TOOLKIT
SECTION 3: BECOMING A VACCINATOR

CONTENTS

WHY VACCINATE?

We know that COVID-19 vaccines are safe, effective, and well-tested. Here are some of the leading health organizations that endorse 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 SocietyAmerican 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)

COVID-19 vaccines are 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.

COVID-19 is here to stay. Getting vaccinated and keeping people up-to-date helps decrease deaths, hospitalizations, and long-term complications caused by the virus. Vaccines help keep hospitals and other healthcare spaces adequately staffed and ensure resources 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)

SIMPLIFIED GUIDELINES & HARMONIZATION OF COVID-19 VACCINES

US Government COVID-19 Vaccine Program Ends

The US government COVID-19 Vaccine Program has ended. With the discontinuation of this program, COVID-19 vaccines are available for purchase from the commercial market and through select state programs.

Check the **CDC Provider Agreement Update** website for close-out steps.

Note that:

- USG-purchased COVID-19 vaccine doses OR ancillary supplies cannot be sold. Ancillary supplies cannot be exchanged for anything of value either.

- Supplies can be shared domestically among other clinics within the practice, other sites offering healthcare services & veterinary clinics.
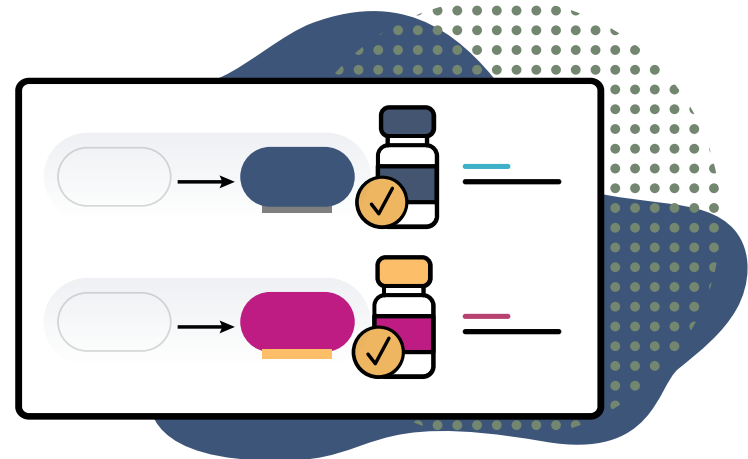
- Ancillary supplies can be used to administer commercially purchased vaccines.

- Expiration dates printed on the exterior box of the CDC ancillary kit does not apply to all items in the kit. This date is based on the earliest expiry of any of the kit's components. Dispose of expired components in accordance with state and local requirements.

Per federal funding requirements, ancillary kits cannot be donated outside of the United States or to organizations that will use the supplies outside the US.

SIMPLIFIED GUIDELINES & HARMONIZATION OF COVID-19 VACCINES (CONTINUED)

COVID-19 vaccines have undergone significant advancements, leading to simplified guidelines and increased harmonization across various aspects, including storage & handling, product availability, and dosing schedules.

In fall 2023, the FDA and CDC authorized updated, monovalent COVID-19 vaccines from Pfizer and Moderna for those six months and older, and Novavax for those 12 years and older. These products target the Omicron variant XBB.1.5.

STATE REQUIREMENTS FOR VACCINATING

ALL VACCINATORS MUST BE ENROLLED IN AND USE I-CARE.

Per Illinois' Immunization Registry Code, Section 689.40(d):

- "Providers shall report all COVID-19 immunizations administered in Illinois to the registry."
- This includes both publicly available and privately purchased COVID-19 vaccines.

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 immunization records of Illinoisans and record vaccinations administered. 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)
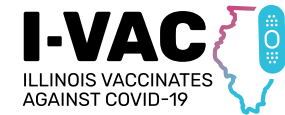- Assessment of immunization coverage levels by practice

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

I-VAC
ILLINOIS VACCINATES
AGAINST COVID-19

HOW DO I REGISTER FOR I-CARE?

I-CARE enrollment is completed through **this website**. This site includes the following features that will streamline and improve the efficiency of I-CARE requests:

- **Automation of Requests:** This process introduces automation, reducing manual processing and ensuring a seamless experience when submitting I-CARE requests. This enhancement aims to simplify the process, making it more user-friendly and efficient.

