 vaccinators watch the [CDC vaccine training videos](#). There are four short modules: one general COVID-19 vaccine training and a specialized training for each vaccine manufacturer.



One way to ensure all staff are up to date on COVID-19 vaccine training is by scheduling the training directly into professional development days. Make sure to include all office staff in these training events.



VACCINE CONFIDENCE

When all staff, including non-medical staff, can answer questions or direct patients to the right source for more information about COVID-19 vaccines, integrating the vaccines into routine workflow becomes much easier! This also helps to increase vaccine confidence internally and with patients.

STAFF TRAINING RESOURCES

TRAINING OR CORE COMPETENCY	HEALTHCARE PROFESSIONALS (who have administered vaccine in the last 12 months)	HEALTHCARE PROFESSIONALS (who are licensed to administer COVID-19 vaccine but have not done so in the last 12 months)	VACCINE SUPPORT WORKERS (not licensed to administer vaccine) qualified to prepare, store, handle, or transport vaccine	ADMINISTRATION SUPPORT STAFF qualified to store, handle, or transport vaccine
CDC Training Module(s) for the vaccine product(s) in your facility	Required	Required	Required	Required
You Call the Shots: Vaccine Administration or other vaccine administration training completed within the last 12 months.	Required	Required	If preparing vaccine	-
You Call the Shots: Vaccine Storage and Handling or other vaccine storage and handling training completed within the last 12 months.	Required	Required	Required	Required
Relevant information contained in the EUA Fact Sheet(s) for Healthcare Providers for the vaccine product(s) in your facility.	Core Competency	Core Competency	Core Competency	Core Competency
Clinical considerations	Core Competency	Core Competency	-	-
Storage and handling requirements	Core Competency	Core Competency	Core Competency	Core Competency
Transport guidance	Core Competency	Core Competency	Core Competency	Core Competency
Preparation requirements	Core Competency	Core Competency	Core Competency	-
Administration requirements	Core Competency	Core Competency	-	-
Anaphylaxis guidance	Core Competency	Core Competency	-	-
Vaccination documentation and reporting requirements	Core Competency	Core Competency	Core Competency	Core Competency
Required and additional information for vaccine recipients	Core Competency	Core Competency	Core Competency	Core Competency


REIMBURSEMENT FOR COVID-19 VACCINE ADMINISTRATION

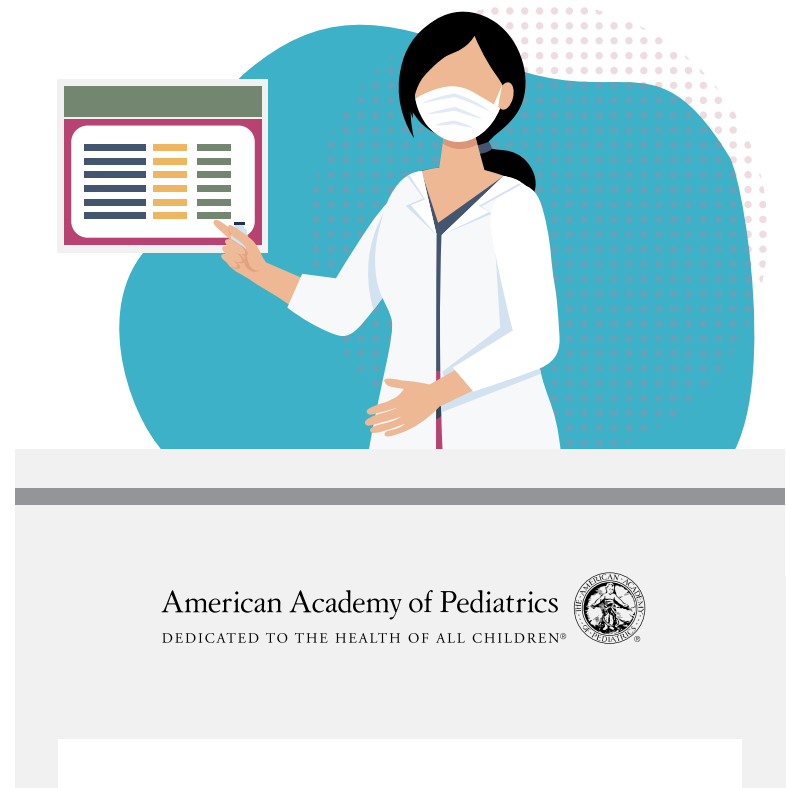
While you may never charge a patient for the vaccine, you can get reimbursed for vaccine administration and counseling. For patients using Medicaid or private insurance, use the appropriate CPT code for the vaccine manufacturer and dose number.