- **Electronic Routing of Documents:** This system enables the electronic routing of documents, enhancing accessibility and facilitating quicker processing. This shift to digital documentation helps improve communication and access to services.

- **Alleviation of Duplications:** The automated system includes checks to identify and eliminate duplicate requests. This saves valuable time and ensures accuracy in the information maintained within the I-CARE system.

- **Decreased Turnaround Time:** This process allows for the reduction in turnaround time. By leveraging automation and digital workflows, it will provide faster and more efficient services.

- **New Verification Protocols:**
  - All new sites will be verified and signed off by either the Medical Director or CEO.
  - Capability for site updates to be initiated and signed off by the PRA (Portal Registration Authority). This delegation streamlines the update process, allowing for quicker and more responsive site management within the I-CARE system.

- **Enhanced Capabilities:**
  - Add new organizations and modify existing ones,
  - Add and update PRAs, and
  - Request access for new individual I-CARE users.

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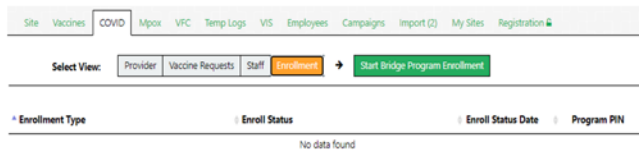
1 Locate your site on the I-CARE website and click on the COVID tab

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.vaccines@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 contact information for your primary and secondary (backup) COVID-19 Vaccine Coordinators

7 Complete the shipping information fields

Make sure you type all information correctly!

8 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.

9 Enter all populations served by your location

ENROLLMENT (CONTINUED)

10 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.

11 List your storage unit details

12 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.

13 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.

14 Save the enrollment

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

15 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).

| Site | Vaccines | COVID | Temp Logs | VIS | Employees | Campaigns | Import | My Sites | Registration 🔒 |

Select View: | Provider | Vaccine Requests | **Enrollment** | → | Edit COVID Enrollment | Print Enrollment... |

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)*:

*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.

ENROLLMENT (CONTINUED)

16 Upload all signed documents back to I-CARE

Blank Enrollment Forms:
- CDC COVID-19 Vaccination Program Provider Agreement (Blank)
- CDC Supplemental COVID-19 Vaccine Redistribution Agreement (Blank)
- IDPH COVID-19 Vaccine Provider Agreement (Blank)
- IDPH COVID-19 Vaccine Provider Pre-Enrollment Checklist (Blank) NEW!⭐

Please complete all applicable Agreement forms, including the Checklist, and upload as attachments. We are unable to process enrollments without all required agreements completed. Thank you.

Signed Enrollment Forms Attachment: ⬆ Upload New Attachment...

17 Save and change your status to "Requested"

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

18 Complete the final checklist on page 3-13.

BRIDGE ACCESS PROGRAM ELIGIBILITY

The Bridge Access Program will cover COVID-19 vaccine costs for some adults through December 2024 or while supplies last. This may include adults 18 years and older who are:

✓ **Uninsured:** not covered by a health insurance plan

✓ **Underinsured:** has health insurance, but the policy does not…

- Cover COVID-19 vaccines
- Provider first dollar coverage of COVID-19 vaccines

✓ **Adults with Medicare Part B, Medicaid, and private insurance** with first dollar coverage are NOT eligible for Bridge doses. Some vaccine recipients may need to get vaccines in-network for first dollar coverage to apply

✓ **IDPH and CDPH** are enrolling limited groups of providers in its COVID-19 Vaccine Bridge Access Program network, including:

- Local Health Departments
- Rural Health Centers
- Federally Qualified Health Centers
- Eligible adults can receive a COVID-19 vaccine at these locations, as well as pharmacies enrolled in eTrueNorth.

Displaying vaccine availability is required for Bridge Access Program clinics. See page 3-15 for more information about vaccines.gov.

BRIDGE ACCESS PROGRAM ELIGIBILITY (CONTINUED)

HAVE YOU:

☐ Completed all required fields on the I-CARE Bridge Program enrollment page

☐ Signed and attached the completed Provider Enrollment form

☐ Completed, signed, and attached the COVID-19 Vaccine Bridge Access Program Provider Agreement

☐ 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 COVID-19 Vaccine Bridge Access Program provider 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.vaccines@illinois.gov** and they will check your I-CARE access rights.
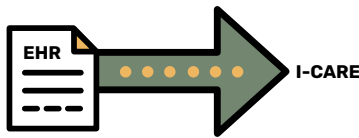
Once you "Start Bridge Program Enrollment" in I-CARE, your status will automatically be saved as "Draft". Make sure all required documents and fields are completed, then save and click "Update Status". This will automatically move the enrollment status to "Requested". The enrollment will then be reviewed and if anything needs to be updated, the enrollment status will be changed to "Review". If all items are complete, the status will be changed to "Complete".

$ Administration Fee Reimbursements: Providers that have enrolled in the Bridge Access Program are now able to be reimbursed to cover administration fees for COVID-19 vaccines provided to Bridge Access Program eligible adults. Under this program, recipients should not be charged an administration fee. Providers will be paid a maximum of $43.06 for each dose of Bridge Access Program COVID-19 vaccine.
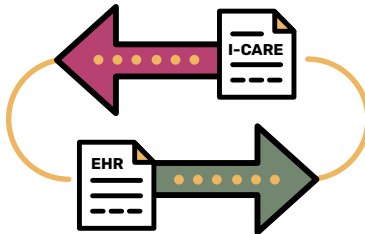
INTEGRATING YOUR EHR INTO I-CARE

If your office is using an Electronic Health Record (EHR) system, you may be able to automatically share data with I-CARE using HL7 data exchange. This data exchange can be done using two methods:

Method 1—One-Way Data Transfer:

The first method is one-way data transfer of unsolicited vaccine record updates from your EHR to I-CARE.

Method 2—Real-Time Data Transfer:

The second method is a real-time, bidirectional data exchange of vaccine record updates, queries, and responses. This method allows immunization providers using an EHR system to query I-CARE for a patient (not found in their own EHR system) and I-CARE will send the patient immunization information back. It will also allow you to send updates from your EHR directly to I-CARE for immediate update.

Contact your EHR vendor to assist in determining which method is best for your system and to start the integration process. Questions about I-CARE can be directed to **dph.icare@illinois.gov**.

Source: **Illinois Department of Public Health Publications**

OTHER VACCINATOR REQUIREMENTS

Illinois vaccinators are also required to sign up for **Illinois Health Alert Network (SIREN) alerts**. Chicago vaccinators must sign up for the Chicago Department of Public Health's **Health Alert Network**. These are news alerts that help providers stay up-to-date with vaccine information.

VaccineFinder or **vaccines.gov** is a website that logs vaccine availability and helps the public find a vaccine near them.

To have your location and vaccine availability show on **Vaccines.gov**, you (or your jurisdiction if they are managing your vaccines.gov information on your behalf) must have a current COVID Locating Health Provider Portal account.

See Guidance for Reporting to Vaccines.gov, additional information on setting up your public display information or setting up COVID-19 vaccine availability, visit **vaccine-resources.gitbook.io**

Other information: Vaccine providers are no longer required to complete COVID-19 vaccine cards following vaccine administration, as the CDC is no longer distributing them.

TRAINING STAFF

Before ordering COVID-19 vaccines, all staff must be trained and familiar with COVID-19 vaccines. IDPH requires COVID-19 vaccinators complete **You Call the Shots Module 10 (Storage and Handling)**.

✓ 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.

Additional Staff Training Resources

- **CDC Training Module(s)** for the vaccine product(s) in your facility
- **EUA Fact Sheet(s) for Healthcare Providers**
- **Clinical considerations**
- **Storage and handling requirements**
- **Preparation and administration requirements**
- **Anaphylaxis guidance**
- **Vaccination documentation and reporting requirements**
- **Required and additional information for vaccine recipients**

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.

REIMBURSEMENT FOR COVID-19 VACCINE ADMINISTRATION

Providers can be reimbursed for vaccine administration and counseling. In most cases, COVID-19 vaccines are to be covered by private insurance. Vaccines are available at no cost to patients through: Medicaid, VFC and the Bridge Access Program.