According to the AAP:

The CPT Editorial Panel has developed several new SARS-CoV-2 vaccine product and immunization administration codes. The new CPT codes:

- clinically distinguish each coronavirus vaccine product and the specific dose for better tracking, reporting, and analysis
- allow for unique CPT vaccine administration codes for each vaccine product

 This includes unique codes for a 1st dose of a single product and a 2nd dose



REIMBURSEMENT FOR COVID-19 VACCINE ADMINISTRATION (CONTINUED)

This level of specificity is a first for vaccine administration codes, and offers the ability to track each vaccine dose, even when the vaccine product is not reported (eg, when the vaccine may be given to the patient for free). The CPT codes for the administration include:

- practice expense costs of storage and ordering
- counseling provided to patients or caregivers on the date the vaccine is administered
- administering the vaccine
- updating the electronic health record and the vaccine registry

Please note: you will not report the immunization administration codes (90460-90461, 90471-90474) when administering a Coronavirus vaccine.

Vaccine Counseling Coding– with NO Administration

There are different mechanisms by which you can get information out to patients, however, for those who opt for in-person (ie, in office or telehealth) individual counseling there are coding options. You should check with your payers for guidance on the most appropriate way to code as some have limitations on the use of Z codes with office-based E/M services (eg, 99212). Note, if you provide vaccine counseling on the day you also administer the vaccine to the patient you may not report counseling separately.

REIMBURSEMENT FOR COVID-19 VACCINE ADMINISTRATION (CONTINUED)

AAP COVID-19 Vaccine Coding Chart (as adopted from [CMS Webpage](#)) 2/4/2022

VACCINE MANUFACTURER	AGE REQUIRED	VITAL TOP COLOR	VACCINE PRODUCT CPT CODE	1ST DOSE ADMIN CPT CODE	2ND DOSE ADMIN CPT CODE	3RD DOSE ADMIN CPT CODE	BOOSTER ADMIN CPT CODE	VACCINE PRODUCT	NDC (BOX/VIAL)
Pfizer	5–11yrs	Orange	91307	0071A	0072A	0073A	–	COVID-19 vaccine, mRNA-LNP, spike protein, PF, 10 mcg /0.2 mL dosage , diluent reconstituted, tris-sucrose formulation, for IM use	59267-1055-02 59267-1055-04 59267-1055-01
Pfizer	≥12yrs	Purple	91300	0001A	0002A	0003A	0004A	COVID-19 vaccine, mRNA-LNP, spike protein, PF, 30 mcg/ 0.3mL dosage , diluent reconstituted, for IM use	59267-1000-02 59267-1000-03 59267-1000-01
Pfizer	≥12yrs	Gray	91305	0051A	0052A	0053A	0054A	COVID-19 vaccine, mRNA-LNP, spike protein, PF, 30 mcg/0.3 mL dosage , tris-sucrose formulation, for IM use	59267-1025-02 59267-1025-03 59267-1025-04 59267-1025-01
Moderna	≥18 years	Red	91301	0011A	0012A	0013A	–	COVID-19 vaccine, mRNA-LNP, spike protein, PF, 100 mcg/0.5mL dosage , for IM use	80777-0273-99 80777-0273-98 80777-0273-10 80777-0273-15
Moderna	≥18 years	Red	91306	–	–	–	0064A	COVID-19 vaccine, mRNA-LNP, spike protein, PF, 50mcg/0.25 mL dosage , for IM use	80777-0273-99 80777-0273-98 80777-0273-10 80777-0273-15
Janssen	≥18 years	Blue	91303	0031A	–	–	0034A	COVID-19 vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, PF, 5x10 ¹⁰ viral particles/ 0.5mL dosage, for IM use	59676-0580-15 59676-0580-05
Novavax			91304 (Pending)	0041A	0042A	–	–		
AstraZeneca			91302 (Pending)	0021A	0022A	–	–		

Footnotes: *Refer to [FDA/CDC Guidance: COVID-19 Vaccine Boosters](#) // (pending) Refer to FDA approval pending // COVID-19 vaccine, Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease) d, days // IM, intramuscular // PF, preservative-free // [CDC: Use of COVID-19 Vaccines in the United States](#)

REIMBURSEMENT FOR COVID-19 VACCINE ADMINISTRATION (CONTINUED)



Reimbursement Tips—Patients with Coverage

For more tips on getting paid, visit the "[COVID-19 Vaccine Administration: Getting Paid](#)" article on the American Academy of Pediatrics website.



Reimbursement Tips—Medicaid

For more information on [getting reimbursed from Medicaid](#), visit the Healthcare and Family Service (HFS) website.