According to the AAP:

The CPT Editorial Panel has developed several 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.

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®

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.

HFS COVID fee schedule

- See the Illinois Healthcare and Family Services provider notices for the most up-to-date information on Medicaid reimbursement.

REIMBURSEMENT FOR COVID-19 VACCINE ADMINISTRATION (CONTINUED)

Vaccines for Children Program and Bridge Access Program

Bridge Access Program providers who are also VFC providers may notice there is an overlap in age groups.

Individuals who are 18 years of age at the time of the vaccination encounter and are uninsured or underinsured (using the VFC Program's definition of underinsured) are eligible for either the Bridge Access Program or VFC Program vaccines.

However, it is preferred that, whenever possible, these 18-year-old individuals should receive a dose of VFC COVID-19 vaccine. This is because VFC is an entitlement program and the vaccine will be available in sufficient quantities, whereas the Bridge Access Program is a temporary program with a limited number of doses.

REIMBURSEMENT FOR COVID-19 VACCINE ADMINISTRATION (CONTINUED)

AAP COVID-19 Vaccine Coding Chart (as adopted from **CMS Webpage**) September 2023

VACCINE MANUFACTURER	PATIENT AGE REQUIRED	VIAL CAP COLOR	VACCINE PRODUCT CPT CODE	ADMINISTRATION	VACCINE PRODUCT	UNIT OF USE NDC
Pfizer	6 months–4 years	**Yellow**	**91318**	**90480**	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID19]) vaccine, mRNA-LNP, spike protein, **3 mcg/0.3 mL dosage**, diluent reconstituted, trissucrose formulation, for IM use	59267-4315-02 (carton of 10 multiple-dose vials) 59267-4315-01 (1 multiple-dose vial)
Pfizer	5–11 years	**Blue**	**91319**	**90480**[1]	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID19]) vaccine, mRNA-LNP, spike protein, **10 mcg/0.3 mL dosage**, tris-sucrose formulation, for IM use	59267-4331-02 (carton of 10 single-dose vials) 59267-4331-01 (1 single dose vial)
Pfizer Comirnaty	≥12 years	**Gray**	**91320**	**90480**[1]	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID19]) vaccine, mRNA-LNP, spike protein, **30 mcg/0.3 mL dosage**, tris-sucrose formulation, for IM use	00069-2392-10 (carton of 10 single-dose syringes) 00069-2392-01 (1 single dose syringe) 00069-2362-10 (carton of 10 single-dose vials) 00069-2362-01 (1 single dose vial)
Moderna	6 months–11 years	**Dark Blue Cap** **Green Label**	**91321**	**90480**[1]	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID19]) vaccine, mRNA-LNP, **25 mcg/0.25 mL dosage**, for IM use	80777-0287-92 (carton of 10 single-dose vials) 80777-0287-07 (1 single dose vial)
Moderna Spikevax	≥12 years	**Dark Blue Cap** **Blue Label**	**91322**	**90480**[1]	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID19]) vaccine, mRNA-LNP, **50 mcg/0.5 mL dosage**, for IM use	80777-0102-97 (carton of 10 multiple dose vials) 80777-0102-95 (carton of 10 single dose vials) 80777-0102-96 (carton of 10 single dose syringes) 80777-0102-93 (carton of 10 single dose, blister-sealed syringes)
Novavax	≥12 years	**Dark Blue**	**91304**	**90480**[1]	COVID-19 vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, PF, **5 mcg/0.5 mL dosage**, for IMuse	80631-1000-01
Novavax	≥18 years	**Dark BluE**	**91304**	**90480**[1]	COVID-19 vaccine,recombinant spike proteinnanoparticle,saponin-basedadjuvant, PF, **5 mcg/0.5mL dosage**, for IM use	80631-1000-01

[1]90480 Immunization administration by IM injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, single dose

COVID-19 vaccine, Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease); d, days; IM, intramuscular; PF, preservative-free

CDC guidance on COVID-19 vaccines | See **AAP's coding and valuation** page has additional information on coding and payment | See **AAP's Pediatric COVID-19 Vaccine Dosing Guide** for dosing intervals

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.